Title: ANNUAL WORKFORCE REPORT 2018/19 – UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST (UHB)

Responsible Director: Kevin Bolger, Chief Workforce and International Officer

Contact: Mike Jones, Director of Human Resources
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Purpose: To present an update to the Board

Confidentiality Level & Reason: N/A

Strategy Implementation Plan Ref:
#11 Optimise workforce supply to ensure sufficient staff and roles to meet patient demand
#12 Expand range of employment opportunities and support for new starters
#14 Develop our leaders at all levels of the Trust

Key Issues Summary:
Provides an update for the Board of Directors against the 5 main themes of the Workforce strategy:

Workforce Planning:
- Medical Workforce;
- Workforce Transformation;
- Workforce Operations;
- Workforce Governance.

Recommendations:
The Board of Directors is asked to:

1. Accept the 2018/19 Annual Workforce Report
2. Accept the workforce priorities for 2019/20
3. Approve the publication of the Annual Workforce Reports

Signed: Kevin Bolger  Date: 17 July 2019
1. Purpose

The Annual Workforce Report 2018/19 aims to provide the Board of Directors with a review of the progress made over the past 12 months in improving the workforce of UHBFT. The report also includes workforce statistics that meet the Trust’s statutory responsibilities under the Equality Act 2010 and are attached in Appendix 2 of the Trust’s detailed report.

2. Report Summary – UHBFT

The report outlines the 5 key themes [detailed below] underpinning workforce strategy and progress made in delivering against the themes.

2.1 Workforce Planning

Robust workforce planning took place to help support the future challenges facing the NHS. Also to assist in completing the NHS Improvement (NHSI) Annual Plan.

2.2 Medical Resourcing

The main challenge for medical workforce in 2018/19 continued to be the on-going national strategy for medical workforce and the response of the Trust to meet those challenges.

2.3 Workforce Transformation

The focus in 2018/19 was to ensure workforce implications of planned service expansions were appropriately implemented. There was continued support to address challenges of the current and future NHS which require new ways of working and innovative workforce strategies and practices to create a flexible workforce. This included a number of projects to restructure departments, review skill mix, shift patterns and extend working hours/weeks to meet changing demands in the provision of patient care.
2.4 **Workforce Operations**

There was a continued focus on achieving Key Performance Indicators (KPI) and working with department managers and Trade Union representatives to reduce the length of time taken to conclude disciplinary and grievance cases. Work continued to endeavour to drive sickness absence rates down. Bespoke training was delivered to managers across the Trust to ensure that managers have the necessary skills to support the workforce.

2.5 **Workforce Governance**

Robust workforce governance systems continued to be utilised and embedded in 2018/19 to ensure the Trust’s compliance with legislative requirements and best practice. The Trust published its diversity data under the Equality Act 2010 including the Gender Pay Gap. There were significant changes implemented to the national Agenda for Change terms and conditions.

2.6 **Conclusion**

The annual report illustrates a wide range of activities and significant progress in human resource management. There are some significant workforce issues that the Trust is facing currently in an uncertain and shifting political and economic climate. However, a number of work streams are on-going in order to mitigate risk to patients, staff or the Trust. There are also many opportunities that we can maximise, with the strong foundation of a stable workforce that is highly committed, well-motivated and fairly managed. For the coming year and beyond it is essential that standards are consistently applied across the entirety of the Trust.

3. **Priorities for 2019/20**

The overarching workforce priorities for 2019/20 focus on the following key areas:

3.1 **Workforce Strategy**

The Strategic Workforce Group has commenced the establishment of a Workforce Strategy. This will be developed with wide ranging engagement with key stakeholders, including, senior leaders and Trade Union colleagues. The Workforce Strategy will be based upon the Trust’s overall strategy ‘Building Healthier Lives’.
The main areas the strategy will cover are:

- Workforce Supply
- Training and Education
- Diversity and Inclusion
- Health and wellbeing
- Leadership

The Trust’s strategy will incorporate plans to resolve the major challenges resulting from the national shortage of clinical staff including nurses, doctors and healthcare scientists.

The Trust will ensure that this strategy is consistent with the NHS Interim People Plan which was issued by NHS Improvement/ England in June 2019.

There will also be a review of the role, functions and membership of the Strategic Workforce Group and working groups will be established in order to deliver the strategic aims in a coherent manner.

3.2 Workforce Data

The Trust is currently experiencing significant practical difficulties in providing the required workforce data to the new operating divisions. This is caused by the fact that the central repository for workforce data - ESR (Electronic Staff Record) is not yet integrated. There are therefore 2 separate systems running (one of QE and one for Heartlands, Good Hope and Solihull). This results in significant labour intensive additional work to provide unified data. The expectation is that a suite of data based on the new operating divisions will be produced by early in quarter 2.

The Trust is in discussion with IBM, the system provider of ESR regarding the merger of the two systems. However, the earliest the technical merger can take place is February 2020 (this is still to be confirmed by IBM).

In order to maximise the systems benefits an outline business case has been presented to the Strategic Workforce Group. This is aimed at having functionality such as high quality management reports and streamlined automated data processing which would remove a number of administrative steps that have to be undertaken currently.

3.3 Completion of Integration of Human Resources Department

Work on the integration of the various teams within the Human Resources department will continue in 2019/20 with the following teams:
3.3.1 Recruitment

There are currently a number of different teams providing recruitment services for the Trust, these include medical recruitment, non-medical recruitment, bank recruitment and international fellowships. Work has recently commenced to integrate these teams to provide a more coherent service.

In addition, the Trust is in the process of conducting an appraisal of technological solutions to improve recruitment processes, examining a number of products that are on the market to determine their suitability.

3.3.2 First Contact

The first stage of the roll-out of First Contact across the Trust commenced on, 1st May 2019. Work will continue on the integration of the teams and the establishment of a single First Contact team for the Trust.

3.3.3 Employee Relations

The Employee Relations teams will continue to integrate and provide cross site support for employee relations matters.

3.4 Sickness Absence

Continue improvements in attendance and the reduction in sickness absence, following the small reduction from 2017/18 – 2018/19. Ensure more robust reporting of reasons for sickness absence.

3.5 HR Policies and Procedures

In order to streamline the Trust’s HR policies and procedures, overarching policies (Employee Relations, Pay, Work Life Balance and Recruitment) are being developed with associated procedures. The policies and procedures are developed in partnership with the local trade unions. The Employee Relations policy has been approved and the 6 associated procedures have been consulted on and will be finalised in the second quarter.

3.6 Pensions and Taxation

The Trust and the NHS as a whole is encountering a number of issues as result of the impact of tax related to pensions and earnings. This has resulted in a number of senior clinicians choosing not to take up voluntary additional work. The Trust is currently working on a proposal aimed at reducing the impact of this. This is being developed by a group chaired by the Chief Workforce and International Officer and senior colleagues.

The Trust is also liaising with other Shelford Group Trusts and nationally with NHS Improvement/England and NHS Employers about the issues.
3.7 Development of working relationships with Trade Unions

Central to the smooth implemented of the Trust’s workforce agenda is the relationship with the trade unions. At Trust level there is an active and productive Joint Consultation Committee for non-medical staff matters and a Joint Local Negotiating Committee for medical workforce matters.

The Trust is working closely with its trade union colleagues to establish divisional committees across the new operational structure to provide a vehicle for dialogue and resolution of divisional matters.

3.8 Disclosure and Barring Service (DBS)

One of the 6 mandatory NHS pre-employment checking standards is the requirement to carry out a DBS check for certain occupations. This must be done at the point of recruitment and can also be done when a member of staff changes jobs and moves into a category of job where a DBS check is required.

At Heartlands, Solihull and Good Hope, staff are rechecked every three years. This is not a mandatory requirement. Discussions are being held regarding which of these approaches is necessary for the Trust. This will be concluded in quarter 2.

3.9 Allied Health Professionals (AHP) Turnover

Turnover of staff in the Allied Health Professionals staff group, and certain professions within the staff group (Physiotherapists, Occupational Therapists, Radiographers and Dietitians), has been identified as being above the Trust average. Work will be undertaken to identify whether there are any reasons for this and to reduce future turnover where possible.

3.10 Gender Pay Gap

An in-depth analysis of the Trust’s gender pay gap and bonus gender pay gap will be undertaken and actions put in place to narrow the gaps. As the snapshot date (31st March 2019) for the data for the 2020 report has already passed, improvements will not be apparent until future years.

3.11 Broadening Recruitment Poll to non-NHS Applicants

Work will be undertaken on job descriptions and person specifications to ensure that as wide a pool of individuals as possible can apply for Trust vacancies therefore preventing the exclusion of non-NHS applicants. For example removing references to NHS experience where this is not a job requirement.
3.12 Leadership Development

Following the success of the 5 leadership priorities progressed during 2018/19, the 2019/20 leadership development plan has been drafted following a strategy workshop with input from key stakeholders at the end of May. It reflects the learning from the year 1 work and the urgent needs associated with supporting the new operational divisions to lead in a large organisation. The plan will deliver a number of different leadership programmes for different groups of staff including Senior Operational leaders, Clinical service leads, team and ward leaders, aspiring group managers and aspiring Black and Ethnic Minority leaders. In addition feedback training, mentoring and talent management plans will also be rolled out.

4. Recommendations

The Board of Directors is asked to:

4.1 Accept the 2018/19 Workforce Report;
4.2 Accept the workforce priorities for 2019/20;
4.3 Approve the publication of the Annual Workforce Reports.