

Date of meeting	14 September 2017
Paper number	Enclosure G1

Report provided:							
For approval:		For assurance:	√	To note:		For information:	

People and Culture Committee

Accountable Director	Chris Swan Non-Executive Director
Presented by	Chris Swan Non-Executive Director
Author	Kimara Sharpe Company Secretary

Alignment to the Trust's strategic priorities (√)	Deliver safe, high quality, compassionate patient care		Design healthcare around the needs of our patients, with our partners	
	Invest and realise the full potential of our staff to provide compassionate and personalised care	√	Ensure the Trust is financially viable and makes the best use of resources for our patients	
	Develop and sustain our business			

Alignment to the Single Oversight Framework (√)	Leadership and Improvement Capability	√	Operational Performance	
	Quality of Care		Finance and use of resources	
	Strategic Change		Stakeholders	

Report previously reviewed by N/A		
Committee/Group	Date	Outcome

Assurance: Does this report provide assurance in respect of the Board Assurance Framework strategic risks?	Y	BAF number(s)	R3.1 R3.2
Level of assurance and trend: Not assessed			

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Purpose of report	This report provides the Board with the key achievements, issues and risks discussed at the People and Culture Committee on 24 August 2017.
Summary of key issues	<p>This was the inaugural meeting of the new Committee. Items discussed included:</p> <ul style="list-style-type: none"> • Terms of reference • Progress on the development of the People and Culture Strategy • Recruitment and Retention Plan • Apprenticeship levy • Freedom to Speak Up • Workforce Scorecard
Recommendations	<p>The Board is recommended to:</p> <ul style="list-style-type: none"> • Approve the Terms of Reference • Note that the Committee approved the Recruitment and Retention Plan • Note the contents of the report

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WORCESTERSHIRE ACUTE HOSPITALS NHS TRUST

PEOPLE AND CULTURE COMMITTEE

1 Introduction

The People and Culture Committee met for the first time on 24 August 2017.

2 Background

The People and Culture Committee is set up to ensure that the Trust attracts and retains a high performing workforce capable of delivering the Trust strategic objectives. The membership consists of two non-executive directors (NEDs), one associate NED, four directors or representatives, chairs of the reporting committees and the deputy directors of HR. Staff side representatives are on the JNCC and Culture Committee. Staff side will see the notes of the meetings.

3 Issues discussed

3.1 Terms of Reference

The Committee approved the terms of reference. These are attached for the Board to approve. The Committee agreed to set up two sub committees, focusing on Culture and Recruitment and Retention with further groups accountable to these.

3.2 People and Culture Strategy

The Interim HR Advisor presented an analysis of the Trust's current performance in relation to its workforce against the people and culture themes of:

- Culture
- Staff Engagement
- Colleague health and well being
- Staff recognition
- Recruitment
- Retention
- Workforce planning
- Education, learning and development
- HR function
- Workforce systems.

From the analysis presented, the Committee agreed that the focus for the Trust should be on the following areas:

An engaged workforce	A skilled workforce	A supported workforce
<ul style="list-style-type: none"> • Culture & leadership • Staff engagement • Colleague health and well being • Colleague recognition 	<ul style="list-style-type: none"> • Recruitment • Retention • Workforce Planning • Education, learning and development 	<ul style="list-style-type: none"> • HR Function • Flexible working • Workforce systems

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The Committee will receive the draft strategy at its next meeting.

3.3 Strategic Workforce Plan

The Committee received a verbal update. This will be linked to the development of the Strategy and will include a vision of what the future workforce will look like, encompassing new roles and pathways.

A draft will be considered in the next couple of months.

3.4 Recruitment and retention plan

The Committee received the Recruitment and Retention Plan which focusses on medical and nursing recruitment. A lot of progress has been made but it is recognised that further innovative work needs to be undertaken. Members requested that data considering the reasons for joining the Trust and how the staff member found out about the trust are collected.

The Committee will receive monthly updates on the progress of the Plan and this will include reporting against the delivery metrics.

In relation to medical recruitment, a successful overseas trip took place where the offers of work are now being confirmed and the paperwork completed. Skype interviews have also taken place. It was acknowledged that there are national areas of shortage e.g. dermatology, but areas that have a local vision e.g. cardiology and ICU have no difficulty in recruiting. The Chief Medical Officer informed the Committee that the Trust has a higher number of doctors in training than in previous years.

The Committee asked for a further focus on nursing vacancies. It was acknowledged that the Trust was working innovatively in respect of reviewing skill mix and ways of working e.g. within the frailty pathway, but more needed to be undertaken.

The Plan is on the agenda for the Board to approve. The Committee commends the Plan to the Board.

3.5 Model Hospital – workforce elements

The Committee was presented with the workforce elements of the Model Hospital and agreed that more work was needed to understand the local context. This will be brought back to the next meeting.

3.6 Apprenticeship levy

The Trust has a stretch target of 136 apprenticeships for 2017/18. This will not offset the levy of £984,000 so different apprenticeships are now being considered. Any staff member recruited to a band 1-4 post should undertake an apprenticeship and it was suggested that Physician Associates could be considered as apprentices.

3.7 Freedom to Speak Up

The Committee was informed that there had been significant interest in this post

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and there was hope that an appointment would be made.

The current Freedom to Speak Up Guardian, Bryan McGinity, is undertaking various actions to improve the awareness of the role. The Trust is also linking with the national office to obtain learning from across the country.

3.8 Workforce scorecard

The Committee received the Workforce scorecard and agreed the indicators to be monitored. This will include bullying and harassment cases as well as indicators split into the protective characteristics.

In relation to statutory and mandatory training, some improvements have been made and significant improvement is required by 30 September in line with the s29A warning notice. However this continues to be a topic which causes much frustration at ward level where there are challenges in relation to the data accuracy. By December, all posts should have competencies allocated to them and managers will be able to compare the training with the competencies required for the post.

3.9 Safer staffing

The Committee considered the report but were unable to discuss it in detail due to the absence of the Chief Nurse. The report is on the Board agenda. The Committee recommends to the Board that it discusses the report and considers where it should be reviewed in future. The Board will recall that there is a necessity to publish the data on a monthly basis. This is a recommendation from the Francis Report. The publication could be via board papers or via another route.

3.10 Sub group reports

3.10.1 The Committee received an update from the Culture Steering Committee. The report in relation to PULSE is on the agenda for consideration.

3.10.2 The Equality and Diversity Annual Report was approved by the Committee and is on the Board agenda.

3.11 Other items discussed and reviewed

3.11.1 BAF – workforce risks: This was approved

3.11.2 Fit and Proper Person: The report submitted to the CQC was considered and the definition of the posts affected was agreed.

3.11.3 Medical revalidation – annual audit: This was considered and is attached for information. The appraisal rate is not as high as it should be but there is a recovery plan in place to improve rates by the end of the year.

4 Implications

None.

5 Recommendations

The Board is recommended to:

- Approve the Terms of Reference

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- Note that the Committee approved the Recruitment and Retention Plan
- Note the contents of the report

Compiled by
Kimara Sharpe
Company Secretary

Director
Chris Swan
Chairman, People and Culture Committee

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Attachment 1

Terms of Reference

PEOPLE AND CULTURE COMMITTEE

Version: 1.2

Terms of Reference approved by: Trust Board

Date approved:

Author: **Company Secretary**

Responsible directorate: Human Resources

Review date: March 2018

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WORCESTERSHIRE ACUTE HOSPITALS NHS TRUST

Terms of Reference **People and Culture Committee**

1. Introduction

This Committee will act as a Committee of the Trust Board and is set up to ensure that the Trust attracts and retains a high performing workforce capable of delivering the Trust strategic objectives

The People and Culture Committee is authorised by the board to act within its terms of reference. All members of staff are directed to co-operate with any request made by the Committee.

The Committee is authorised by the Trust board to instruct professional advisors and request the attendance of individuals and authorities from outside the Trust with relevant experience and expertise if it considers this necessary for or expedient to the exercise of its functions.

The Committee is authorised to obtain such internal information as is necessary and expedient to fulfil its functions.

2. Purpose

The purpose of the group is:

- To assess the workforce implications of the Trust strategic objectives, national HR workforce strategies, employment legislation and local initiatives.
- To oversee the development and implementation of the Trust's People and Culture Strategy and associated plans
- To monitor the effectiveness of the strategy and report on progress against plan.
- To provide assurance to the Board on the operation of effective and robust HR Workforce & OD practices and governance frameworks.

3 Membership

- Two Non-Executive Directors
- One Associate Non-Executive Director
- Chief Executive
- Director of Finance (or representative)
- Director of People and Culture
- Director of Communications
- Deputy Directors of Human Resources and OD
- Chairs of the sub committees

In attendance:

- Company Secretary (or Deputy)

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- Director of Performance (for the performance item only)
- Divisional representatives and other staff as appropriate

3.1 Chair of the Committee is appointed by the Trust Board.

4 Arrangements for the conduct of business

4.1 Chairing the meetings

The Non-Executive Director Chair will chair the meeting. In the absence of the Chair, another Non-Executive Director will Chair the meeting.

4.2 Quorum

The Committee will be quorate when one third of the members are present including one Non-Executive Director and two Executive Directors.

4.3 Frequency of meetings

The Committee will meet monthly.

4.4 Frequency of attendance by members

Members are expected to attend each meeting, unless there are exceptional circumstances.

4.5 Declaration of interests

If any member has an interest, pecuniary or otherwise, in any matter and is present at the meeting at which the matter is under discussion, he/she will declare that interest as early as possible and shall not participate in the discussions. The Chair will have the power to request that member to withdraw until the subject consideration has been completed. All declarations of interest will be minuted.

4.6 Urgent matters arising between meetings

If there is a need for an emergency meeting, the Chair will call one in liaison with the Director of People and Culture.

4.7 Secretariat support

Secretarial support will be through the CE secretariat and a report will be presented to the Trust Board.

5 Purpose and Functions

5.1 Purpose

To act as a Committee of the Trust Board to:-

- Enable the Board to obtain assurance on the management of the Trust's workforce.

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5.2 Duties

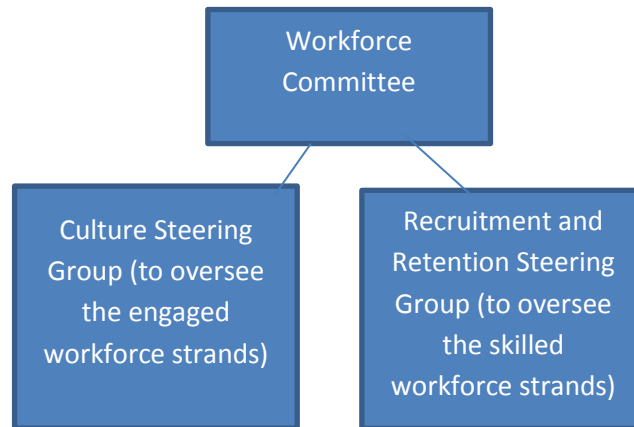
In discharging the purpose above, the specific duties of the Committee are as follows:

- To oversee the development and implementation of a strategic workforce plan to ensure sustainability and affordability of workforce supply on a short, medium and long term basis To oversee the implementation of the Trust's recruitment and retention plan to ensure the Trust has the right number of staff to deliver high quality services
- To oversee the development and implementation of a workforce education and development plan to ensure the knowledge and skills of the workforce enable continuous improvement in the delivery of services
- Review staff survey results and monitor implementation of the action plan and effectiveness of arrangements to engage colleagues
- To oversee the effectiveness of the Trust's workforce equality and diversity plan
- Monitor key workforce performance indicators and action plans to improve performance.
- To oversee the implementation of trustwide cultural change programmes. To regularly review the effectiveness of these programmes
- To oversee the implementation of the Trust's employee health and wellbeing plan that minimises sickness absence rates across the Trust
- Identify risks associated with workforce issues ensuring ownership with mitigating actions, escalating to Trust Board as required.
- Assure the Board on the progress of the workforce related Board Assurance Framework risks
- To assure the board that controls are in place to reduce reliance on agency staff (all areas) and therefore reduce agency spend.
- To ensure that all Trust policies relevant to HR / OD / Education / Training/Equality and Diversity and Occupational Health are maintained and updated in accordance with best practice, operational service activities, relevant legislation as well as taking into account the requirements of NHS regulatory bodies

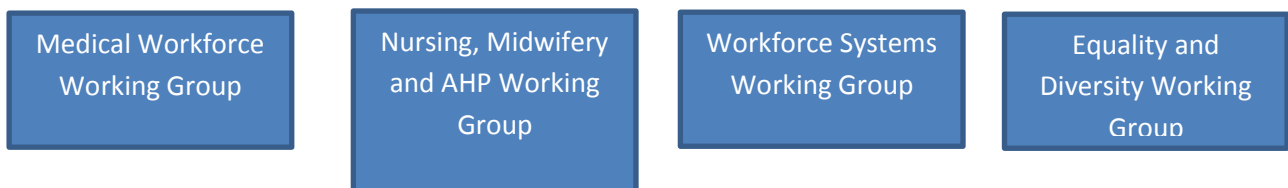
6. Relationships and reporting

- 6.1 The Committee is accountable to the Trust Board and will report after each of its meetings to the Trust Board in public and where appropriate in private.
- 6.2 The following governance structure has been established to oversee the effectiveness of the strategy and to ensure that associated plans are implemented within agreed timescales.

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The steering groups will be supported by the following working groups:



7 Review of the Terms of Reference

These Terms of reference will be reviewed by March 2018 or earlier if deemed appropriate by the Chair.

KS/ToR People and Culture
 August 2017

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Attachment 2

WORCESTERSHIRE ACUTE HOSPITALS NHS TRUST

REPORT TO THE PEOPLE AND CULTURE COMMITTEE – 24 August 2017

Medical Appraisal and Revalidation

1. Situation

This report describes the progress and management of medical appraisal and revalidation.

2. Background

Medical revalidation is the process by which licensed doctors demonstrate to the GMC that they are up to date and fit to practise. Full participation in annual appraisal is integral to successful progression through medical revalidation.

3. Assessment

3.1 Medical appraisal and revalidation performance

As at 14 August 2017, there were **385** doctors with a prescribed connection to the Worcestershire Acute NHS Trust. **323** doctors have been revalidated as at 14 August 2017 which is in line with the GMC revalidation trajectory timeline of entering doctors into their first revalidation cycle. **Zero** doctors are currently deferred and **one** doctor put on hold.

The appraisal rate for all medical staff is **89.41%**, above the Trust board target and a slight increase since June 2017 with the rate of **88.06%**. 36 planned appraisals have not taken place as at 31 July 2017. All of these 36 appraisees have had appraisers allocated. **See paragraph 3.5 for corrective actions.** 2 Divisions have recorded slight decrease in appraisal rates since June 2017. Whilst SCSD, Surgery and Women's and Children have recorded rates above the Trust Tolerance rate the Medicine Division have recorded low rates. Reasons for non-completion have been requested from all divisions.

Division	Appraisal rate at 31 July 2017 (all doctor types)	Direction of travel since 30 June 2017	Number of missed appraisals at 31 July 2017
Medicine	80.60%	↓ from 82.09%	13
Surgery	89.16%	↑ from 80.25%	9
SCSD	93.24%	↑ from 94.48%	10
Women & Children	90.48%	← stable 90.48%	4

The SAS doctors' appraisal rate has increased slightly from 72.46% to 73.24% and

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below the Trust tolerance of 85%. This is still of concern. **See paragraph 3.5 for corrective actions.**

3.2 NHS England Regional RO Network

The NHS England Regional Revalidation Conference was attended on 28th March 2017 by Mr Melwyn Pereira, Clinical Lead for Appraisal and Revalidation and Dawn-Marie Wright, Revalidation Support Officer. The conference provided useful resources to support the Trust to prepare for the second cycle of revalidation following Sir Keith Pearson's Report 'Taking Revalidation Forward' in January 2017.

3.3 NHS England Annual Organisation Audit (AOA)

The Annual Organisation Report was submitted on 12th May 2017. Please see appendix 1 *available on request* for more details. The number of unapproved incomplete or missed appraisals has increased from 50 to 74. **See paragraph 3.5 for corrective actions.**

3.4 Update on Recommendations from NHS England - Independent Review Visit – Audit Report

The visit was undertaken following assessment of the organisation's Annual Organisational Audit (AOA) report for 2015 which outlined the organisation's overall position with regard to appraisal and revalidation and because an interim Responsible Officer had been appointed.

Summary of recommendations and associated action has been provided in appendix 2 *available on request*

3.4 Risks

The process of central allocation of appraisers/appraisees will pose retention risk to the number of appraisers that can be recruited to administer the appraisal process. Appraisers anticipating increase workload due to equitable distribution may resign from their role. There is a potential impact on small specialty areas resisting undertaking cross specialty appraisals due to lack of confidence resulting from inadequate training and resources.

3.5 Corrective Actions

- Corrective actions following the Independent visit recommendations have been outlined in appendix 2 *available on request*
- All doctors who have missed their appraisals have been allocated appraisers with deadline to arrange their appraisals. The central allocation of appraisees to appraiser will ensure equitable distribution. Monthly reports are issued to all divisions to take action on missed appraisal. Responses and actions are followed up periodical. The Trust Medical Appraisal and revalidation Policy has been reviewed to include consequences for non-engagement.
- HR Business Partners have been included in the circulation list so that they are informed of their Divisions performance and to provide support.

4 Recommendation

The Board is asked to note the current status and support the required actions for medical appraisal and revalidation to achieve Trust and national targets.

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Report provided:							
For approval:	√	For assurance:		To note:	√	For information:	

Developmental review of leadership and governance
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Accountable Director	Michelle McKay Chief Executive Officer
Presented by	Michelle McKay Chief Executive Officer
Author	Cathy Geddes Improvement Director

Alignment to the Trust's strategic priorities (√)	Deliver safe, high quality, compassionate patient care	√	Design healthcare around the needs of our patients, with our partners	√
	Invest and realise the full potential of our staff to provide compassionate and personalised care	√	Ensure the Trust is financially viable and makes the best use of resources for our patients	
	Develop and sustain our business			

Alignment to the Single Oversight Framework (√)	Leadership and Improvement Capability	√	Operational Performance	
	Quality of Care	√	Finance and use of resources	
	Strategic Change	√	Stakeholders	

Report previously reviewed by		
Committee/Group	Date	Outcome
Board development	August 2017	Agreement

Assurance: Does this report provide assurance in respect of the Board Assurance Framework strategic risks?	Y	BAF number(s)	R3.1
Level of assurance and trend Not assessed			

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Purpose of report	To receive the results of the self assessment and the next steps in relation to the Well Led assessment.
Summary of key issues	<p>The Board and Trust Leadership Team have undertaken a Well Led self-assessment using the “Developmental reviews of leadership and governance using the well-led framework: guidance for NHS trusts and NHS foundation Trusts (2017)”.</p> <p>The results of this self –assessment were that the eight Key Lines of Enquiry (KLOE) were all graded either as Red – (Not achieving basic level governance Not achieving basic level governance) or Red/Amber – (Basic level governance- early progress in development).</p> <p>Priorities for action have been agreed as a result of this self-assessment.</p> <p>In addition to the self-assessment, the Board and Board committees are being externally reviewed by NHSI. The Finance & Performance Committee was reviewed in August. The Board and remaining Committees are being reviewed in September.</p> <p>A review of Board and committee papers is also underway and will be completed by the end of September.</p> <p>The Board will receive at its next meeting an action plan against the well led assessment. This will detail the timescales for the actions identified.</p>
Recommendations	<p>The Board is asked to</p> <ul style="list-style-type: none"> • note the results of the self-assessment undertaken in August 2017 and • approve to progress the priorities outlined.

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WORCESTERSHIRE ACUTE HOSPITALS NHS TRUST

DEVELOPMENTAL REVIEW OF LEADERSHIP AND GOVERNANCE

1 Introduction and background

The boards of NHS foundation trusts and NHS trusts are responsible for all aspects of the leadership of their organisations. They have a duty to conduct their affairs effectively and demonstrate measurable outcomes that build patient, public and stakeholder confidence that their organisations are providing high quality, sustainable care.

NHSI have recently published guidance for NHS Trusts on undertaking developmental reviews of leadership and governance.¹

This guidance includes a new framework of key lines of enquiry (KLOEs) and the characteristics of good organisations, is wholly shared with the CQC and underpins the CQC's regulatory assessments of the well-led question.

It is important to note that the assessment process is primarily for providers themselves to facilitate continuous improvement, therefore there is a need for honesty and openness.

3 Process for undertaking the review

In discussion with the trust Board, it was agreed that WAHT would undertake a self-assessment against the KLOE's detailed in the above guidance. Following completion of the self-assessment there will be an independent external assessment in 2018.

Alongside the assessments, external observations of the Board and its committees have commenced in order to provide further learning for the trust.

The self-assessment was undertaken separately by the senior leadership team (at TLG 2 August 2017) and by the Non-Executive Directors during August 2017. The unitary Board then met on 8 August to share assessments and reach consensus on a single self-assessment. See Appendix 1 for the results of the self-assessment.

Priorities for action have been identified and these will be progressed with an update report back to the Board in six months' time.

An independent external assessment will then be planned.

4 Implications

The Trust is required to comply with the Health & Social Care Act 2008 (Regulated Activities) Regulations 2014. The CQC inspection framework has a Well Led Domain and KLOE's that the Trust is required to meet.

5 Recommendations

¹ Developmental reviews of leadership and governance using the well-led framework: guidance for NHS trusts and NHS foundation Trusts (2017)

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The Board is asked to

- note the results of the self-assessment undertaken in August 2017 and approve to progress the priorities outlined.

Compiled by
Cathy Geddes
Improvement Director

Director
Michelle McKay
Chief Executive

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Appendix 1 Developmental review of leadership and governance - Feedback from Self-assessments - August 2017

Trust Self-assessment

TLG undertook a self-assessment exercise on 2 August 2017 against the NHSI KLOE's for the Developmental review of leadership and governance. In addition the Non - Executive Directors undertook their own self assessments using the same framework. Both outputs were then shared and discussed with the entire Trust Board and consensus was reached on a final assessment. This is presented below.

KLOE	RATING	EVIDENCE TO SUPPORT RATING	SUGGESTED IMPROVEMENTS/PRIORITIES
1: Is there the leadership capacity and capability to deliver high quality, sustainable care?	Red/Amber	Largely new Board and Execs but still some gaps/interim arrangements. Experienced individuals but still developing as a team as evidenced by net leadership score of PULSE survey of 47 for the Board and 49 for Trust Leadership Group. Of the 6 NEDs two have been here less than 2 months. Bulk of Exec team new to the Trust in the last 4 months. At Divisional level, experience but a lot of temporary arrangements in place. Overall leadership structure is not clear and clear lines of accountability and responsibility are not evident. Leadership lacks depth and breadth (Turnover, Acting arrangements, Crisis management) Limited capacity (culture of acting down), inability to address priorities on a sustainable basis. Culture of learned helplessness.	Pulse leadership development including individual coaching. Pulse surveys 3 times a year will now include the well-led KLOEs so net leadership and culture scores will be available to evidence improvement. Enhance HR function and implement workforce strategy.

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		Model hospital work commenced, although embryonic. Some Theatre improvement work and R2G # NOF improvements. Visibility of Execs still patchy.	
2: Is there a clear vision and a credible strategy to deliver high quality, sustainable care to people who use services, and robust plans to deliver?	Red	Strategy work needs to be commenced. FoAHSW agreed but Board has not had chance to step back and formulate a clear vision and strategy. Strategy development is planned. Clinical council in place first meeting 23/08/17. Frailty work commenced. Involvement in STP workstreams- LMS; Pathology; Pharmacy	Board work on vision and signature behaviours through intentional culture change work Strategy development .
3: Is there a culture of high quality, sustainable care?	Red/Amber	Duty of candour monitored and reported to Divisions and SIRLG monthly but not to Board. FFT process in place but improvement plans unclear. Recruitment templates include reference to values but values based recruitment not in place. Culture of reporting but limited learning from incidents/audits. Limited board visibility Pulse process beginning which will support staff engagement and improved culture Engagement of Divisions with the Board is limited. Equality and Diversity agenda is invisible	Ward to Board reporting to ensure the right information going to the right place.
4: Are there clear responsibilities, roles and systems of accountability to support good governance and	Red	Risk management strategy, committee and BAF in place Post dedicated to risk in place Early evidence of risk informing decisions SI Process not consistent across divisions. No visibility	Committee / organisational structure clarified including divisional governance processes standardised.

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management?		at Board except process (number outside 60 days) not the outcome or learning. Same for Mortality. Lack of accountability framework.	Performance management & Accountability framework
5: Are there clear and effective processes for managing risks, issues and performance?	Red/Amber	Performance reviews embedding but need refining, still very immature Lack of accountability framework in place. Lack of IT strategy, Estates and Facilities strategy, Equipment replacement programme Revised risk management strategy in place Executive Risk management group re-established BAF updated but not embedded- connections are immature Recognition of QIA's to support effective CIP but not consistently completed. Green shoots re: levels of assurance/ articulation of risk Quality informatics needed to support triangulation of information. Poor clinical audit processes. Business continuity and major incident planning needs reviewing and improving.	Finalisation of BAF and review/re-assessment process. Major incident planning and business continuity Reassessment of risk maturity to be undertaken by OUH Trust
6: Is appropriate and accurate information being effectively processed, challenged and acted upon?	Red/Amber (lower)	Thematic improvement plan in place. Green shoots with start of integrated performance report which is more intuitive, but only at Board level - not at Directorate or Divisional level yet. Board needs to be driven by benchmarking and oversight framework to enable it to become more focussed. CAS are being used to identify changes required. Local audits in place with peer review. IG issues and concerns	Continue to develop Integrated Performance Report and roll out at Divisional and Directorate level. Commission a review of data systems (due to recent SI)

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		Weaknesses in accuracy of data for mandatory training. Concerns with data systems	
7: Are the people who use services, the public, staff and external partners engaged and involved to support high quality sustainable services?	Red/Amber	Signs of better stakeholder engagement, improved use of social media for customer engagement. Poor responsiveness however on complaints/SI's. Staff survey, chatback, FFT, LIA (although this has now stopped), Pulse programme. FOAHSW engagement, Good examples of engagement in stroke, frailty, dermatology and renal. Good patient engagement in Ophthalmology. Cancer patient survey Self-assessment of pt engagement completed- need to roll out plan of improvement. Pt stories at Board. Lack of focus on diversity and meeting diverse needs of patients and staff.	Communicate information re: Freedom to Speak Up Champion so all staff know how to access. Develop stakeholder engagement strategy Board workforce sub-committee to be established
8: Are there robust systems and processes for learning, continuous improvement and innovation?	Red	Good examples in nurse training and new roles development. Getting it right first time (GIRFT) programme- #NOF, abdominal surgery- NELAs Max Fax – examples of innovation, Birth centre Radiology response to Section 31 SQuID Ineffective management structure for innovation- learned helplessness. Lack of Quality Improvement strategy, capability or capacity. Limited engagement with external bodies, although initial	Develop QI strategy Strengthen links with WMAHSN Pulse culture change programme to support continuous improvement process.

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		meeting with West Midlands Academic Health Science Network (WMAHSN) has taken place. Limited Board development programme but sessions held on Risk management and Pt safety.	
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Key to ratings

Red	Red/Amber	Amber	Amber/Green	Green
Not achieving basic level governance	Basic level governance- early progress in development	Firm progress in development- not fully established and sustained	Results being achieved	Mature, comprehensive and exemplar assurance in place

Date of meeting	14 September 2017
Paper number	Enclosure G3

Report provided:							
For approval:	√	For assurance:		To note:		For information:	

Recruitment and Retention Plan

Accountable Director	Michelle McKay Chief Executive Officer
Presented by	Michelle McKay Chief Executive Officer
Author	Tina Ricketts Interim HR Support

Alignment to the Trust's strategic priorities (√)	Deliver safe, high quality, compassionate patient care		Design healthcare around the needs of our patients, with our partners	
	Invest and realise the full potential of our staff to provide compassionate and personalised care	√	Ensure the Trust is financially viable and makes the best use of resources for our patients	
	Develop and sustain our business			

Alignment to the Single Oversight Framework (√)	Leadership and Improvement Capability	√	Operational Performance	
	Quality of Care		Finance and use of resources	
	Strategic Change		Stakeholders	

Report previously reviewed by		
Committee/Group	Date	Outcome
People and Culture Committee	24 August 2017	Approved
Trust Leadership Group	July 2017	Approved (<i>see key points section</i>)

Assurance: Does this report provide assurance in respect of the Board Assurance Framework strategic risks?	Y	BAF number(s)	P3
Level of assurance and trend Not assessed			

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Purpose of report	Attached in appendix one is the Trust's Recruitment and Retention Plan for the period 1 st September 2017 to 31 st March 2020. This plan has been developed to bring together a number of initiatives that are being taken forward by the medical workforce group and the nursing and midwifery workforce group.
Summary of key issues	<p>The plan has been structured under four themes:</p> <ol style="list-style-type: none"> 1. Governance 2. Recruitment 3. Retention 4. Workforce systems and processes <p>A high level action plan has been developed to support the delivery of this plan and this can be found in appendix 1.</p> <p>Page 7 of the plan contains a summary of the hard to fill roles within the Trust and details the number of new starters that the Trust will need by March 2018 to meet its workforce needs.</p> <p>As recruitment and retention is one of the key issues facing the Trust, a revised governance structure is proposed to oversee the implementation of the plan and to ensure that the workforce committee is sighted on all recruitment and retention related risks. The proposed structure can be seen on page 8 and includes a Recruitment and Retention Steering Group which will have oversight of three working groups. In addition to the existing medical and nursing and midwifery groups, a third working group will be introduced to take forward the development of the Trust's recruitment processes and e-rostering system.</p> <p>The recruitment and retention sections of the plan have been structured on the findings of a recent survey undertaken by NHS Employers which identifies what matters most to people when looking for a new role and what factors are most likely to make them stay.</p> <p>The workforce systems section of the plan sets out a number of actions that will be undertaken to further improve the Trust's recruitment processes. Recruitment related IT systems will be reviewed to better support managers, to reduce the admin burden and minimise bottlenecks.</p> <p>The plan was reviewed by the executive team and TLG in July 2017 and the following observations were made:</p> <ul style="list-style-type: none"> • That the Plan focusses on clinical staffing with little reference to managerial and support staff. • The plan is silent on incentives to encourage staff to join our

Date of meeting	14 September 2017
Paper number	Enclosure G3

	<p>Trust</p> <ul style="list-style-type: none"> • Completion dates within the high level action planned should be reviewed <p>These observations have been referred to the Recruitment and Retention Steering Group who has responsibility for the further development, implementation and evaluation of the plan. This Group is also responsible for ensuring the progress of the high level action plan against key milestones and agreed outcome measures.</p> <p><i>The BAF risk in the document has been updated to reflect the new BAF.</i></p>
Recommendations	<p>The Board is asked to approve the Recruitment and Retention Plan noting that the high level action plan in appendix 1 is subject to further refinement by the Recruitment and Retention Steering Group</p>



Worcestershire Acute Hospitals NHS Trust Recruitment and Retention Plan 2017 to 2019

Approved by : People and Culture Committee
24 August 2017

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1. Trust Overview

Worcestershire Acute Hospitals NHS Trust provides hospital based services from three main sites - the Alexandra Hospital in Redditch, Kidderminster Hospital and Treatment Centre and Worcestershire Royal Hospital - serving a population of more than 550,000. In 2016/17, the Trust provided care to more than 211,000 patients (38% of the local population) through 730,000 contacts:

- 139,000 accident and emergency attendances
- 52,000 emergency admissions
- 65,000 planned operations
- 5,800 birth deliveries
- 468,000 outpatient attendances

The Trust has approximately 5,500 employees with an annual turnover of £360 million. The Trust is structured under six divisions:

- Asset management and Information Technology
- Corporate Services
- Clinical Support
- Medicine
- Surgery
- Women and Children

The Trust has recently developed a new set of signature behaviours, linked to core competencies, which will become “the way we do things”:

Core Competence	Signature behaviour
Accountability	Do what we say we will do
Improving performance	No delay, every day
Transforming care	We listen, we learn, we lead
Leading collective achievement	Work together, celebrate together

2. Purpose of this Plan

This Plan supports the mitigation of the following Board Assurance risk:

3	Invest and realise the full potential of our staff to provide compassionate and personalised care
P3.1	Develop at all levels an organizational culture and set of behaviours that embody the Trust's values
R3.2	If we do not deliver a cultural change programme we may fail to attract and retain staff with the values and behaviours required to deliver the high quality care we aspire to.

The Trust has identified that one of the prime drivers for poor patient flow is the lack of consultant acute medical and emergency physicians. Considerable evidence exists to show that early senior decision making for non-elective patients is critical to both clinical outcomes and also from a hospital flow perspective. Until improvement is realised in the recruitment and retention of these critical vacancies, improving

performance against a number of key performance indicators, as a measure of timely access to treatment for patients, will be challenged.

While this is the area of prime focus for recruitment and retention, there are also significant vacancies across the medical and nursing streams. This plan sets out a range of strategies that the Trust will undertake over the next two years to improve the retention of its current workforce and to reduce the number of vacant posts in these critical areas.

The plan has been structured in four themes and brings together the recruitment and retention activities of the medical and nursing and midwifery workforce groups. The four themes of the plan are as follows:

1. Governance
2. Recruitment (attraction strategies)
3. Retention
4. Workforce systems and processes

The objectives and outcomes of the plan are as follows:

Table 1: Summary of objectives and outcomes of the plan

Theme	Objectives	Outcomes
Governance	<p>To ensure appropriate governance arrangements are in place to oversee the delivery of this plan</p> <p>To align recruitment and retention strategies across the Trust</p> <p>To improve workforce planning capacity and capability across the Trust</p> <p>To ensure the Trust is compliant with workforce regulations (e.g. European Working Time Directive and IR35)</p>	<p>The effectiveness of the plan will be monitored on a regular basis and actions adjusted where appropriate to improve performance</p> <p>Resources are pooled and duplication avoided</p> <p>The Trust will manage its workforce effectively so that it always has the right number of staff and skill mix in place</p>
Recruitment	<p>To continue to raise the profile of the Trust as the place to work and be treated</p> <p>To ensure a regular and consistent flow of both medical and nursing workers to meet turnover and vacancy needs</p> <p>To reduce the Trust's dependency on bank staff and eliminate reliance on agency, reducing overall</p>	<p>The Trust will see an increase in the number of applicants and a reduction in the number of leavers</p> <p>The Trust will see an improvement in its friends and family test results</p> <p>The number of medical and nursing vacancies will reduce month on month</p> <p>Agency spend is reduced and is</p>

	workforce costs as well as ensuring the provision of consistent high quality care	below the cap set by NHS Improvement
Retention	<p>To establish the Trust's brand amongst the current and future workforce with a strong focus on workforce development</p> <p>To develop new and innovative ways of working, re or up-skilling existing workforce whilst flexing the workforce to deliver care in different ways and in different settings</p> <p>To offer a range of flexible working options to maximise retention</p>	<p>Staff are loyal to the Trust, understand and are committed to its vision, signature behaviours and strategic objectives. Staff do not leave the Trust because of failings in relation to their development, working conditions and the quality of their work experience</p> <p>Staff work effectively in their roles and find their working life with the Trust to be an enjoyable and rewarding experience resulting in reduced turnover</p> <p>Flexible patterns of work are encouraged and managed in the context of service needs</p>
Workforce Systems & Processes	<p>To reduce the time taken to recruit and fill a vacancy</p> <p>To ensure the full utilisation of the e-rostering system (e.g. automation of pay and absence)</p> <p>To ensure the co-ordination of all recruitment activities across the Trust</p>	<p>Recruitment processes are streamlined and comply with key performance indicators</p> <p>Gaps in shifts are identified at an early stage. Manual timesheets are eradicated. Agency spend is reduced.</p> <p>The Trust has a coordinated approach to recruitment campaigns and open days</p>

This Plan complements and should be read in conjunction with the Trust's Workforce Strategy and associated plans. This plan builds on the Trust's recruitment and retention activities for the period 2014 to 2017.

3. Context

The NHS is the largest employer in England and the fifth largest employer in the world. When formed in 1948 there was 144,000 staff across the United Kingdom, now there are over 1,045,000 in England alone. Since 2010, there has been a 22% increase in the number of consultants, an 11% increase in the number of doctors, a 2% increase in nurses and health visitors and a 15% reduction in the number of support staff within the NHS. Despite this increase, many NHS Trusts have struggled to recruit to their full establishment with trainees only replacing the workforce gaps. 67,000 staff left the NHS in 2016/17. Therefore, as well as raising the Trust's profile

to attract candidates to vacant posts a key element of this plan focuses on the retention of the current workforce.

The Trust is a partner organisation in the Herefordshire and Worcestershire Sustainability and Transformation Plan with the future of acute hospital services in Worcestershire being subject to recent public consultation. At the time of writing this plan, the outcome of the consultation is unknown, however it is anticipated that the overall impact to the Trust's workforce will be neutral but may require colleagues to work differently including at other Trust sites. These changes have the potential to adversely impact on the future recruitment and retention of staff. However, to mitigate this, the Trust has committed to ensuring that all service changes are supported by robust staff engagement and communication plans.

The Trust was placed in special measures in December 2015 as a result of inspections carried out by the Care Quality Commission. Due to the adverse publicity connected with this status, the Trust has seen its overall staff turnover rate steadily increase to a peak of 13% in November 2016. This has also impacted on the Trust's staff survey and friends and family test results in which only 48% of colleagues would recommend the Trust to as a place to work compared to a national average of 62%. The Trust also scores below average with regard to staff recommending the Trust as a place to receive care/treatment with a Trust score of 56% compared to the national average of 70%.

The Trust has introduced a number of strategies to address these issues which are detailed throughout this document. These strategies have resulted in a minor month on month improvement in staff turnover to a rate of 12.5% in April 2017. However, both medical and nursing vacancies remain a high risk with over 320 whole time equivalent vacancies reported in May 2017. Of these, 160 (22% of staff group) are medical and 160 (8.7% of staff group) are qualified nursing and midwifery vacancies. In addition to medical and nursing the Trust has an overall vacancy rate of 7% for allied health professions/scientists, professional and technical staff with radiographers (8% vacancy rate) being particularly hard to recruit. The vacancy rate for NHS infrastructure support staff is 8% with the highest vacancies in administration.

A comparison with NHS Improvement model hospital benchmarking data (using the most recent information available from December 2016) indicates that the Trust's consultant retention rate is 90% compared to 94% nationally and therefore consultant retention is a key area for improvement.

A review of performance has identified that previous strategies have resulted in vacancy rates remaining static with the number of new starters equaling that of leavers. The following table details the staff groups with the highest vacancy rates which are proving difficult to recruit. The table identifies that even if the international recruitment in India in July 2017 is successful, the number of consultant vacancies are predicted to increase to 45 by March 2018. To improve on its current position, the Trust must recruit an additional five consultants and thirty three qualified nurses per month and progress against these targets will be monitored by the Trust's board.

Table 2: Hard to recruit staff groups - number of new starters required by 31st March 2018

Hard to recruit staff groups To nearest WTE	Est'ment 2017/18	Turnover rate 2016/17	Number of new recruits needed to replace leavers (nine mths)	Plus current recruitment requirement based on vacancy rate at May 2017 (excludes candidates in pipeline)	Total number of new starters needed by 31 st March 2018
Training Grade*	280	n/a	0	35	35
Consultant**	312	9%	21	40	61 (or 45 if international recruitment in India successful)
Specialty Doctor/ Clinical Fellow**	122	10%	9	36	45 (or 19 if international recruitment in India successful)
Registered Nurse***	1,890	13%	184	119	303 or 33 per month
Radiographer	245	10%	18	28	46 or 5 per month

*The August 2017 intake of doctors in training is expected to improve the Trust's vacancy position. It is anticipated that there will be 35 Junior Doctor gaps against the 219 posts (compared to a gap of 54 last year).

** The Trust is over-recruiting on middle grades to offset the consultant vacancy rate. It is anticipated that the international recruitment campaign in July 2017 will result in the recruitment of up to 16 consultants and 26 middle grades.

*** The Trust has introduced a number of new roles to assist the nursing workforce in "releasing time to care" these include ward housekeepers and ward administrators.

4. The Plan

A high level action plan has been developed to support the delivery of this plan and this can be found in appendix 1. The action plan has been structured under four themes as detailed above and will be delivered through the governance structure as

detailed below.

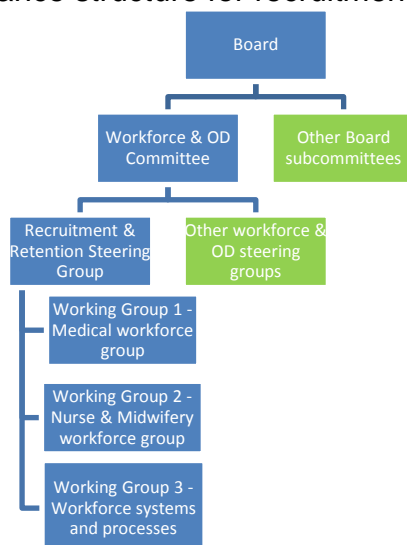
Each action has been allocated to a forum which will be held accountable for delivery. A scorecard has been developed (detailed later in this plan) which will monitor the effectiveness of this plan and performance will be reported as a standing agenda item at the Workforce and Organisational Development Committee.

4.1 **Governance**

As recruitment and retention is one of the key issues facing the Trust, a revised governance structure will be established by 31st August 2017 to oversee the implementation of this plan. This governance structure will strengthen the risk management process ensuring that the Workforce and Organisational Development Committee is sighted on all recruitment and retention related risks.

A Recruitment and Retention Steering Group will be formed which will have oversight of the three working groups. In addition to the existing medical and nursing and midwifery groups, a third working group will be introduced to take forward the development of the Trust's recruitment processes and e-rostering system. The terms of reference for the steering group and working groups will be developed by 31st August 2017.

Diagram 1: New governance structure for recruitment and retention



A key requirement for the Trust is to develop three year workforce plans for each division and this will be taken forward through the Workforce & OD Committee. Until these plans are in place, and in response to the current recruitment challenges, the Trust will develop one year bridging plans for each division by 30th September 2017.

The Trust is in the process of undertaking a review of the recording and monitoring of vacancy rates to enable “live” data to be available. This work will be completed by 30th September 2017.

To provide assurance to the Board the Workforce and Organisational Development Committee will oversee the auditing of the Trust's compliance with safer recruitment practices, the working time directive and IR35 compliance. These audits will be completed by 31st March 2018.

4.2 Recruitment

A recent survey by NHS Employers has identified what matters most to people when looking for a new role within healthcare. The findings of this survey are summarised in the table below and are listed in order of preference:

What matters most when looking for a new role (recruitment)
1. Opportunities for development
2. Location
3. Pay and benefits
4. Opportunities for flexible working
5. Opportunities for progression
6. The values of the employer
7. The reputation of the employer

* An analysis of the Trust's leavers in 2016/17 has identified that the main reason for leaving is relocation (17%) followed by work life balance (16%) and retirement at (12%).

The Trust has responded to these findings and has structured the recruitment section of the plan under the above headings.

4.2.1 Opportunities for Development

The Trust will continue to promote the return to practice programme for nursing. These accredited programmes are funded through Health Education England and will be accessed by the Trust through two annual cohorts. Return to practice opportunities will be directly recruited by the Trust with a commitment to substantive employment. Recruitment to previous cohorts has proven unfruitful with candidates confirming that they wish to work in a community environment rather than an acute setting. In response to this, the Trust will arrange a number of taster days to encourage an increase in applicants.

The Trust has 26 nursing associates undertaking the two year programme. Subject to the validation of this national pilot the Trust intends to offer two Nursing Associate programmes each year to both new and existing staff. Numbers will be determined by the workforce plans as referenced above.

The Trust is working in partnerships with local Higher Education Institutes and Health Education England to develop physician associates to work as part of a medical workforce to support the current challenges in trainee numbers. Furthermore, the Trust will invest in these relationships for expert advice and support regarding the development of other new clinical roles and models of training support.

The Trust has recently been successful in recruiting mental health and learning

disability nurses. A scoping exercise will be undertaken by September 2017 to ascertain the number of additional posts that would be suitable for this type of role.

With the increase in students, nursing associates and apprenticeships it is important that the Trust undertakes a review of its mentor capacity to negate any impact on service delivery and the experience of students. To support this work the Trust will introduce a mentorship model across the medical, nursing and midwifery workforce by March 2018.

The Trust will introduce a new preceptorship course for all newly qualified nurses and band 4 staff by 31st March 2018. This will require the Trust's preceptorship policy to be refreshed which will enable existing band 5 staff to access the course if deemed appropriate.

The Nursing and Midwifery Workforce Group will develop a business case to scope whether a student loan pay back scheme can be introduced for student nurses. The scheme will require students to commit to working for the Trust for at least 3 years post qualification. The business case will be developed by 31st March 2018.

4.2.2 Location

As detailed above, the main reason for staff leaving the Trust is relocation. The Trust has committed to undertake further research to understand the reasons behind this. One of the factors identified is the lack of affordable housing. In response to this the Trust will work with local housing associations to increase the availability of key worker housing from April 2018 onwards.

The Trust is aware that a workforce which is representative of its local community can build trust and confidence among patients and provide better quality care. The Trust plans include the development of a workforce which represents the community it serves at every level. There is common misconception that careers within the NHS comprise of clinical roles only, this misconception will be addressed and the full extent/range of employment offered by the Trust will be marketed through "60 second service video's" and campaigns with local media.

The Trust has been successful in the international recruitment of medical staff and has developed a range of attraction packages to support the relocation of candidates. The Trust will continue with this approach and will develop an international recruitment timetable to cover the period of this plan.

The Trust will develop a range of attraction packages for nursing and midwifery staff which will be launched in October 2017. The Nursing and Midwifery Working Group is developing a business case for the international recruitment of nursing and midwifery staff and this will be completed by 30th September 2017.

4.2.3 Pay and benefits

Unlike NHS Foundation Trusts, Worcestershire Acute Hospitals NHS Trust is unable to offer pay outside of national terms and conditions. However, Agenda for Change does allow local recruitment and retention premiums to be applied for hard to recruit

roles. In response to this, the Trust will undertake a review of enhancements offered by neighbouring Trusts to ascertain whether these enhancements should be applied to certain roles. This work will be completed by 31st March 2018.

The Trust has a suite of salary sacrifice schemes for the benefit of staff. Through the scheme the Trust provides equipment or goods to eligible employees in return for a reduction in salary over a set term resulting in a saving in pension and national insurance costs for both the Trust and the employee. Over the next six months the Trust will improve the marketing of these schemes to both new and existing staff and this information will be included in the Trust's recruitment literature.

The Trust will undertake an options appraisal of Trust bank arrangements, including a review of the contract with NHS Professionals, to ascertain how the Trust can increase the number of active bank workers. All staff will be auto enrolled on the Trust's bank and a review of bank rates will be undertaken to ensure the Trust remains competitive with neighbouring Trusts.

4.2.4 Opportunities for flexible working

Promotion of flexible ways of working within the Trust can help attract and retain staff. Flexible working options offered by the Trust include part time hours, job share, compressed hours, annualised hours and career breaks.

The Trust will undertake a review of its current approach to flexible working against "Timewise" best practice and will be less rigid with the hours/ shifts offered to potential new staff. The Trust will explore the option of obtaining Timewise accreditation by 30th September 2018.

4.2.5 Opportunities for Progression

The Trust is developing an Education Academy that will support career pathways in medicine, nursing and midwifery and this will be in place by March 2018. Promotional videos and literature will be produced for each specialty and these will be uploaded on to the Trust's website and recruitment microsite so that candidates are aware of the range of opportunities for development.

The apprenticeship levy provides the opportunity for healthcare/ therapy assistants to take a "step on/ step off" approach to obtaining a degree. Each division will be asked to identify the number of level 2, 3, 4 and 5 apprentices that can be supported within their workforce plans. This will ensure the Trust has a steady supply of clinicians for the future and will provide a number of development opportunities for new and existing staff.

4.2.6 Values

The Trust will embed its signature behaviours through values based recruitment and selection methods. Job description and person specification templates will be updated to include these behaviours and will be tested at interview and assessment centres. This approach will require a refresh of the Trust's recruitment and selection

policy and procedures and will be taken forward through the workforce systems and processes working group and will be completed by March 2018.

4.2.7 Reputation of the employer

The Trust has been working hard over the last year to improve its reputation as an employer. Regular Chat Back surveys have been undertaken to ascertain the key issues affecting staff with actions put in place in response to this feedback.

A dedicated recruitment microsite will be developed by March 2018 which will include promotional videos for each specialty/ service and virtual tours of the Trust's sites.

Work is being undertaken with clinical directors to review the content of recruitment literature. New recruitment materials will be developed which will include the benefits of living and working in Worcestershire and these will be made available on the Trust's intranet and website.

A new initiative will be introduced from October 2017 which will see clinical directors and professional leads contact potential new recruits to discuss the benefits of working for the Trust. Newly appointed staff will be allocated a buddy on arrival and an international support group will be established to welcome overseas candidates.

The corporate and clinical induction programmes will be refreshed and a bespoke induction developed for new consultants.

4.3 Retention

The survey by NHS Employers also identified what factors are most likely to make healthcare staff stay in a role. The findings of this survey are summarised in the table below and are set out in order of preference:

What factors are most likely to make you stay in a role (retention)
1. Opportunities for development
2. Staff engagement
3. Opportunities for progression
4. Pay and benefits
5. Opportunities for flexible working
6. The values of the employer
7. Location
8. The reputation of the employer

4.3.1 Opportunities for development

As detailed above, the Trust is developing an education academy which will be structured around well-defined career pathways for staff. The academy will be the

key vehicle for promoting development opportunities for new and existing staff.

The Trust will refresh its leadership plan by March 2018 with an initial focus on leadership development for clinical directors and band 6/7 nursing and midwifery staff.

The medical workforce group will explore the possibility of increasing the number of medical rotation posts within the Trust to include overseas rotations. This will enable the Trust to strengthen links outside of the UK.

This group will also be responsible for the introduction of a mentorship programme for consultants.

The nursing and midwifery workforce group is developing a business case to scope the cost/ benefit of employing supernumerary band 6 workforce development roles for each nursing specialty. This work will be completed by March 2018 and will be supported by a nurse education forum to maximise the dissemination of information across the Trust.

A review of development opportunities for bank workers will be undertaken in conjunction with NHS Professionals. This will include the regular reporting of mandatory training and appraisal compliance.

Regular good news stories relating to staff development will be published externally and internally. These will include mentorship awards, apprenticeship successes and the opportunities available to staff through the Trust's Education Academy.

4.3.2 Staff Engagement

Engagement is about creating opportunities for staff to connect with their colleagues, managers and the wider organisation. It's about creating an environment where staff are motivated, valued and empowered to deliver the quality care expected and to go the extra mile in line with the Trust's signature behaviours. Staff involvement and engagement is therefore a key factor influencing staff morale in the workplace.

We know from the results of the last NHS staff survey that only 46% of staff would recommend the Trust as a place to work and the Trust needs to understand why. A review of the findings of the NHS staff survey and Chat Back responses is being undertaken and a workforce strategy developed to address areas requiring improvement. This strategy is in development and will be published by 30th September 2017.

4.3.3 Opportunities for Progression

The Trust has made real progress in challenging the "status-quo" of like for like recruitment and now undertakes a skill mix review following every resignation/relocation of an employee. This approach has seen new roles introduced across the Trust including the physician associate, ward housekeeper and ward administrator.

To strengthen the opportunities for internal progression the Trust will introduce

procedures and guidance for different “levels” of recruitment i.e. internal to a department, internal to the Trust and open recruitment (simultaneous advert for internal and external candidates) which encourage staff to seek progression/development/experience within the Trust rather than moving to another employer. Furthermore, the Trust will undertake a full review of job plans for all medical staff by March 2018.

It is a contractual obligation for every member of staff to have an annual appraisal and the Trust is committed to this principle and will become more robust in its monitoring and achievement of compliance. The Trust is committed to achieving a target of 95% compliance and ensuring that 100% of these appraisals are of a consistently high quality and meaningful to the individual. The introduction of a values based appraisal form will change the way appraisals are conducted and ensure they are focused on quality conversations. There will be an opportunity to discuss the employee’s aspirations as part of this process. All employees, with the support of their line manager, will be able to register their skills and abilities on the Trust’s “talent register” which would give them *first option* on vacancies within their chosen area(s) as they arise.

The following policies will be reviewed/ introduced in support of this approach:

- Internal staff movement policies
- Acting up and secondment policy
- Leavers Policy (includes retire and return)

4.3.4 Pay

As noted above, unlike NHS Foundation Trusts, Worcestershire Acute Hospitals NHS Trust is unable to offer pay outside of national terms and conditions.

In order to support the retention of staff the Trust will undertake a review of all zero hour contracts by 31st March 2018. An audit of medical bank staff contact details will also be undertaken with meetings arranged with those who have been inactive for over three months to ascertain their availability for future shifts.

The Trust will undertake a consultation on the amalgamation of the Trust's notice period policies so that all band 5 staff and above are required to provide three months’ notice with the aim of reducing the gap between leavers and new starters to a minimum.

4.3.5 Flexible Working

The Trust will provide workshops for staff that are approaching retirement age, to provide them with information on the various options available to them to continue working. Where an employee is contemplating working beyond retirement age, flexibility in working arrangements may be agreed, particularly where this will facilitate the retention of valuable and/or scarce skills and experience.

As referenced in the recruitment section above, the Trust will undertake a review of its current approach to flexible working against “Timewise” best practice and will be less rigid with its approach to flexible working applications from current staff.

4.3.6 Values of the Trust

The Trust has recently developed a set of signature behaviours which will become “the way we do things around here”. The Recruitment and Retention Steering Group will have responsibility for ensuring that these behaviours become embedded in all recruitment and retention activities.

4.3.7 Location

As detailed above, the main reason for staff leaving the Trust is relocation. The Trust has committed to undertake further research to understand all of the reasons behind this. Exit Interview/questionnaire processes, documentation and reporting will be reviewed and re-launched as well as a campaign to improve return rates in order to analyse trends within the Trust. To do this we will encourage all employees who resign from employment to either complete an exit questionnaire, or attend an exit interview. The exit questionnaire will be available to complete online. Results of the completed questionnaires and interviews will be collated and analysed on a quarterly basis and reported along with any actions to the Workforce and Organisational Development Committee. The Trust will also become more proactive in following up leavers after they have left the organisation to get their feedback

The Trust will introduce an internal staff movements policy which will offer staff the opportunity to move internally should they so wish i.e. to change their base without censure under a streamlined recruitment procedure.

4.3.8 Reputation of the Trust

Staff have the right to work in an environment which is conducive to effective working practices and which ensures they can work safely and healthily. The Trust has recently introduced an app which enables “real time” staffing levels to be reported. This is supported by a robust escalation policy to ensure safe staffing levels are maintained at all times. The utilisation of the e-rostering system will be enhanced to not only identify ‘gaps’ in staffing and potential shortages in skill mix requirements, but will move from real time to horizon scanning and provide an early warning system.

To further enhance the working environment the Trust will undertake a Trust wide stress audit and develop a strategy to address causes of work related stress. This will be supported by the regularly monitor of sickness absence reasons and trends through the Workforce and Organisational Development Committee.

4.4 Workforce Systems

A number of actions will be undertaken to further improve the Trust’s recruitment processes. Recruitment related IT systems will be reviewed to better support managers, to reduce the admin burden and minimise bottlenecks. This will include streamlining

pre-appointment checks and working in line with NHS Employers guidelines to ensure the NHS Check Standards are practicable and relevant.

Actions include:

- A review of the establishment control process(es) to reduce the time taken to authorise the recruitment of replacement posts
- A review of each stage of the recruitment and selection process and the development of performance indicators to ensure time-scales are minimised
- A review of the current utilisation of IT systems such as NHS Jobs and ESR to streamline processes wherever possible and ensure consistency in approach. This will minimise the possibility of losing good candidates to other organisations and to optimise the future relationship between the successful candidate and the Trust
- A refresh of the recruitment and selection training for managers and all staff involved in the recruitment process
- The establishment of a system to retain good candidates who have been interviewed but not appointed in the first instance. When similar jobs become vacant this database of staff can be managed via a waiting list system used before going out to advert. This will enable pro-active rather than re-active recruitment
- Job descriptions will be reviewed to ensure that jobs are well designed and attractive. Manager's guidance on job design will be refreshed and a review of all vacancies that are not filled and those that are vacated within a year to ensure jobs are designed well. The Trust will establish a library of approved job descriptions that will link to the position numbers on ESR

There is a need to raise the profile of the Trust and a need to develop greater branding. More sophisticated advertising through a multi-media approach would take the brand to more applicants, however the brand needs to ensure the unique selling points of the Trust are conveyed and these will be developed with the support of the medical and nursing workforce working groups.

Detailed below are the approaches that the Trust will employ to get better value for money and improve the effectiveness of advertising. NHS Jobs provides the Trust with a cost-effective approach to recruitment advertising and the Trust will continue to advertise all posts on this site. However, NHS Jobs alone will not attract the number and calibre of applicants and therefore the following media will also be used, subject to cost:

- Job fayres
- Open days
- Recruitment microsites
- On-line advertising campaigns
- 'Live' job chat forums
- Social Media
- Text alerts
- Web banners

- Professional journals
- Job boards
- Local/national newspapers

Any such recruitment activity will be followed up to track candidates, which will require the deployment of an intelligent database to track those who attend interviews and/or interact with the Trust through multi-media. Over time this will allow the Trust to build its own database of potential candidates, and to ensure they are kept informed of job opportunities and Trust news and successes.

For those areas which have a high vacancy rate due to national shortages we will run focused campaigns agreed by the Clinical Director or Professional Head of Service who will own the activity. These could include:

- Development of a recruitment microsite
- Vacancy and directorate specific recruitment literature
- Ensuring a Trust presence at profession specific events
- Continued social media presence
- Open days for specific professions or Divisions
- Employee case studies

To co-ordinate all of the above activity, the Trust will develop an organisational wide annual recruitment planner. This will include details of all recruitment campaigns, open days and assessment centres.

The Trust will look to improve service standards throughout the recruitment process by evaluating selected recruitment campaigns from a candidate experience point of view. The Trust will survey applicants at the end of campaigns and obtain feedback from recruiting managers and new starters. The results will be evaluated and presented to the Recruitment and Retention Steering Group and the process revised appropriately.

The Trust has identified inconsistency in the approval process for special leave across the Trust. A review of the authorisation process will be undertaken with relevant Trust policy and e-rostering system “rules” being updated accordingly.

The workforce systems and processes working group will undertake a review of the utilisation of the e-rostering system across the Trust to ascertain whether further benefits can be realised from increasing the functionality of this system. This includes the interfaces with the bank office and the ESR system.

5 Recruitment and Retention Scorecard

The effectiveness of this plan will be monitored through the Workforce and Organisational Development Committee and the Recruitment and Retention Steering Group. The following scorecard will be produced each month to provide both forums with a summary of performance:

Table 3: Recruitment and retention scorecard

Metric (by staff group)	Target by 31st March 2018
Vacancy rate	Consultant < 15% Middle grade <10% Qualified Nurses <7%
Turnover rate	Consultant < 8% Middle grade <8% Qualified Nurses <10%
Number of new starters	Consultant - 5 per month Middle grade - 4 per month Qualified Nurses – 30 per month
Number of leavers	Consultant < 2 per month Middle grade <2 per month Qualified Nurses < 20 per month
Summary of reasons for leaving	Reduction in staff leaving for reasons relating to relocation, work life balance and retirement

6 Summary

The recruitment and retention of staff is one of the key risks for the Trust. The introduction of a revised governance structure and in particular a Recruitment and Retention Steering Group will ensure that the Trust is sighted on all recruitment and retention related risks and that appropriate actions are being taken to mitigate them. Furthermore, the Steering Group will bring together all recruitment and retention activities across the Trust which will maximise available resource and avoid duplication.

The plan in appendix one sets out priority actions for the Trust over the next two years and details the forum responsible for delivery. Priority actions include the review of the Trust's compliance with legislation and an assessment of current activities against best practice.

The biggest challenge facing the Trust is the recruitment of medical staff and in particular acute medical and emergency physicians. The medical workforce group will be asked to focus on this issue with wider recruitment and retention activities being passed to the workforce systems and processes group for action.

Priorities for the nursing and midwifery workforce group have also been revised to enable the Trust to concentrate on achieving the recruitment of thirty three new qualified nurses each month.

Appendix 1 - Worcestershire Acute Hospitals NHS Trust - High level Recruitment and Retention Plan 2017 to 2019								To be completed by:			
Ref	Theme	Strand	Subject	Actions	Outcome	Responsible Forum for delivery	Lead Officer	Sep-17	Mar-18	Sep-18	Mar-19
1	Governance	Not applicable	Governance Structure	Set up Recruitment and Retention Steering Group and associated working groups. Develop terms of reference.	The Trust is sighted on key workforce risks and the effectiveness of this plan	People and Culture Committee					
2	Governance	Not applicable	Workforce Plans	Develop 3 year workforce plans for each division. To include analysis of age profile of workforce.	Trust is aware of future workforce requirements and can schedule in necessary recruitment	People and Culture Committee					
3	Governance	Not applicable	Workforce Plans	Develop 1 year bridging workforce plans for each division	Trust is able to cover current vacancy levels through different ways of working	People and Culture Committee					
4	Governance	Not applicable	Vacancy Rates	Undertake audit of current establishment and vacancy rates. Ensure appropriate reporting system in place to enable "live" vacancy data to be reported.	"live" vacancy data available which informs Trust of current hotspots and recruitment requirements	People and Culture Committee					
5	Governance	Not applicable	IR35 compliance	Undertake audit of medical locums to ensure IR35 compliance	Trust is compliant with IR35	People and Culture Committee					
6	Governance	Not applicable	Safer recruitment practices	Undertake an audit of the safer recruitment practices across the Trust to ensure they are compliant with CQC key lines of enquiry and NHS Employers guidance	Trust is compliant with best practice	People and Culture Committee					
7	Governance	Not applicable	Working Time Directive	Undertake an audit of the Trust's e-rostering system to ensure compliance with the Working Time Directive	The Trust is compliant with the Working Time Directive	People and Culture Committee					
8	Recruitment	Opportunities for development	Education Academy	Develop an Education Academy that provides a one stop shop for all education and training	The Trust is seen as an employer of choice for development opportunities	Recruitment and Retention Steering Group					
9	Recruitment	Opportunities for development	Return to practice taster days	Develop an annual timetable of taster days to support recruitment to the return to practice programmes	An increase in the number of return to practice applicants	Nursing and Midwifery workforce group					
10	Recruitment	Opportunities for development	Mental Health Nurses	Scope the number of Mental Health and Learning Disability Nurses that the Trust can employ	The Trust is able to maintain safe nurse staffing levels	Nursing and Midwifery workforce group					
11	Recruitment	Opportunities for development	Nurse Mentorship	Undertake a review of the mentor capacity across the Trust to accommodate students, Nursing Associates and apprenticeships. Introduce CLIP mentorship model across all wards	The Trust has additional capacity for students, nurse associates and apprenticeships	Nursing and Midwifery workforce group					
12	Recruitment	Opportunities for development	Preceptorship Policy	Undertake a review of the Trust's Preceptorship Policy . Introduce a new preceptorship course for all newly qualified nurses and band 4 staff to the Trust. Enable existing band 5 staff to access if deemed appropriate.	The Trust is seen as an employer of choice by newly qualified staff	Nursing and Midwifery workforce group					
13	Recruitment	Opportunities for development	Student Loan payback scheme	Develop a business case to scope whether a student loan pay back scheme can be introduced for student nurses	The Trust attracts an increase in newly qualified nurses	Nursing and Midwifery workforce group					
14	Recruitment	Location	Key worker housing	Undertake a review of the availability of key worker housing	The Trust is seen as an employer of choice	Recruitment and Retention Steering Group					
15	Recruitment	Location	Promotional video's	Develop promotional video's to market the range of available roles across the Trust	Increase in number of applicants and conversion rates	Recruitment and Retention Steering Group					
16	Recruitment	Location	International recruitment timetable (Medical)	Develop annual international medical recruitment timetable	International campaigns are planned in good time	Medical workforce group					
17	Recruitment	Location	Attraction Packages for Medical Staff	Develop recruitment attraction packages for medical staff	Increase in number of applicants and conversion rates	Medical workforce group		Complete			
18	Recruitment	Location	Attraction Packages for Nursing Staff	Develop recruitment attraction packages for nursing and midwifery staff	Increase in number of applicants and conversion rates	Nursing and Midwifery workforce group					
19	Recruitment	Location	International recruitment for nursing and midwifery staff	Develop a business case for the international recruitment of nursing and midwifery staff	A reduction in nursing and midwifery vacancies	Nursing and Midwifery workforce group					
20	Recruitment	Pay and benefits	Recruitment and retention premia	Scope the enhancement offered by neighbouring Trusts to ascertain whether premias should be applied to certain roles	Reduction in hard to recruit roles	Recruitment and Retention Steering Group					
21	Recruitment	Pay and benefits	Staff Benefits	Improve the marketing of staff benefits to new and existing staff	The Trust is seen as an employer of choice	Recruitment and Retention Steering Group					
22	Recruitment	Pay and benefits	Bank	Undertake options appraisal of Trust bank arrangements including review of contract with NHS Professionals to ascertain how the Trust can increase the number of active bank workers	Increase in the number of active bank staff	Recruitment and Retention Steering Group					

Appendix 1 - Worcestershire Acute Hospitals NHS Trust - High level Recruitment and Retention Plan 2017 to 2019								To be completed by:			
Ref	Theme	Strand	Subject	Actions	Outcome	Responsible Forum for delivery	Lead Officer	Sep-17	Mar-18	Sep-18	Mar-19
23	Recruitment	Pay and benefits	Bank	Junior doctors to be invited to join Trust bank	Reduction in agency costs	Medical workforce group					
24	Recruitment	Pay and benefits	Bank	Review bank rates offered for locum shifts	Increase in junior doctors on bank. Reduction in agency costs	Medical workforce group					
25	Recruitment	Opportunities for progression	Career pathways	Ensure that career pathways are published for all staff groups on the Trust's intranet, website and recruitment material	The Trust is seen as an employer of choice for career progression opportunities	Recruitment and Retention Steering Group					
26	Recruitment	Opportunities for progression	Apprenticeships	Scope the number of healthcare assistant apprenticeship roles that the Trust can support	The Trust has a pipeline of healthcare assistants and is able to maximise the apprenticeship levy	Nursing and Midwifery workforce group					
27	Recruitment	Values	Values based recruitment	Implement values based recruitment and selection methods for all vacancies	A reduction in staff turnover as new recruits will be aligned to the Trust's values and behaviours.	Workforce Systems and Processes Working Group					
28	Recruitment	Reputation of employer	Branding	Develop new recruitment materials - to include benefits of living and working in Worcestershire	Increase in number of applicants. Trust's seen as an employer of choice	Recruitment and Retention Steering Group					
29	Recruitment	Reputation of employer	Branding	Update Trust's intranet and website to include updated recruitment materials	Increase in number of applicants. Trust's seen as an employer of choice	Recruitment and Retention Steering Group					
30	Recruitment	Reputation of employer	Branding	Develop Recruitment microsite. Develop promotional video's for each speciality. Develop virtual tours of Trust sites	Information for candidates in one place	Recruitment and Retention Steering Group					
31	Recruitment	Reputation of employer	Specialist input into recruitment campaigns	Work with Clinical Directors to produce targeted adverts and arrange attendance at open days	Candidates are attracted to apply due to high quality adverts	Medical workforce group					
32	Recruitment	Reputation of employer	Buddy System	Implement overseas support group and buddy system for SAS and Clinical Fellows	Candidates establish links with Trust at early stage of the recruitment process. Increase in conversion rates	Medical workforce group					
33	Recruitment	Reputation of employer	Induction	Develop bespoke induction for new consultants	Increase in recruitment and retention of consultants	Medical workforce group					
34	Recruitment	Opportunities for development	New Roles	Invest in relationships with Heath Education West Midlands for expert advice and support re the development of new clinical roles and models of training support	Trust has innovative staffing models in place	Medical workforce group					
35	Retention	Opportunities for development	Leadership development	Refresh Trust's leadership plan with a priority focus on clinical leadership development	The Improvement in the leadership capability and capacity of clinical leads	Recruitment and Retention Steering Group					
36	Retention	Opportunities for development	Rotations	Explore the possibility of developing overseas rotational posts	Improved retention rates	Medical workforce group					
37	Retention	Opportunities for development	Mentorship programme for new Consultants	Set up mentorship programme for new consultants	Improved retention of new consultants	Medical workforce group					
38	Retention	Opportunities for development	Workforce Development roles	Scope the cost/ benefit of supernumery band 6 workforce development roles for each speciality	The Trust is seen as an employer of choice for development opportunities	Nursing and Midwifery workforce group					
39	Retention	Opportunities for development	Nurse Education Forum	Introduce a Nurse Education Forum to support the dissemination of information across the Trust	The Trust is seen as an employer of choice for development opportunities	Nursing and Midwifery workforce group					
40	Retention	Opportunities for development	Bank worker compliance	Review mandatory training and appraisal compliance for bank staff in conjunction with NHS Professionals	Increase in the number of active bank staff	Workforce & OD Committee					
41	Retention	Opportunities for development	Publication of staff achievements	Ensure regular staff development good news stories are published internally and externally	The Trust is seen as an employer of choice for development opportunities	Recruitment and Retention Steering Group					
42	Retention	Staff engagement	Staff Engagement	Undertake a review of the findings of the NHS Staff Survey and Chat Back responses and develop an action plan to address areas that require improving. Ensure regular communications are issued to notify staff of the actions being taken to address the concerns/ issues raised	Reduction in staff turnover	People and Culture Committee					
43	Retention	Opportunities for progression	Internal progression	Introduce procedures and guidance for different levels of recruitment (internal to dept., internal to Trust and open recruitment)	The Trust is seen as an employer of choice for development opportunities	Recruitment and Retention Steering Group					
44	Retention	Opportunities for progression	Job Plans	Undertake full review of job plans for all medical staff	Job plans aligned to capacity/ demand levels	Medical workforce group					
45	Retention	Opportunities for progression	Appraisal	Review appraisal form to include signature behaviours and career discussions/ talent register	The Trust is seen as an employer of choice for development opportunities	Recruitment and Retention Steering Group					

Appendix 1 - Worcestershire Acute Hospitals NHS Trust - High level Recruitment and Retention Plan 2017 to 2019								To be completed by:			
Ref	Theme	Strand	Subject	Actions	Outcome	Responsible Forum for delivery	Lead Officer	Sep-17	Mar-18	Sep-18	Mar-19
46	Retention	Pay and benefits	Contracts of employment	Review all zero hour contracts	Increase in the number of active bank staff	Recruitment and Retention Steering Group					
47	Retention	Pay and benefits	Bank	Undertake audit of medical bank staff contact details	Medical bank staff details up to date	Medical workforce group					
48	Retention	Pay and benefits	Bank	Undertake marketing campaign for bank staff that have been inactive for 3 months or more	Increase in the number of active bank staff	Recruitment and Retention Steering Group					
49	Retention	Pay and benefits	Notice periods	Undertake consultation on the amalgamation of the Trust's notice period policy so that all band 5 staff are required to provide 3 months notice	The gap between leavers and new starters is removed	Recruitment and Retention Steering Group					
50	Retention	Flexible working	Career conversations	Offer career conversations to all staff who are considering retirement.	There is an increase in the number of staff who retire and return	Recruitment and Retention Steering Group					
51	Retention	Flexible working	Flexible Working	Undertake a review of the effectiveness of the Trust's flexible working policy against "Timewise" best practice.	The Trust is seen as an employer of choice with regard to work/life balance	Recruitment and Retention Steering Group					
52	Retention	Location	Reasons for leaving	Undertake a review of the reasons for leaving identifying actions that can be taken to mitigate staff turnover	A reduction in the Trust's staff turnover rate. An increase in retention.	Recruitment and Retention Steering Group					
53	Retention	Location	Internal movement of staff	Develop Trust policy to support the internal movement of staff	Improved retention rates	Recruitment and Retention Steering Group					
54	Retention	Reputation of employer	Stress audit	Undertake a Trust wide stress audit and develop strategy to address causes of work related stress	Reduction in sickness absence	Recruitment and Retention Steering Group					
55	Workforce Systems and Processes	Not applicable	Streamline establishment control process	Undertake a review of the establishment control process(es) to reduce the time taken to authorise the recruitment of replacement posts	Time taken to authorise recruitment to a post is minimised	Workforce Systems and Processes Working Group					
56	Workforce Systems and Processes	Not applicable	Streamline recruitment processes	Undertake a review of the current recruitment process(es) to identify time taken for each activity. Set KPI's for each stage of the process. To include an options appraisal of the recruitment process	Time taken to recruit is minimised.	Workforce Systems and Processes Working Group					
57	Workforce Systems and Processes	Not applicable	Recruitment campaign timetable	Develop annual recruitment campaign timetable (to include bank staff)	Assessment centres and interviews are planned in good time and dates appear in adverts.	Workforce Systems and Processes Working Group					
58	Workforce Systems and Processes	Not applicable	Open day timetable	Develop annual open day timetable (to include bank staff)	Open days/ job fayres are planned in good time and can be included in recruitment campaigns	Workforce Systems and Processes Working Group					
59	Workforce Systems and Processes	Not applicable	Job descriptions	Establish database of approved job descriptions that link to the position numbers on ESR	Job descriptions are in standard Trust format and are consistent across staff groups and divisions	Workforce Systems and Processes Working Group					
60	Workforce Systems and Processes	Not applicable	Candidate experience during the recruitment process	Undertake a review of the recruitment process from a candidate experience point of view	Improved candidate experience and conversion rate	Workforce Systems and Processes Working Group					
61	Workforce Systems and Processes	Not applicable	Special leave	Review authorisation process for special leave ensuring consistency across the Trust	Authorisation of all special leave is in line with Trust policy	Workforce Systems and Processes Working Group					
62	Workforce Systems and Processes	Not applicable	E-rostering system	Undertake a review of the utilisation of the functionality of the e-rostering system. Are gaps in rota's pushed through to the bank office on a timely basis? Has the system been linked to ESR to remove the need for manual timesheets	The Trust as full benefits realisation of the e-rostering system	Workforce Systems and Processes Working Group					
63	Workforce Systems and Processes	Not applicable	E-rostering Policy	Undertake a review of the Trust's e-rostering policy to ensure it is fit for purpose with regard to the Trust's flexible working policy	The Trust is seen as an employer of choice with regard to work/life balance	Recruitment and Retention Steering Group					

Date of meeting	14 September 2017
Paper number	Enclosure G4

Report provided:							
For approval:		For assurance:	√	To note:		For information:	

Nursing and Midwifery Safer Staffing Report

Accountable Director	Vicky Morris Chief Nursing Officer
Presented by	Vicky Morris Chief Nursing Officer
Author	Sarah Needham Lead Nurse for Education and Workforce

Alignment to the Trust's strategic priorities (√)	Deliver safe, high quality, compassionate patient care	√	Design healthcare around the needs of our patients, with our partners	√
	Invest and realise the full potential of our staff to provide compassionate and personalised care	√	Ensure the Trust is financially viable and makes the best use of resources for our patients	√
	Develop and sustain our business	√		

Alignment to the Single Oversight Framework (√)	Leadership and Improvement Capability	√	Operational Performance	√
	Quality of Care	√	Finance and use of resources	√
	Strategic Change	√	Stakeholders	√

Report previously reviewed by		
Committee/Group	Date	Outcome
People and Culture	24 August 2017	On agenda but not discussed

Assurance: Does this report provide assurance in respect of the Board Assurance Framework strategic risks?	Y	BAF number(s)	R4.2
Level of assurance and trend not assessed			
Significant	Limited	None	

Date of meeting	14 September 2017
Paper number	Enclosure G4

Purpose of report	This paper is presented to the Board for assurance on nursing and midwifery workforce fill rates
Summary of key issues	<p>This paper provides an update on the Nursing and Midwifery Workforce Action group, including the key risks and mitigation plans in the following areas</p> <ul style="list-style-type: none"> • Compliance information on safer staffing levels at ward and site level • Trust position on nursing recruitment • Workforce strategy new objectives
Recommendations	<p>The Trust Board is requested to note the following:</p> <ul style="list-style-type: none"> • Building a flexible and permanent nursing workforce against a backdrop of national nursing shortages remains a challenge. • The Trust is strengthening its approach to recruitment and retention. • Controls are in place to manage the risks associated with nursing vacancies. <p>The Board is requested to discuss the future publication of this report, i.e. whether it is considered at a Board meeting or whether it is published following consideration at the People and Culture Committee</p>

Date of meeting	14 September 2017
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WORCESTERSHIRE ACUTE HOSPITALS NHS TRUST

REPORT TO TRUST BOARD – August 2017

1. Introduction

This paper provides an update on the Nursing and Midwifery Workforce Action group, including the key risks and mitigation plans in the following areas:

- Compliance information on safer staffing levels at ward and site level.
- Trust position on nursing recruitment.
- Workforce strategy new objectives

2. Background

Over the last 12 months a number of initiatives have taken place in order to gain assurance that the nursing workforce is proactively addressing the issues and challenges in relation to our nursing workforce gaps.

3. Safer staffing fill rates

The Board is required to receive information on fill rates per ward and information is also provided per site for the Trust (see appendix 1).

- Areas below the 80% (national expected fill rate) are highlighted in red.
- Impact on the quality and safety of these areas is scrutinised by the DDNs and Matrons.
- If fill rates are reported as over 100% this is because unqualified staff are utilised to support and backfill trained staff vacancies.
- Reviews of staffing takes place three times per day and staff are mobilised from areas with higher staffing levels into areas which require support.
- The safer staff app is now being utilised and Divisional Directors of Nursing are working to ensure that completion rates become 100% consistently, in order to have the overview of safe staffing.

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Safer staffing Data – June 2017

Ward name	DAY		Night	
	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)
Acute Stroke Unit	87.5%	105.5%	86.5%	107.4%
Avon 2- Gastro	100.4%	111.5%	74.9%	159.4%
Avon 3- Infectious Diseases	101.8%	100.9%	81.7%	123.6%
Avon 4	101.6%	151.0%	70.8%	140.6%
Laurel 1 Cardiology-CCU	92.5%	120.9%	100.1%	132.7%
Laurel 2 Resp	103.2%	92.1%	89.6%	128.4%
Medical Assessment Unit WRH	97.1%	109.5%	98.9%	104.9%
Medical High Care and Short Stay	120.1%	141.7%	131.9%	145.4%
Silver Assessment Unit	92.9%	84.1%	148.6%	98.0%
MAU ALX	46.0%	91.3%	95.5%	86.7%
Ward 12 Medicine	100.9%	112.2%	117.7%	101.7%
Ward 2 Specialist Med	124.4%	107.1%	126.1%	120.1%
Ward 5 - Medicine AHD	85.3%	112.3%	109.3%	108.5%
Ward 6	142.0%	95.3%	189.6%	103.8%
CCU- Alex	74.0%	-	102.2%	-
EVERGREEN 1	129.7%	135.9%	155.5%	144.3%
Ward 14	81.3%	82.1%	102.2%	100.8%
Ward 10	92.1%	96.3%	102.8%	91.5%
Ward 11	90.0%	89.7%	90.2%	98.9%
Ward 16	88.2%	102.5%	82.4%	123.3%
Ward 17	82.1%	99.7%	100.5%	75.4%
Ward 18	83.3%	99.8%	95.8%	96.1%
SCDU & SHDU	97.2%	93.5%	100.9%	100.0%
Beech A	92.9%	93.1%	100.4%	108.8%
Beech B2	109.8%	92.1%	96.3%	98.6%
Beech B1	88.6%	105.5%	96.3%	98.7%
Trauma & Orthopaedics	62.9%	112.8%	135.0%	115.2%
Severn Unit & HDU	89.2%	105.9%	97.8%	103.8%
WRH Delivery Suite & Theatre	76.2%	100.0%	87.9%	95.2%
WRH Maternity Triage	100.0%	100.0%	100.0%	100.0%

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WRH Meadow Birth Centre	100.0%	100.0%	100.0%	100.0%
WRH Postnatal Ward	82.6%	91.5%	87.8%	79.6%
WRH Riverbank	81.7%	81.5%	93.8%	99.1%
WRH Neonatal	105.8%	106.7%	100.8%	96.7%
WRH TCU Midwives	100.0%		100.0%	
WRH Antenatal Ward	79.1%	47.2%	89.5%	80.6%
ITU ALEX	100.0%	100.0%	100.0%	-
ITU WRH	100.0%	100.0%	100.0%	-
WARD 1 KTC	100.0%	100.0%	100.0%	-
LAUREL 3 WRH	77.8%	67.1%	77.9%	93.3%

The Unify data above reflects the divisional picture of red flag shifts as outlined in the table below.

This table below highlights the areas whereby staffing fill rates falls below the national standard of 80% and these are RAG rated as red shifts, and evidence which could be triangulated to have occurred as a result of staffing gaps.

DDNs and Matrons have a responsibility of reassessing red flag shifts and developing a plan of what needs to be put in place in order to make the shift safe.

Please find below specific ward information whereby shifts fall below the 80% national fill rate requirement.

June 2017 data

Ward Area	What was done	Potential impact of care as a result of staffing gaps.
Avon 2	74.9 % fill rate for trained staff on night shifts but backfilled with HCA staff with overfill of 159.4 %.	Falls -10 No Infections Pressure Ulcers Grade 3 x1– hospital acquired. Grade 2 x1 - Hospital acquired Grade 1 x1 – hospital acquired.
Avon 4	70.8 % fill rate for trained staff on night shifts but backfilled with HCA staff	Falls -1 No infections

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	with overfill of 140.6 %	Pressure Ulcers Grade 2 x1 –hospital acquired
Alex MAU	46.0% trained and HCA filled rate of 91.3% - assurance provided that staff was sufficient to acuity.	Falls -9 No infections Pressure Ulcers Grade 2 x1 (? Community acquired under investigation)
Alex CCU	74% fill rate for trained staff. Staffing flexed dependent on acuity.	Falls -1 No infections Pressure ulcers - 0
Laurel 3-	staff deemed as safe when measured against acuity	Falls – 0 No infections Pressure Ulcers - 0
Antenatal ward	staffing flexed across department dependant on activity	Falls – 0 No infections Pressure Ulcers - 0
Delivery Suite	76.2% trained however, staffing flexed to activity in department.	Falls – 0 No infections Pressure Ulcers - 0
T&O	fill rate of 62.9% and backfilled with HCA posts of 112.8%.	Falls -7 No infections Pressure Ulcers Grade 1 x1 – hospital acquired Grade 2 x1 – hospital acquired

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The table below highlights data from the staffing app in terms of where staffing falls below safe staffing standards. These are defined as red flag shifts and the monitoring and management of these shifts which are highlighted as a concern are managed through the Divisional Directors of Nursing and Matrons. The data highlights that the 'complete rate' for the data entry of the staffing app remains under 100%. This is now being reviewed on a daily basis by our DDNs and through our ward audits.

Site	Division	Ward	Shift	Complete Rate	Fill Rate	Skill Mix	Trust Staff	Safe Shifts	Planned RNs	Actual RNs	Planned HCAs	Actual HCAs	Trust	Bank	Shift Date
ALX				91.74%	85.33%	4502/3075	83.70%	1089 / 1140	5310	4502	3570	3075	6342	1235	
	Medicine			86.67%	84.81%	2461/1508	79.01%	586 / 619	2910	2461	1770	1508	3136	833	
	SCSD			100.00%	87.33%	481/43	100.00%	65 / 65	540	481	60	43	524	0	
	Surgical			97.41%	85.67%	1560/1524	86.96%	438 / 456	1860	1560	1740	1524	2682	402	
KTC				100.00%	102.92%	181/66	89.07%	89 / 89	180	181	60	66	220	27	
	SCSD			100.00%	102.92%	181/66	89.07%	89 / 89	180	181	60	66	220	27	
WRH				91.46%	85.41%	9839/5048	90.46%	1629 / 1698	11340	9839	6090	5048	13467	1420	
	Maternity			95.00%	86.00%	3038/1090	92.66%	310 / 314	3480	3038	1320	1090	3825	303	
	Medicine			87.31%	85.17%	3827/2484	85.88%	672 / 721	4470	3827	2940	2484	5420	891	
	SCSD			96.19%	84.07%	1148/214	99.41%	155 / 157	1320	1148	300	214	1354	8	
	Surgical			93.97%	85.72%	1826/1260	92.94%	492 / 506	2070	1826	1530	1260	2868	218	

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4. Recruitment and Retention

The current total number of qualified nurse vacancies in the Trust is 180 WTE compared to May 2017 which was 162 WTE.

Hot spot areas for vacancies are:

- MAU, Alex
- Theatres
- High care and MSSU

To manage the risk posed by nurse vacancies the following controls are in place:

- Agency/bank use overseen by Divisional Directors of Nursing (DDN)
- Active recruitment
- New roles being introduced.
- Monitoring fill rates.
- Daily review of staffing by Matrons and Divisional Directors of Nursing
- Moving staff to support staffing gaps.

We are further strengthening controls by:

- Regular scrutiny of use of e-roster at ward level.
- Strengthening accountability and responsibility through new performance metrics.
- A new electronic tool (safer staffing App) to provide assurance re staffing levels for each shift was launched at the end of February 2017.
- Increasing NHSP pay rates to top of band for 2,5,6. This has increased fill rates in the first 3 weeks since the launch by 10%.
- Incentive initiatives launched to increase the fill rates until the end of February.
- Rebranding of Trust Bank has taken place. It is now called; Worcestershire Acute Hospitals Nurse bank launched in partnership with NHSP
- Implementing an automated structure to unlocking shifts via the escalation process. This aims to ensure that shifts are not unlocked too early or too late in order to fill shifts.
- Processes are also being reviewed to gain robust control on our patient specialising costs across the Divisions

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Recruitment

Recruitment data

	April 17	May 17	June 17
Funded Est WTE – Qual	1883	1883	1889
Funded Est WTE - Unqual	772	772	773
Order Book Funded – Contracted Qual	157	162	180
Order Book Funded – contracted Unqual	1	(-4)	(-7)

The Trust wide positional figures do not include additional capacity on Evergreen and MAU.

Recruitment continues and new starters have been recruited but have not yet commenced with the Trust. Our recruitment has recently not been keeping abreast of our attrition, and this has continued in June with 13.91 wte registered nurse leavers and 8.83 wte new starters (-5.08wte attrition rate). However, 5.55 wte of these leavers were retirements (with 0.80 returning as flexible retirement).

There were only 7.76 wte voluntary resignations this month which does not show a particular pattern in any division, other than medicine where 2.40 wte left for promotion or better reward package into General Practice and Private Healthcare. See table below for Divisional turnover figures.

Retention/ turnover data

Division	Turn over qualified %	Turn over Unregistered %
Medicine	16	16.85
SCSD	10.89	10.72
Surgery	12.68	15.45
Women and Children	11.04	15.10

Top three areas with the highest turnover of qualified staff are;

- MAU Worcester 35 %
- Evergreen 31%
- Theatres KTC 26%

One of the nursing workforce strategy objectives is to formulate different retire

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and return packages in order to utilise effectively our highly educated and experienced nurses within the Trust. The table below demonstrate the number of qualified and unqualified nurse who could potentially retire now.

Retirement data

Division	Retirement numbers from 55 - 65 plus - Qualified	Retirement numbers from 55 - 65 plus - unqualified
Medicine	45	45
SCSD	85	35
Surgery	71	31
Women and Children	45	21
Totals	246	132

Potential E-Roster Efficiencies

Leave Reason	Hrs
Unpaid Leave	171.5
Bereavement Leave	190.5
Compassionate / Special Leave	307
Carers Leave	474
Career Break	219
Other Authorised	312
Total	1674

This has increased from last month which was 1282.25 hrs which equates to 34 WTE compared to 44.5 WTE. 44.5 WTE lost in the workforce to leave other than annual leave has a significant impact on our workforce availability. We need to ensure that this starts to reduce over the coming months within the divisions. Divisions need to gain assurance that leave is being given within the guidelines of the Trust

5 Implications

Required to undertake monthly staffing levels reviews

Required to undertake 6 monthly acuity and dependency reviews of ward/ unit areas.

6 Recommendation

The Trust Board is requested to note the following:

- Building a flexible and permanent nursing workforce against a backdrop of national nursing shortages remains a challenge.
- The Trust is strengthening its approach to recruitment and retention.
- Controls are in place to manage the risks associated with nursing vacancies.

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- Daily review of the Safer staffing App by Matrons to ensure 100% compliance is fundamental in order that the CNO can have assurance of our Trust wide overview on staffing.
- Escalation and mitigation when staffing falls below the required level will need to be consistently applied and evident.

The Board is requested to discuss and consider the future publication of this report, (i.e. whether it is considered at a Board meeting or whether it is published following consideration at the People and Culture Committee). The national expectation is that the Trust Board would receive at least twice a year.

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