NHS 24 BOARD MEETING	20 JUNE 2019 ITEM NO 12.2
**WORKFORCE: Trend Report (May 2019)**

Executive Sponsor:	Director of Workforce
Lead Officer/Author:	
Action Required	The Board is asked to: • note the workforce report
Key Points	This report provides the Board Committee with an update on areas of workforce focus for the month of May 2019. It provides analysis of workforce information to inform decision making in relation to the workforce and in addition identifies any workforce issues. The HR metrics collated in this report are derived from the NHSScotland HR Management Information System (eESS) and are reported real-time. This report contains high level workforce information for the attention of the Staff Governance Committee. Comprehensive reports are still produced and monitored by the HR senior team, and are available for any member of the Executive Management Team or Staff Governance Committee on request.
Financial Implications	Currently, there are no financial implications to highlight.
Timing	This workforce report is usually presented to Executive Management Team and the Staff Governance Committee prior to its presentation at the Board, however on this occasion, due to Committee meeting schedule only April's information was available.
Contribution to NHS 24 strategy	Information on NHS 24's workforce allows NHS 24's governance committees to make informed decisions, which support achieving the resetting of our culture, creating capacity, capability and confidence in our people and teams.
Contribution to the 2020 Vision and National Health and Social Care Delivery Plan (Dec 2016)	Ensuring that our workforce continues to be appropriately trained, engaged, motivated, healthy and resilient to deliver NHS 24 services now and in the future which is at the heart of the 2020 workforce vision.
Equality and Diversity Impact Assessment (EQIA)	Not applicable for the month of May 2019.

1. RECOMMENDATION

1.1 The Board is asked to discuss and note the information contained within the Workforce Report and any actions identified to be taken forward.

2. TIMING

2.1   This report provides metrics and analysis for the month of May 2019 and includes historic trends and future forecast information.

3. BACKGROUND

3.1   To support workforce management across NHS 24 the importance of accurate workforce information and intelligence to better understand both the current and future workforce is recognised.

3.2   The NHS 24 Workforce Plan is monitored on an ongoing basis. This paper, supported by weekly workforce reports, is produced monthly to identify and monitor key workforce trends including workforce figures by staff cohort, workforce projections, attendance rates, workforce turnover, completed appraisals and health and well-being.

3.3   Staffing information is provided to the Staff Governance Committee quarterly to further evidence that the Staff Governance Standards are embedded and adhered to as part of the governance framework.

3.4   A comprehensive report on monthly performance and key workforce metrics is provided to the senior HR team for review and monitoring and in addition is sent to senior line managers within the organisation for any appropriate actions to be progressed.

4. UPDATES

Workforce Plan, Effective Recruitment & Deployment

4.1   The table overleaf shows the current staff in post against the year end target establishment as at 31st May 2019. For the majority of skill sets the establishment throughout the year remained fairly steady, influenced only by attrition. The Call Handler numbers fluctuate throughout the year, balancing the requirement to have more Call Handlers in place over peak periods, the current Call Handler staffing target of 425 WTE rising to 475 WTE in October 2019 to support the new 111 service model. The under establishment in the budget for Nurse Practitioners has been offset with recruitment to other clinical skill sets including Clinical Practice Educators, Mental Health Nurse Practitioners, Psychological Wellbeing Practitioners and Breathing Space Advisors to support the patient journey and new operational model.

NHS 24 GREEN

STAFFING	Budgeted WTE	Current Staff as at 31/05/2019		Variance against Budgeted WTE 2018/19
		31-May-19		
	WTE	Headcount	WTE	WTE
Clinical Service Managers	19.00	19	18.30	-0.70
Clinical Services Manager - Dental	1.00	1	1.00	0.00
CSM: Practice Development and Education	1.00	1	1.00	0.00
Senior Charge Nurses	65.04	79	66.83	1.79
Advanced Nurse Practitioners	9.00	7	7.00	-2.00
Clinical Practice Educators	6.96	8	6.96	0.00
Total Nurses	**174.16**	**245**	**143.04**	**-31.12**
Regional Pharmacy Advisors	3.77	3	2.40	-1.37
Pharmacy Advisors	9.28	19	6.20	-3.08
Physiotherapy Specialist Advisor	5.00	4	3.01	-1.99
Senior Dental Nurses	4.48	7	4.96	0.48
Dental Nurses	31.00	64	27.43	-3.57
Total Clinical Frontline	**321.73**	**457.00**	**288.13**	**-41.56**
Call Handlers	425.00	638	404.26	-20.74
Team Managers Unscheduled Care	49.00	64	51.18	2.18
Training Advisors	0.00	7	6.04	6.04
HIA Team Manager	3.00	3	3.00	0.00
Health Information Advisors	10.88	12	8.18	-2.70
Health Information Operators	16.00	10	7.16	-8.84
SEDS Hub Team Managers	1.00	1	1.00	0.00
Dental Hub Administrators	11.00	23	8.73	-2.27
Living Life Cognitive Behavioural Therapist	2.61	5	2.60	-0.01
Living Life Self Help Coach	3.20	2	1.40	-1.80
Living Life Mental Health Practitioner	0.00	3	1.40	1.40
Breathing Space Supervisor	3.00	6	4.60	1.60
Breathing Space Phoneline Advisor	17.67	36	21.33	3.66
Team Managers Scheduled Care	3.50	5	3.09	-0.41
Scheduled Care Call Operator (fixed term)	21.66	22	17.20	-4.46
Unscheduled Care Call Operator (fixed term)	16.00	5	3.92	-12.08
Unscheduled Care Bank Call Operator	0.00	64	0.64	0.64
Scheduled Care Bank Call Operator	0.00	3	0.03	0.03
Total Non Clinical Frontline	**583.52**	**909**	**545.76**	**-37.76**
Total Non Frontline	**255.89**	**255**	**231.98**	**-23.91**
Total Staff	**1161.14**	**1621**	**1065.87**	**-103.23**

Staff who are internally seconded into other positions are recorded in the position they are seconded in to. The Clinical Service Manager (1 head, 0.8 WTE) and Team Leader figures (1 head, 0.5 WTE) include staff who are deployed to the Cancer Treatment Helpline.

*The Senior Change Nurse target does not include those in the Mental Health Hub.

**The total Nurse target does not include Mental Health Nurses. This is a year end target, the headcount and WTE of Nurses is monitored monthly with regards to the interaction of skill sets. The Total Nurses include Nurse Practitioner – Band 6, Nurse Practitioner – Band 5 and Clinical Supervisor

*** Any in year budget changes will be reflected in amended establishment figures for each cost centre.

**** Non -Frontline staffing comprises all staff who are not directly delivering the Unscheduled Care Service.

Recruitment and Retention

4.2 Recruitment and Service Delivery continue to work together to ensure a national approach to Nurse Practitioner recruitment. Additional workshops have taken place to review and update the paperwork supporting advertising, short listing and interview/assessment. An advert for Band 6 Nurse Practitioners will be posted over the last 2 weeks in June, and it is planned that the first new hires from this campaign would be ready to start at NHS 24 during September 2019. During May 2 Nurse Practitioners (1.21 WTE) commenced with NHS 24.

4.3 Recruitment for the Mental Health Hub progressed during May with external candidates joining NHS 24. We welcomed MHH Nurse Practitioners (2 heads/1.8WTE). Recruitment is working with the Mental Health Hub Senior Charge Nurses to progress the pipeline and offers have been made for Psychological Wellbeing Practitioner (5 heads/4.2 WTE) and Mental Health Nurse Practitioners (2 heads/2 WTE) to start with NHS 24 mid June.

4.4 During May, we received 364 contacts in relation to the Unscheduled Care Call Handler advert for 12 hour weekend only vacancies at the regional centres. Of these contacts, 272 individuals completed a telephone interview and 64 have attended a face to face interview, with a further 103 candidates awaiting interview. To date, 41 candidates have passed interview and have commenced pre-employment checks. 6 Call Handlers (4.40 WTE) started at NHS 24 during May.

4.5 Recruitment are working with the Primary Care Triage (PCT) Team to progress Nurse Practitioner candidates through the pipeline. PCT Call Handler candidates are being managed via the national recruitment process in line with Unscheduled Care candidates.

4.6 Recruitment attended the kick-off meeting with Service Delivery and the Prince's Trust to support the 2019 group, scheduled to train at NHS 24 from August.

4.7 NHS 24 recognise the broader requirements around complex care needs and the support required to maintain good mental wellbeing. NHS 24 have been working with the public; our staff and our partners to develop digitally enabled mental health services which help reduce waiting times and improve access for people with mental health distress and/or mental health problems. As part of this initiative, NHS 24 increased recruitment to the Mental Health Hub. The table below shows staffing as at 31st May 2019.
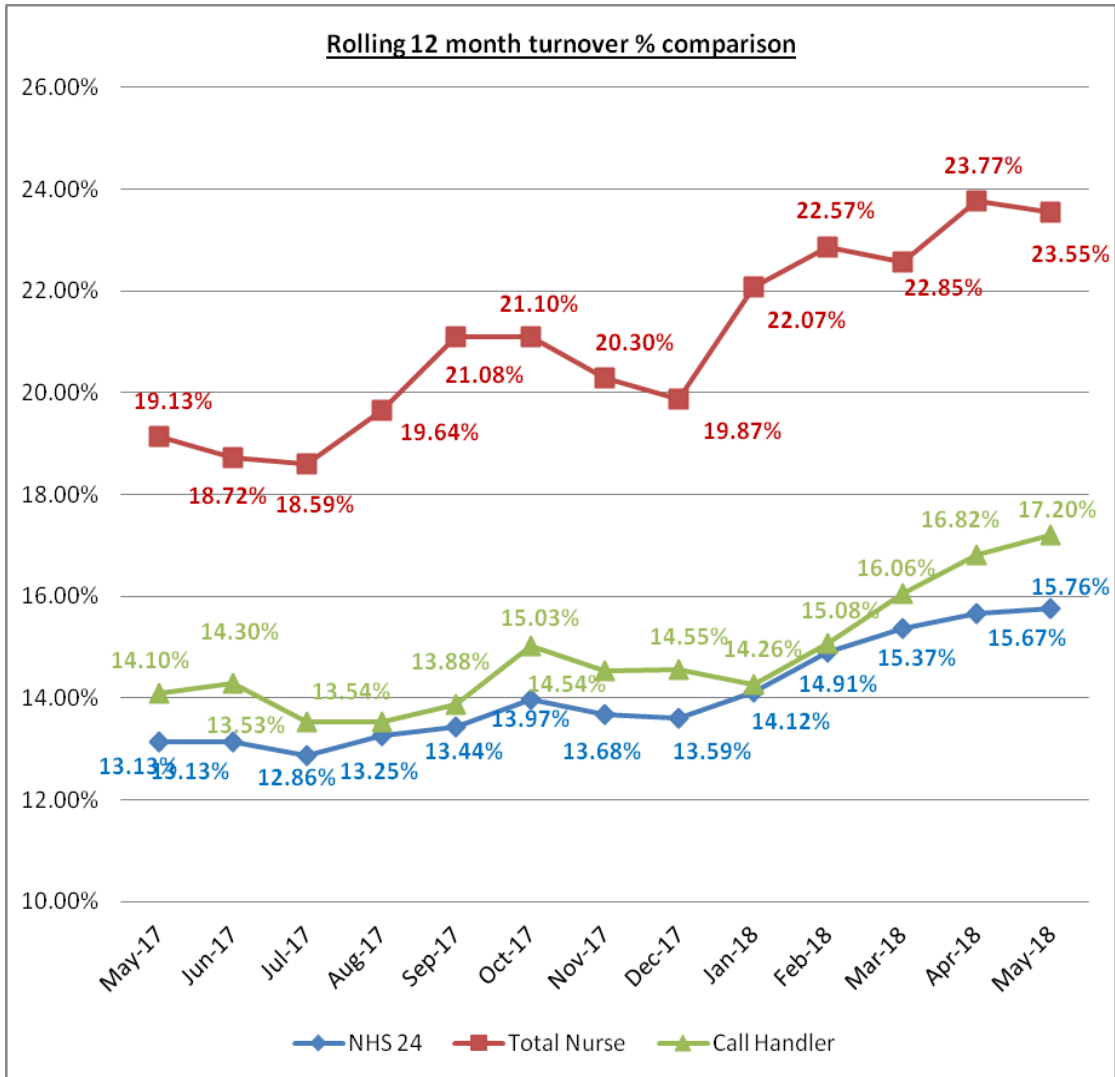
Mental Health Hub	Budgeted WTE	Current Staff as at 31/05/2019		Variance against Budgeted WTE 2018/19
		31-May-19		
	WTE	Headcount	WTE	WTE
Senior Charge Nurses	4.00	3	3.00	-1.00
Mental Health Nurse Practitioner	7.84	12	7.84	0.00
Psychological Wellbeing Practitioner	15.00	7	6.08	-8.92
Total	26.84	22.00	16.92	-9.92

4.8 Turnover is monitored by NHS 24 on a monthly basis. The turnover figures contained in this report are calculated by dividing the number of leavers by the total headcount for that staff group.
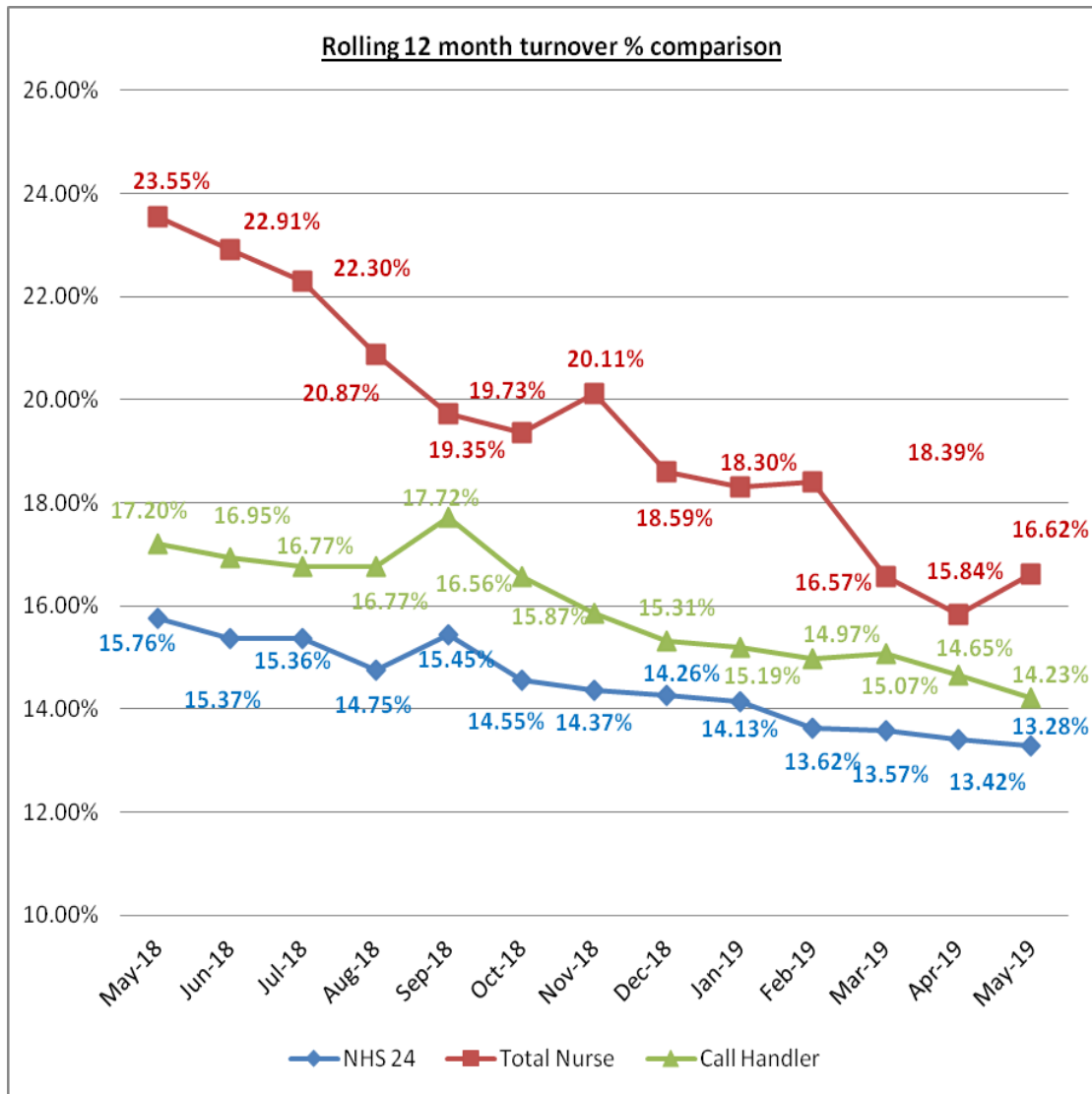
4.9 The following charts show the rolling turnover for NHS 24 over the last year and the previous year for NHS 24 as a whole, and highlights turnover for both frontline Nurses and Call Handlers. The figures are not inclusive of any internal staff movements to other roles within the organisation.

May 2017 – May 2018

Rolling 12 month turnover % comparison

Legend: NHS 24, Total Nurse, Call Handler

Total Nurse values: 19.13%, 18.72%, 18.59%, 19.64%, 21.08%, 21.10%, 20.30%, 19.87%, 22.07%, 22.57%, 22.85%, 23.77%, 23.55%

Call Handler values: 14.10%, 14.30%, 13.54%, 13.88%, 15.03%, 14.54%, 14.55%, 14.26%, 15.08%, 16.06%, 16.82%, 17.20%, 15.76%

NHS 24 values: 13.13%, 13.13%, 12.86%, 13.25%, 13.44%, 13.97%, 13.68%, 13.59%, 14.12%, 14.91%, 15.37%, 15.67%

5

May
2018
-
May
2019

Rolling 12 month turnover % comparison

*It should be noted that the chart above includes all NHS 24 leavers including those who left due to end of fixed term contracts/secondments and those transferring to other NHS Boards.
**Total nurse figure includes Nurse Practitioner Band 6, Nurse Practitioner Band 5, Clinical Supervisor and Mental Health Nurse Practitioners

4.10   The chart above illustrates that the rolling turnover rate has decreased for NHS 24 as a whole since May 2018 (-6.93%). Turnover has also decreased for Call Handlers (-2.97%) and decreased for Nurses (-2.48%).

NHS 24 GREEN

Skill Set	Headcount		
	June 2018 - May 2019	June 2017 - May 2018	Difference
Call Handler	90	110	-20
Call Operator	5	6	-1
Clinical Services Manager		2	-2
Clinical Supervisor	1	1	-
Non Frontline	26	31	-5
Nurse Practitioner Band 6	36	48	-12
Nurse Practitioner Band 5	5	14	-9
Pharmacy Advisor	3	4	-1
Physiotherapy Specialist Advisor	3		+3
Team Manager	4	1	3
Senior Charge Nurse	5	10	-5
Other Frontline	22	14	8
Nurse Practitioner (In Hours)	-	1	-1
Call Handler (In Hours)	-	1	-1
Call Operator (In Hours)	-	-	-
Grand Total	**200**	**243**	**-43**

4.11   The table above shows the number of leavers across the last 12 rolling months against the previous 12 months. For Nurse Practitioners (band 6 and 5 combined) turnover has decreased by 21 heads and Call Handlers have decreased by 20 heads.

4.12   The table below shows internal staff movement that took place across the organisation during April and May 2019, predominantly made up of promotions/transfers within frontline skill sets. For example Nurse Practitioners moving into Senior Charge Nurse or Practice Educator roles and Call Handlers moving into Team Manager roles. The table below shows the number of promotions/transfers within each skill set, staff members are counted in the position they are promoted from.

	April 2019		May 2019	
Skill set	Headcount	WTE	Headcount	WTE
Senior Charge Nurse	0	0.00	0	0.00
Nurse Practitioner (band 6)	2	1.12	1	0.80
Nurse Practitioner (band 5)	1	0.48	0	0.00
Team Manager	0	0.00	1	0.80
Call Handler	2	1.28	0	0.00
Other Frontline	0	0.00	0	0.00
Non Frontline	0	0.00	5	5.00
Total	**5**	**2.88**	**2**	**1.6**

* If a post holder remained in the same role but changed service they haven't been counted in the table above.

eESS

4.13   HR continue to work in collaboration with NHS 24 managers to provide support during the transition to eESS. Drop-in clinics have been scheduled across all locations across June, July, August and September providing an opportunity for staff and managers to ask questions and the opportunity to receive face to face training focussed on system familiarisation in relation to attendance management, course bookings, professional registrations and common issues. These sessions will be run by HR representatives from across the various functions.

4.14   Plans have been developed and are being progressed with regards to Phase 4 of eESS Self Service implementation. Standard Operating Procedures have been developed and a pilot will be conducted in collaboration with managers in Cardonald to test these. The transactions in scope for the next phase include change of hours, change of location, change of cost centre and terminations.
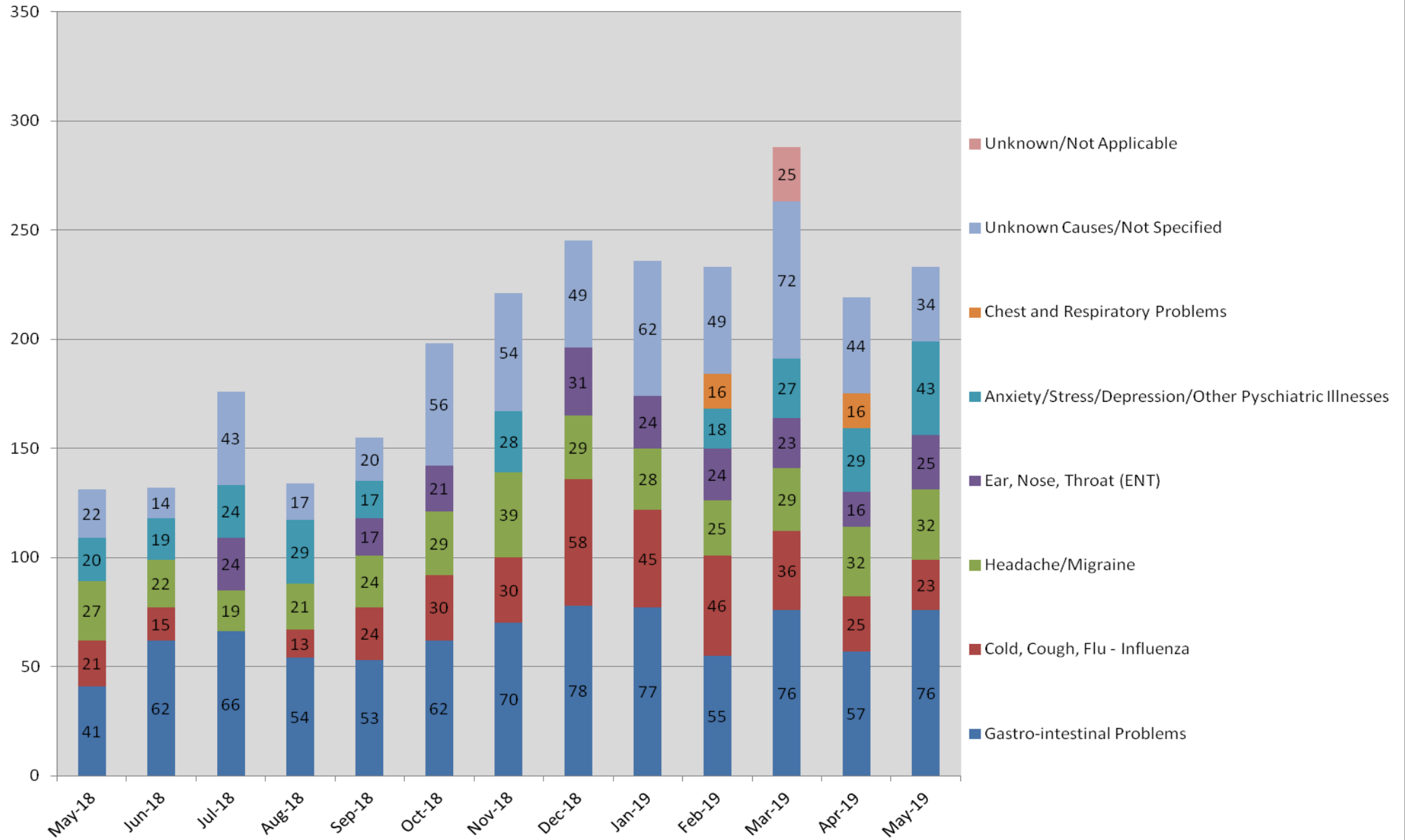
Supporting Attendance at Work, Health and Wellbeing

4.15   We continue to work with managers on the effective implementation of the Attendance Management Policy around pro-active intervention to support staff to return to work and the implementation of adjustments to allow staff to remain at work. We have developed an Attendance Improvement Plan for 2019/20, which will be presented to the next Area Partnership Forum and Staff Governance meetings.

4.16   The chart below shows that the monthly absence rate in the last 2 months has decreased slightly with some improvement in overall figures of 0.26% and 0.35%. Absence continues to be a challenge with over 15000 hours lost on average each month due to sickness. Unscheduled Care experience the highest absence rates and in particular amongst the Call Handler skill set.

4.17   Long Term absence attracts a high number of absentees with NHS 24 carrying an average number of 60 people off long term sick at any one time. The Employee Relations Team and line managers continue to focus on early intervention and offering support at the earliest stage to prevent absences becoming long term (>28 days).
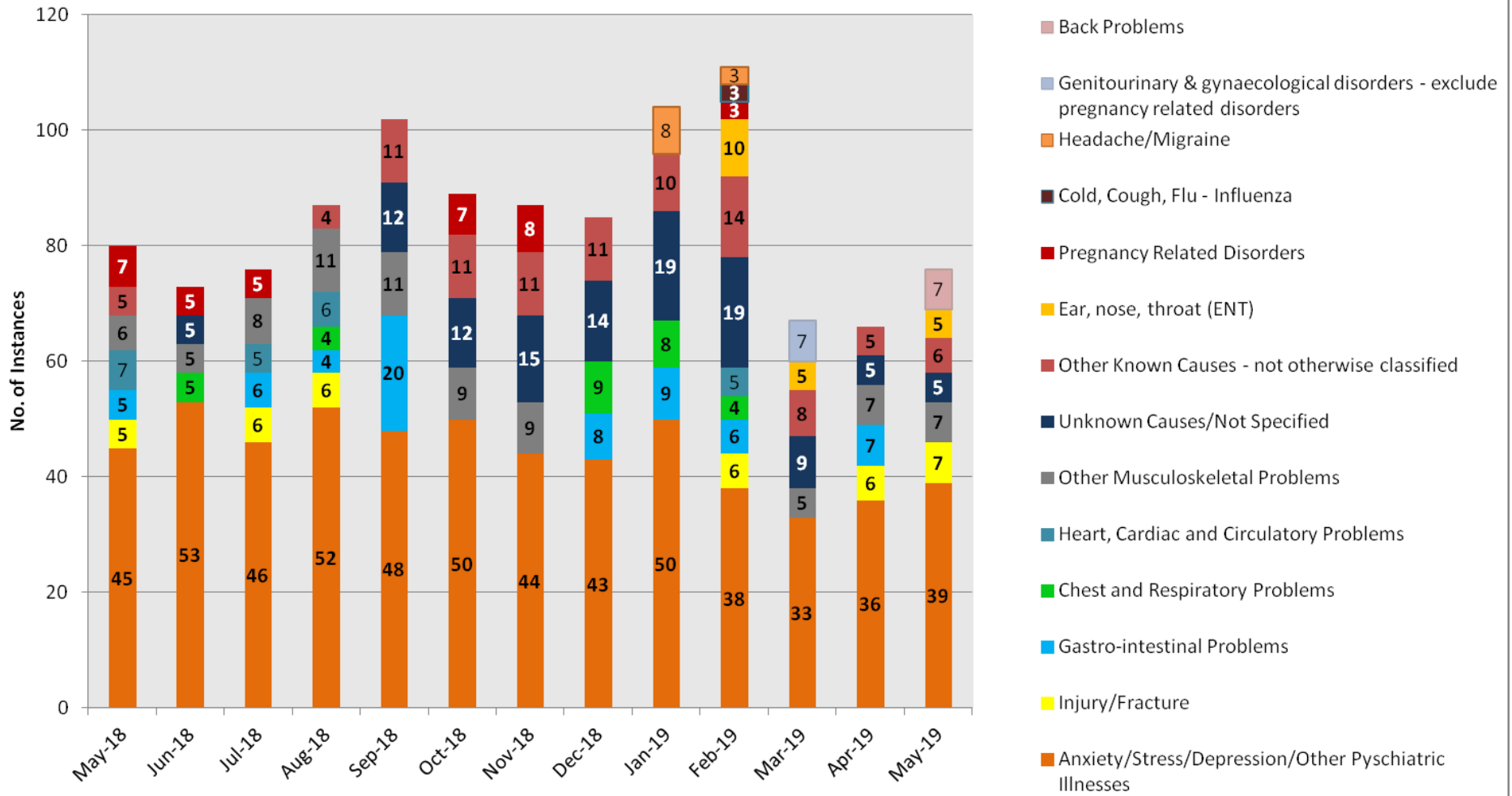
NHS 24 Absence % over 13 months
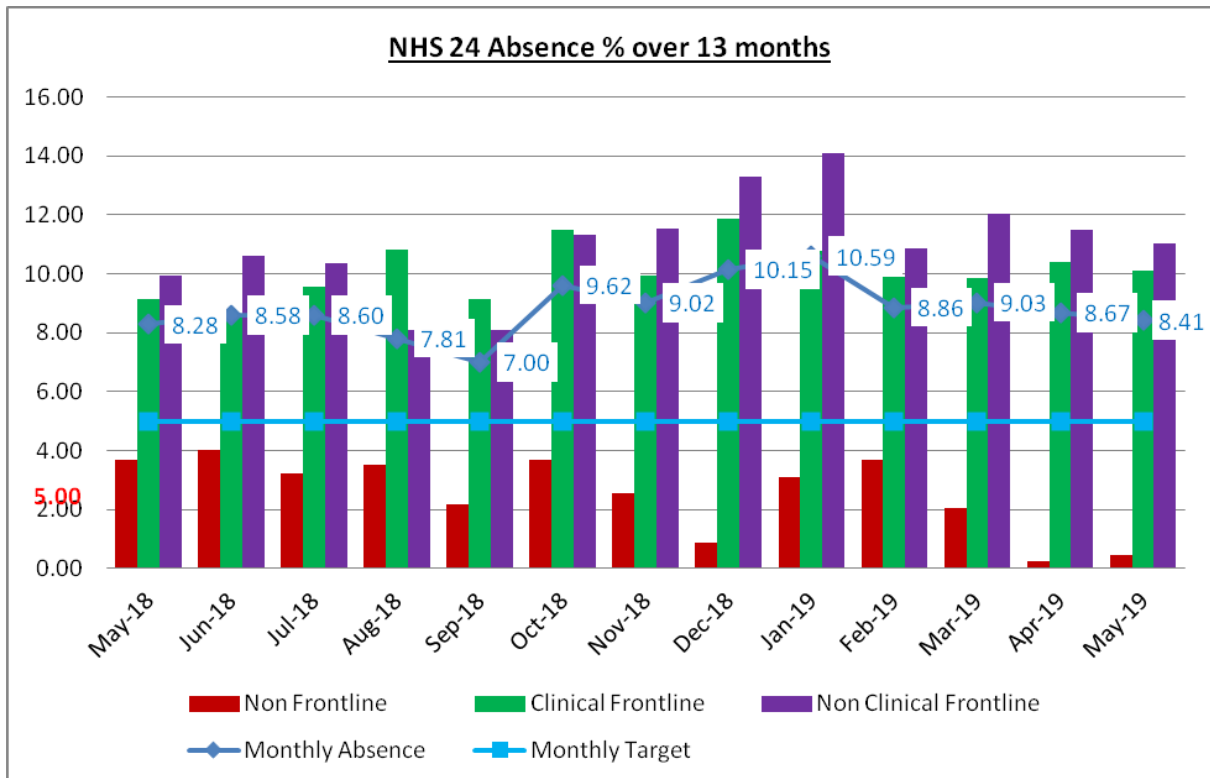
4.18 We continue to review all long-term sickness cases monthly to determine progress, consideration of early intervention and to offer advice and recommendations to managers in line with the Attendance Management Policy. Over 50 attendance meetings take place each month. A Human Resource representative is in attendance at all formal meetings and offers advice to managers pre and post meeting.

4.19 As part of NHS 24's Wellbeing Strategy, we have held a number of roadshow events, providing staff with information on absence as well as signposting staff to preventative measures as well as mental health support services available to them. We have reviewed the feedback from these sessions and passed the main themes to centres for them to progress. From the feedback from staff we have identified 3 main corporate themes which will be progressed during the year, these are; Mindfulness, Mental Health and Sedentary working. Centres are also progressing local wellbeing initiatives.

4.20 The East Contact Centre is also currently piloting a wellbeing initiative whereby a Team Manager is taking on a new Wellbeing role in a bid to create an environment of support for staff wellbeing, to take a person centred approach in   promoting attendance at work and looking at early interventions to support staff. Evaluation measures are currently being developed to consider the impact of this pilot and whether or not further roll out will be beneficial

Top NHS 24 STS Reasons - May 2018 - May 2019

Legend:
- Unknown/Not Applicable
- Unknown Causes/Not Specified
- Chest and Respiratory Problems
- Anxiety/Stress/Depression/Other Pyschiatric Illnesses
- Ear, Nose, Throat (ENT)
- Headache/Migraine
- Cold, Cough, Flu - Influenza
- Gastro-intestinal Problems

Month	Gastro-intestinal Problems	Cold, Cough, Flu - Influenza	Headache/Migraine	Ear, Nose, Throat (ENT)	Anxiety/Stress/Depression	Chest and Respiratory Problems	Unknown Causes/Not Specified	Unknown/Not Applicable
May-18	41	21	27		20		22	
Jun-18	62	15	22		19		14	
Jul-18	66	19		24	24		43	
Aug-18	54	13	21		29		17	
Sep-18	53	24	24	17	17		20	
Oct-18	62	30	29	21			56	
Nov-18	70	30	39		28		54	
Dec-18	78	58	29	31			49	
Jan-19	77	45	28	24			62	
Feb-19	55	46	25	24	18	16	49	
Mar-19	76	36	29	23	27		72	25
Apr-19	57	25	32	16	29	16	44	
May-19	76	23	32	25	43		34	

Top NHS 24 LTS Reasons - May 2018 - May 2019

Learning, Education and Management Development

Annual Clinical Refresher modules

4.21 Core skill sets of Service Delivery staff are required to complete a suite of clinical refresher update modules annually in the period from 1st April, through to 31st March the following year. This means that at the beginning of the new period each April, all completion percentages return to zero - the organisation can expect to see a rise in completion figures month-on-month from April onwards, until full completion rates are achieved the following March. The number of modules which are required to be completed differs according to role, up to a maximum of 6 for clinicians. Service Delivery will schedule staff with appropriate offline time to complete the modules over the annual period in line with other organisational priorities. The percentage of staff who had completed <u>all</u> of the required modules as at 10th June was 6.7% (last years Quarter 1 figure was 5.69%). This figure is consistent with the Quarter 1 completion trend over the past 3 years where there has been a targeted focus in Quarter 2 and 3 to complete the clinical refresher modules.

4.22 Data on individual module completions is presented below as well as the overall completion figures for Nurses and Call Handlers – this illustrates actual eLearning activity more accurately, as often staff have completed a number of modules out of the total required amount (e.g. perhaps 5 out of 6, or 1 out of 2
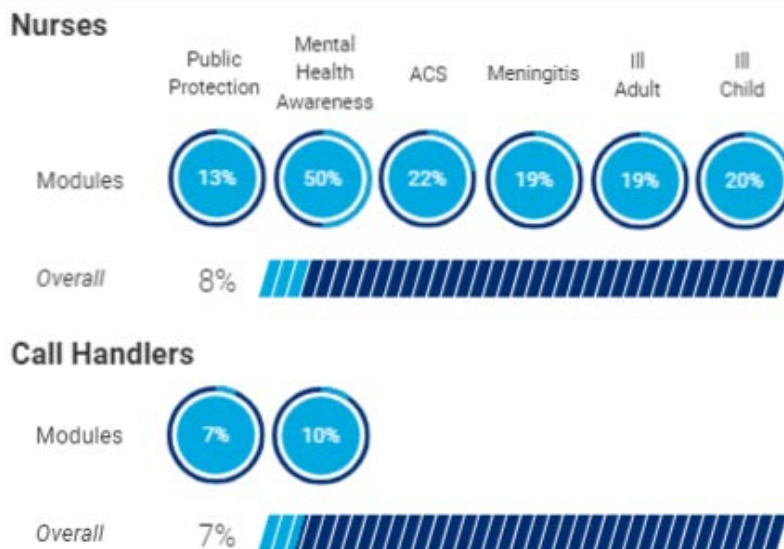
Personal Development Planning and Review

4.23 A number of Executive Management Team and Directorate Objectives and Deliverables workshops have taken place, to support the business planning and Personal Development Planning and Review cycles. All Directorates have agreed to complete appraisal discussions with staff by the end of June 2019, with Service Delivery working to a target of the end of September 2019

4.24 Turas Appraisal awareness sessions took place in April and May and 100 staff have attended to date, with more sessions scheduled for June. Current activity recorded in Turas Appraisal is shown below:

	Logged on to Turas Appraisal	Objectives agreed	PDP items agreed	Discussion Summary (Appraisal meeting) agreed
% of headcount	73%	11.7%	8.0%	4.4%

4.25 The functionality within Turas Appraisal continues to be developed, and recent developments have included approval features to record Remuneration Committee actions.

Leadership and Management Development

4.26 In May 2019, there was engagement with the Service Delivery senior management team, to receive their feedback on a proposed programme of development for the junior and middle NHS 24 leadership team. The programme is planned to include 4 core sessions and suite of options for additional development. The Employee Director and senior teams from the other Directorates and Communications will be to provide feedback in June 2019. consideration.

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5. ENGAGEMENT

5.1 Appropriate engagement has taken place with relevant managers from across all Human Resource functions, Service Delivery and Finance.

6. FINANCIAL IMPLICATIONS

6.1 When finalised, the financial implications of the leadership development plan will be included in the proposal for approval by the Executive Management Team.