

Report Title	The 2020/21 Workforce Plan		
Sponsoring Executive	Raffaella Goodby, Director of People and OD		
Report Author	Frieza Mahmood, Deputy Director of People and OD		
Meeting	Trust Board (Public)	Date	5 th March 2020

1. Suggested discussion points *[two or three issues you consider the Trust Board should focus on]*

The Trust Board is previously cited on resourcing strategies being utilised to deliver fully staffed ambitions. The outcome is a significant reduction in vacancies, which have halved over 6 months. The residual vacancies remaining on 31st March 2020 are estimated to be 554.37 WTE.

Based on current recruitment plans and estimates our true vacancy level will be reduced further to approximately 350 WTE vacancies by 31st September 2020. The intense focus on recruitment and retention must be sustained to achieve this position.

202.24 WTE of the true vacancies were classified in February as hard to fill with alternative resourcing strategies now developed and detailed in the annex. If these strategies deliver as proposed by the clinical groups, our true vacancy level will be reduced to 147.76 WTE (2.1%) which is line with the expected threshold of 2 – 3% for 20/21. 2 posts do not have an alternative resourcing strategy presently.

The paybill for 20/21 cannot exceed £329m as previously noted. Detailed work is being undertaken to generate pay cost improvements in each clinical group, aligned with the agency spend plan. Corporate directorates have agreed CIP plans approved by the Chief Executive.

2. Alignment to 2020 Vision *[indicate with an 'X' which Plan this paper supports]*

Safety Plan	X	Public Health Plan		People Plan & Education Plan	X
Quality Plan	X	Research and Development		Estates Plan	
Financial Plan	X	Digital Plan		Other <i>[specify in the paper]</i>	

3. Previous consideration *[where has this paper been previously discussed?]*

Clinical Group Reviews. People and OD Delivery Committee

4. Recommendation(s)

The Trust Board is asked to:

- a. **DISCUSS** the proposed strategies
- b. **COMMENT** on the proposals that will offer the board assurance on safe staffing
- c. **NOTE** the considerable progress made on mitigations for 'hard to fill' posts since the last board meeting

5. Impact *[indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]*

Trust Risk Register	x	Risk 114			
Board Assurance Framework	x	BAF 12			
Equality Impact Assessment	Is this required?	Y		N	x If 'Y' date completed
Quality Impact Assessment	Is this required?	Y		N	x If 'Y' date completed

SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST

Report to the Public Trust Board – 5th March 2020

The 2020/21 Workforce Plan

1. Introduction

The Trust Board has received regular updates on progress regarding recruitment, vacancies, retention and hard to fill posts over the past 6 months, with a detailed 'baseline report' in October 2019. These updates, also discussed in the People and OD committee, have set out our progress against our ambition to be Fully Staffed.

The Trust Board has previously received detailed papers outlining our resourcing plans (October 19), retention management (January 20) proposals along with hard to fill posts and proposed mitigations (February 20).

The outcome of focused activities in this area has been a significant reduction in the number of vacancies, which have effectively halved over the last 6 months.

This has been achieved by a diverse range of recruitment approaches all designed to increase the number of external new starters to the Trust, and offset the impact of turnover, resulting in an overall increase the capacity and staffing levels of the workforce.

This paper brings together the outputs from efforts to improve staffing levels, deliver transformation and achieve efficiency challenges and deliver the 20/21 Workforce strategy.

The paybill for 20/21 cannot exceed £329m (as previously noted by the FIC and POD committees and board). Detailed work is being undertaken to generate cost improvements in pay in each of the clinical groups, the corporate groups have agreed CIP plans approved by the Chief Executive. Therefore vacancy levels are expected to be further reduced by 31st March 2020 to reflect this.

1.1 Vacancy Management Update

The outputs of our work have been to ensure that by the 31st March 2020 we will have filled 874.28 WTE posts of the 1100 vacancies which we started the financial year with. 723.41 WTE of these new starters will commence in post by 31st March 2020.

The residual vacancies which will remain on 31st March 2020 are estimated (taking into account current turnover levels and withdrawal rates) to be 554.37 WTE. This takes account of 50-60 leavers per month.

Based on current recruitment plans and estimates a further 316.73 WTE will have commenced by 1st July 2020 and 443.50 WTE by 1st October 2020.

This is intended to take our true vacancy level down to approximately 350 WTE vacancies by 31st September 2020.

202.24 WTE of the true vacancy posts were originally classified in February 2020 as being hard to fill with the breakdown of these by area below:

Clinical Group	Feb Board Hard to Fill (WTE) now with mitigation plans in place
Medicine and Emergency Care	46.55
Primary Care Community and Therapies	1.00
Women and Child Health	63.77
Imaging	13.41
Surgical Services	77.51
Corporate	0.00
Total	202.24

Since the February Board, there has been an alternative resourcing strategy put in place for the hard to fill roles which includes new roles being developed, a series of more innovative approaches to recruitment and additional developments intended to aid attraction and retention for each role by clinical group. These are detailed in **Annex 1** as previously advised.

If these alternative hard to fill strategies deliver to plan alongside maintaining the pace of our current recruitment activities, our true vacancy level will be reduced to 147.76 WTE (2.1%) which is line with the expected threshold of 2 – 3% for 20/21. However this will be dependent on maintaining a rolling programme of intense recruitment based on anticipatory turnover levels and the success of our retention plans in progress and developing as previously discussed at Trust Board. There can be no loss of focus, investment or energy in the recruitment and retention efforts of the last 6 months, or this position will not be achieved.

The execution of this will support the stability of our workforce, in particular our evolving approach to those staff approaching retirement age – an innovative ‘silver offer’ as popular and effective in other private and public sectors. The Trust will also need to sustain its successful centralised recruitment campaigns for Band 5 Qualified Nursing staff to including international recruitment campaigns in Australia or Dubai alongside the exploration of other overseas options. The band 5 nurse recruitment and retention remains a key issue for the Trust and will be a focus for our newly appointed deputy chief nurse and chief nurse.

Please see below a table summarising the recruitment new starter and retention improvement trajectory by month, to 1st October 2020. The board will remember that we aim to reduce our turnover to 10%, which puts us in the top quartile of NHS Trusts in the UK. This will involve focussing our efforts on the high turnover areas and celebrating and embracing the Midland Metropolitan University Hospital brand and attraction.

