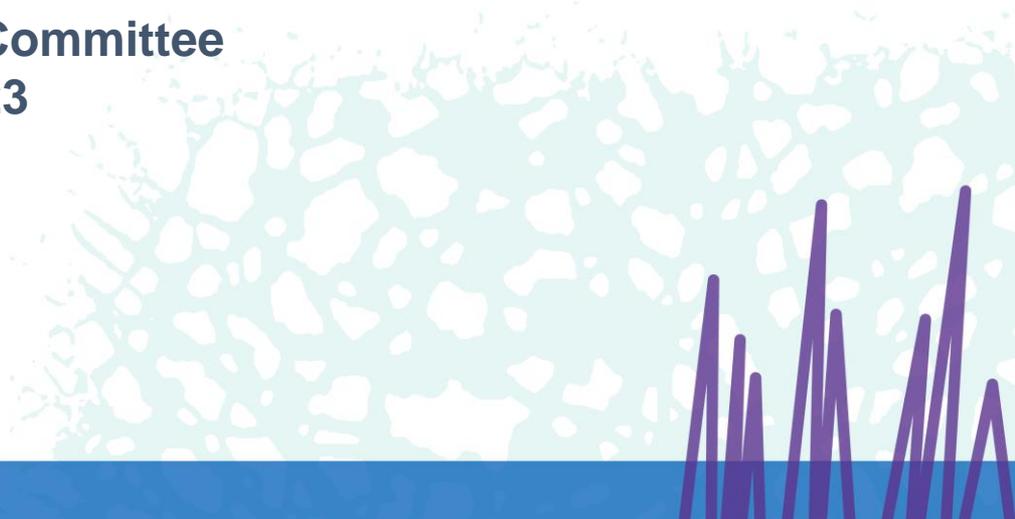




Royal Papworth Hospital
NHS Foundation Trust

Workforce Dashboard

Workforce Committee
January 2023

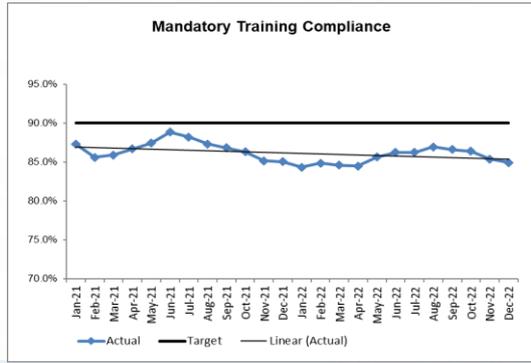
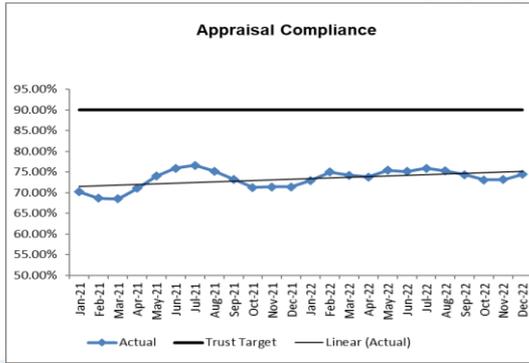
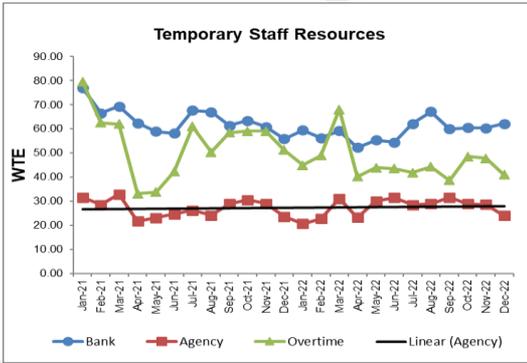
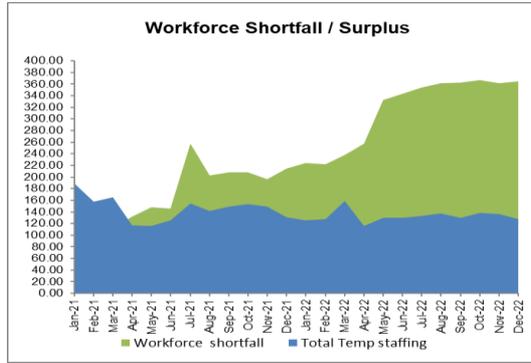
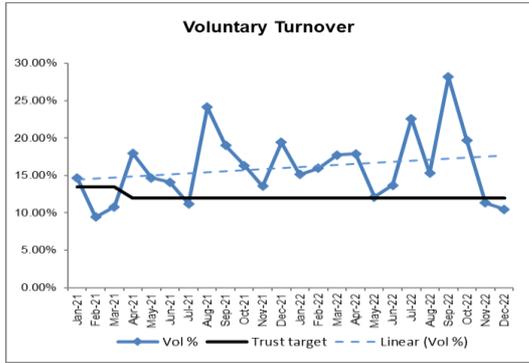
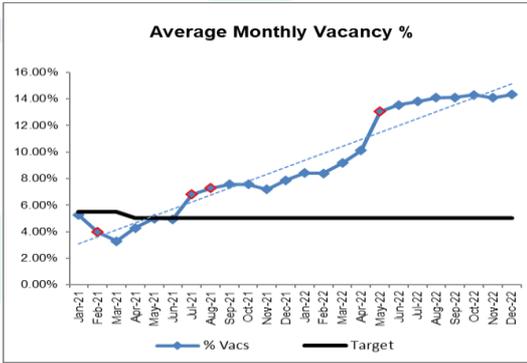




Trust KPIs

	JAN-22	FEB-22	MAR-22	APR-22	MAY-22	JUN-22	JUL-22	AUG-22	SEP-22	OCT-22	NOV-22	DEC-22	CHANGE
Establishment FTE	2165.03	2165.03	2165.03	2165.03	2238.15	2238.15	2238.15	2238.15	2239.15	2239.15	2239.15	2239.15	-
FTE in POST (Average)	1982.69	1983.17	1966.77	1946.09	1939.75	1935.26	1929.10	1923.09	1923.42	1919.13	1923.86	1918.31	▼
Bank Usage FTE	59.44	56.28	59.22	52.24	55.34	54.44	62.20	67.14	59.98	57.43	60.34	62.23	▲
Agency Usage FTE	20.75	22.75	31.13	23.28	30.10	31.49	28.58	28.93	31.64	28.85	28.62	23.99	▼
Overtime Usage FTE	45.02	48.96	68.08	40.16	43.95	43.55	41.90	44.29	38.64	48.60	47.78	41.00	▼
Total FTE Usage	2107.90	2111.16	2152.20	2061.77	2069.14	2064.74	2061.78	2063.45	2053.68	2054.01	2060.60	2045.53	▼
Average Vacancy FTE	182.34	181.86	198.26	218.94	291.16	302.89	309.05	315.06	315.73	320.02	315.29	320.84	▲
Vacancy %	8.42%	8.40%	9.16%	10.11%	13.05%	13.53%	13.81%	14.08%	14.10%	14.29%	14.08%	14.33%	▲
Voluntary Turnover %	15.14%	15.97%	17.73%	17.89%	12.13%	13.67%	22.60%	15.28%	28.16%	19.70%	11.35%	10.45%	▼
Starters Leavers Net FTE	14.34	-16.05	13.77	-20.43	-8.73	8.32	-15.37	-20.85	-7.34	12.17	4.74	4.90	▲
Stability Index %	81.41%	80.44%	80.05%	80.61%	80.72%	80.66%	80.16%	80.25%	79.09%	78.55%	78.75%	78.79%	▲
Reg Nursing Vacancy %	4.87%	5.50%	6.65%	7.48%	9.26%	11.47%	11.11%	11.76%	12.91%	13.62%	13.79%	13.38%	▼
Unregistered Nursing Vacancy %	24.52%	24.27%	24.54%	25.09%	26.31%	26.62%	26.82%	26.28%	22.90%	21.06%	18.84%	19.77%	▲
Admin & Clerical Vacancy %	9.96%	9.64%	12.12%	13.10%	13.20%	13.19%	13.56%	13.67%	14.37%	16.01%	16.41%	16.60%	▲
AHP Vacancy %	16.38%	15.91%	16.86%	17.72%	17.21%	17.97%	16.75%	15.76%	13.98%	10.17%	11.47%	12.52%	▲
Healthcare Scientists Vacancy %	13.14%	10.83%	16.12%	16.72%	20.80%	19.84%	18.91%	19.81%	16.68%	13.23%	12.11%	13.23%	▲
Sickness %	5.6%	5.4%	5.6%	5.2%	4.1%	5.0%	5.3%	4.5%	4.3%	5.4%	4.9%	5.4%	▲
Average Sick Days per FTE	18	19	18	20	25	20	19	22	23	19	21	18	▲
Mandatory Training %	84.32%	84.86%	84.56%	84.45%	85.61%	86.22%	86.21%	86.92%	86.60%	86.35%	85.37%	84.92%	▼
Appraisal %	72.94%	74.96%	74.18%	73.75%	75.41%	75.08%	75.88%	75.28%	74.31%	73.06%	73.12%	74.38%	▲
Time to Hire	57	63	58	-	-	-	-	62	-	52	56	57	▲

Trend Analysis - Trust KPIs - Dec-22

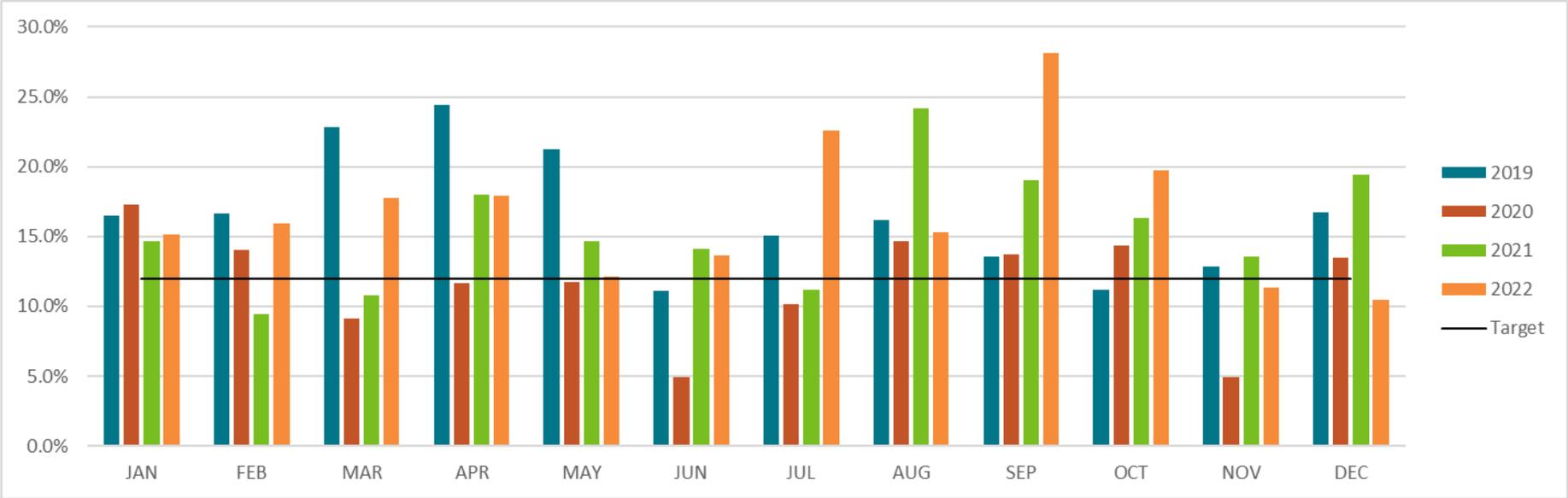


N.B. Red marker indicates a change in budget

Trend Analysis – Turnover Rate

The chart below shows voluntary turnover over the last 4 years by month. The impact of the move to the new hospital and Covid-19 on turnover rates is clear in this chart. In the early part of 2019 we experienced high turnover rates as a result of the move to the new hospital as staff who were not able and/or willing to stay with the hospital post move left. Turnover rates reduced over the summer 2019 and were at or below our then KPI of 15%. Turnover reduced further as Covid-19 started to impact and remained suppressed during 2020. In 2021 as Covid-19 restrictions were lifted turnover increased as staff progressed career plans put on hold during the pandemic. Turnover remained over our KPI of 14 % for the majority of months in 2022.

The most common reasons given by staff for leaving is relocation, lack of opportunities and work-life balance.



Staff Engagement

The NHS Staff Survey 2022 was undertaken October – December 2022. It measures the working experience of staff gathered at the same time each year. The results provide a rich source of data on the views of staff on a wide range of areas. The data is used by the CQC as part of their Well Led assessment and is the basis for our Workforce Race Equality Scheme, Workforce Disability Equality Scheme and Freedom to Speak Up Index assessments. This year for the first time a survey was also made available to workers registered on our staff bank. It was optional to participate in this ahead of it becoming compulsory in 2023. We chose to participate as we were keen to hear of the experiences of our bank colleagues and consider how we could use this to improve the experience in order to improve recruitment and participation in bank work.

We had a final substantive response rate of 60.84% (1212 respondents from an eligible sample of 1992 employees). This is above the average response rate for Acute Specialist Trust’s, which sits at 56.05%. There were 84 responses to the bank survey. We do not have any comparative information for the bank survey response rate.

Please find below the substantive response rates by Division and Staff Group: The results of the survey will be published in March 2023 and until then are embargoed.

Division	Response Rate
CARDIOLOGY DIVISION	51.5%
CLINICAL ADMINISTRATION	66.0%
CORPORATE SERVICES	76.2%
DIGITAL DIRECTORATE	82.2%
FINANCE DIRECTORATE	61.3%
NURSING-CLINICAL	81.7%
NURSING-CORPORATE	77.8%
R&D	81.1%
SURGERY TRANSPLANT & ANAESTHETICS	49.5%
THORACIC MED & AMBULATORY CARE	63.5%
WORKFORCE	93.5%

Staff Group	Response Rate
ADD PROF SCIENTIFIC AND TECHNIC	74.7%
ADDITIONAL CLINICAL SERVICES	49.8%
ADMINISTRATIVE AND CLERICAL	80.8%
ALLIED HEALTH PROFESSIONALS	76.8%
ESTATES AND ANCILLARY	30.3%
HEALTHCARE SCIENTISTS	67.5%
MEDICAL AND DENTAL	44.5%
NURSING AND MIDWIFERY REGISTERED	56.9%

Workforce Leads Update (1 of 3)



Royal Papworth Hospital
NHS Foundation Trust

Operations – Liz Taylor, Karen Panesar, Lorraine Howard-Jones

The medical staffing team have been working with the medical education team to make improvements to the clinical induction programme for junior doctors. This includes the proposal to add in an additional day to the medical induction process to enable all mandatory training elements to be completed. We are looking to introduce this as once juniors start in post compliance with mandatory training becomes more difficult.

Local clinical excellence awards as an evaluative scheme was paused through the pandemic with funds being distributed equally amongst all eligible consultants. In 2023, in time for making awards for performance in 2022/23 – the Trust is considering putting in place its own process in advance of the 2023 CE awards. A working party has been established to facilitate this.

With a full team of workforce business partners we have been able to focus on pro-active sickness management fully utilising workforce reporting-half pay/ no pay reports and support managers at a granular level. Monthly reviews have been initiated and we have been regularly checking in with managers who have any staff on long term sickness absence in order to provide guidance and ensure they are being managed under the Trust process and given health and wellbeing support is being explored and offered. Also continued support for staff and managers of those needing to be redeployed regularly to different ward areas-one of the main themes reported by the Trust Mental H and WB practitioner.

Support is being provided to Estates and Facilities with Housekeeper attraction, engagement and retention as well as non clinical apprenticeship.

A significant number of Workforce Policies and Procedures are out of date. This is as a result of the need to switch focus and capacity during the Covid-19 surges and then the gaps in the team. We are keen to take the opportunity to not just update the policies and procedures but also to embed the values and behaviours and ensure they are based on best practice. We are currently focusing on the Recruitment and Selection Procedure, Flexible Retirement and the Violence and Aggression Policy.

Training and Development – Lorraine Howard-Jones

- The focus in 2022 for training and development has largely concentrated on ensuring that we have a fit for purpose induction programme, returning us to a steady state on mandatory training and maintaining our e-learning and widening access programmes which engaging with the project to move training and development into the Royal Papworth School. Our ambition for this service in 2023 is to focus on:
 - i. Non-clinical training which includes induction, onboarding and mandatory training but will include the procurement and implementation of a learning management system as well as further development of bookable online training programmes as well as developing a coherent response to learning and development demand arising from a Trust-wide training needs assessment and
 - ii. organisational development which will focus on implementing talent management and succession planning, development of clear career pathways and associated learning interventions, as well as working with HEE and Higher Education partners to improve the learning opportunities available to our staff

Workforce Leads Update (2 of 3)



Royal Papworth Hospital
NHS Foundation Trust

Workforce Information / Workforce Planning – Adam Radwell

- SBS Payroll performance continues to cause concern. We are working closely with SBS to monitor and improve their performance. We have seen some improvement but we are not yet at a level of service we expect and it is erratic with some months being acceptable but then other months multiple issues.
- We have successfully processed a number of corrective payments for staff – these included the Overseas Nurses Back Pay to ensure their service prior to joining Royal Papworth was accounted for, as well as backdated pay for Overtime where the Local Overtime Rates were less favourable than AfC rates.
- We continue to see a high number of avoidable overpayments – the main cause being late submission of forms. We have changed our Payroll form process to streamline it, and are working with managers to try and ensure paperwork is completed in advance of the effective date and submitted before payroll deadline. Managers now receive reports on their overpayments and the cost and there is a regular report to the Audit Committee.
- We upgraded to HealthRoster and SafeCare Live version 11.2.3 at the start of January; this upgrade featured a number of useful enhancements which will be beneficial to the Trust. We have also gone to advert for a new Band 5 eRostering Advisor. This will give us more resource within the eRostering Team to complete project work and roster updates and amendments that we know are being requested by Departments.

Recruitment and Temporary Staffing – Luke Bage

- Over the last 2 months we have been focusing on reducing time to hire, especially for internal candidates. In January we have 215 candidates in our recruitment pipeline, 83 of which are internal. We have reviewed and streamlined the pre-employment checks process for internal appointments. Time to hire has reduced from 62 days in August to 57 in December. There is still substantial improvements to be made but until we have implemented the new recruitment system it will be difficult to make the kind of improvements needed to bring the time to hire down to an acceptable level.
- We have completed the procurement for a new electronic recruitment system which should transform and speed up recruitment processes. We are planning to have it implemented in April 2023.
- We identified that student nurse recruitment had reduced over the last two years; the number of newly qualified nurses we had recruited in 2021 and 2022 was significantly down from the previous years. Pre-Covid-19 we were linked in with Universities across the country and attended lots of events. We have reviewed our approach and have improved the engagement with student nurses on placement with us and planned a programme of visits/attendance at events. We recruited 6 student nurses November following implementation of new process (they will be ready to commence in Oct 2023).
- We significantly increased the number of overseas nurses we aimed to recruit in 2022/23 to 52. We are recruiting to all Divisions working with a number of agencies. In the period March 22- December 22 we planned to recruit and onboard 26 nurses. We managed to start 24 of the 26 by then end of December and are working on travel plans for the remaining 2. We have recruited 15 of the 26 we are seeking to recruit Jan – Mar 23.

Equality, Diversity & Inclusion

This update provides an overview of the work plan and activity over the last two months on the important area of Equality, Diversity and Inclusion (EDI). The structure of how we report will change to reflect the strategic objectives set out in the Workforce Strategy once that is approved by the Trust Board.

Over the last 2 months we have been focusing on:

- Delivery of the second module of the Transformational Reciprocal Mentoring Programme in December.
- Working with NHSE on the design and procurement of an evaluation of the Transformational Reciprocal Mentoring Programme. NHSE are keen to evaluate the impact and learning from the programme. This is also important for us as we are in the early stages of planning for a second cohort of this programme. NHSE are fully funding this evaluation.
- The LGBT+ Network supported by the EDI and Communications Team have been planning a number of events to celebrate LGBT History Month in February. There will be a number of webinars with speakers and a photography competition.
- The Staff Story at the Trust Board was delivered by two member of staff with lived experience of dyslexia. The Disability and Difference and Working Carers (DADWC) Network had encouraged and supported these member of staff to share their story. Following the Board meeting the EDI team have been working with the DADWC Network to consider how we can better support staff with dyslexia and dyscalculia including setting up a support group for staff with dyslexia. We are also planning to run a Schwartz Round in partnership with Cambridge and Peterborough Foundation Trust.
- As part of the C&P EDI Workstream leading on a joint, consistent approach to the procurement and/or design of EDI Training and Development for leaders and staff. The first piece of work being progressed is the procurement of training on Cultural Intelligence from Beyond Difference.
- Supporting the Women's Network to develop their strategy.

- Progressing a comprehensive review of the Violence and Aggression Procedure so that it better addresses abuse of staff by patients and provides them with clear guidance on the action that should be taken to protect and support staff.
- Updating the Trusts EDI Procedure which was out of date.

The activities we will be focusing on over the coming months:

- We will confirm the arrangements for the second cohort of the Transformational Reciprocal Mentoring Programme and develop the communication plan to recruit to this with the aim of being ready to open it from applications in Feb/March.
- Update the WRES and WDES Action Plans- with evidence linking them to the ongoing work of the EDI team and the Networks. .
- Plan how we will undertake Equality Delivery System 2022 which we are expected to have completed by July 2023. This self assessment process looks at both workforce EDI and the experience of patients.
- Complete the review of the Violence and Aggression Procedure and design the training and support material and communication plan for the relaunch.
- Undertake a review of our current recruitment processes to identify where biases may be impacting and better understand the experiences and perceptions of candidates and recruiters. We are working through the recommendations/learning from the Fair Recruitment Report.

Compassion & Collective Leadership Programme

The Compassionate and Collective Leadership underpins our strategic objective to embed a compassionate and collective leadership culture across the organisation in order to sustain the delivery of high quality care to our patients. Following an in-depth diagnostic phase, we identified eight priority areas to address the issues identified by staff in the diagnostic phase. We have been progressing a work plan to address these eight priority areas through a number of workstreams.

Over the last 2 months we have been focusing on:

- Recruiting to the Compassionate and Collective Leadership Programme Team, following the departure of the additional capacity brought in approximately 18 months ago to design and deliver the Values and Behaviours workshops and the Line Managers Compassionate and Collective Leadership Programme. We have been fortunate to recruit a number of excellent new members of the team.
- Continuing to deliver the Values and Behaviours Workshops. By the end of December 22 approximately 70% of staff had attended a workshop.
- Delivering the final sessions of the Line Managers Programme. Unfortunately the celebration event for Cohort 1 had to be cancelled

because of the nurses strike. It is being rearranged.

- Recruiting to the 2023 cohorts of the Line Managers Programme which will commence in April 2023.
- Continuing to expand the Health and Wellbeing offering to staff. As part of the Staff Benefits we expanded the emergency hardship scheme to award food and fuel vouchers to staff in need.
- Recruiting to additional HWB Facilitators to ensure that each area of the hospital and House is being supported by this role.

The activities we will be focusing on over the coming months:

- Developing the workplan for 23/23 including the next steps with the Values and Behaviours Workshops, approach to team development, approach to talent management and how we remove biases from recruitment processes.
- Designing a process for evaluating the impact of the Compassionate and Collective Leadership Programme.
- Expand the financial wellbeing support available to staff.

Resourcing & Retention Improvement Programme

- The BAF risks for turnover and vacancy rates are currently rated as extreme risks given the steady rise in both over the last 18 months. The socio-economic context and current period of industrial unrest mean that resourcing and retention will continue to remain difficult throughout 2023. In order to address these risks and mitigate the impact on our ability to maintain safe staffing levels and improve productivity we have instigated a Resourcing and Retention Improvement Programme. The aim of the Programme is to:
 - To enhance resourcing & retention of staff, delivering our strategic objectives by having a systematic and coherent approach
 - To identify, realise & deliver opportunities to think & work differently
 - To utilise local, regional & national initiatives
- Following an initiation workshop in October 2022 a diagnostic review of existing staff survey data, workforce data and related material, was commissioned. This was to ensure that the Programme was focusing on making improvements and/or develop new work processes/interventions on those things or staff groups which were most likely to have a positive impact on turnover and recruitment. The programme intends to take the following approach:
 - Collaborative & supportive
 - Systematic
 - Realistic
 - Joined up
 - Improvement methodology
 - Encouraging partnership working across Divisions/Directorates and with Workforce Directorate
- The Programme Board is co-chaired by the Director of Workforce and OD and the Chief Nurse. The Programme Board's role is to provide the governance for the collective ownership and oversight of the following workstreams:
 - Workforce Planning
 - Resourcing including attracting staff, onboarding, preceptorship, temporary staffing
 - Recruitment
 - Employee Development and progression
 - Retention and reward
- The first meeting of the Programme Board was held on 12 January 2023 after being postponed because of the RCN strike action in December. We reviewed the diagnostic report and established five workstreams based on the areas outlined above. Each workstream will use the diagnostic work to identify a small number of initial pieces of work to take forward. This is an improvement programme so there is a focus on testing interventions using an improvement methodology and on learning from best practice elsewhere. There is a NHSE Improvement Self-Assessment Tool which we will complete as part of the initial diagnostic phase.



Royal Papworth Hospital
NHS Foundation Trust

By Staff Group



Staff Groups - Dec-22 (1 of 2)

Registered Nursing & Midwifery



Staff in Post



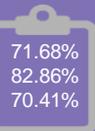
Vacancies



Voluntary Leavers



Sickness Absence



Appraisal Compliance
Mand Training Compliance
V&B Training Attendance

90% have over 12 Month's Service



Equality, Diversity & Inclusion:



Female



BAME



LGBTQ+



have a disability

N.B Protected Characteristics are self reported

Additional Clinical Services



Staff in Post



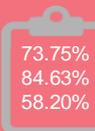
Vacancies



Voluntary Leavers



Sickness Absence



Appraisal Compliance
Mand Training Compliance
V&B Training Attendance

76% have over 12 Month's Service



Equality, Diversity & Inclusion:



Female



BAME



LGBTQ+



have a disability

N.B Protected Characteristics are self reported

Medical & Dental



Staff in Post



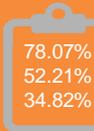
Vacancies



Voluntary Leavers



Sickness Absence



Appraisal Compliance
Mand Training Compliance
V&B Training Attendance

53% have over 12 Month's Service



Equality, Diversity & Inclusion:



Female



BAME



LGBTQ+



have a disability

N.B Protected Characteristics are self reported

Allied Health Professionals



Staff in Post



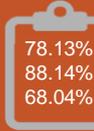
Vacancies



Voluntary Leavers



Sickness Absence



Appraisal Compliance
Mand Training Compliance
V&B Training Attendance

82% have over 12 Month's Service



Equality, Diversity & Inclusion:



Female



BAME



LGBTQ+



have a disability

N.B Protected Characteristics are self reported

Staff Groups - Dec-22 (2 of 2)

Add Prof Sci & Technical

83.60 FTE	11.34 FTE
Staff in Post	Vacancies
1.6 FTE	7.5%
Voluntary Leavers	Sickness Absence
83.16% Appraisal Compliance	84.14% Mand Training Compliance
68.13% V&B Training Attendance	
89% have over 12 Month's Service	

Equality, Diversity & Inclusion:

75%	18%	4%	2%
Female	BAME	LGBTQ+	have a disability

N.B Protected Characteristics are self reported

Healthcare Scientists

89.45 FTE	11.84 FTE
Staff in Post	Vacancies
0.6 FTE	5.7%
Voluntary Leavers	Sickness Absence
78.82% Appraisal Compliance	88.49% Mand Training Compliance
88.24% V&B Training Attendance	
80% have over 12 Month's Service	

Equality, Diversity & Inclusion:

74%	16%	3%	10%
Female	BAME	LGBTQ+	have a disability

N.B Protected Characteristics are self reported

Administrative & Clerical

397.03 FTE	79.02 FTE
Staff in Post	Vacancies
3.0 FTE	3.3%
Voluntary Leavers	Sickness Absence
76.18% Appraisal Compliance	92.11% Mand Training Compliance
80.97% V&B Training Attendance	
86% have over 12 Month's Service	

Equality, Diversity & Inclusion:

79%	10%	3%	8%
Female	BAME	LGBTQ+	have a disability

N.B Protected Characteristics are self reported

Estates & Ancillary

72.47 FTE	32.43 FTE
Staff in Post	Vacancies
0.0 FTE	11%
Voluntary Leavers	Sickness Absence
64.94% Appraisal Compliance	88.49% Mand Training Compliance
63.64% V&B Training Attendance	
83% have over 12 Month's Service	

Equality, Diversity & Inclusion:

57%	22%	6%	7%
Female	BAME	LGBTQ+	have a disability

N.B Protected Characteristics are self reported



Royal Papworth Hospital
NHS Foundation Trust

By Division



Cardiology Division - Dec-22

STAFFING

Vacancy Rate: 12.6%

Turnover: 4.48%

Agency FTE: 6.37

Bank FTE: 7.10

Overtime FTE: 6.36

Internal Promotions in the last month = 0

ABSENCE

Sickness Absence: 3.6%

of which:
0.4% Long Term
3.2% Short Term

Maternity Leave: 0.7%

STAFF ENGAGEMENT

Staff Survey Response: 51.50%

Pulse Survey Response: 6.21%

OVERPAYMENTS

Overpayments since last report*: 6

Main Cause of Overpayments* = **LATE LEAVER**

Outstanding Overpayment Balance* = £118k

*BASED ON DATA PROVIDED BY SBS PAYROLL

COMPLIANCE

Appraisal: 76.26%

Mandatory Training: 76.41%

ROSTERING

6 Week Roster Compliance: 71.4%

Auto-Roster Usage: 27.3%

Net Hours Left* = -298

*NEGATIVE = OWED / POSITIVE = OWING

STAFF SERVICE

Staff with over 12 Month's service: 75%

Average Years Service = 5 Years 5 Months

RECRUITMENT

Number of live Adverts: 3

EDI

Female %: 71%

BAME %: 29%

Disability %: 5%

LGBTQ+ %: 2%

Chief Executive - Dec-22

STAFFING

Vacancy Rate: 17.8%

Turnover: 0.00%

Agency FTE: 0.00

Bank FTE: 0.92

Overtime FTE: 0.00

Internal Promotions in the last month = 0

ABSENCE

Sickness Absence: 0.0%

of which:
0.0% Long Term
0.0% Short Term

Maternity Leave: 0.0%

STAFF ENGAGEMENT

Staff Survey Response: 76.20%

Pulse Survey Response: 7.24%

OVERPAYMENTS

Overpayments since last report*: 0

Main cause of Overpayments* = **INCORRECT INFO STATED**

Outstanding Overpayment Balance* = £0k

*BASED ON DATA PROVIDED BY SBS PAYROLL

COMPLIANCE

Appraisal: 71.43%

Mandatory Training: 98.82%

ROSTERING

6 Week Roster Compliance: 0.00%

Auto-Roster Usage: 87.1%

Net Hours Left*: -11

*NEGATIVE = OWED / POSITIVE = OWING

STAFF SERVICE

Staff with over 12 Month's service: 71%

Average Years Service = 6 Years 7 Months

RECRUITMENT

Number of live Adverts: 0

EDI

Female %: 63%

BAME %: 0%

Disability %: 0%

LGBTQ+ %: 0%

Clinical Administration - Dec-22

STAFFING



ABSENCE



STAFF ENGAGEMENT



OVERPAYMENTS



Main cause of Overpayments* = **LATE LEAVER**



*BASED ON DATA PROVIDED BY SBS PAYROLL

STAFF SERVICE



Average Years Service = 6 Years 5 Months

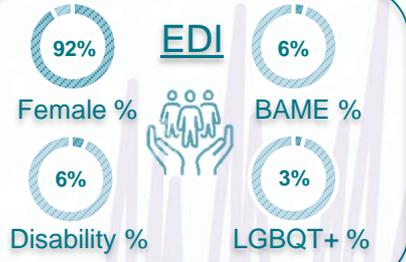
COMPLIANCE



ROSTERING



RECRUITMENT



Digital - Dec-22

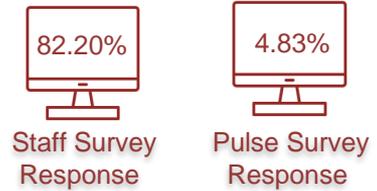
STAFFING



ABSENCE



STAFF ENGAGEMENT



OVERPAYMENTS



*BASED ON DATA PROVIDED BY SBS PAYROLL

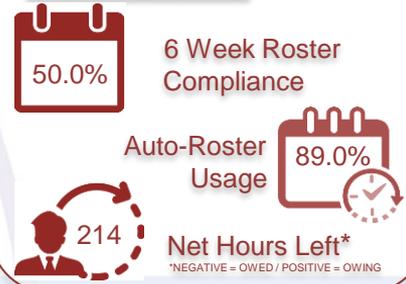
STAFF SERVICE



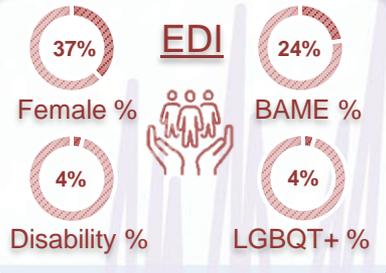
COMPLIANCE



ROSTERING

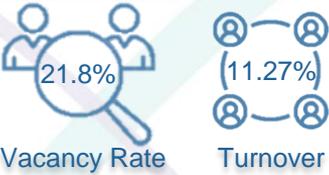


RECRUITMENT



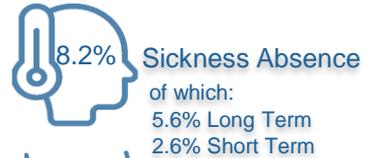
Finance Directorate - Dec-22

STAFFING



Internal Promotions in the last month = **1**

ABSENCE



STAFF ENGAGEMENT



Staff Survey Response

Pulse Survey Response

STAFF SERVICE

Staff with over 12 Month's service



Average Years Service = 6 Years 5 Months

COMPLIANCE



ROSTERING



RECRUITMENT

Number of live Adverts



OVERPAYMENTS

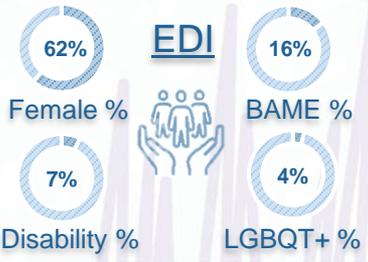


Main cause of Overpayments* = **LATE LEAVER**

Outstanding Overpayment Balance*



*BASED ON DATA PROVIDED BY SBS PAYROLL



Medical Director - Dec-22

STAFFING



COMPLIANCE



ABSENCE



ROSTERING



STAFF ENGAGEMENT



STAFF SERVICE



Average Years Service = 1 Years 6 Months

RECRUITMENT



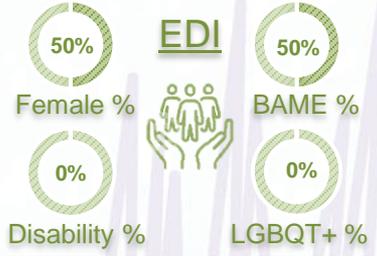
OVERPAYMENTS



Main cause of Overpayments* = **INCORRECT INFO STATED**

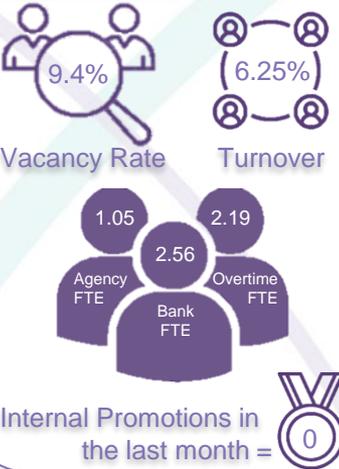


*BASED ON DATA PROVIDED BY SBS PAYROLL



Nursing Clinical - Dec-22

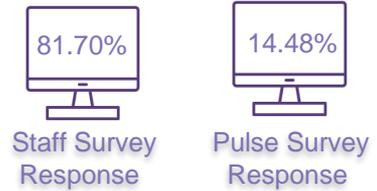
STAFFING



ABSENCE



STAFF ENGAGEMENT



OVERPAYMENTS



*BASED ON DATA PROVIDED BY SBS PAYROLL

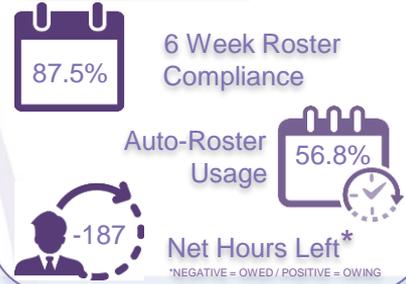
STAFF SERVICE



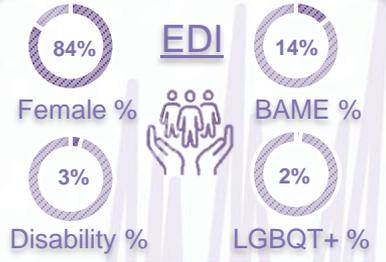
COMPLIANCE



ROSTERING



RECRUITMENT



Nursing Corporate - Dec-22

STAFFING

Vacancy Rate: 9.3%

Turnover: 14.30%

Agency FTE: 0.00

Bank FTE: 1.42

Overtime FTE: 0.33

Internal Promotions in the last month = 0

ABSENCE

Sickness Absence: 8.6%

of which:
4.4% Long Term
4.2% Short Term

Maternity Leave: 4.8%

STAFF ENGAGEMENT

Staff Survey Response: 77.80%

Pulse Survey Response: 2.07%

OVERPAYMENTS

Overpayments since last report* = 0

Main cause of Overpayments* = JR DR ROTA ELEMENTS

Outstanding Overpayment Balance* = £13k

*BASED ON DATA PROVIDED BY SBS PAYROLL

COMPLIANCE

Appraisal: 69.44%

Mandatory Training: 81.26%

ROSTERING

6 Week Roster Compliance: 100%

Auto-Roster Usage: 48.4%

Net Hours Left* = 17

*NEGATIVE = OWED / POSITIVE = OWING

STAFF SERVICE

Staff with over 12 Month's service: 81%

Average Years Service = 6 Years 5 Months

RECRUITMENT

Number of live Adverts: 1

EDI

Female %: 76%

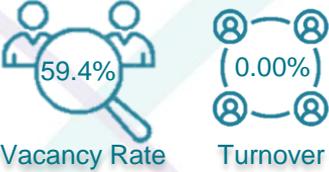
BAME %: 21%

Disability %: 13%

LGBTQ+ %: 2%

Operations Director - Dec-22

STAFFING

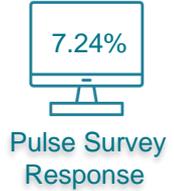


Internal Promotions in the last month = 0

ABSENCE



STAFF ENGAGEMENT



OVERPAYMENTS



Main cause of Overpayments* = **LATE NOTIFICATION**



*BASED ON DATA PROVIDED BY SBS PAYROLL

STAFF SERVICE



Average Years Service = 4 Years 5 Months

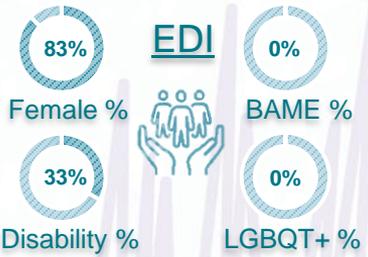
COMPLIANCE



ROSTERING



RECRUITMENT



Research & Development - Dec-22

STAFFING

Vacancy Rate: 0.0%

Turnover: 24.89%

Agency FTE: 0.00

Bank FTE: 4.13

Overtime FTE: 0.15

Internal Promotions in the last month = 0

ABSENCE

Sickness Absence: 3.5%
of which:
1.0% Long Term
2.5% Short Term

Maternity Leave: 3.5%

STAFF ENGAGEMENT

Staff Survey Response: 81.10%

Pulse Survey Response: 12.76%

OVERPAYMENTS

Overpayments since last report* = 0

Main cause of Overpayments* = **LATE NOTIFICATION**

Outstanding Overpayment Balance* = £17k

*BASED ON DATA PROVIDED BY SBS PAYROLL

COMPLIANCE

Appraisal: 77.03%

Mandatory Training: 86.32%

ROSTERING

6 Week Roster Compliance: 100%

Auto-Roster Usage: 84.0%

Net Hours Left*: 18

*NEGATIVE = OWED / POSITIVE = OWING

STAFF SERVICE

Staff with over 12 Month's service: 84%

Average Years Service = 6 Years 5 Months

RECRUITMENT

Number of live Adverts: 5

EDI

Female %: 84%

BAME %: 15%

Disability %: 7%

LGBQT+ %: 4%

Surgery, Transplant & Anaesthetics - Dec-22

STAFFING

Vacancy Rate 15.0%

Turnover 12.45%

Agency FTE: 11.57
Bank FTE: 22.01
Overtime FTE: 20.08

Internal Promotions in the last month = 0

ABSENCE

Sickness Absence 6.3%
of which:
2.3% Long Term
4.0% Short Term

Maternity Leave 2.6%

STAFF ENGAGEMENT

Staff Survey Response 49.50%

Pulse Survey Response 26.90%

OVERPAYMENTS

Overpayments since last report* 10

Main cause of Overpayments* = **LATE LEAVER**

Outstanding Overpayment Balance* £183k

*BASED ON DATA PROVIDED BY SBS PAYROLL

COMPLIANCE

Appraisal 66.42%

Mandatory Training 78.53%

ROSTERING

6 Week Roster Compliance 86.6%

Auto-Roster Usage 33.2%

Net Hours Left* 941
*NEGATIVE = OWED / POSITIVE = OWING

STAFF SERVICE

Staff with over 12 Month's service 82%

Average Years Service = 8 Years 5 Months

RECRUITMENT

Number of live Adverts 8

EDI

Female % 67%

BAME % 46%

Disability % 3%

LGBTQ+ % 4%

Thoracic Med & Ambulatory Care - Dec-22

STAFFING

Vacancy Rate: 17.6%

Turnover: (0.00%)

Agency FTE: 3.32

Bank FTE: 10.32

Overtime FTE: 4.03

Internal Promotions in the last month = 0

ABSENCE

Sickness Absence: 5.8%

of which:
1.4% Long Term
4.4% Short Term

Maternity Leave: 3.2%

STAFF ENGAGEMENT

Staff Survey Response: 63.50%

Pulse Survey Response: 10.34%

OVERPAYMENTS

Overpayments since last report* = 2

Main cause of Overpayments* = **LATE NOTIFICATION**

Outstanding Overpayment Balance* = £26k

*BASED ON DATA PROVIDED BY SBS PAYROLL

COMPLIANCE

Appraisal: 77.53%

Mandatory Training: 79.37%

ROSTERING

6 Week Roster Compliance: 93.3%

Auto-Roster Usage: 43.8%

Net Hours Left* = 133

*NEGATIVE = OWED / POSITIVE = OWING

STAFF SERVICE

Staff with over 12 Month's service: 85%

Average Years Service = 8 Years 5 Months

RECRUITMENT

Number of live Adverts: 2

EDI

Female %: 82%

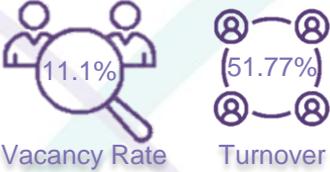
BAME %: 27%

Disability %: 4%

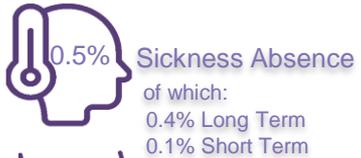
LGBQT+ %: 3%

Workforce Directorate - Dec-22

STAFFING



ABSENCE



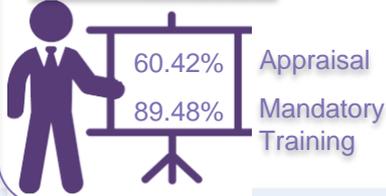
STAFF ENGAGEMENT



STAFF SERVICE



COMPLIANCE



ROSTERING



RECRUITMENT



OVERPAYMENTS

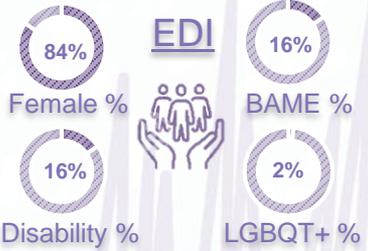


Main cause of Overpayments* = **TEMP STAFFING HOURS**



*BASED ON DATA PROVIDED BY SBS PAYROLL

EDI



Glossary

STAFF GROUPS

- Registered Nursing & Midwifery - Registered nurses, midwives and health visitors
- Additional Clinical Services – Unregistered Clinical Staff, including unregistered nurses and HCSW
- Medical & Dental – All Medical staff, including Consultants, Junior Doctors in Training and Trust Appointed Junior Doctors
- Allied Health Professionals – Registered Dietitians, Occupational Therapists, Physiotherapists, Radiographers, Speech & Language Therapists and Social Workers
- Add Prof Sci & Technical – Professional Technical Staff, including Pharmacists & Pharmacy Technicians, Surgical Care Practitioners and Operating Department Practitioners
- Healthcare Scientists – Physiologists, Technical Support Services, Pathology
- Admin & Clerical – All administrative staff, including Senior Managers
- Estates & Ancillary – Estates, Facilities, Housekeeping, Patient Environment Assistants

FTE – Full time equivalent

SIP – Staff in post

VACANCY – this shows the difference between the FTE of contracted staff in post against the agreed establishment. This does not include Temporary Staffing Usage

TURNOVER – this shows the rate at which staff are leaving the organisation over the last 12 months

STABILITY INDEX – this is a measurement showing the number of staff who have over 12 months' service at the Trust; the higher the index the more stable

SICKNESS – this measures the unavailability of staff due to sickness absence. The sickness percentage is calculated by dividing the FTE lost by FTE available

AVERAGE SICKNESS DAYS PER FTE – this figure is to provide context for how many days are lost in a 12 month period for each employee

MATERNITY – this measures the unavailability of staff due to maternity leave

TEMPORARY STAFFING USAGE – this is the FTE usage of Bank, Agency and Overtime

INTERNAL PROMOTIONS – this is the number of staff who have been promoted to a higher pay grade

EQUALITY, DIVERSITY & INCLUSION – all EDI data is self reported by employees either via their starter form or through ESR

- Female – staff with the Gender of Female
- BAME – staff with the Ethnicity Description of Black, Asian, Mixed or Other Ethnic Groups; this does not include 'Not Stated'
- Disability – staff with a Disability Description of Yes
- LGBTQ+ - staff with a Sexual Orientation of Gay or Lesbian, Bisexual, Other Sexual Orientation Not Listed. This does not include 'Not Stated' or 'Undecided'