

# Workforce Review Meeting

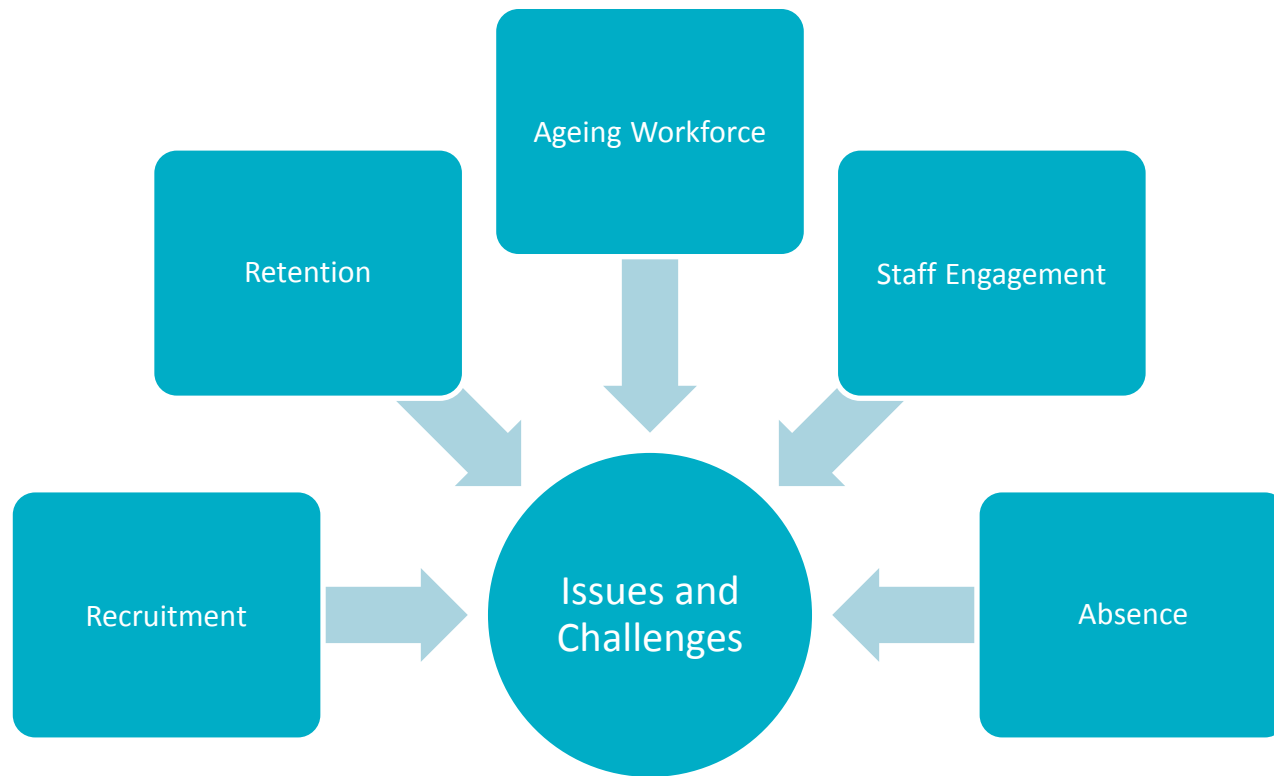
Trust Board  
30 November 2017



Proud To **Care**  
Make It **Happen**  
We Value **Respect**  
Together We **Achieve**

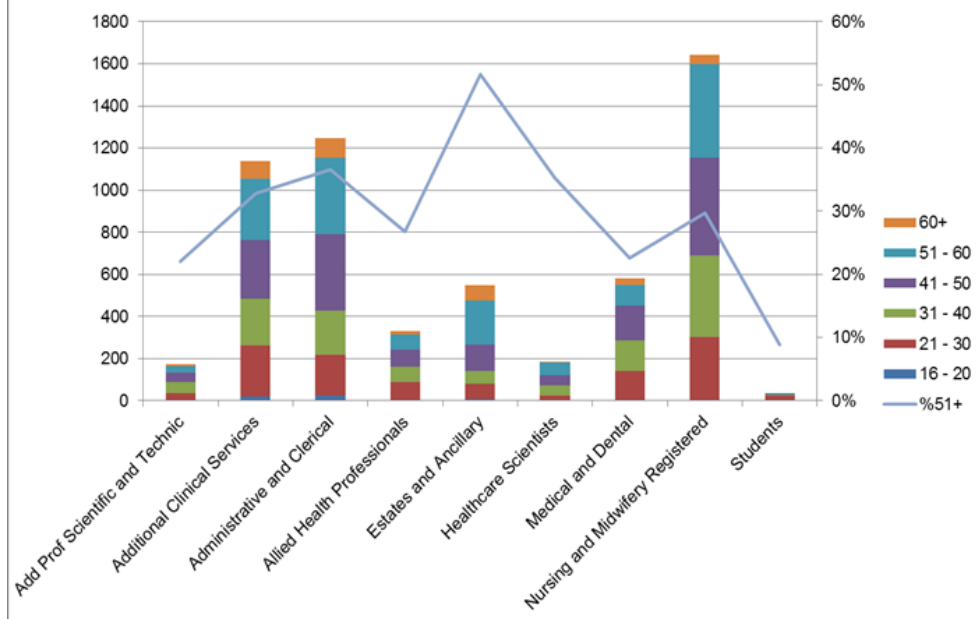
- Workforce Profile
- Impact on recruitment, retention and employment experience
- Workforce Transformation to date
- Recruitment
- Retention – OD Plan and People Strategy
- 5 year transformation plan

# Overview – Workforce challenge



# Age Profile

Trust Showing Age Profile % Staff 51+ by Staff Group  
October 2017



## Flexible Working

39% of the workforce is between the age of 21-40. A proportion of these staff may choose to access the shared parental leave entitlement. 57% of the workforce currently work part time hours. This is likely to increase in the future given the relatively high numbers within this age range.

## Ageing Workforce

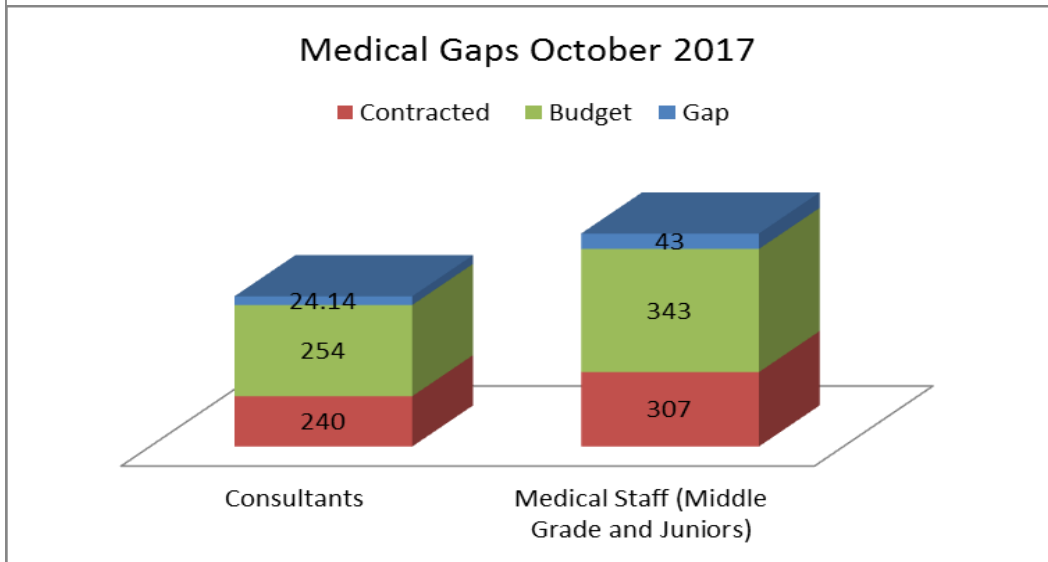
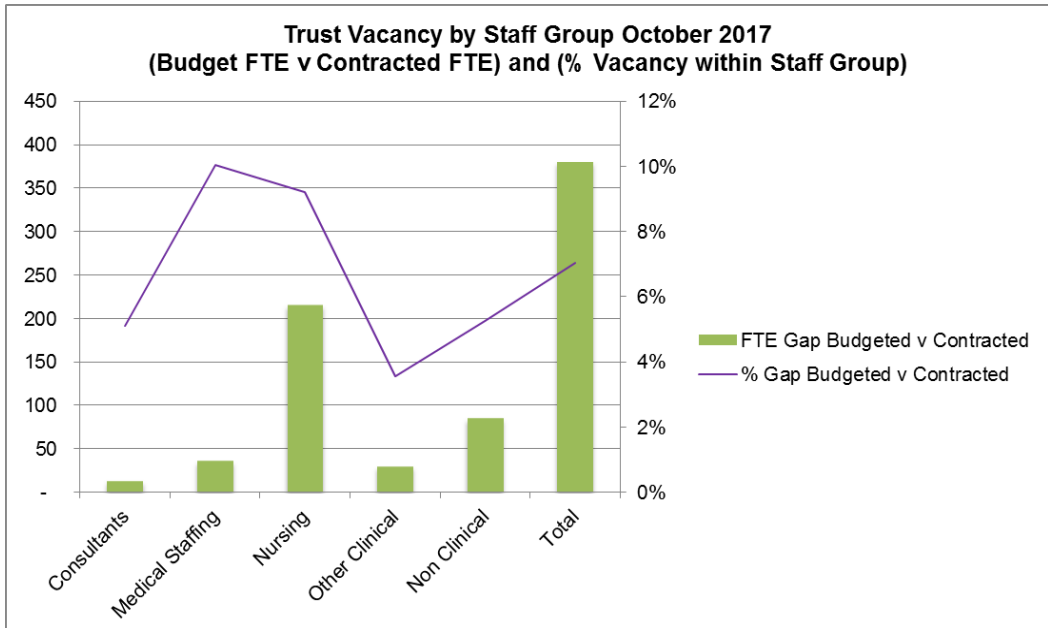
13% of Nursing and Midwifery Registered staff are over 55 years of age. This means that there are 184 WTE eligible to retire.

19% Consultants are over 55 years. Based on 50% it could equate to **23wte leaving over the next 5 years.**

14% AHP / Scientific / Technical staff are over 55 years. Based on 50% it could equate to **42wte leaving over the next 5 years.**

37% of staff within Estates and Ancillary are over 55. Based on 50% of this number retiring it could equate to **81 WTE leaving over the next 5 years.**

# Recruitment and Retention



## Recruitment and Retention

Over the past 12 months, our total WTE across the **Trust** has increased by **81.16 WTE**  
(731 Starters and 650 leavers)

Over the past 12 months, our total WTE of **Nursing and Midwifery Registered** staff has reduced by **-15.76 WTE**  
(103 Starters and 120 Leavers)

Over the past 12 months, our total WTE of **Consultants** has increased by **3.26WTE**  
(24 Starters and 21 Leavers)

Over the past 12 months, our total WTE of **AHP / Scientific / Technical** has reduced by **-2.85WTE**  
(53 Starters and 60 Leavers)

Over the past 12 months, our total WTE of **Estates and Ancillary** has reduced by **1.88WTE**  
(54 Starters and 53 Leavers)

# Workforce supply

**Nursing** - The number of nurses and Midwives on the Nursing and Midwifery Council's UK register of all practitioners, began declining in 2008 and continues to fall. Migration patterns have changed, the number of UK-trained nurses leaving to work in other countries now outnumbers those trained outside the United Kingdom seeking to work in the United Kingdom.

The current national workforce is ageing: 12.4 per cent of the nursing and midwifery workforce is aged 55 and over.

The number of training places in the allied health professions and pharmacy workforce has reduced in response to funding constraints – this may have an impact on the supply of staff in the next 20 years.

Demand for nursing and allied health professionals is expected to outstrip supply unless the number of training places is increased or recruitment outside the United Kingdom intensifies. – *SOURCE* Kings Fund.

## **Medical Staff**

**Tier 1 and Tier 2 Medical Staff** - Middle Grade and Junior Doctor recruitment risk varies based on Deanery supply, which is anticipated to reduce given the numbers of Doctors in training posts has fallen for the fifth year running, with just over 50% of doctors who completed the foundation programme going on to enter British specialist training (UK Foundation Programme Office, 2017).

**Radiologists** - There is a national shortage of Radiologists which is impacting on our workforce numbers. We have consistently had a gap of 2WTE Radiologists, This is filled using additional reporting sessions and locums. Moving forwards we are looking at joint recruitment with larger centres and the role development of Consultant Radiographers to support the medical workforce.

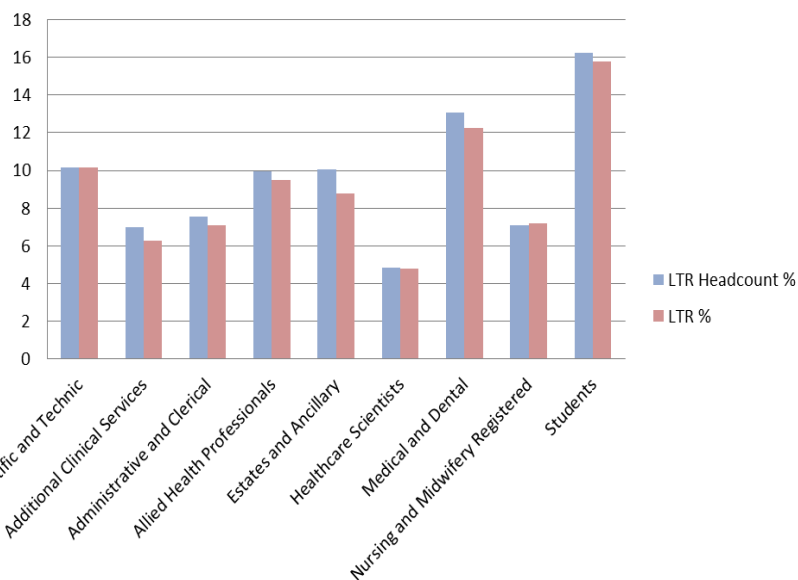
**Emergency Department Consultants** – There is a National shortage of ED Consultants. There are 5.0wte substantive Consultants in post, only 4 of whom cover the On Call rota. The College of Emergency Medicine (CEM) recommends that all A&E departments should have an establishment of at least 10 Emergency Medicine Consultants to provide up to 16 hours a day of consultant cover.

**Dermatology Consultants** - Nationally there is a shortage of Consultant Dermatologists.

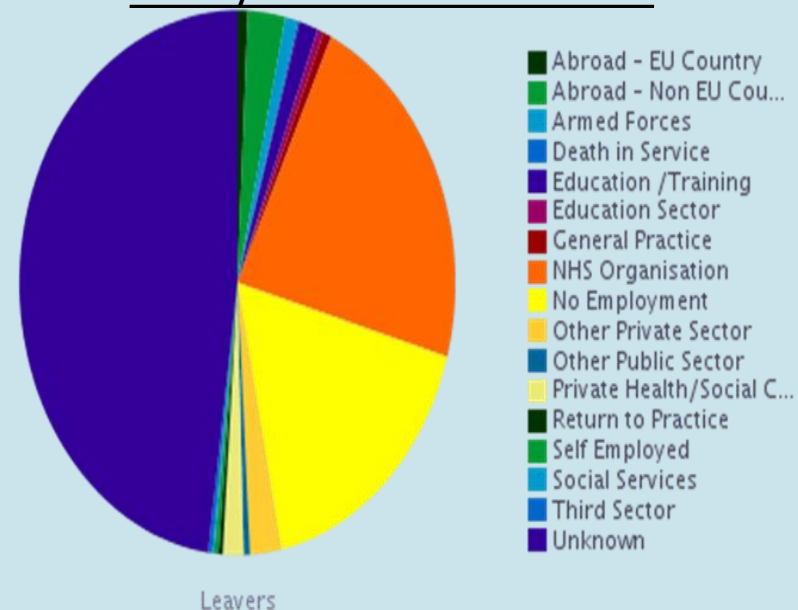
**Neurology** - SaTH has experienced long-standing capacity and workforce issues for several years, again similar to regional and national consultant workforce issues also in this specialty.

# Workforce Turnover

**Trust by Staff Group (HC and FTE) (Oct 16 - Sep 17)**  
(Excludes Junior Doctors)



## Ability to Retain Workforce



We lose 22.31% of employees to another NHS Trust

# Impact of Outlined Risks on Staff Engagement

The following comments have been taken from our 2016 Staff Survey and from the 2017 Job Evaluation Survey Tool provided by Junior Doctors.

More frontline staff/frontline staff with good experience and skills.

Workload has increased drastically, with minimal or no workforce increase. Staff members are frequently being taken to work in other areas, leaving even higher workloads for the staff left behind. Huge amounts of stress is being felt by staff members.

Multiple long term rota gaps stretching staff to limits. Often required to cover multiple doctor's workload.

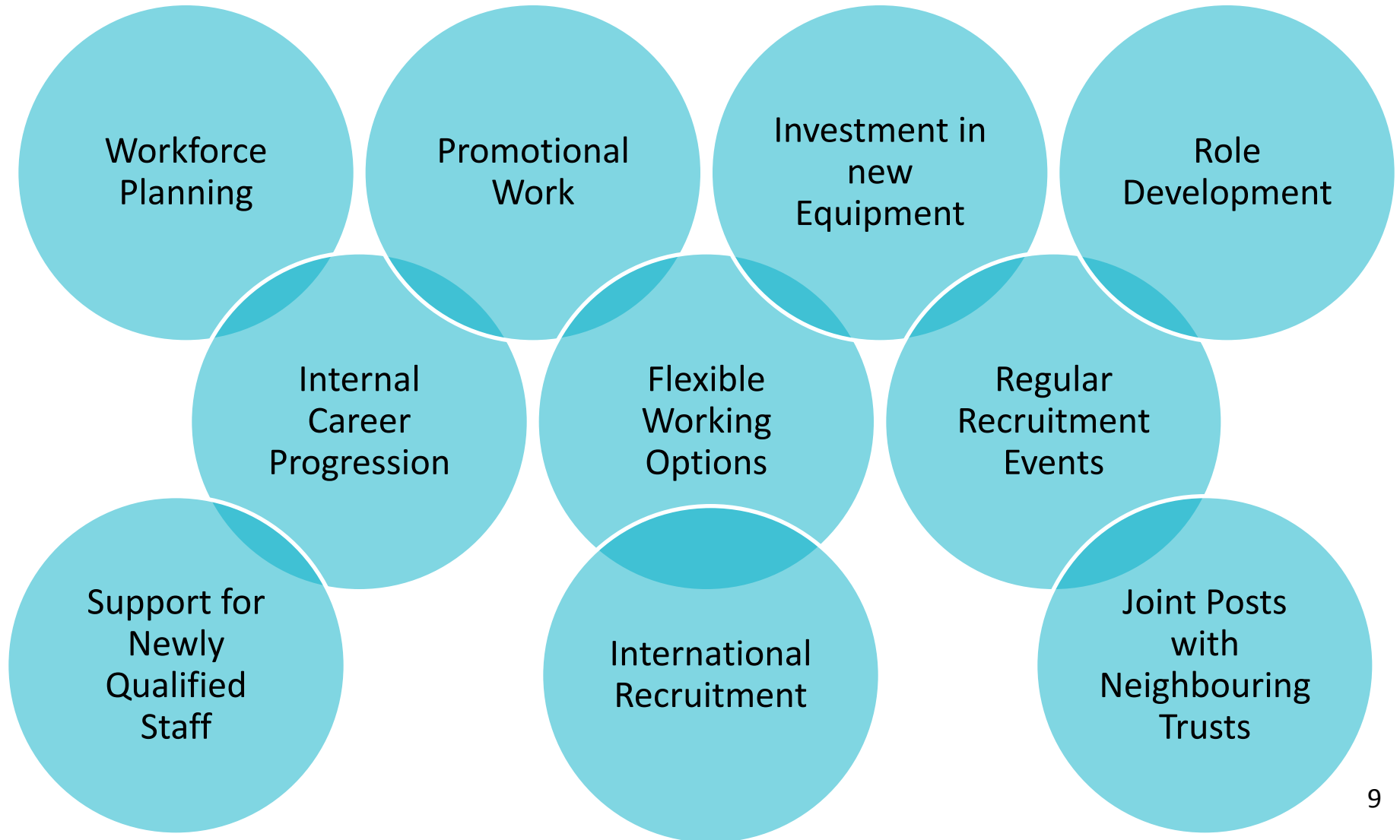
Great rotation but not enough junior doctors on the teams meaning staying late is more than common. Most often stressed by workload.

Challenging rotation as cross cover involved. One busier than the other, which can be unfair. But good learning opportunities.

Too much workload on weekends when cross covering ENT leaves patients waiting long time in A and E before assessment.



# Current Mitigation



# Workforce transformation to date

- Nurse Associate
- Physio at the Front door.
- ACP development – ED & Acute Med.
- Physician Associate.
- Clinical Practice Educator.
- GP support in Ambulatory Medicine.
- Reporting advanced practitioner in Radiology to support ED.
- Support roles in clinical support services.
- Apprentices across the organisation.

# Investment in recruitment - Belong to something....



amazing

Belong to something...

# Case Studies



The Shrewsbury and Telford Hospital NHS Trust

We have invested £28 million in the Women and Childrens Centre. We have a purpose built facility and we have invested in our staff. We are one of the only DGHs with 2 consultants for each of the main specialities.

Andrew Cowley  
Consulting Paediatrician

#shrewsburyhospitals



The Shrewsbury and Telford Hospital NHS Trust

The job is fast paced and you have to be extremely accurate, but that's one of the things I love about it.

Lyella Gleave-Evans  
Pharmacy Assistant Technical Officer

#shrewsburyhospitals



The Shrewsbury and Telford Hospital NHS Trust

After working in retail for many years I really like the structure in the NHS. My plan is to become a biomedical scientist and I can do that here.

Louise Gordon  
Pathology Technician

#shrewsburyhospitals



The Shrewsbury and Telford Hospital NHS Trust

I work in a great team which is well supported by the management.

Tracy Armit  
Domestic

#shrewsburyhospitals



The Shrewsbury and Telford Hospital NHS Trust

We see many more complex cases in the NHS than you would in the private sector.

Bobby Young  
Dental Technician

#shrewsburyhospitals



The Shrewsbury and Telford Hospital NHS Trust

It's busy but not mad. I get to spend time with my patients so the quality of care is high.

Kianor Shafiqi  
Consultant Paediatrician

#shrewsburyhospitals



The Shrewsbury and Telford Hospital NHS Trust

It's a rewarding job. I love the people I work with.

Andrew Williams  
Medical Records Clerk

#shrewsburyhospitals



The Shrewsbury and Telford Hospital NHS Trust

We have one of the largest Paediatric units in the UK and are able to offer comprehensive care for all cases.

Andrew Tapp  
Consultant Neonatologist and Speechologist

#shrewsburyhospitals



The Shrewsbury and Telford Hospital NHS Trust

I came into the NHS with very few qualifications, but thanks to the training I am now one of the most skilled people in my team.

David Ivie  
Facilities Engineer

#shrewsburyhospitals



# People Strategy

- To ensure our employment experience is great – recognising the close relationship with patient experience.
- To ensure our staff feel valued & recognised
- To deliver cultural change
- To achieve Employee Engagement
- Attract and retain talented people
- Make our values real
- Ensure delivery of our strategy – great people and leadership.



# Belong to something (OD Plan)



# Workforce Transformation – 5 Year Plan

What?	How Many?	Why?
<b>Advanced Clinical Practitioners</b>	51	<b>Advanced Clinical Practitioners</b> will be expanded within the care groups to address short falls in our medical workforce but also to assist in creating a long term sustainable workforce.
<b>Nurse Associates</b>	132	<b>Nurse Associates</b> will be introduced to address the short fall in band 5 registered nurses which also provides greater stability in creating a sustainable workforce. The trainees will be sourced predominately from our Health Care Assistant workforce and after training work across all 24 hours wards and Theatres and Ophthalmology. Scheduled Care is expecting to increase this workforce to 60 wte over the next 5 years.
<b>Assistant Scrub Practitioners</b>	10	<b>Assistant Scrub Practitioners</b> will be introduced to assist in addressing the current workforce gaps within our Theatres). Transition to the new role is underpinned by a 2 year course: Assistant Practitioner (Health) Higher Apprenticeship – Perioperative Care delivered in partnership with Staffordshire University. Scoping work underway to introduce this role to Maternity Theatres.
<b>Rehabilitation Health Care Practitioner</b>	15	<b>Rehabilitation Health Care Practitioner</b> This role will be developed which combines occupational health, physiotherapy with the current band 3 health care assistant role within ITU. This role will help create further efficiencies and ensure we meet the Allied Health Professional standards. These roles are planned for Y5.
<b>Consultant Radiographer</b>	2	Plain film reporting to support the shortage of Radiologists and improve general radiographer career progression
<b>Non Medical Prescriber</b>	5	New role within Pharmacy, Pharmacists will develop into this role as a part of the Hospital Pharmacy Transformation Plan.

# Why reconfiguration?

- From experience, Women and Children's and Surgery the centralisation of service along with a strong clinical view improves recruitment, this is an assumption in our planning.
- The workforce efficiencies from the reconfiguration support development and transformation at scale. Without this the Trust is unable to support the growth.
- Single site working makes rotas attractive; currently in a number of specialities on call is a one in four, new model moves to one in eight/ten.

**Our Workforce Plan as part of Future Fit addresses the fragility in our workforce**



# Summary

- Fragility in a number of specialties, one member of staff makes a difference.
- Clear People Strategy, OD Plan and Workforce Plans developed.
- Need for support to ensure transition into new clinical model.

# Thank you for your time

