



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Abertawe Bro Morgannwg
University Health Board



Meeting Date	Performance and Finance	Agenda Item	2b
Report Title	Medical Locum Caps		
Report Author	Sharon Vickery, Assistant Director of Workforce - Delivery Units and Medical Staffing		
Report Sponsor	Hazel Robinson, Director of Workforce and OD, Dr Richard Evans, Executive Medical Director, Lynne Hamilton, Director of Finance and Chris White, C.O.O.		
Presented by	Hazel Robinson, Director of Workforce and OD		
Freedom of Information	Open		
Purpose of the Report	This report is submitted to the Performance and Finance Committee to provide an update on the implementation of the Medical Locum Cap within ABMU. The detailed progress reports attached to this report in the appendices are provided to Welsh Government on a monthly basis.		
Key Issues	This report sets out progress, challenges and follow up actions required to improve implementation of the all Wales agency caps.		
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance
			✓
Recommendations	<p>Members are asked to:</p> <ul style="list-style-type: none"> • NOTE the content of the Welsh Government submission and give retrospective approval to the documentation • NOTE the progress and challenges outlined • NOTE the follow up actions. In particular:- <ul style="list-style-type: none"> a. An urgent conversation with the new Executive Medical Director and the Chief Operating Officer to review the level of scrutiny being deployed by the Delivery Units in applying the agency cap project given the continued deterioration in the agency data and the all Wales comparative data. b. A need to review why some areas have chosen not to pursue Medacs recruitment versus the cost of retaining long term locums. c. That the issue of increasing the relocation package for overseas recruitment from 1K to 5K will be considered by the Executive Team. 		

MEDICAL LOCUM CAPS

1. INTRODUCTION

This report is submitted to the Performance and Finance Committee to provide an update on the implementation of the Medical Locum Cap within ABMU. The detailed progress reports attached to this report in the appendices are provided to Welsh Government on a monthly basis.

Each month the Performance and Finance Committee receives and approves the information submitted to Welsh Government relating to organisational compliance of the medical locum cap. October data was submitted to Welsh Government on the 17th November 2018.

2. BACKGROUND

The medical locum cap introduced across all Health Boards in Wales in November 2017. Please note that the term agency doctor used is to denote external agency cover and ad hoc locum denotes internal doctors providing cover. Key areas of progress, performance and ongoing challenges are summarised below.

3. PROGRESS

3.1 Total Booked Hours - October

- A total of 16,413.90 hours were booked for agency and internal locum medical staff.
- The number of agency hours utilised dropped this month to 9,790.50. Extensions of existing bookings equate to 2,118 hours totalling £171,092.88 leaving the balance of 7,672.50 hours for new and ad hoc bookings equating to £501,222.

	Hours	% of Total	Cost
Agency			
Extensions	2,118.00		£171,092.88
New	7,672.50		£501,222.00
Total Agency	9,790.50	60%	
Total Locum	6,623.40	40%	£419,660.62
Totals	16,413.90	100%	£1,091,975.50

- It should be noted that not all the booked hours will be worked in October as some of the bookings will extend into the following month(s).

3.2 Agency – the progress for October 2018 is reported below.

Agency Assignments

- The percentage of agency doctors paid at or below the capped rates in terms of the number of assignments has worsened considerably and is set out as follows:-

Assignments % Compliance						
April 18	May 18	June 18	July 18	Aug18	Sept 18	Oct 18
56.2%	36.2%	28.6%	20.89%	20.25%	8.33%	6.15%

	No. of Assignments	No. of Hours	% of Assignments
Cap Breach	122	7,968.50	93.84%
Below/at cap	8	1,822.00	6.15%
Total	130	9,790.50	100%

Agency Hours

- The percentage of agency doctors paid at or below the capped rates based on hours has decreased considerably in October from 31% (September) to 18.60%.

Hours % Compliance						
April 18	May 18	June 18	July 18	Aug 18	Sept 18	Oct 18
41.5%	21%	33.2%	15.27%	26%	31.11%	18.60%

Total Hours Booked						
April 18	May 18	June 18	July 18	Aug 18	Sept 18	Oct 18
4,485	2,478	6,698	10,252	10,280	12,560	9,790.50

Reasons for Use

Grade	September Hours	September Booked Spend	October Hours	October Booked Spend	Variance On Prior Month Booked Hours	Variance On Prior Months Booked Spend
Consultant	2,584.50	£263,464	1,585.00	£160,148	-999.50	-£103,316
Specialty Doctor	1,012.50	£67,260	450.00	£28,161	-562.50	-£39,099
ST3+	2,294	£166,269	2,324.50	£178,568	+30.50	+£12,299
ST1/2	6,649.10	£354,279	5431.00	£305,409	-1,218.10	-£48,870

Consultant

- 78% of Consultant expenditure is linked to vacant posts within General Medicine, Obstetrics & Gynaecology, Paediatrics & Neonates, Trauma & Orthopaedic, Adult Psychiatry and Haematology. 22% of Consultant expenditure related to sick leave.
- £64,662 was attributed to new bookings and £75,206 to extensions.

Specialty Doctor

- 100% of Specialty Doctor costs are linked to vacant posts within Adult Psychiatry. These shifts are costing £28,161.

ST3+

- 64% of ST3+ expenditure is linked to vacant posts within Anaesthetics, Paediatrics & Neonates, General Medicine, Accident & Emergency, ENT, Obstetrics & Gynaecology, Old Age Psychiatry and Trauma & Orthopaedics of which £120,426 being attributed to new bookings and £48,375 extensions.
- 28% of ST3+ expenditure is linked to Deanery Gaps, which was spread across 3 doctors and 7 posts, 6 being in Accident & Emergency using 2 doctors, and 1 doctor covering Paediatrics, which equate to the value of £5,581 of new bookings, leaving £1,495 for extensions.
- 8% of ST3+ expenditure is linked to sickness within Accident & Emergency at Princess of Wales Hospital and Paediatrics Morriston Hospital.

ST1/2

- 58% of ST1/2 expenditure is linked to vacant posts, which is within Accident & Emergency, Adult Psychiatry, General Medicine, General Surgery, Paediatrics and Trauma & Orthopaedics of which £201,072 was attributed to new bookings and £39,768 being attributed to extensions.
- 31% of ST1/2 expenditure is linked to Deanery gaps in rota of which £51,786 was attributed to new bookings and £3,621 being attributed to extensions within A&E, Adult Psych & General Surgery.
- 6% of ST1/2 expenditure is linked to sickness of which £9,183 is attributed to new bookings within Accident & Emergency, General Surgery and Orthopaedics and Trauma.

An analysis of the financial range of breaches by grade is included below:-

Grade	% paid at cap or below	% paid £1p - £5 above cap	% paid £5.01 - £10 above cap	% paid £10.01 - £15 above cap	% paid £15.01 - £20 above cap	% paid £20+ above cap
Consultant	4.07%	61.32%	2.56%	27.13%	4.9%	0%
SAS Dr.	100%	N/A	N/A	N/A	N/A	N/A
ST3+	0%	8.04%	15.98%	0%	2.15%	73.82%
ST1/2	4.07%	31.53%	10.9%	21.88%	25.7%	0%

This may suggest that the HB is missing the opportunity to negotiate effectively to bring some grades within the capped rate or to reduce cost.

All Wales Comparative Agency Data

The table below sets out compliance with the cap, together with the total hours booked in September by individual Health Boards. The Committee will note that this Health Board has performed poorly compared to other organisations with the possible exception of Cwm Taf.

Health Board	Total nos. of hours booked October 18	Percentage compliance with cap or below cap
ABM	9,790.50	18.60%
C/V	7,338.07	48.59%
Hywel Dda	2,688.00	40.08%
Cwm Taf	6,223.00	19.01%

3.3 Internal ad hoc locums

Assignments

The percentage of the internal ad hoc locums paid at or below the cap by assignment improved this month and is outlined below:-

Assignments % Compliance						
April 18	May 18	June 18	July 18	Aug 18	Sept 18	Oct 18
81%	73.1%	70%	67%	69%	68%	79%

- The percentage of doctors paid at or below the capped rates based on hours in October stands at 86%, which again is an improvement on last month.

Hours % Compliance						
April 18	May 18	June 18	July 18	Aug 18	Sept 18	Oct 18
86%	83%	78%	73.2%	78%	75%	86%

- The total number of hours booked for internal ad hoc locum cover in October rose slightly from 6,113.65 to 6,623.40.

3.4 Agency and Locum Expenditure

- The Health Board has set a target agency/locum monthly spend as outlined in the table below. Actual monthly expenditure is as follows:-

April 18	May 18	June 18	July 18	Aug 18	Sept 18	Oct 18
Target Spend						
£1,245K	£1,245K	£1,245K	£1,254K	£1,254K	£1,254K	£1,254K
Actual Spend						
£1,079K	£1,224K	£1,678K	£1,664K	£1,585K	£1,633K	£1,695K

- This is the fifth consecutive month where expenditure is reported at above target levels and this month the highest level of expenditure has been recorded.
- It should be noted however that fully aligning shifts booked, worked and paid is complex. On occasions claims are submitted late, which impacts on the monthly spend profile.
- Based on expenditure reported through the ledger all Delivery Units overspent in October.

Unit	Expenditure Target	Financial Target	Financial Spend
Morrison		418K	539K
POW		324K	519K
Singleton		262K	315K
Neath		61K	104K
MH/LD		160K	164K

Challenges and Actions

- Work continues with the Delivery Units to improve confidence and compliance with the system. This is improving month on month but requires significant manual intervention which in the long-term this is not a sustainable process.
- The Allocate product “Locum on Duty” which will provide the software to electronically facilitate shift booking, which in turn will support improved utilisation reporting and the establishment of an internal medical bank facility. An ‘invest to save’ bid has been submitted to Welsh Government and there has been early indication from Welsh Government that the bid has been successful.
- This system will also support more accurate cost reporting. At present they rely on the accuracy and completeness of the returns from the Delivery Units. The system will also eradicate doctors submitting ADH forms late as this will be automated by the system and paid as the work is done.
- Work continues with Medacs to replace the longest serving agency locums with permanent staff. Medacs are currently reviewing suitable CV’s and will forward to the Medical HR Department once available. Further details are attached in Appendix 3.
- Appendix 3 suggests that we are waiting for other CVs from Medacs for certain posts, that some DUs wish to pursue TRAC recruitment before considering the Medacs CVs and some have decided not to pursue Medacs recruitment. It is suggested that the rationale for not proceeding with Medacs is explored due to the cost of retaining the long term locums before final decisions are taken on how to proceed.
- At the last meeting the Performance and Finance Committee requested a list of all medical vacancies in the HB. Attached as Appendix 4 is a list of all vacancies being addressed by the Medical Workforce Team. Please note this may not be an exhaustive list as some DUs may have held posts for different reasons.
- Kendall Bluck has been contracted to work in the Emergency Department at Morrison and to undertake a review of junior doctor rotas, across the Health Board and work will be commencing shortly and a meeting was held on the 8th November 2018 to discuss further.

- Ongoing recruitment plans are summarised below. These will form the basis of the HB's recruitment and retention strategy for the medical workforce;-
 - Participating in the All Wales BAPIO Campaign in November 2018. So far the Health Board have identified thirty nine posts. The specialties included in the initiative are T&O, Surgery, Medicine, Emergency Medicine, Mental Health, Paediatrics, Ophthalmology and Anaesthetics. For this round, BAPIO are informing candidates to sit either the IELTS or OET language tests as soon as they apply and it is hoped this will help to reduce the time from recruitment to commencing employment.
 - A number of the BAPIO posts are at a junior clinical fellow level and the Royal College will only sponsor senior clinical fellows at ST4 and above. It has been decided the doctors will be assessed at interview on their level of experience and those at the junior level will be asked if they wish to take up the offer of employment under a Tier 2 visa following the changes to visa restrictions by the Home Office.
 - A proposal is being developed to undertake a second BAPIO Campaign each year either in conjunction with other organisations or stand alone as a Health Board.
 - Enhance the induction/cultural induction to Wales and the Health Board for overseas doctors. This is already in place, but may benefit from a refresh. This measure will make it easier to recruit and retain doctors and will enhance the Health Board's reputation for future recruitment campaigns.
 - Consider an increase to the relocation package for overseas doctors from £1,000 to £5,000. A paper is being prepared for Executive Team to discuss this.
 - Develop innovative rotations between different specialities, which may be of interest to doctors.
 - Develop exchange programmes with different countries.
 - Participate in recruitment fairs and events.
 - Optimise our relationship with the BMJ to enhance our position in the market.
 - Develop innovative solutions such as the SAS development programme they have utilised in a number of English Trusts to support the SAS doctors through the CESR route to become consultants. This has worked very well in ED and they now have a considerable number who can now be appointed at consultant level

- Develop strategies to attract local candidates through “grow you own”. This will involve proactive work with Schools, Colleges and Universities.
- Review consultant recruitment strategies.
- It is suggested that there is the need for an urgent conversation with the new Executive Medical Director and the Chief Operating Officer to review the level of scrutiny being deployed by the Delivery Units in applying the agency cap given the deterioration in the agency data and the all Wales comparative data.

4. WELSH GOVERNMENT SUBMISSION

Please refer to the following Appendices for details of the October 2018 submission:-

Appendix 1: October WG Report

Appendix 2: October Finance Assessment

Appendix 3: Updated Spreadsheet: Medacs Longest Serving Locums

Appendix 4: List of Medical Vacancies.

Appendix 5: October Internal doctors earning £120 or more per hour

5. GOVERNANCE AND RISK ISSUES

The main risk with this work relates to the overall challenging recruitment market and the overall supply of doctors. These factors are covered in section 2.

FINANCIAL IMPLICATIONS

The financial details are set out in section 2 and in Appendix 2.

6. RECOMMENDATION

Members are asked to:

- **NOTE** the content of the Welsh Government submission and give retrospective approval to the documentation
- **NOTE** the progress and challenges outlined
- **NOTE** the follow up actions. In particular:-
 - a. An urgent conversation with the new Executive Medical Director and the Chief Operating Officer to review the level of scrutiny being deployed by the Delivery Units in applying the agency cap project

given the continued deterioration in the agency data and the all Wales comparative data.

- b. A need to review why some areas have chosen not to pursue Medacs recruitment versus the cost of retaining long term locums.
- c. That the issue of increasing the relocation package for overseas recruitment from 1K to 5K will be considered by the Executive Team.

Governance and Assurance										
Link to corporate objectives (please ✓)	Promoting and enabling healthier communities		Delivering excellent patient outcomes, experience and access		Demonstrating value and sustainability		Securing a fully engaged skilled workforce		Embedding effective governance and partnerships	
					✓		✓			
Link to Health and Care Standards (please ✓)	Staying Healthy	Safe Care	Effective Care		Dignified Care	Timely Care	Individual Care	Staff and Resources		
			✓					✓		
Quality, Safety and Patient Experience										
Whilst there are significant recruitment difficulties the supply of locum doctors is vital to safe patient care.										
Financial Implications										
Securing these doctors at appropriate rates is also key to the recovery and sustainability of the Health Board										
Legal Implications (including equality and diversity assessment)										
Not applicable.										
Staffing Implications										
None other than the need to improve the supply of the medical workforce										
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)										
Not applicable										
Report History		A similar report is presented to the Committee monthly to scrutinise the WG submission which is submitted in line with their timetable.								
Appendices		Appendix 1: October WG Report Appendix 2: October Finance Assessment Appendix 3: October Updated Spreadsheet : Medacs Longest Serving Locums Appendix 4: October List of Medical Vacancies Appendix 5: October Internal doctors earning £120 or more per hour								