



# **HR & OD Monthly Trust Report (October 2016)**

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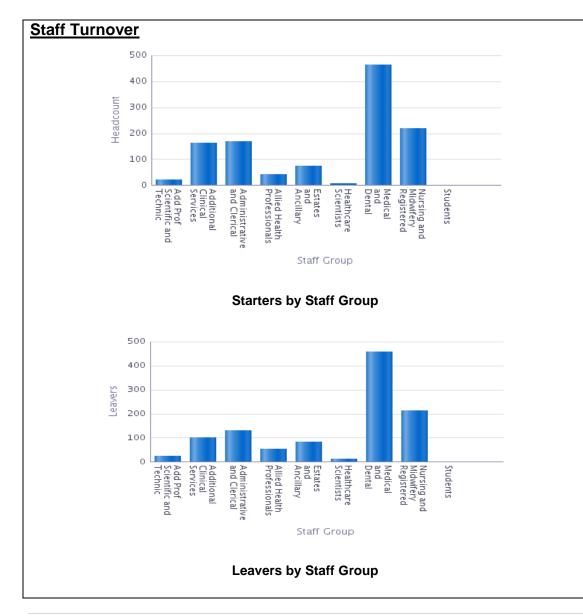
KPI	Target	Sept 16		
Staff Turnover Trust Wide	Under Mean of Acute Hospitals 11.15%	9.72%		
Vacancy Rate N&M	8%	13.70%		
Vacancy Rate medical	7.5%	15.33%*		
Agency & Bank Rate	<2%	7.87%		
Absence Rate	4%	4.77%		
Appraisals	95%	64.70%		
Core learning	95%	86%		

<sup>\*</sup>Vacancy rate has increased by 5.96% as a result of the fluctuation in number due to junior doctors' rotation. The vacancy rate prior to junior doctor rotation was 14.67%

<sup>\*\*</sup>The vacancy rate increased from 13.57% at the previous month end to 15.33%. This is linked to the increase of 29.62 Fte in funded establishment due to additional funding in A&E and escalation beds made permanent. In addition the number of registered N&M staff in-post reduced by 14.07 Fte during the month.







#### Trustwide

The Staff Turnover rate for August is 9.76%, which is a decrease of 0.26% on July

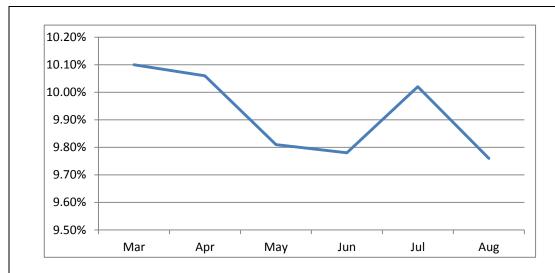
#### **Headlines:**

Mar 16: 10.10% Apr 16: 10.06% May 16: 9.81% Jun16: 9.78% July 16: 10.02% Aug 16: 9.76%

- Nursing and Midwifery turnover rate has slightly decreased in month to 9.77%. This is down from the 9.99% in the preceding month. Net increase of 40 N&M staff over the last 12 months.
- Medical and Dental Staff turnover rate has slightly increased in month to 15.25%. This is up from the 15.06% in the preceding month. Net increase of 10 Medical staff over the last 12 months
- The Trust turnover rate of 9.76% is lower than the average of 11.30% for other Large Acute (Non-Teaching) Hospitals based on the June 2016 data from HSCIC (Health and Social Care Information Centre). The turnover rates ranged between 6.93% and 22.33% and the mean is 11.15%. ULHT ranked 14 (lowest) out of 39.
- Turnover comparisons rates (HSCIC):
  - Nursing & Midwifery (Registered) ULHT ranked in the lower percentile with 10.27% (11 out of 39). This is below the mean of 11.54% and average of 11.49%.
  - Other Non-Medical Clinical Services (usually unregistered) – ULHT ranked in the lower







#### **Trust Staff Turnover**

Staff Group	Est as at 31.08.16	SIP as at 1.09.15	SIP as at 31.08.16	Average SIP	Leavers 1.09.15 - 31.08.16	Turnover SIP	Turnove r Leavers against est
Nursing &	22.42.00	4070.06	1000 12	1000 60	40450	0.770/	0.220/
Midwifery	2243.09	1878.06	1899.13	1888.60	184.58	9.77%	8.22%
All Medical	931.73	802.24	808.35	805.30	449.73	55.85%	48.27%
Medical							
excluding							
juniors	551.73	461.34	472.49	466.92	71.18	15.25%	12.90%

Leavers by Month August 15 – July 16

- percentile with 11.06% (11 out of 39). This is below the mean of 14.04% and average of 14.11%.
- AHP's ULHT ranked in the lower percentile with 11.85% (11 out of 39). This is below the mean of 13.38% and average of 13.77%.
- Trustwide we had 82 Leavers during August (17 was N&M staff)
- We have received 105 responses on Exit Questionnaires to date.

### **Actions Underway**

- Increased focus on staff engagement.
- Exit Interviews action Plan has been updated with recommendations from ET, with clear focus on ensuring that we improve the response rate and there are fewer staff who say we could have done more to keep/retain them.
- Focus on retention and recognition
- Occupational Health strategies, focusing on Psychological, Physical and Social Wellbeing.
- Review of Age/Retirement Profile for ULHT underway with report to ET during October.
- Additional actions/recommendations identified to increase the response rate of exit questionnaires.

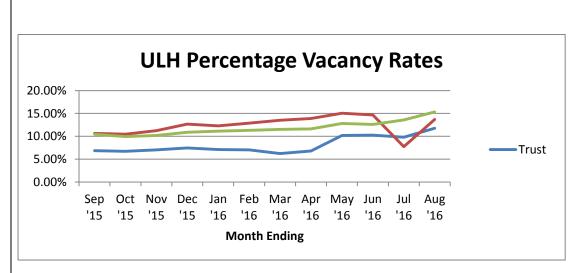
## **Recruitment & Retention**

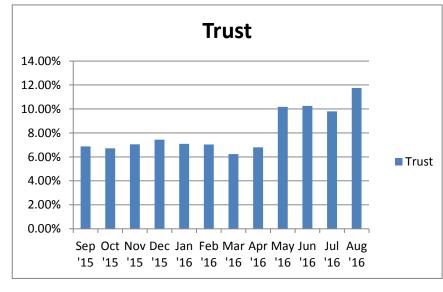
#### Trustwide:

There is currently a vacancy rate of 11.75% across the trust, this is an increase on last month, by 1.95%,









**ULH Vacancy Rate** 

however this affected by the junior Doctors rotation. Vacancy rate is now based on Finance establishment FTE compared to Finance contracted FTE.

#### Medical: 13.70%%

- Slight increase in number of Medical Staff FTEs in post over past 12 months.
- Number of Staff in-post 01.09.15 = 802.24 FTEs and 833 Headcount
- Vacancy rate has increased by 5.96% as a result of the fluctuation in number due to junior doctors' rotation. The vacancy rate prior to junior doctor rotation was 14.67%

#### Nursing: 15.33%

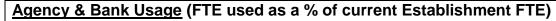
- The vacancy rate increased from 13.57% at the previous month end to 15.33%. This is linked to the increase of 29.62 Fte in funded establishment due to additional funding in A&E and escalation beds made permanent.
- 71 wte new starters for September
- A total of 61 Band 5 N&M staff have been promoted within last 12 months (career progression/ retention of skills/staff)

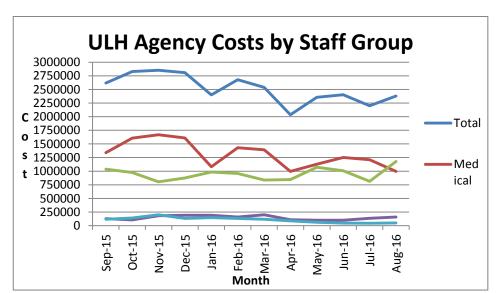
## **Actions Underway**

- A&E Recruitment Plan identified across all 3 sites (some appointments have been made)
- Representatives from ULHT are attending the Royal College of Emergency Medicine's annual scientific conference in Bournemouth to recruit doctors to our A&Es.
- International Nurse Recruitment and Newly qualified recruitment drives









**ULH Agency Costs by Staff Group** 

# **Employee Wellbeing**

#### Trustwide:

August 2016 - 8.50% (4.55% Agency + 3.95% Bank) Previous comparable data August 2015 - 8.40% (4.93% Agency + 3.47% Bank)

#### Headlines:

- 0.63% increase in the figure from July (7.87% to 8.50%)
- Total cost for Agency in August 2016 was £2,379,796 which is an increase of £179,485 from the previous month.
- The Directorates with the highest Agency spend in August are Integrated Medicine Boston £733,721 and Integrated Medicine Lincoln £728,763

### **Actions Underway**

- HR has been working with 'Experis' Agency and have had meetings with x9 CD's covering the 30 most hard to recruit posts/areas
- CD's are looking through various prospective applicants and panels will be set up within next couple of months to convert to permanent solutions thus reducing need for Agency and Locum cover.

#### **Trustwide**

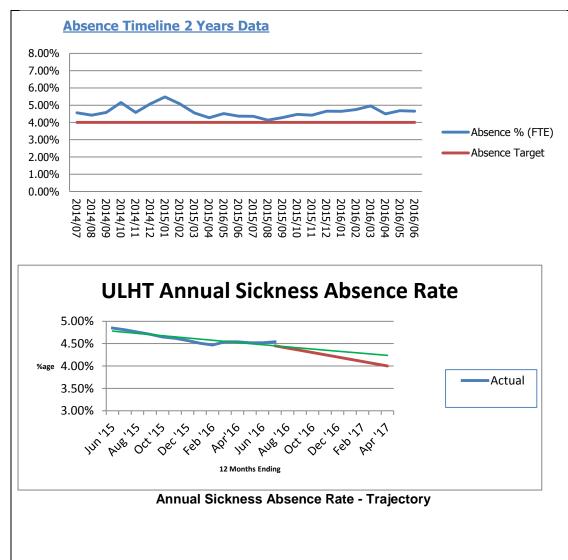
Annual sickness rate has decreased by 0.27% in comparison to July 2015 figures.

The annual cost of sickness (excluding any backfill costs) has decreased by £417,629 compared to 12 months ago.

Monthly sickness rate for July 2016 is 4.77%. The June 2016 monthly sickness rate has now decreased from 4.65% to 4.60%.







### Target 4%

#### Headlines

- During the 12 months ending July '16, Anxiety/Stress/Depression and other Psychological illness was the top reason for time lost due to sickness at 21.26% of all absence. Of this figure 1.71% was work related and 19.55% non-work related.
- Estates & Ancillary had the highest sickness rate during the 12 months at 6.44% followed by Additional Clinical Services at 6.31% (Unregistered Nurses 6.89%), and Nursing & Midwifery Registered at 5.05%.
- 60.60% of OH Appointment requested are offered within 0-10 days from referral, a further 14.49% is offered within 11-15 days.
- 28% of the referrals are relates to Anxiety/depression/other psychiatric illness and other MSK and back problems are 18% and 12% respectively.
- 36.90% of the referrals resulted in 'Fit for Work with reasonable adjustments' and 14.11% 'Fit for normal duties' as recommendations

## **Actions Underway:**

- All sickness information entered into ESR via either ESR self-service or monthly interface from the HealthRoster System
- Sickness Action Plan (across all Services/Sites) are being updated to reflect key milestones and assurance to Trust Board and NHSi.
- Flu Vaccination We are awaiting the final delivery date for flu vaccines and we are planning to have them on site for the 1st week in October and





Staff Group	FTE Lost	%	<b>Estimated Cost</b>
Add Prof Scientific & Technic	2,945.59	3.98%	£280,894.05
Additional Clinical Services	24,252.52	6.31%	£1,323,228.77
Administrative & Clerical	17,656.78	3.95%	£1,317,103.33
Allied Health Professionals	3,944.16	2.99%	£405,449.40
Estates & Ancillary	15,308.96	6.44%	£806,203.79
Healthcare Scientists	897.40	2.29%	£111,768.22
Medical & Dental	4,525.71	1.55%	£887,796.80
Nursing & Midwifery Registered	35,789.08	5.05%	£3,373,114.15
Students	9.53	0.17%	£550.62
Total	105,329.73	4.54%	£8,506,109.12

Rolling Yearly Sickness Rates & Estimated Cost by Staff Group

commence vaccinations that week.

- Counselling Course The ULHT Occupational Health & Health & Wellbeing Service CPCAB Level 2 Award in Introduction to Counselling Skills course commences in October 2016.
- Mental health First Aid MHFA MHFA training will commence in September 2016 MHFA is a two day course with external trainer support, for up to 18 minimum employees
- Mindfulness for Wellbeing A rolling programme will commence from October 2016 (this is a generic approach with view to developing more specialist bespoke courses for departments /services at a later date).

# **Employee Relations**

	LCH Open	PHB Open	GDH Open	W/C Open	Diagnosis Open	Therapy Open
Disciplinary Cases	16	7	1	5	3	0
Formal Grievance Cases	15	10	1	3	1	0
Appeal Panel	1	1	0	0	0	0

Sept 2016 ER Cases Non-Medical Workforce

## **Headlines:**

- The Employee Relations Team now has access to E-Roster which enables the team to chase absence more effectively.
- Payment for regular overtime whilst on annual leave principles have been wrote.

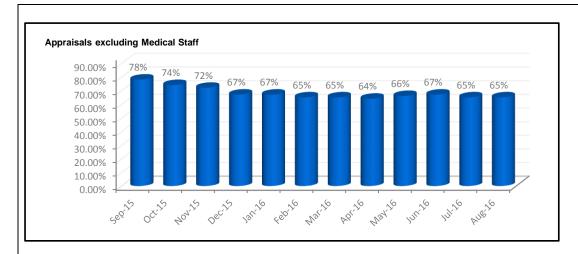
# **Actions Underway:**

 1:1 meetings being arranged with staff affected by PAR

# **Appraisals**







### Appraisals excluding medical staff

## **Medical Appraisals**

# **Nursing & Other Staff (Agenda for Change)**

- As at 31 August 2016 (for rolling 12 months) the Agenda for Change Staff Appraisal compliance rate is 64.70%.
- As at August 2015 (for previous 12 month period) it was 79.33%
- The overall percentage for appraisals has decreased by 0.30% from the previous month

# **Highlights:**

- The site with the highest appraisal rate is Louth at 74.60%, which is an increase of 1.52% from the previous month.
- Lincoln also has an increased appraisal rate at 65.01%, which is an increase of 0.99%.
- Pilgrim and Grantham appraisal rates have both decreased from the previous month, by 1.35% and 2.94% respectively

## **Actions Underway:**

- An Appraisal Milestone Plan has been developed with a particular focus on improving Appraisal rates/compliance for Nursing & Midwifery Staff.
- Pay Progression Policy (linked between staff appraisals and salary increments) have been finalised and will 'Go Live' with effect from 1<sup>st</sup> October 2016. Trust wide communication has taken place in this regard.
- Additional HR Training sessions are being arranged to 'train' Managers on how to record appraisals on ESR to ensure accurate recording for monitor and audit purposes.

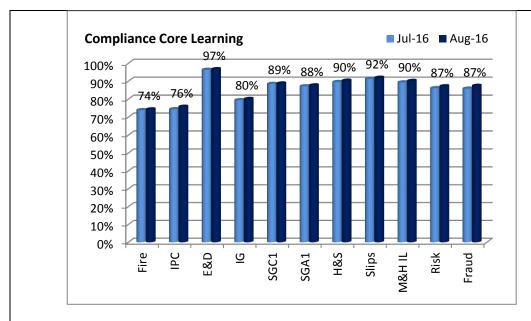
# Trustwide

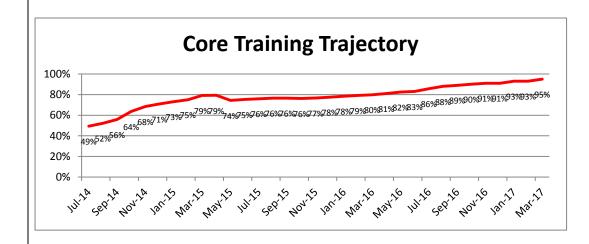
The Trusts compliance/performance this month remains

# **Core Learning**









the same at 86%

## **Highlights:**

- Fire compliance remains the same whereas Infection Prevention increased by 2% and Information Governance by 1%. All 3 annual topics are between 3 and 5% higher than this time last year.
- 3 yearly topics either remain the same or show another increase of 1%. Rates are much higher than this time last year.
- The DNA 'No Show' rate for August is down 5% to 16% compared to last month which is 5% less than that same time last year

### **Actions Underway:**

- New pre-prepared Core Learning Compliance report created and available through ESR Supervisor Self-Service for Managers/Supervisors/Clinical Educators which provides up to date compliance for their areas automatically in 5 clicks. This will help simplify and improve compliance monitoring.
- Senior Managers are notified no later than 4 working days from the classroom session of the names of the individuals who have DNA'd so they can take appropriate action
- With the introduction of ESR Supervisor Self-Service, managers and clinical educators have access to DNA information for their staff.
- The Pay Progression Policy is launched on 1.10.16.
  Non-compliance with core learning may act as a bar to incremental pay progression.





# **Employee Engagement**

#### **Headlines:**

- September's Pulse Check is out for completion to a guarter of the workforce.
- Facilities and Estates Pulse Check completion and "You said, We did" events have taken place.
- Ongoing Staff Engagement support is being provided to the CQC Hub team in preparation for the October inspection.
- ULHT Learners' week planned in partnership with staff-side w/c 26.9.16 to promote learning opportunities for all.
- Staff engagement events being planned across the Trust in September/October 2016.
- Survey results received and analysed for 8/10 teams from Cohort 1: Staff Engagement Teams.
- Staff engagement on-line improvement portal created

### **Actions Underway:**

- Feedback survey results to staff engagement programme teams.
- Close survey and obtain results from last two of the staff engagement teams.
- Report programme results and findings to HR and OD Programme Board and Staff Engagement Group.
- Finalise teams for Cohort 2, Staff Engagement Team Programme.
- Pulse Check results analysed and shared.
- Improve strategies to increase Pulse Check return rate.
- Patient Experience and Staff Engagement (Frontier Framework) scope being agreed

# **Equality & Inclusion**

The Trust continues to make significant progress in improving performance in relation to the Equality, Diversity and Inclusion agenda.

### 1) Equality, Diversity and Inclusion Committee

The Trust-wide Equality, Diversity and Inclusion Committee had its first meeting on the 9<sup>th</sup> September 2016. The committee is chaired by Jan Sobieraj, Chief Executive Officer, and is firmly embedded within the governance structure of the organisation.

This committee will not only provide the Trust with a robust mechanism to deliver and monitor performance in relation to statutory and mandatory duties relating to Equality, Diversity and Inclusion, it will also provide a vision for the Trust to celebrate and promote the wealth of cultural diversity in Lincolnshire.

### 2) Public Sector Equality Duty





At United Lincolnshire Hospitals NHS Trust, our vision is to provide consistently excellent and safe patient-centered care for the people of Lincolnshire, through highly skilled, committed and compassionate staff working together. We also believe that equality, diversity and inclusion are central to the success of our vision.

The Trust is fully committed to meeting its responsibilities and meeting the requirements of the Public Sector Equality Duty (PSED). The Trust is developing plans and actions to ensure compliance with equality legislation, designed to address unfair discrimination experienced by members of protected groups as defined by the Equality Act 2010.

## a) Equality Objectives 2016-2017

To support in the delivery of the wider Public Sector Equality Duty, the Trust has set five key equality objectives for 2016-2017. These objectives have been published on the Trust's website

### b) Staff Equality Monitoring

At the United Lincolnshire Hospitals NHS Trust we firmly believe that well supported staff provide better care for patients. In the Trust we monitor staff equality information, as required under the Public Sector Equality Duty, in an anonymised manner. This information helps us to understand the needs and requirements of our workforce, so that we can do our utmost to support their specific needs and make the reasonable adjustments required.

The workforce equality information is analysed by a number of the protected characteristics identified in the Equality Act 2010. The current Electronic Staff Record (ESR) system allows for data reporting on all the protected characteristics except Gender Reassignment. The ESR system is a national system and the Trust has raised with the software provider that future system upgrades need to provide the function to record Gender Reassignment status.

There is no requirement for the Trust to report on the protected characteristic Pregnancy and Maternity. However, the Trust is able to report on the number of people who have requested maternity / paternity leave.