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Bwrdd Iechyd Prifysgol
Abertawe Bro Morgannwg
University Health Board



Meeting Date	Workforce & OD	Agenda Item	5c
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 Workforce & OD 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 which includes:- • AGREE the frequency of reporting to the Workforce & OD Committee given the changes to the frequency of Welsh Government reporting from monthly to quarterly reporting. 		

MEDICAL LOCUM CAPS

1. INTRODUCTION

This report is submitted to the Workforce & OD 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 Workforce & OD Committee receives and approves the information submitted to Welsh Government relating to organisational compliance of the medical locum cap. December data was submitted to Welsh Government on the 17th January 2019.

2. BACKGROUND

The medical locum cap was 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 – December

- A total of 18,723.96 hours were booked for agency and internal locum medical staff.
- The number of agency hours utilised increased this month to 10,885.50. Extensions of existing bookings equate to 7,342.50 hours totalling £520,571.38 leaving the balance of 3,543.50 hours for new and ad hoc bookings costing £218,761.49.
- A contributing factor to the current level of usage is additional capacity that has been sourced to support winter pressures.

	Hours	% of Total	Cost
Agency			
Extensions	7,342.50		£520,571.38
New	3,543.50		£218,761.49
Total Agency	10,885.50	58%	£739,332.87
Total Locum	7,838.46	42%	£497,106.63
Totals	18,723.96	100%	£1,236,539.50

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

3.2 Agency – the progress for December 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 decreased slightly from November and is set out as follows:-

Assignments % Compliance									
April 18	May 18	June 18	July 18	Aug18	Sept 18	Oct 18	Nov 18	Dec 18	
56.2%	36.2%	28.6%	20.89%	20.25%	8.33%	6.15%	8.33%	7.89%	

	No. of Assignments	No. of Hours	% of Assignments
Cap Breach	57	10,516	96.6%
Below/at cap	4	370	3.39%
Total	61	10,885	100%

Agency Hours

- The percentage of agency doctors paid at or below the capped rates based on hours has decreased markedly in December from 13.49% in November to 3.39%.

Hours % Compliance									
April 18	May 18	June 18	July 18	Aug 18	Sept 18	Oct 18	Nov 18	Dec 18	
41.5%	21%	33.2%	15.27%	26%	31.11%	18.60%	13.49%	3.39%	

Total Hours Booked									
April 18	May 18	June 18	July 18	Aug 18	Sept 18	Oct 18	Nov 18	Dec 18	
4,485	2,478	6,698	10,252	10,280	12,560	9,790.50	10,579	10,885	

Usage by Grade

Grade	November Hours	November Booked Spend	December Hours	December Booked Spend
Consultant	5,357.50	£535,589	1,322.00	£131,156
Specialty Doctor	0.00	£0.00	187.50	£112,456
ST3+	2,649.50	£201,547	2,901.00	£220,157
ST1/2	2,572.50	£147,867	6,475.00	£375,485

Consultant hours have dropped this month, given that so many extensions were booked in November. The ST1/2 hours have increased markedly. 4,025 hours are due to extensions with two full time locums booked for 900 hours each in ENT and General Medicine. Please note that not all hours booked in December will be worked in month.

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	25.52%	48.60%	0.06%	13.64%	0%	11.65%
SAS Dr.	100%	0%	0%	0%	0%	0%
ST3+	0%	24.91%	2.23%	0%	11.32%	61.54%
ST1/2	2.37%	4.86%	15.55%	59.53%	5.05%	12.63%

This may suggest that the Health Board is missing the opportunity to negotiate effectively to bring some grades within the capped rate or to reduce cost. The Executive Medical Director and Chief Operating Officer have written jointly to the Service Directors and Unit Medical Directors asking them to take greater efforts with negotiating rates. This piece of work will feature as part of the medical workforce workstream aimed at refreshing the agency cap implementation.

The HB has a new Medacs Client Relationship Manager. She is proving proactive in challenging the DUs to drive rates down. Recently she negotiated for two agency cap doctors to be engaged who are compliant with the capped rates. She joined the HB in January and so it is hoped this will have a positive effect on the rates being paid.

3.3 Internal ad hoc locums

Assignments

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

Assignments % Compliance								
April 18	May 18	June 18	July 18	Aug 18	Sept 18	Oct 18	Nov 18	Dec 18
81%	73.1%	70%	67%	69%	68%	79%	77%	75%

- The percentage of doctors paid at or below the capped rates based on hours in December stands at 80%, which the same as last month.

Hours % Compliance								
April 18	May 18	June 18	July 18	Aug 18	Sept 18	Oct 18	Nov 18	Dec 18
86%	83%	78%	73.2%	78%	75%	86%	80%	80%

- The total number of hours booked for internal ad hoc locum cover in December increased from 5,842.52 to 7,838.46.

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 £	June £	July £	Aug £	Sept £	Oct £	Nov £	Dec £
Target Spend								
1,245K	1,245K	1,245K	1,254K	1,254K	1,254K	1,254K	1,254K	1,245K
Actual Spend								
1,079K	1,224K	1,678K	1,664K	1,585K	1,633K	1,695K	1,806K	1,680K

- The expenditure for December 2018 decreased by 7% to £1.6m.
- 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, apart from Neath and Port Talbot overspent in December.

Unit	Expenditure Target	Financial Target	Financial Spend
Morrison		418K	611K
POW		324K	515K
Singleton		262K	301K
MH/LD		160K	199K
Neath		61K	32K

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” 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.
- This system will also support more accurate cost reporting. At present the Health Board has to 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. An Invest to Save bid was submitted to Welsh Government and this has been successful.

- The project has commenced and project staff were recruited in December. These staff will commence by February 2019 and the roll out of the system will commence.
- The Workforce & OD Committee should note that the Recovery and Sustainability Board established a Medical Workforce work stream. The rollout of Locum on Duty, replacing the Medacs longest serving locums and the development and implementation of a medical recruitment and retention strategy all form part of the work stream. This will now be mapped across to the new Programme: High Value Opportunities for 2019/20.
- Work continues with Medacs to replace the longest serving agency locums with permanent staff. The most up to date details are attached in Appendix 3. Once again this appendix suggests that some DUs wish to pursue TRAC recruitment before considering the Medacs CVs and some have decided not to pursue Medacs recruitment at all.
- Following discussion with the Executive Medical Director (EMD) and Chief Operating Officer they have written jointly to the Service Directors and Unit Medical Directors (UMDs) asking them to engage with Medacs where TRAC recruitment is yielding little or no results. The letter has also asked for written assurances from the DUs around the scrutiny processes they operate to approve all rates over the cap. Such requests should be approved by the UMDS before final sign off by the EMD. Responses to this work will be reported to the next WOD Committee.
- Kendall Bluck (KB) has been contracted to work in the Emergency Departments (ED) at Morriston and Neath and to undertake a review of junior doctor rotas, across the Health Board. The Health Board has provided KB with a range of information and given them access to the system holding all the junior doctor rotas managed by the Medical Workforce team. They are currently carrying out an offsite analysis of the information. Site visits for KB to speak to medical and general managers have been scheduled for January 2019. Their initial reports will be available for the Health Board to consider on the 27th February 2019
- The Workforce & OD Committee is considering a separate paper this month setting out the work to be undertaken to develop a recruitment and retention strategy for the medical workforce. This paper therefore should be read in conjunction with the draft recruitment and retention strategy.
- The Workforce & OD Committee should note that the HB is exploring the concept of a neutral vend arrangement when the Medacs contract expires in August 19. This arrangement has the potential to drive more competition, lower costs and greater fill rates. At present the company utilized by Cwm Taf is meeting all HBs to present the benefits of such a relationship.

Reporting

- The Workforce & OD Committee should note that Welsh Government have recently moved to quarterly reporting and in fact on the 17th January information will be submitted for the months of October, November and December. October and November data has not been attached to this report as this has already been considered by the Performance and Finance Committee. There needs to be

agreement if reporting to the Workforce and OD Committee is undertaken monthly or move to quarterly reporting in line with Welsh Government requirements.

4. WELSH GOVERNMENT SUBMISSION

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

Appendix 1: December WG Report

Appendix 2: December Finance Assessment

Appendix 3: Updated Spreadsheet: Medacs Longest Serving Locums

Appendix 4: December 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:-
- **AGREE** the frequency of reporting to the Workforce & OD Committee given the changes to Welsh Government reporting.

Governance and Assurance							
Link to corporate objectives <i>(please ✓)</i>	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 <i>(please ✓)</i>	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	This report was previously reported monthly to the Performance and Finance Committee and therefore this is the first report for the Workforce and OD Committee to scrutinise the Welsh Government submission in line with their timetable.						
Appendices	Appendix 1: December WG Report Appendix 2: December Finance Assessment Appendix 3: December Updated Spreadsheet : Medacs Longest Serving Locums Appendix 4: December Internal doctors earning £120 or more per hour						

Addressing the impact of NHS Wales Medical and Dental Agency and Locum deployment in Wales – WHC/2017/042

PROGRESS REPORT to reflect the activity during the period of

1st December to 31st December 2018

1.0 Introduction

Welsh Government (WG) issued a Welsh Health Circular WHC/2017/042 on 23rd October 2017 “Addressing the impact of NHS Wales Medical and Dental Agency and Locum deployment in Wales”.

The Circular required Health Boards to nominate an Executive Director lead to prepare monthly progress reports for Board level scrutiny, which are subsequently forwarded to WG for information. Abertawe Bro Morgannwg University Health Board (the Health Board) nominated the Executive Medical Director as their Executive lead.

This report reflects the September 2018 data following implementation of the capped rates.

The Circular required Health Boards to report on the progress of the implementation plan for capped rates, and specifically required information on the following:

1. An assessment of the effectiveness of the control framework and information about whether any changes have been made as a result of lessons learned during operation;
2. An updated risk assessment incorporating lessons learned from any practical issues which have arisen during implementation, and the ways the risks will be mitigated or managed;
3. A comparison of the actual savings compared to the projected savings and an assessment of the confidence in the accuracy of the data;
4. An anonymised list of the number of agency workers paid (later confirmed by WG to be ‘booked’) above the capped rates, including details of the number of hours/sessions they have delivered and their specialty;
5. An anonymised summary which sets out the expenditure made to each of the ten highest paid (i.e. those paid the highest hourly rate) agency workers including details of the hours/shifts worked, their specialty and length of current assignment with the organisation;
6. An anonymised summary of the longest serving agency workers i.e. those working for the longest consecutive period, including their specialty, details of the hours/shifts worked and length of assignment;
7. An anonymised summary of the number of exceptions that have been authorised for Internal Ad Hoc Locum Cover in excess of the agreed cap including the number of hours/sessions they have delivered and their specialty;
8. An anonymised summary which sets out the expenditure made to each of the ten highest paid ad hoc locum workers including details of the hours/shifts worked;
9. An anonymised summary of any individual paid more than £120 per hour or more including their specialty, details of hours/shifts worked, whether they are providing

Internal Ad Hoc Locum Cover or supplied by and Agency and length of assignment for agency staff.

The Health Board (HB) is confident that the data presented for agency workers by Medacs Healthcare is accurate. There was not the same confidence in the internal ad hoc locum data as the process and systems used were bedding in. The data however has continued to improve in terms of completeness, accuracy and quality giving us now a reasonable level of confidence in its accuracy. The Health Board continues to review processes and systems and where necessary make changes to work towards 100% accurate recording of ad hoc locum data.

2.0 An assessment of the effectiveness of the control framework and information about whether any changes have been made as a result of lessons learned during operation.

The Units within the HB are holding weekly local scrutiny panels to consider shifts that breach before escalation to the appropriate Executive Director. There is evidence that the work of these panels is maturing.

A further scrutiny panel is held monthly which is attended by the Executive Directors. At these scrutiny panels, the Executive Directors scrutinise the decisions taken by the Delivery Units to encourage greater challenge or to ratify their work and discuss how to improve compliance with the process.

3.0 An updated risk assessment incorporating lessons learned from any practical issues, which have arisen during implementation and the ways the risks will be mitigated or managed

Nature of risk	Description	Mitigating actions
Recording of the Internal Ad Hoc Locum shifts	Further data is required for accurate data.	Updated information recorded and one to one training arranged for front line staff
Breaches of Internal Ad Hoc Locum Price Caps	Some departments have high vacancies and have breached capped rates to secure locums Alternative is paying Consultants to be resident which has a much higher cost	Breaches scrutinised by each unit prior to Executive scrutiny panel. Review of recruitment options
Exclusion of GPs in the WHC	GP's approached to cover secondary locum shifts have declined as they can earn more as a locum GP.	May be beneficial to introduce a capped rate for GP's although it is accepted however that GP OOHs is

		very fragile at present. This requires WG approval.
Mixed Grades on Rotas	Currently grade of vacancy is paid to ad hoc locums. This is proving difficult as higher grade doctors not content to receive a lower grade locum rate when sharing rotas	Consider if the rate for the grade of the vacancy is paid however, no doctor should receive less than the rate for their grade. This requires WG approval.
SAS sharing rotas with trainees	This is the same point as above however this mix of grades seems to prove more contentious as trainees consider that all on a Middle Grade rota should be paid the same rate	If the proposal above is implemented it should be monitored to establish if this also address issues for Middle Grade rotas

4.0 A comparison of the actual savings compared to the projected savings and an assessment of the confidence in the accuracy of the data

Please refer to Appendix 1 attached.

5.0 An anonymised list of the number of agency workers paid above the capped rates, including details of the number of hours/sessions they have delivered and their speciality

5.1 Agency Workers who had assignments confirmed and rates agreed prior to 13.11.17 who are above the cap (please note that many of these will now have left, transferred to NHS, reduced to cap etc as in the set out in the Table above).

Number (from highest to lowest paid)	Hours Worked (01.12.18 to 31.12.18)	Specialty	% variance to price cap
1	150	Obstetrics & Gynaecology	+39.14%
2	150	Paediatrics & Neonates	+29.13%
3	150	Haematology	-13.90%
4	150	Rehabilitation	0%
5	150	Orthopaedics & Trauma	0%
6	150	Oncology	+21.22%
7	150	Adult Psychiatry	-17.24%
8	150	Adult Psychiatry	0%

5.2 Agency Workers who had assignments confirmed during December 2018 and (rates agreed after the 13.11.17) who are above the cap

Number (from highest to lowest paid)	Hours Booked (01.12.18 to 31.12.18)	Specialty	% variance to price cap
1	1,105.00	General Medicine	38.66%
2	1,050.00	Ear Nose & Throat	26.22%
3	1,040.00	Paediatrics & Neonates	41.40%
4	980.00	Ear Nose & Throat	23.27%
5	900.00	Obstetrics & Gynaecology	35.73%
6	900.00	General Medicine	13.79%
7	525.00	Adult Psychiatry	9.67%
8	520.00	Obstetrics & Gynaecology	39.12%
9	520.00	General Medicine	26.22%
10	450.00	Adult Psychiatry	0.01%
11	300.00	Adult Psychiatry	0.01%
12	300.00	Old Age Psychiatry	0.01%
13	220.00	Orthopaedics & Trauma	20.19%
14	180.00	Obstetrics & Gynaecology	19.29%
15	160.00	Paediatrics & Neonates	41.40%
16	160.00	Orthopaedics & Trauma	0.00%
17	160.00	Orthopaedics & Trauma	0.00%
18	150.00	Paediatrics & Neonates	49.56%
19	150.00	Obstetrics & Gynaecology	35.73%
20	80.00	Obstetrics & Gynaecology	3.58%
21	77.00	Accident & Emergency	23.27%
22	40.00	General Medicine	38.14%
23	37.50	Orthopaedics & Trauma	26.22%
24	36.00	Obstetrics & Gynaecology	19.29%
25	36.00	Anaesthetics	91.43%
26	36.00	Orthopaedics & Trauma	26.22%
27	24.00	Anaesthetics	145.88%

28	24.00	General Medicine	1.72%
29	24.00	General Surgery	38.66%
30	24.00	Orthopaedics & Trauma	26.22%
31	22.00	Anaesthetics	91.43%
32	22.00	Accident & Emergency	39.57%
33	20.00	Accident & Emergency	23.27%
34	20.00	Accident & Emergency	10.84%
35	18.00	Accident & Emergency	12.58%
36	16.00	Anaesthetics	91.43%
37	12.00	General Medicine	56.08%
38	12.00	Adult Psychiatry	44.14%
39	12.00	General Surgery	38.68%
40	12.00	Accident & Emergency	23.27%
41	12.00	Adult Psychiatry	23.27%
42	11.50	General Surgery	38.68%
43	10.00	Accident & Emergency	23.27%
44	10.00	Accident & Emergency	23.27%
45	10.00	Accident & Emergency	10.84%
46	9.00	Accident & Emergency	48.16%
47	9.00	Accident & Emergency	48.16%
48	9.00	Accident & Emergency	48.16%
49	9.00	Accident & Emergency	48.16%
50	9.00	Accident & Emergency	23.27%
51	9.00	Accident & Emergency	23.27%
52	8.00	Accident & Emergency	23.27%
53	8.00	Accident & Emergency	23.27%
54	7.00	Accident & Emergency	39.57%
55	5.00	Accident & Emergency	10.84%
56	5.00	Accident & Emergency	10.84%
57	1.00	Obstetrics & Gynaecology	67.21%

5.3 New assignments sourced at cap since 13.11.17 booked in December 2018 have included:

Number (from highest to lowest paid)	Hours Booked (01.12.18 to 31.12.18)	Specialty	% variance to price cap
1	187.50	Old Age Psychiatry	00.00%
2	150.00	General Medicine	00.00%

5.4 Summary of hours booked in December 2018

Hours booked at Cap	369.50
Hours booked above Cap	10,516
Extensions to bookings made prior to 13.11.17 above Cap	7,342

Job Extensions- 7,342 Hours 19 Jobs 16 Drs

New Bookings - 3,543.50 Hours 42 Jobs 21 Drs

6.0 An anonymised summary which sets out the expenditure made to each of the ten highest paid (i.e. those paid the highest hourly rate) agency workers including details of the hours/shifts booked, their specialty and length of current assignment with the organisation

Number (from highest to lowest paid)	Total Cost hourly rate	Hours Booked (01.12.18 to 31.12.18)	Specialty	Length of current assignment	Expenditure
1	£140.30	24.00	Anaesthetics	24 Hours	£3,367.20
2	£115.97	180.00	Obstetrics & Gynaecology	180 Hours	£20,874.60
3	£115.97	36.00	Obstetrics & Gynaecology	36 Hours	£4,174.92
4	£109.23	16.00	Anaesthetics	16 Hours	£1,747.68
5	£98.89	24.00	General Medicine	24 Hours	£2,373.36
6	£97.23	300.00	Adult Psychiatry	300 Hours	£29,169.00
7	£97.23	300.00	Old Age Psychiatry	300 Hours	£29,169.00
8	£97.23	450.00	Adult Psychiatry	450 Hours	£43,753.50
9	£85.34	150.00	Paediatrics & Neonates	150 Hours	£12,801.00
10	£80.68	1,200	Paediatrics & Neonates	1,200 Hours	£96,816.00

7.0 An anonymised summary of the longest serving agency workers i.e. those working for the longest consecutive period, including their specialty, details of the hours/shifts worked and length of assignment

A list of the Top 10 have been presented.

Number (from longest consecutive period)	Specialty	Aggregate of Hours worked	Length of assignment
1	Obstetrics & Gynaecology	10,350	5 Years 4 Months
2	Paediatrics & Neonates	9,900	5 Years 1 Month
3	Haematology	4,500	2 Years 4 Months
4	Rehabilitation	4,350	2 Years 3 Months
5	Orthopaedics & Trauma	3,150	1 Year 8 Months
6	Oncology	3,000	1 Year 7 Months
7	Adult Psychiatry	3,000	1 Year 7 Months
8	Adult Psychiatry	2,700	1 Year 5 Months
9	Obstetrics & Gynaecology	1,650	11 Months
10	Adult Psychiatry	1,500	10 Months

8.0 An anonymised summary of the number of exceptions that have been authorised for Internal Ad Hoc Locum Cover in excess of the agreed cap including the number of hours/sessions they have delivered and their specialty

Breached capped Rate	Service	No. of Bookings	Hours Worked	Percentage of Compliance*
Yes	Accident & Emergency	20	173.50	22%
	Anaesthetics	41	278.75	34%
	General Medicine	50	795.86	44%
	Surgery	25	240.13	17%
	Paediatrics	1	8.50	4%
No	Accident & Emergency	71	689.50	78%
	Anaesthetics	80	814.75	66%
	Dental	38	1207.25	100%
	General Medicine	64	1338.00	56%
	Obstetrics	13	266.97	100%
	Paediatrics	26	304.75	96%
	Surgery	124	1720.50	83%

*Percentage of the total returns in that specialty

The HB has growing confidence in the internal ad hoc locum data as the data captured and reporting systems have now bedded in, and we continue to work through some lessons learned in relation to recording 100% of the activity. However, it is apparent that there are still some areas where Consultants are back-filling sessions and claiming WLI rates (not a true WLI), and this information is still not being recorded and again we may see an increase in spend when this is being addressed. We have asked Stuart Evans, WG for a true definition of a WLI, which can be circulated to departments when received.

9.0 An anonymised summary, which sets out the expenditure made to each of the highest paid ad hoc locum workers including details of the hours/shifts worked

No.	Specialty	Grade	Unit	Hrs Booked	Avg Hourly Rate	Sum of Total Cost
1	Cardiac	Consultant	Morrison	7.50	333.33	£2,500.00
2	Cardiac	Consultant	Morrison	3.75	333.33	£1,250.00
3	Cardiology	Consultant	Morrison	7.5	158.13	£1,186.00
4	Cardiology	Consultant	Morrison	7.5	158.13	£1,186.00
5	Cardiology	Consultant	Morrison	24.36	158.13	£3,852.00

There are 31 bookings amounting to 146.25 hours totalling £22,509.00 attributed to Anaesthetics across the Health Board with the rate varying between £153.60 and £154.40 per hour. Additionally this month there are 14 bookings amounting to 81.38 hours totalling £12,695.28 recorded for Trauma & Orthopaedics relating to RTT targets.

Please note:

In 2011 Welsh Government brought in an additional sessional payment guide for Orthopaedic Services and currently this stands at £585 per session and therefore although a breach of capped rate is in line with the T&Cs.

The Amendment to the National Consultant Contract in Wales paragraph 3.8 also states, *“In exceptional circumstances where a Consultant is requested and agrees to be immediately available i.e. resident on call, this will be remunerated at three times the sessional payment at Point 6 of the Consultant salary scale”*, this would equate to £566 a session giving an hourly rate of £151.15, this is a breach of the capped rate but in line with the T&Cs.

10.0 An anonymised summary of any individual paid more than £120 per hour or more including their specialty, details of hours/shifts worked, whether they are providing Internal Ad Hoc Locum Cover or supplied by and Agency and length of assignment for agency staff.

Due to the numbers please refer to Appendix 4 attached for December 2018 data.

11.0 Compliance with the CCS framework to procure agency workers

Number of Drs Booked	Number Drs Booked MasterVend	Number Drs Booked outside MasterVend	Number Drs booked outside CCS Framework
37	37	0	0

ABOVE CAP – 34

AT / BELOW CAP – 3

12.0 Progress made in renegotiating rates of agency workers who had assignments booked prior to the 13th November 2017.

Original RAG		
RAG STATUS	No	%
Finished	29	76.32%
Refused to Lower	4	10.53%
Lowered to Cap	5	13.16%
Total	38	100.00%

The number of doctors who have reduced their rates this month from the original establishment is one.

13.0 Other useful Key Statistics

Agency

Attached as Appendix 2 is the spreadsheet relating to Agency shifts. The total number of external agency assignments booked in December was 61. It has not been possible to chase the breach forms for doctors outside the mastervend so this month the figures do not include this detail. 3 (7.89%) of these were paid at the capped rate or below the cap. 87% of these assignments were booked to cover vacancies, with 10% to cover sickness absence and 3% to cover site pressures. The cost attributed to engaging external agency doctors for December 2018 was £739,273. Morriston Hospital has utilised the greatest spend of agency doctors bookings at 22 assignments at a cost of £248,099. Princess of Wales Hospital utilised 24 assignments at a cost of £205,413, Singleton utilised 5 assignments at a cost of £105,238, whereas Mental Health booked 10 assignments with a related cost of £180,534.

Ad hoc Locums

Attached as Appendix 3 is the spreadsheet relating to internal ad hoc locum shifts. In December 2018, of the 553 ad hoc locum assignments, (75%) were paid at or below the capped rate. The value of internal ad hoc locum usage was £497,106.63 (includes on costs). Morriston utilised the greatest number of bookings: 282 with 75 breaches of the cap. POWH booked 144 with 42 breaches (this includes Anaesthetics at NPTH). Singleton utilised 117 with 20 breaches of the cap, of which 4 breaches were attributed to Anaesthetics Morriston. Neath Port Talbot booked 10 with no breaches of the cap.

The data submitted for Mental Health related to November data and therefore this would have been captured in last month's reporting.

13.0 Conclusion

The HB continues to work hard in embedding the process. There is high confidence in the Medacs data. A substantial amount of work has been undertaken to improve the quality of the internal ad hoc locum data. There is growing evidence that external supply is being affected due to market forces. It is also thought that the inability to pay accommodation and travel is having a negative impact on supply. It is critical therefore given that this is now the ninth report that the HB and NHS Wales begin to look for alternative solutions to improve the supply of doctors in a number of specialties to reduce the reliance on Agency or ad hoc locum doctors. The HB would also welcome feedback from Welch Government on the data and reports submitted so far.

Prepared by:

(Executive Director Lead for WHC/2017/042)



GIG
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NHS
WALES

Bwrdd Iechyd Prifysgol
Abertawe Bro Morgannwg
University Health Board

ABMU Finance Dept. WG Agency Cap Financial Summary

Month 09
FY 2018/2019

Summary Assumptions & Data Issues

1. Primary Data Source:

- Information to produce the reports are taken from the Health Board's Financial Ledger system and report all costs allocated to Medical Agency and ADH codes.
- Information in the Ledger will include actual expenditure and accruals.

2. Source Data Medac Process :

- At the end of each month Medac provide the Health Board with a report on the bookings made within that month. The bookings made in the month are then compared to the actual payments made via the payroll system for the same period. Where payments are outstanding an accrual is included based on the value of the bookings made using the data provided by Medacs.

3. Source Data ADH Process:

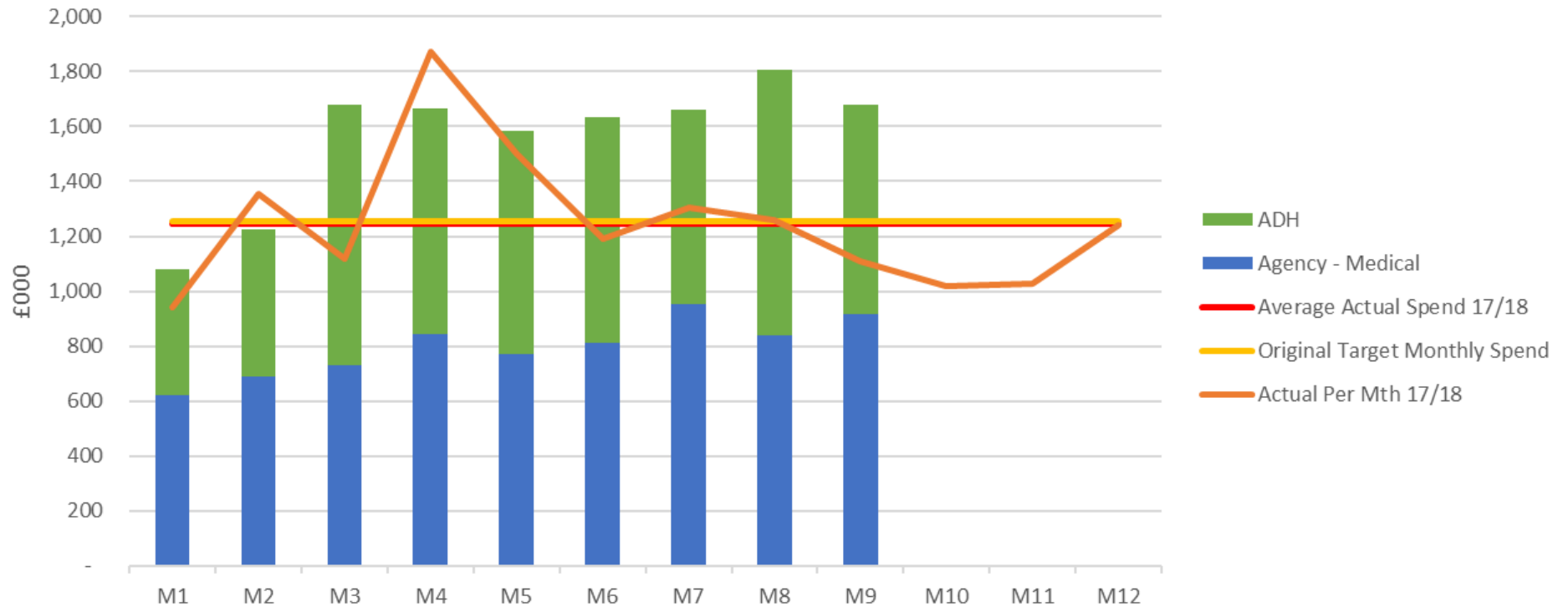
- From 1st April 2018 the accrual is based on the booking information provided to Finance/Medical HR at the end of each month. Similar to the Medacs process, the bookings made in month are then compared to the the actual payments made via the payroll system for the same period. Where payments are outstanding an accrual is included based on the value of the bookings made using the data provided by Medacs.
- The accuracy of the financial position is dependent on the information submitted to Finance/Medical HR by the Units. Medical HR have provided training as well as issuing communication to those key individuals within the Units who are the holders of the ADH information.

4. Modelling & Savings Target

- During the implementation of the cap the Health Board undertook a modelling exercise to determine the savings to be delivered.
- The modeling work based on expenditure between Oct 16 – and Nov 17 estimated an annual saving for the Health Board of £1.5m FYE.
- Based on the modelling work undertake the Health Bard had a monthly target of average monthly spend from 2016/2017 less impact of the savings derived from the modelling work. This target is depicted in the graphs as a yellow line.
- To assist the reader a red line has been added to the graphs to depict the average monthly spend from 2017/2018 and an orange line added to reflect the actual spend each month from 2017/2018.
- *NOTE – this report is using the Financial Ledger system and cannot reflect whether any changes in expenditure patterns are as a result of the WG cap or changes in volume.*

Section 1: Health Board Wide Summary

Health Board Wide - Actual ADH & Medical Agency Spend

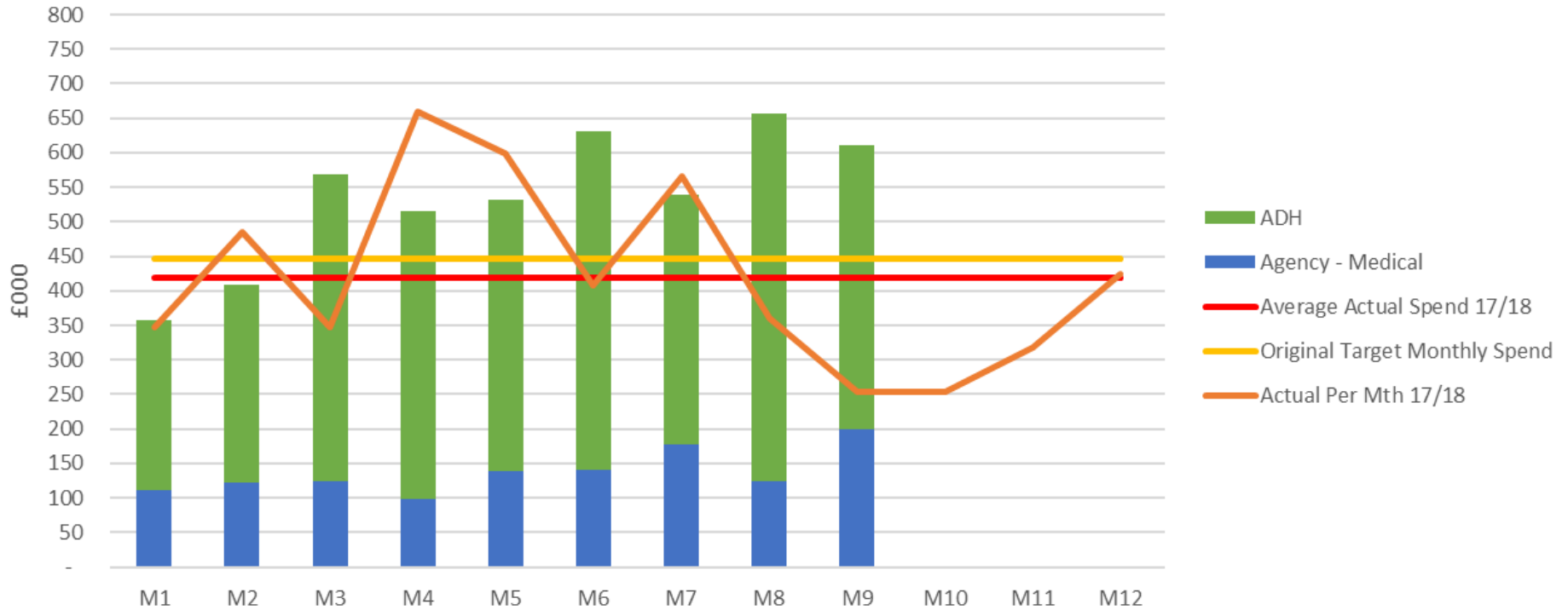


	Average Actual Monthly Spend 17/18 £000	Actual Spend 18/19											
		M1 £000	M2 £000	M3 £000	M4 £000	M5 £000	M6 £000	M7 £000	M8 £000	M9 £000	M10 £000	M11 £000	M12 £000
Agency - Medical	663	619	688	732	844	773	811	954	839	916			
ADH	581	460	536	946	820	812	821	704	967	765			
Total Agency & ADH	1,245	1,079	1,224	1,678	1,664	1,585	1,633	1,659	1,806	1,680	-	-	-

Section 2: Service Delivery Units Summary

Morriston SDU

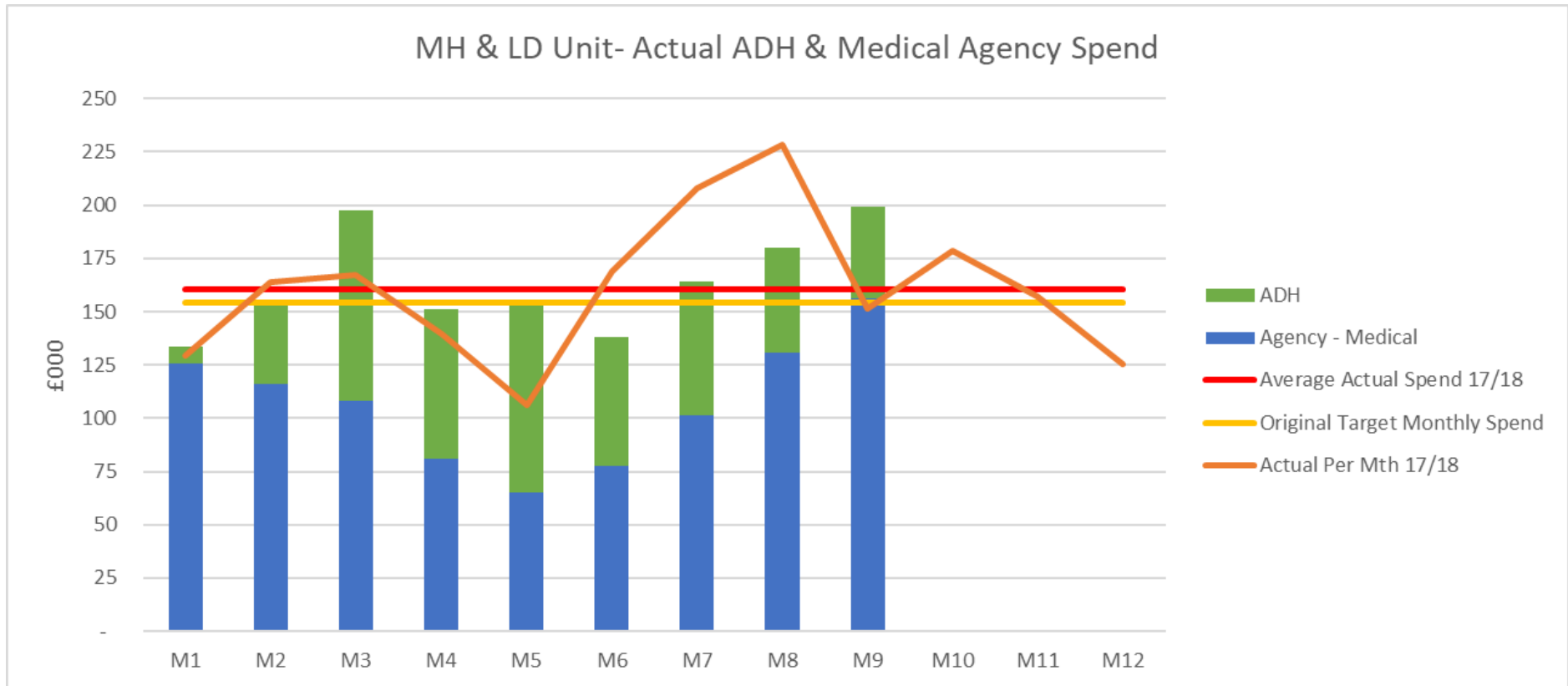
Morriston - Actual ADH & Medical Agency Spend



	Average Actual Monthly Spend 17/18 £000	Actual Spend 18/19											
		M1 £000	M2 £000	M3 £000	M4 £000	M5 £000	M6 £000	M7 £000	M8 £000	M9 £000	M10 £000	M11 £000	M12 £000
Agency - Medical	160	112	122	124	99	139	140	177	124	200			
ADH	259	246	286	445	417	394	491	362	534	412			
Total Agency & ADH	418	358	408	569	516	533	631	539	657	611	-	-	-

Section 2: Service Delivery Units Summary

MH/LD SDU

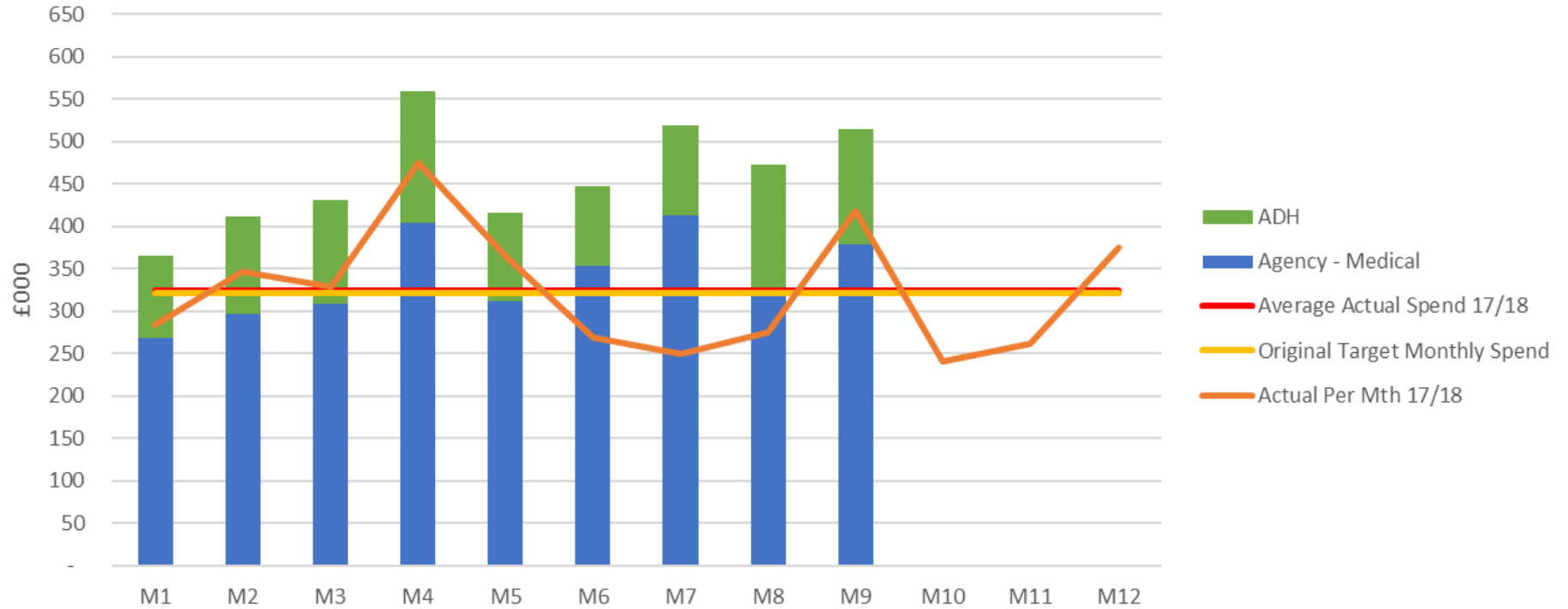


	Average Actual Monthly Spend 17/18 £000	Actual Spend 18/19											
		M1 £000	M2 £000	M3 £000	M4 £000	M5 £000	M6 £000	M7 £000	M8 £000	M9 £000	M10 £000	M11 £000	M12 £000
Agency - Medical	130	126	116	108	81	65	77	102	131	156			
ADH	30	8	38	89	70	90	61	63	49	43			
Total Agency & ADH	160	134	154	198	151	156	138	164	180	199	-	-	-

Section 2: Service Delivery Units Summary

POW SDU

POW- Actual ADH & Medical Agency Spend

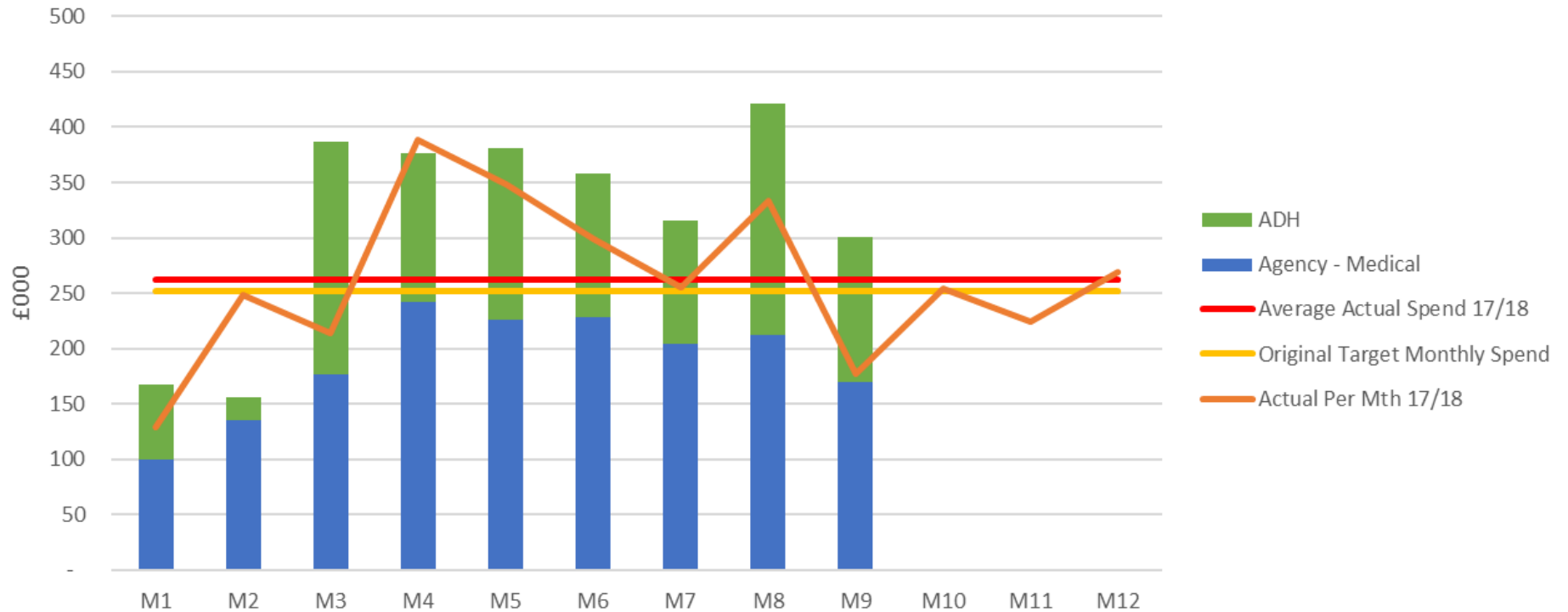


	Average Actual Monthly Spend 17/18 £000	Actual Spend 18/19											
		M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12
		£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000
Agency - Medical	198	269	296	308	403	311	354	413	324	379			
ADH	126	97	116	122	156	104	94	106	148	136			
Total Agency & ADH	324	366	412	430	559	416	448	519	473	515	-	-	-

Section 2: Service Delivery Units Summary

Singleton SDU

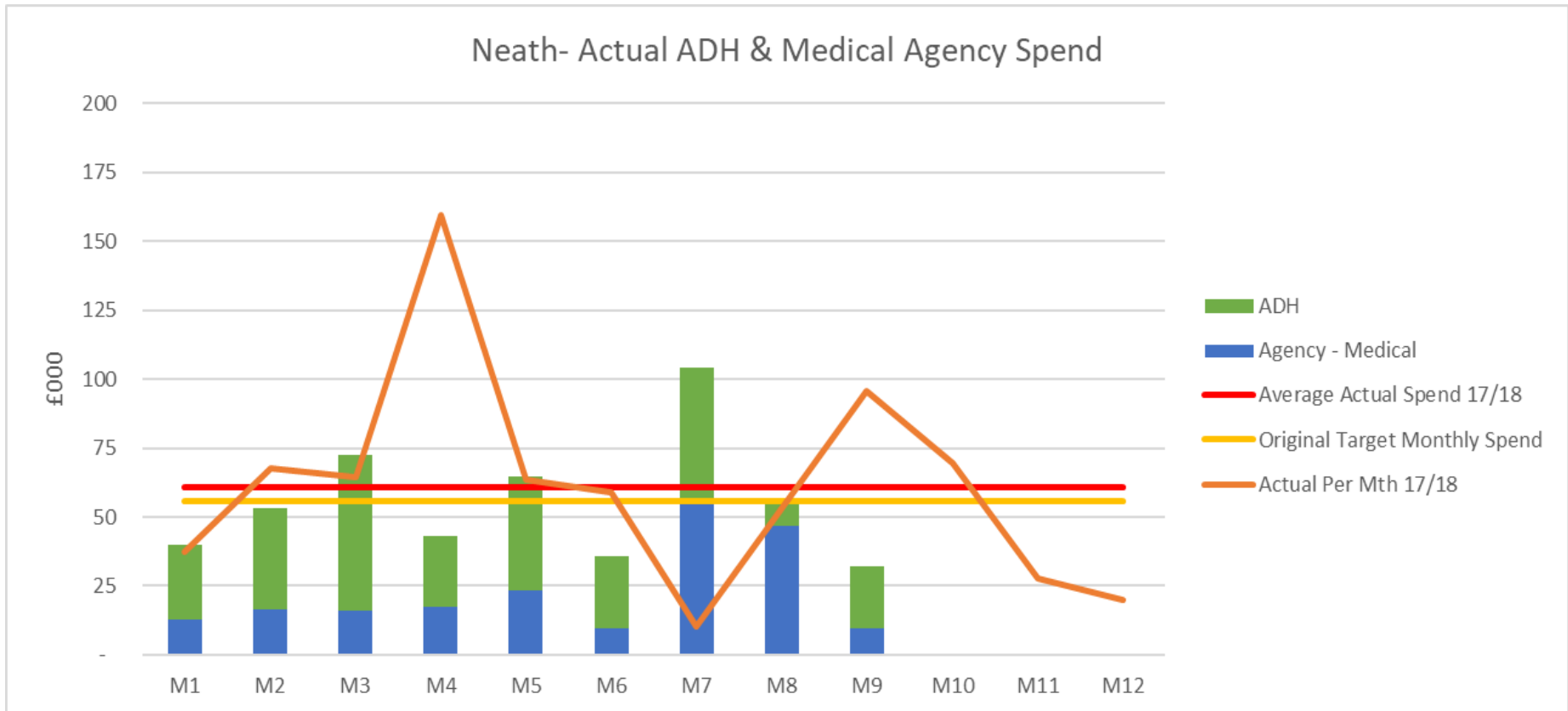
Singleton- Actual ADH & Medical Agency Spend



	Average Actual Monthly Spend 17/18 £000	Actual Spend 18/19											
		M1 £000	M2 £000	M3 £000	M4 £000	M5 £000	M6 £000	M7 £000	M8 £000	M9 £000	M10 £000	M11 £000	M12 £000
Agency - Medical	141	99	135	176	243	226	229	205	212	170			
ADH	120	68	21	211	134	155	130	111	209	131			
Total Agency & ADH	262	167	156	387	376	381	358	315	421	301	-	-	-

Section 2: Service Delivery Units Summary

Neath SDU



	Average Actual Monthly Spend 17/18 £000	Actual Spend 18/19												
		M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12	
	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000
Agency - Medical	33	13	17	16	18	23	10	56	47	10				
ADH	28	27	36	56	26	41	26	48	8	22				
Total Agency & ADH	61	40	53	73	43	65	36	104	55	32	-	-	-	-

Speciality	Grade	Length Of Service	Charge Rate	M/S Fee 3%	Total Hourly Charge	Annualised Locum Cost (based on 40 hours)	Mid Point Salary (MN37)	Bandings 50% (2b)	On Costs (27% Pension & NI)	Introductory Fee	Total HB Annualised Cost	Annualised Saving On Substantive Replacement/Hire	TRAC NUMBER	Feedback	Medacs Candidate Submitted	Feedback
PRINCESS OF WALES HOSPITAL																
Paediatrics & Neonates	ST3+	5 years 1 month	£73.68	£2.21	£75.89	£157,852.03	39,354	£19,677	£15,938.37	£8,000	£82,969	£74,882.66	130-4865404-141218-SH	Out to Advert	2 submissions Nov/Dec	Department wants to try and appoint via NHS jobs/Trac first before using agency - this is for all recently submitted doctors
Obstetrics & Gynaecology	ST3+	11 Months	£57.05	£1.71	£58.76	£122,223.92	39,354	£19,677	£15,938.37	£8,000	£82,969	£39,254.55	130-6281808-040717-POWH-E	Existing Locum will be in post until new candidate starts. Medacs locum has been offered, applied via NHS jobs and has accepted	No submissions Nov/Dec	Medacs not asked to support
Obstetrics & Gynaecology	Consultant	9 months	£107.85	£3.24	£111.09	£231,057.84	£87,034	£43,517	£35,248.77	£12,000	£177,800	£53,258.07	130-POW94635	Appointed 2 1st Dr Started 15/10 and 2nd Dr starting 7 Jan	No submissions Nov/Dec	Medacs not asked to support
Radiology	Consultant	12 Months	£127.85	£3.84	£131.69	£273,905.84	£87,034	£43,517	£35,248.77	£12,000	£177,800	£96,106.07	130-POW942053	Recently appointed start date 1st February 2019	4 submissions Nov/Dec	
SINGELTON HOSPITAL																
Oncology	Consultant	1 year 7 months	£117.85	£3.54	£121.39	£252,481.84	£87,034	£43,517	£35,249	£12,000	£177,800	£74,882.07	130-MDU95165	Clinical - Appointed Dr Jason Lester on 28/12/2018 starting 1st April 2019	No submissions to date	Medacs not asked to support
Obstetrics & Gynaecology	ST3+	5 years 4 months	£79.38	£2.38	£81.76	£170,063.71	39,354	£19,677	£15,938	£8,000	£82,969	£87,094.34	130-24686202-080618-SH-C	Candidate appointed start date March 19	No submissions Nov/Dec	Medacs not asked to support
Obstetrics & Gynaecology	SD	1 year 8 months	£78.34	£2.35	£80.69	£167,835.62	39,354	£19,677	£15,938.37	£8,000	£82,969	£84,866.25	130-5232603-210318-POW-A	Appointed to 3 permanent SD posts. 2 starting in March 19, with 1 to confirm their start date.	No submissions Nov/Dec	Medacs not asked to support
NEATH PORT TALBOT HOSPITAL																
General Medicine	SAS	4 Months	£45.76	£1.37	£47.13	£98,036.22	39,354	£19,677	£15,938	£5,000	£79,969	£18,066.85	130-9151732-201017-NPT	Recruited 2 doctor, 1 withdrew and 1 started. Department currently reviewing options for additional MTIs.	1 submission Nov	Department wants to consider alternative recruitment options first.
General Medicine	SAS	4 Months	£45.76	£1.37	£47.13	£98,036.22	39,354	£19,677	£15,938	£5,000	£79,969	£18,066.85	BAPIO 2018	This is a post linked to the MTI recruitment strategy. *Allocations of the MTI doctors has been completed, Medical Workforce to update the current time to completion re GMC Registration, UKVI and Visa	1 submission Nov	Part of MTI 2018 recruitment
MENTAL HEALTH																
Rehabilitation	SAS	2 years 3 months	£66.43	£1.99	£68.42	£142,319.63	39,354	£19,677	£15,938	£5,000	£79,969	£62,350.26	Was advertised now on hold	Eve Jeffery's is currently looking into the funding and will check with the service if they want to advertise.	No submissions to date	Post not confirmed by department to advertise
Adult Psychiatry Neath and Port Talbot	Consultant	1 year 7 months	£80.46	£2.41	£82.87	£172,377.50	£87,034	£43,517	£35,249	£12,000	£177,800	£5,422.27	130MHU95065	Advertised on the 1/11 and now again on the 20/12/18 closing on 09/01/2019 "0" applicants to date extended to 30/01/2019 (4th advert)	No submissions to date	Medacs not asked to support
Adult Psychiatry Cefn Coed	Consultant	8 months	£97.22	£2.92	£100.14	£208,284.13	£87,034	£43,517	£35,249	£12,000	£177,800	£30,484.36	130MHU94895	Re advertised for the 5th time with a closing date of 30/01/2019	No submissions to date	Medacs not asked to support
Adult Psychiatry Cefn Coed	SD	10 months	£66.43	£1.99	£68.42	£142,319.63	£56,034	£28,017	£22,694	£8,000	£114,745	£27,574.86	Not currently Advertised	Eve is speaking with the service manager and clinical director to check if they want to advertise	No submissions Nov/Dec	Post not confirmed by department to advertise
Adult Psychiatry POW	Consultant	1 year 5 months	£97.22	£2.92	£100.14	£208,284.13	£87,034	£43,517	£35,249	£12,000	£177,800	£30,484.36	130-MHU93955	Awaiting update from Directorate	No submissions to date	Medacs not asked to support
MORRISTON HOSPITAL																
Orthopaedics & Trauma	ST1	1 year 8 months	£45.76	£1.37	£47.13	£98,036.22	£38,582	£19,291	£15,626	£5,000	£78,499	£15,537.51	130-8072841-010616-MH-S	Awaiting shortlisting. 2 Remaining vacancies as the other 2 posts have been appointed too.	No submissions to date	Medacs not asked to support
Paediatrics & Neonates	ST3+	1 year 5 months	£85.34	£2.56	£87.90	£182,832.42	39,354	£19,677	£15,938	£5,000	£79,969	£102,863.05	130-11906414-091017-SH	Appointed Dr XX with start date TBC.	2 submissions Nov/Dec	Sam Williams wants to try and appoint via NHS jobs first before using agency - this is for all recently submitted doctors
Haematology	Consultant	2 years 4 months	£83.62	£2.51	£86.13	£179,147.49	£87,034	£43,517	£35,249	£12,000	£177,800	£1,347.72		Dept not advertising - 2 unfilled posts in Singleton	No submissions Nov/Dec	Medacs not asked to support

Appendix 4

10. An anonymised summary of any individual paid more than £120 per ours or more including their specialty, details of hours/shifts worked, whether they are providing Internal Ad hoc Locum Cover or supplied by an Agency and length of assignment for agency staff.

Number	Total Cost hourly rate	Hours booked in month	Specialty	Agency or Internal Ad hoc locum	Length of Assignment
1	153.60	11.25	Anaesthetics	Internal	N/A
2	333.33	7.50	Cardiac	Internal	N/A
3	156.00	37.50	Orthopaedics	Internal	N/A
4	153.60	11.25	Anaesthetics	Internal	N/A
5	153.60	7.50	Anaesthetics	Internal	N/A
6	153.60	3.75	Anaesthetics	Internal	N/A
7	153.60	15.00	Anaesthetics	Internal	N/A
8	156.00	3.75	Orthopaedics	Internal	N/A
9	158.13	7.50	Cardiology	Internal	N/A
10	153.60	3.75	Anaesthetics	Internal	N/A
11	158.13	7.50	Cardiology	Internal	N/A
12	153.60	3.75	Anaesthetics	Internal	N/A
13	153.60	3.75	Anaesthetics	Internal	N/A
14	153.60	3.75	Anaesthetics	Internal	N/A
15	153.60	7.50	Anaesthetics	Internal	N/A
16	156.00	10.12	Orthopaedics	Internal	N/A
17	154.40	7.50	Anaesthetics	Internal	N/A
18	156.00	7.50	Orthopaedics	Internal	N/A
19	156.00	3.75	Orthopaedics	Internal	N/A
20	156.00	18.76	Orthopaedics	Internal	N/A
21	153.60	3.75	Anaesthetics	Internal	N/A
22	153.60	3.75	Anaesthetics	Internal	N/A
23	154.40	15.00	Anaesthetics	Internal	N/A
24	154.40	3.75	Anaesthetics	Internal	N/A
25	153.60	11.25	Anaesthetics	Internal	N/A
26	154.40	30.00	Anaesthetics	Internal	N/A
27	158.13	24.36	Cardiology	Internal	N/A
28	333.33	3.75	Cardiac	Internal	N/A