

**NHS 24
BOARD MEETING**

**3 OCTOBER 2019
FOR ASSURANCE**

WORKFORCE: Trend Report (August 2019)

Executive Sponsor:	Director of Workforce
Lead Officer/Author:	
Action Required	The Board is asked to: <ul style="list-style-type: none"> • note the workforce report
Key Points	This report provides the Board with an update on areas of workforce focus for the month of August 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 NHS Scotland HR Management Information System (eESS) and are reported real-time. This report contains high level workforce information for the attention of the Board. Comprehensive reports are still produced and monitored by the Workforce 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 June's information was available for the Staff Governance Committee.
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 August 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 August 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 Workforce 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 August 2019. For the majority of skill sets the establishment throughout the year remained 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.
- 4.2 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 31/08/2019		Variance against Budgeted WTE 2019/20
		Headcount	WTE	WTE
		31-Aug-19		
	WTE	Headcount	WTE	WTE
Clinical Service Managers	19.00	17	16.30	-2.70
Clinical Services Manager - Dental	1.00	1	1.00	0.00
Head of Clinical Practice Education and Development	1.00	1	1.00	0.00
Senior Charge Nurses	65.04	79	66.83	1.79
Advanced Nurse Practitioners	9.00	6	6.00	-3.00
Clinical Practice Educators	6.96	8	6.96	0.00
Nurse Practitioners - Band 6	161.16	219	126.85	
Nurse Practitioners - Band 5	12.00	11	7.47	-4.53
Clinical Supervisor	Inc in Band 6 Nurses	5	1.12	
Total Nurses **	173.16	235	135.44	-37.72
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	8	5.46	0.98
Dental Nurses	31.00	58	25.35	-5.65
Total Clinical Frontline	320.73	439.00	275.95	-52.74
Call Handlers	425.00	641	392.87	-32.13
Team Managers Unscheduled Care	49.00	64	51.90	2.90
Training Advisors	0.00	7	6.04	6.04
HIA Team Manager	3.00	3	3.00	0.00
Health Information Advisors	10.88	10	7.01	-3.87
Health Information Operators	16.00	12	8.76	-7.24
SEDS Hub Team Managers	1.00	1	1.00	0.00
Dental Hub Administrators	11.00	23	9.21	-1.79
Living Life Cognitive Behavioural Therapist	2.61	5	2.80	0.19
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	5.00	6	4.60	-0.40
Breathing Space Phonenumber Advisor	21.00	38	22.33	1.33
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	3.60	-12.40
Unscheduled Care Bank Call Operator	0.00	60	0.60	0.60
Scheduled Care Bank Call Operator	0.00	2	0.02	0.02

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Total Non Clinical Frontline	588.85	909	536.83	-52.02
Total Non Frontline	265.15	255	230.67	-34.48
Total Staff	1174.73	1603	1043.45	-139.24

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

*The Senior Charge 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

Nurse Practitioners

- 4.3 Interviews from the June advert are now almost complete, so far 6 heads (4.48WTE) have been made offers for a September induction, with a further induction planned for November.

Call Handlers

- 4.4 24 Unscheduled Care Call Handlers (7.68 WTE) started with NHS 24 in August. The Recruitment team are working to fill the remaining Call Handler inductions scheduled for September, October and November.
- 4.5 A number of student preferred candidates who were ready to offer for the August 2019 Call Handler induction will be held in reserve should Service Delivery be able to facilitate evening training during October/November 2019.

Primary Care Triage

- 4.6 5 PCT Call Handlers (3.65 WTE) started with us in August; there is a current advert out to recruit another 4 heads into the service. 1 PCT Nurse Practitioner (0.64 WTE) started with us in August as predicted, with 1 scheduled to start in October. Current recruitment activity to fill the remainder of the 4WTE required.

Prince's Trust

NHS 24 GREEN

- 4.7 Following the success of the new partnership with the Princes Trust, resulting in six appointments to permanent posts last year. A second cohort of people from the Princes Trust commenced in Clydebank during August this year, with Call Handler interviews being offered to participants who successfully complete the tailored training programme in September with a view that successful candidates will commence in October..

Mental Health Hub

- 4.8 2 x Mental Health Nurse Practitioners (2 WTE) are scheduled to start on 16th September.

Pharmacy

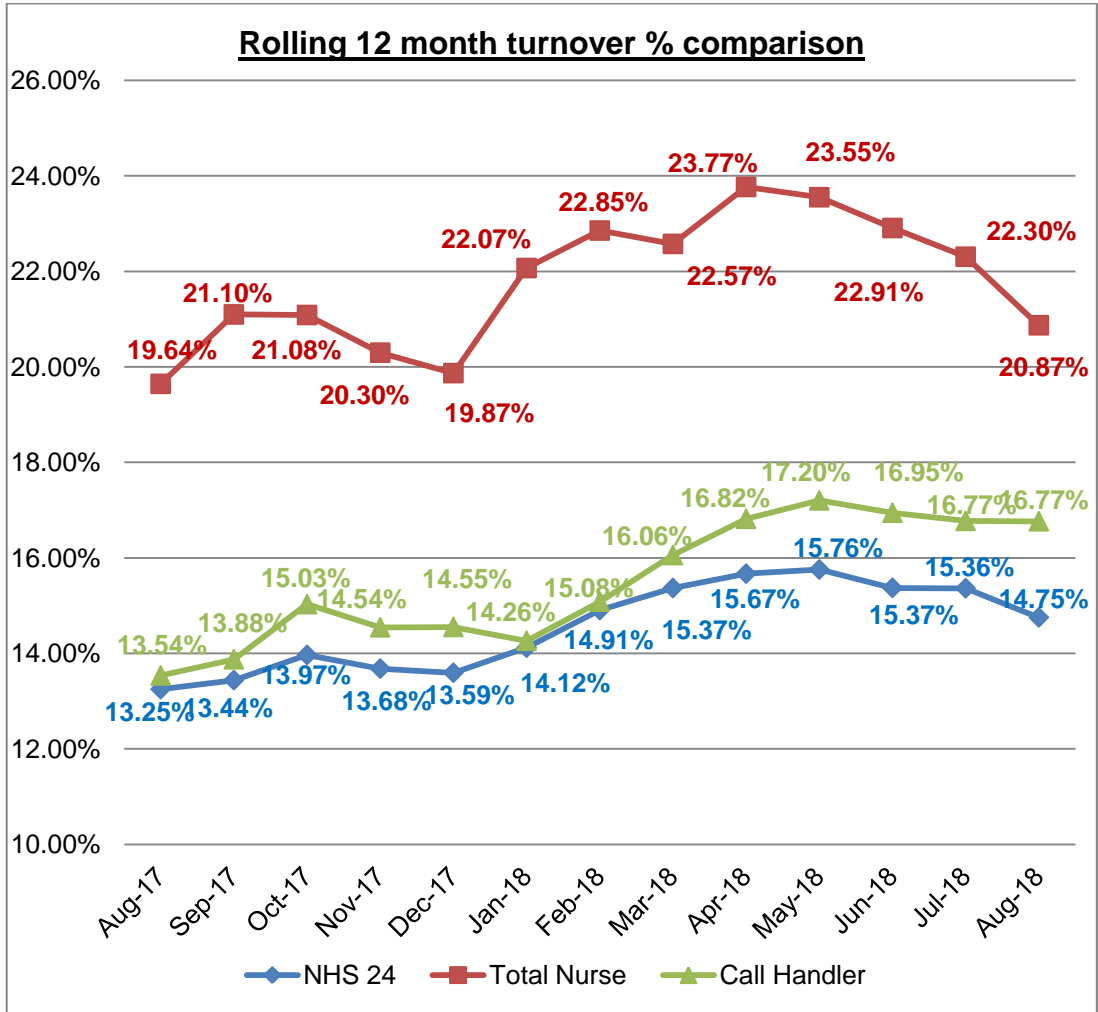
- 4.9 3 Pharmacy Advisors (2.08 WTE) are scheduled to start with us on 16th September.

Turnover

- 4.10 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.
- 4.11 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.

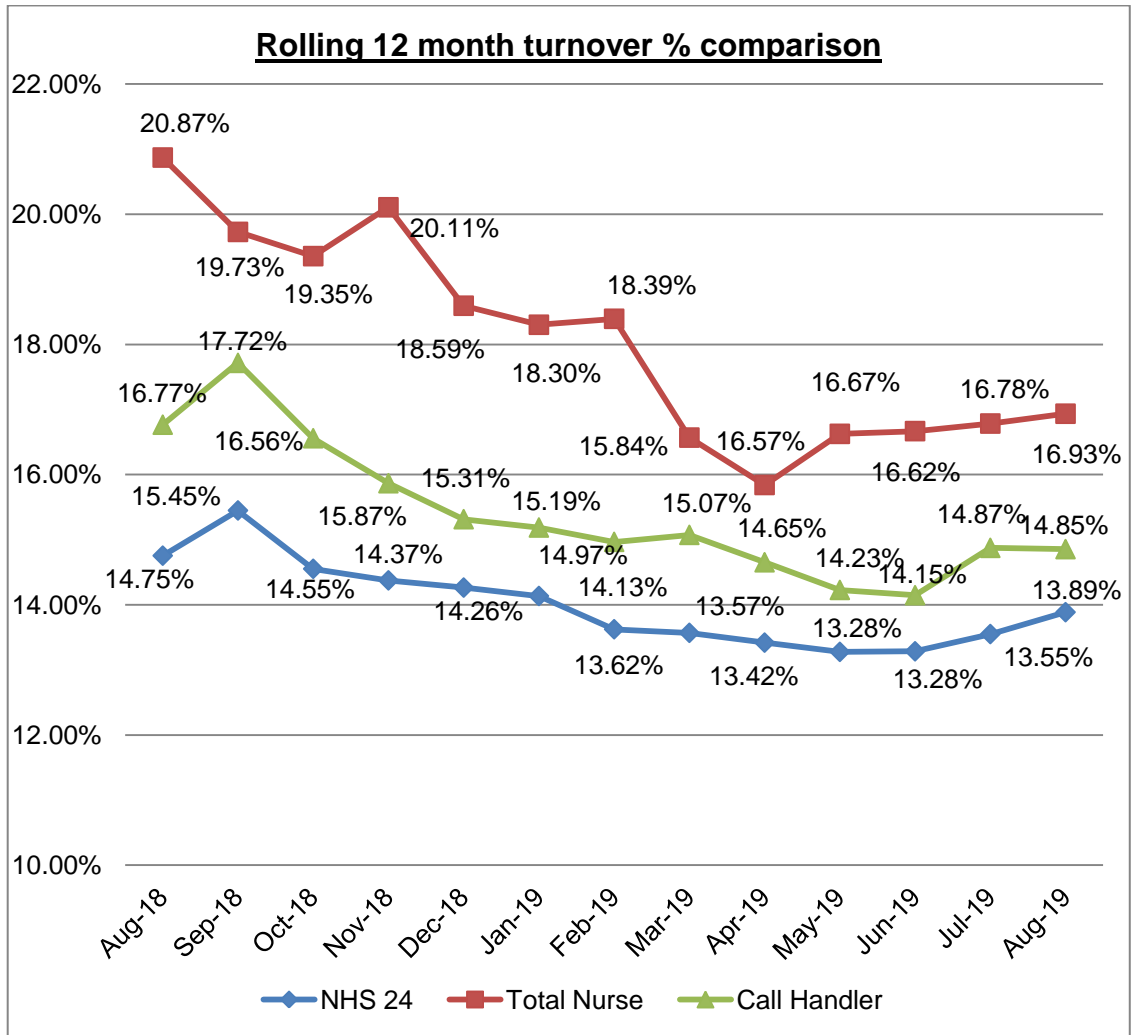
NHS 24 GREEN

August
2017
–
August
2018



NHS 24 GREEN

August 2018 - August 2019



*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

4.12 The chart above illustrates that the rolling turnover rate has decreased for NHS 24 as a whole since August 2018 (-0.86%). Turnover has also decreased for Call Handlers (-1.92%) and decreased for Nurses (-3.94%).

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Skill Set	Headcount		
	September 2018 - August 2019	September 2017 - August 2018	Difference
Call Handler	88	86	2
Call Operator	3	4	-1
Clinical Services Manager	2	1	1
Clinical Supervisor	1	1	0
Non Frontline	28	20	8
Nurse Practitioner Band 6	34	34	0
Nurse Practitioner Band 5	5	13	-8
Pharmacy Advisor	1	5	-4
Physiotherapy Specialist Advisor	2	1	1
Team Manager	3	2	1
Senior Charge Nurse	5	8	-3
Other Frontline	27	15	12
Nurse Practitioner (In Hours)	0	1	-1
Call Handler (In Hours)	0	1	-1
Call Operator (In Hours)	0	1	-1
Grand Total	199	193	6

- 4.13 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 8 heads and Call Handlers have increased by 2 heads.

- 4.14 The table below shows internal staff movement that took place across the organisation during July and August 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.

Skill set	July 2019		August 2019	
	Headcount	WTE	Headcount	WTE
Senior Charge Nurse				
Nurse Practitioner (band 6)	1	0.64		
Nurse Practitioner (band 5)			1	1
Team Manager				
Call Handler			3	1.75
Other Frontline			1	1
Non Frontline			3	2.5
Total	1	0.64	8	6.25

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

eESS

- 4.15 HR continue to work in collaboration with NHS 24 managers to provide support during the transition to eESS. Drop-in clinics have taken place during June and will continue throughout July, August across all centres and will continue during 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.
- 4.16 Plans are being progressed with regards to Phase 4 of eESS Self Service implementation. Standard Operating Procedures have been developed and are being tested in collaboration with managers. The transactions in scope for the next phase include change of hours, change of location, change of cost centre and terminations.

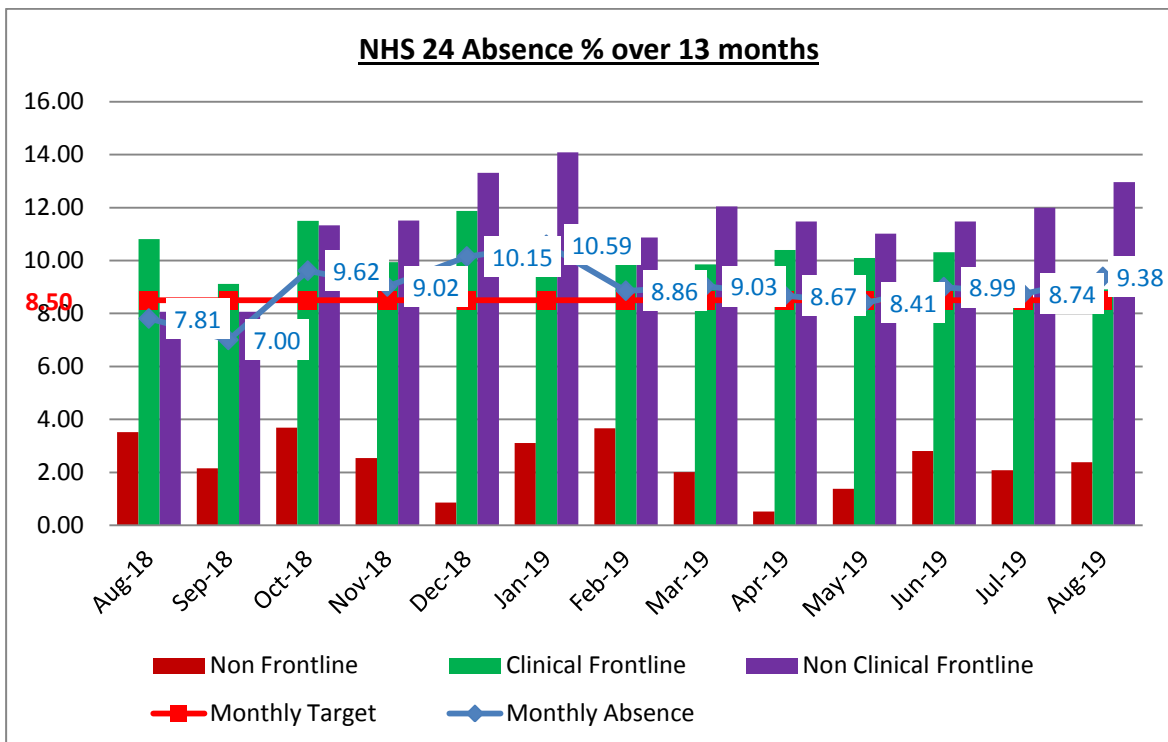
Supporting Attendance at Work, Health and Wellbeing

- 4.17 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 Management Improvement Plan for 2019/20, which has been approved by relevant Committees and is actively being progressed.

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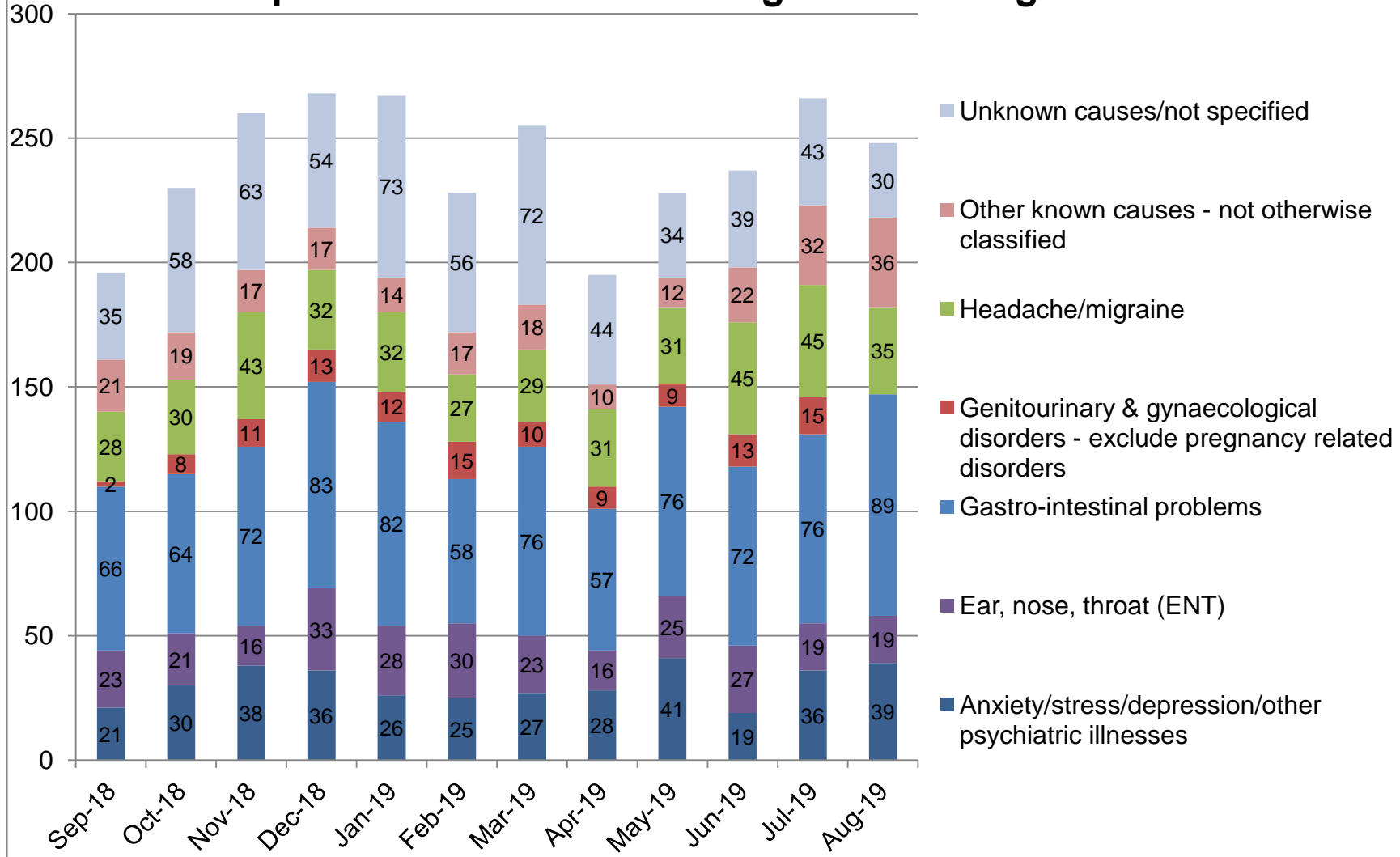
4.18 The chart below shows that the monthly absence rate has increased from July 2019 to August 2019 from 8.99% to 9.38% (16,527 hours) which continues to be a cause for concern. Call Handler absence continues to be the area with the highest absence at 15.28%. Given the high absence rates particularly amongst Unscheduled Care staff, the senior management team have requested additional reports on absence to specifically target areas of concern.

4.19 Long Term absence attracts a high number of absentees with NHS 24 carrying an average number of 55-60 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).

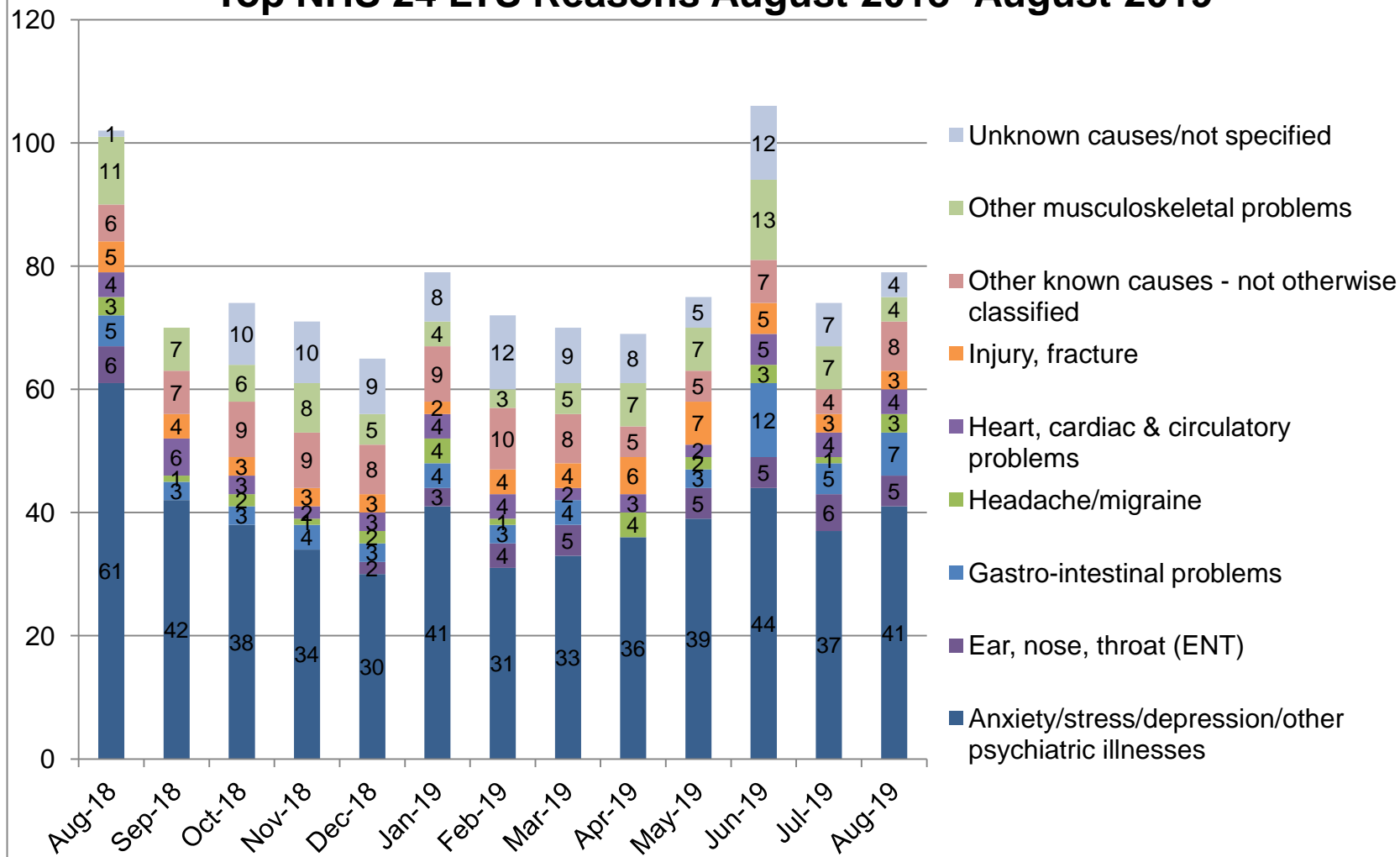


4.20 We continue to review all long-term sickness cases monthly to determine progress, consideration of early intervention and to offer advice and recommendations to managers in line with the Attendance Management Policy. Over 50 attendance meetings take place each month. A Workforce representative is in attendance at all formal meetings and offers advice to manager's pre and post meeting.

Top NHS 24 STS Reasons August 2018- August 2019



Top NHS 24 LTS Reasons August 2018- August 2019



Learning, Education and Management Development

Annual Clinical Refresher modules

- 4.21 Core skill sets within Service Delivery are required to complete a suite of clinical refresher update modules annually, in the period starting 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 then expect to see a rise in completion figures month-on-month from April through to the end of the following March (there is also an exercise to ensure that anyone who did not complete the modules is prioritised at the beginning of the new period). The total number of modules required to be completed differs according to role, up to a maximum of six for clinicians.
- 4.22 The percentage of all relevant staff groups who had completed all of their required modules as of 4th September was **12%**. This figure, along with the completion figures for individual modules, compares favourably with completions at the same month in previous years.
- 4.23 Completion figures for the Nurse Practitioner and Call Handler staff groups specifically can be seen in the table below. A breakdown of **individual module** completions by these staff groups is also given - this provides a more representative view of the volume of eLearning activity taking place than the overall figure (as only those that have completed **all** required modules are included in the overall completion figures of Nurse Practitioners at 10% and Call Handlers at 13.8%). A further breakdown by location is provided

	All modules	Public Protection	Mental Health Awareness	Acute Coronary Syndrome	Meningitis	Recognition of Acutely Ill Adult	Recognition of Acutely Ill Child
Nurse Practitioners	10.0%	24.7%	31.0%	40.2%	32.2%	32.2%	31%
Call Handlers	13.8%	15.3%	21.3%				

- 4.24 Recent discussions have taken place with Nursing and Care and Service Delivery Clinical Education colleagues regarding the current model of clinical eLearning as a mandatory requirement, and it was confirmed that the key topics covered within the suite of six modules are still appropriate for the organisation and that these will be supported by a wider approach to ongoing clinical CPD. This includes provision of BMJ Learning resources, which the organisation subscribes to for all staff.
- 4.25 Staff have the option of providing a short evaluation (star rating with optional comment) at the end of each clinical eLearning module and feedback received to date has been largely positive – 85% of staff who have opted to leave feedback since April 2019 have scored the modules 4 or 5 stars (out of a

possible 5). Further analysis will be undertaken to further inform content and approach moving forward.

Personal Development Planning and Review

- 4.26 Appraisal cycle activity has been taking place in the organisation, with all Directorates agreeing to complete appraisal discussions with staff by the end of September 2019. Current activity recorded in Turas Appraisal is shown below:

Directorate	Logged on to Turas Appraisal	Objectives Agreed	PDP Items Agreed	Discussion Summary (Appraisal Meeting) Agreed
Chief Executives Office	100%	20%	20%	30%
Finance	84%	32%	21%	16%
Human Resources	97%	44%	22%	44%
Information & Communications Technology	64%	3%	3%	0%
Medical	50%	50%	50%	0%
Nursing and Care	77%	23%	18%	27%
Service Delivery	86%	23%	16%	24%
Service Development	83%	19%	13%	19%
TOTALS	86%	23%	16%	24%

- 4.27 The dashboard reporting functionality for managers within Turas Appraisal is not yet available but will deliver real benefits to managers and support effective planning of appraisal discussions.

Leadership and Management Development

- 4.28 In July 2019, the Executive Management Team approved the financial cost to support a programme of development entitled Investing in Our Leadership – Cohort 2. The Area Partnership Forum received the programme documents for comment and consultation in August 2019. In the previous quarter to June 2019, there had been extensive engagement with the Service Delivery senior management team. The Executive Management Team and other Directorate Senior Management Teams received the programme documents for comment and consultation in the previous quarter.
- 4.29 The Investing in Our Leadership – Cohort 2 programme is planned to commence in October 2019 and conclude in September 2020. The programme is comprised of four core/mandatory events aimed at meeting high-level requirements for organisational, leadership and people management development. There are a further seven core/mandatory sessions, which will absorb the essential aspects of people management development. Participants will be required to attend these only if they have not attended them previously.

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.