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CYMRU  
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Bwrdd Iechyd Prifysgol  
Bae Abertawe  
Swansea Bay University  
Health Board



<b>Meeting Date</b>	<b>30<sup>th</sup> October 2019</b>	<b>Agenda Item</b>	<b>2.3</b>
<b>Report Title</b>	<b>Medical Agency Cap</b>		
<b>Report Author</b>	Sharon Vickery, Assistant Director of Workforce & OD		
<b>Report Sponsor</b>	Hazel Robinson, Director of Workforce & OD Dr Richard Evans, Executive Medical Director Lynne Hamilton, Director of Finance Chris White, Chief Operating Officer		
<b>Presented by</b>	Hazel Robinson, Director of Workforce & OD		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	This report is submitted to the Workforce & OD Committee to provide an update on the implementation of the Medical Locum Cap within Swansea Bay University Health Board. Welsh Government has moved to quarterly reporting and so this monthly report focuses mainly on the metrics for September 2019.		
<b>Key Issues</b>	This report sets out the September performance compared to previous months together with plans to improve implementation of the all Wales agency cap.		
<b>Specific Action Required</b> <i>(please ✓ one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
			✓
<b>Recommendations</b>	Members are asked to: <ul style="list-style-type: none"> <li>• <b>NOTE</b> the metrics for September 2019.</li> <li>• <b>NOTE</b> the immediate actions outlined.</li> </ul>		

## MEDICAL AGENCY CAP

### 1. INTRODUCTION

This report is submitted to the Workforce & OD Committee to provide an update on the implementation of the Medical Locum Cap within Swansea Bay University Health Board. Welsh Government (WG) has moved to quarterly reporting and so this monthly report focuses mainly on the metrics for September 19 together with any immediate plans to attempt to improve compliance.

The next quarterly submission is due by WG in October for the quarter period July - September in line with the instructions received by WG on 2<sup>nd</sup> July 2019.

### 2. PROGRESS

#### 2.1 Total Booked Hours – September 2019

- 9,548 internal and agency locum hours were booked in September 2019 compared to 12,605 in August 2019 which constitute a 25% reduction.
- The number of agency hours booked decreased this month by 40% to 3,883 compared to 6,491 in August. The vast majority to this was due to extensions of existing bookings which equate to 3,344 hours, at a value of £250,397. The balance of 539 hours is for new and ad hoc bookings at a cost of £37,482.

	Hours	% of Total	Cost
<b>Agency</b>			
Extensions	3,344	86.12%	£250,397
New	539	13.87%	£37,482
<b>Total Agency</b>	<b>3,883</b>	<b>41.00%</b>	<b>£287,879</b>
Total Ad Hoc Locum	5,665	59.00%	£303,390
<b>Total</b>	<b>9,548</b>	<b>100%</b>	<b>£591,267</b>

- This represents a decrease in the cost of work **booked** in September.
- NB - not all the booked hours will be worked in September as some of the bookings will extend into the following month(s)

2.2 Agency – the progress for September 2019 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 increased from August.

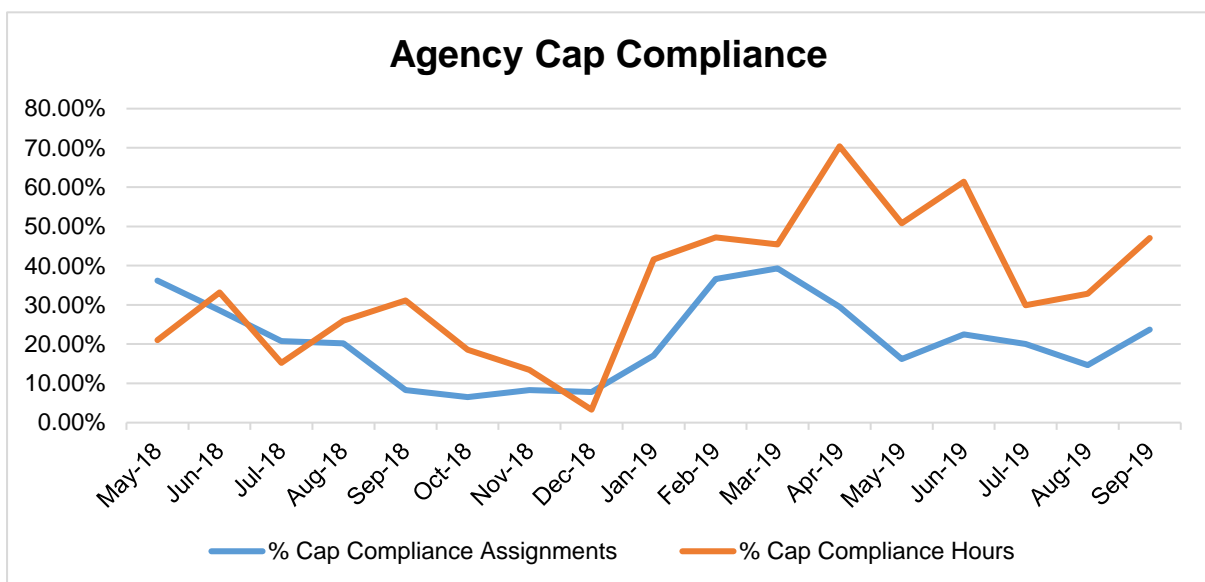
#### Agency Hours

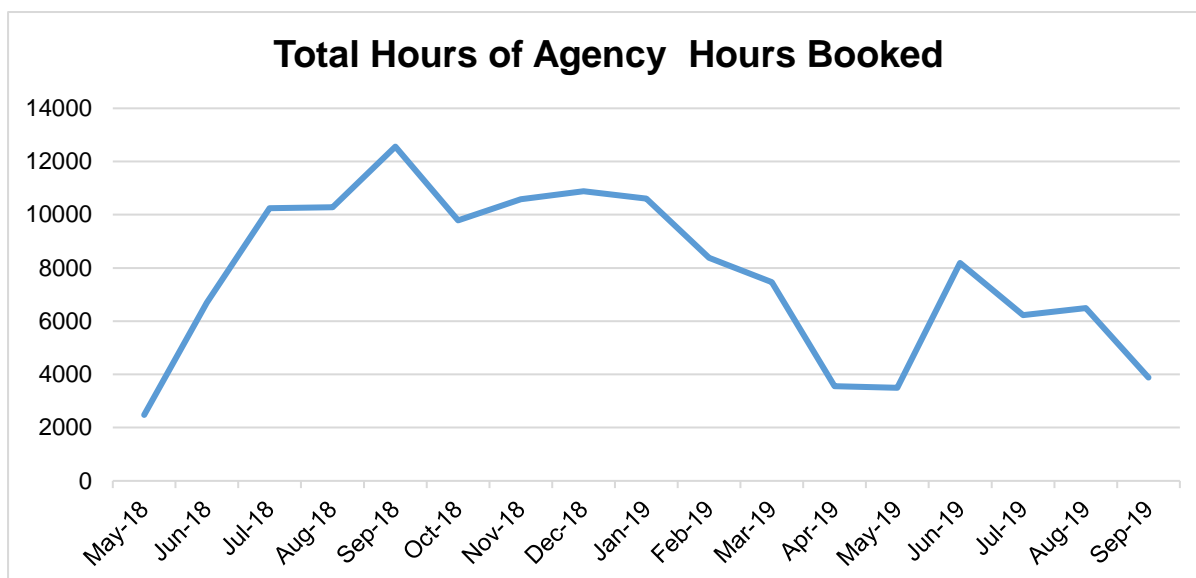
- The percentage of agency doctors paid at or below the capped rates based on **hours** increased in September to 47% compared to August figures at 32.8%.

## Agency Hours

- Total agency hours booked decreased in September to 3,883 compared to August figures at 6,491.

Month	% Cap Compliance Assignments	% Cap Compliance Hours	Total Hours Booked
May 18	36.2%	21.0%	2,478
June 18	28.6%	33.2%	6,698
July 18	20.8%	15.2%	10,252
August 18	20.2%	26.0%	10,280
September 18	8.3%	31.1%	12,560
October 18	6.5%	18.6%	9,790
November 18	8.3%	13.4%	10,579
December 18	7.8%	3.3%	10,885
January 19	17.1%	41.6%	10,605
February 19	36.6%	47.2%	8,385
March 19	39.3%	45.4%	7,472
April 19	29.5%	70.4%	3,556
May 19	16.2%	50.8%	3,499
June 19	22.5%	61.4%	8,186
July 19	20.0%	29.9%	6,225
August 19	14.63%	32.8%	6,491
September 19	23.68%	47.0%	3,883





	No. of Assignments	No. of Hours	% of Hours
<b>Cap Breach</b>	29	2,058.50	53.0%
<b>Below/at cap</b>	9	1,825.00	47.0%
<b>Total</b>	38	3,883.50	100%

#### Usage by Grade -

Grade	Aug 19 Hours	Aug 19 Booked Spend	Sept 19 Hours	Sept 19 Booked Spend	Variance On Prior Month Booked Hours	Variance On Prior Months Booked Spend
<b>Consultant</b>	32	£3,347	1,273	£132,838	+1,241	+£129,491
<b>Specialty Doctor</b>	600	£39,858	900	£59,787	+300	+£19,929
<b>ST3+</b>	970	£68,463	166	£9,754	-804	-£58,709
<b>ST1/2</b>	4,889	£271,242	1,544	£85,488	-3,344	-£185,754

100% of Consultant expenditure is linked to vacant posts within Adult Psychiatry, Maxillofacial Surgery and Oncology; £120,497 is attributed to extensions and £12,351 new bookings.

100% of Specialty Doctor expenditure is linked to vacant post within Adult Psychiatry; £59,787 is attributed to extensions.

100% of ST3+ expenditure is linked to vacant posts within Accident & Emergency & Trauma & Orthopaedics; £8,557 is attributed to extensions and £1,197 to new bookings.

98% of ST1/2 expenditure is linked to vacant posts within Accident & Emergency, Adult Psychiatry, Cardiothoracic, General Medicine, Haematology and Trauma &

Orthopaedics. 2% of expenditure is linked to sickness within General Medicine. £61,554 is attributed to extensions and £23,934 is attributed to new bookings.

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

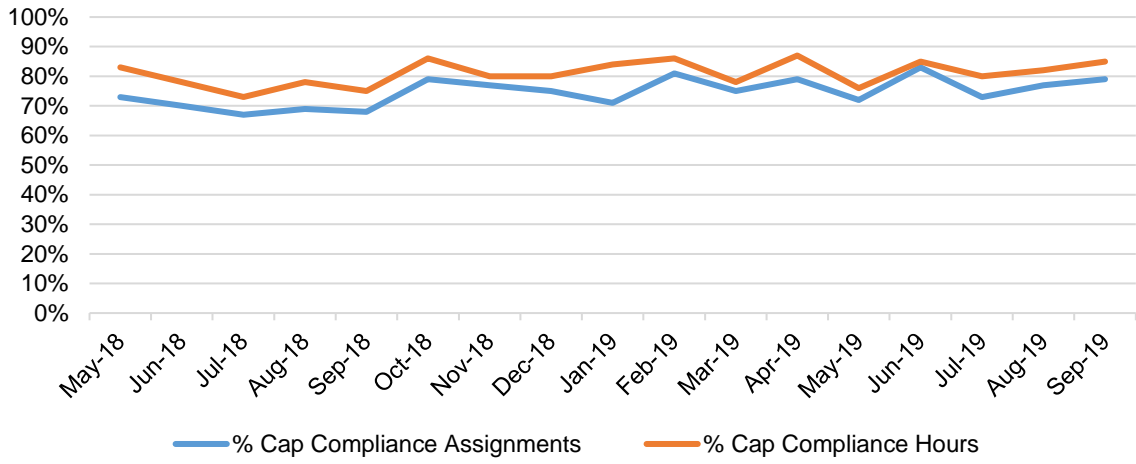
Grade	% paid at cap or below	% paid £1p - £5 above cap	% paid £5.01 - £10 above cap	% paid £10.01 - £15 above cap	% paid £15.01 - £20 above cap	% paid £20+ above cap
Consultant	35.35%	35.35%	0%	8.80%	0%	20.50%
SAS	100%	0%	0%	0%	0%	0%
ST3+	90.36%	0%	0%	0%	9.64%	0%
ST1/2	21.04%	0%	0%	72.35%	6.60%	0%

### 2.3 Internal ad hoc locums

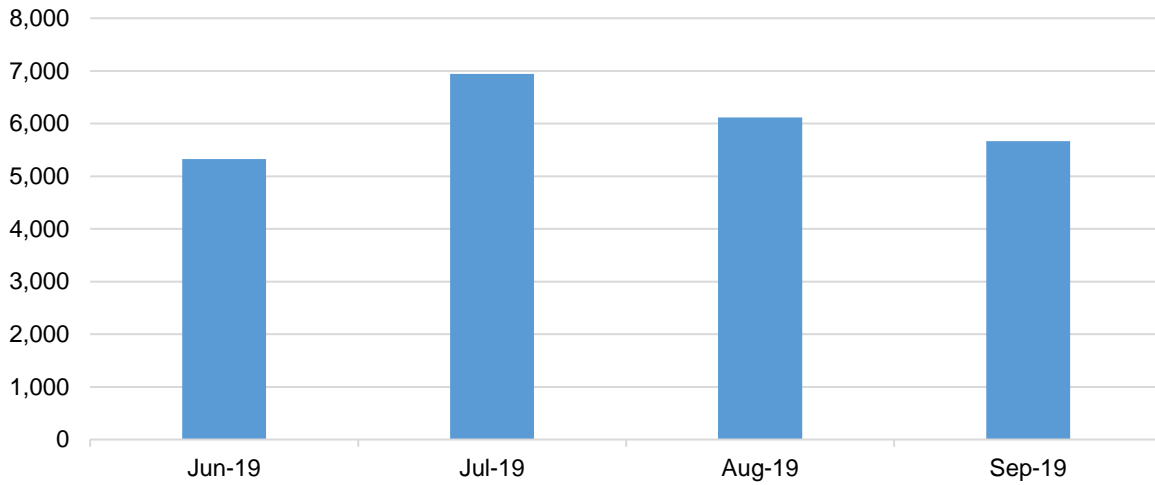
- The percentage of the internal ad hoc locums paid at or below the cap by **assignment** increased for September 79% compared to August figures (77%).
- The percentage of doctors paid at or below the capped rates based on **hours** in September increased to 85%.
- The total number of hours booked for internal ad hoc locum cover in September decreased to 5,665 from 6,114 in August.

Month	% Cap Compliance Assignments	% Cap Compliance Hours	Total Hours Booked
May 18	73%	83%	
June 18	70%	78%	
July 18	67%	73%	
August 18	69%	78%	
September 18	68%	75%	
October 18	79%	86%	
November 18	77%	80%	
December 18	75%	80%	
January 19	71%	84%	
February 19	81%	86%	
March 19	75%	78%	
April 19	79%	87%	
May 19	72%	76%	
June 19	83%	85%	5,324
July 19	73%	80%	6,945
August 19	77%	82%	6,114
September 19	79%	85%	5,665

### Internal ad-hoc locums cap compliance



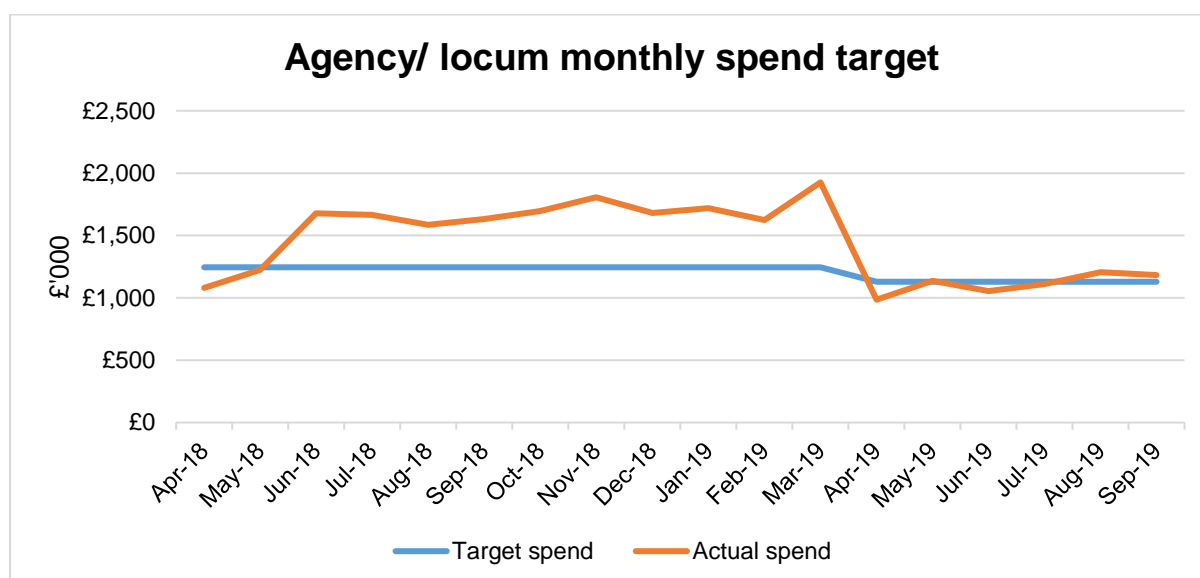
### Internal ad-hoc locums- total hours booked



## 2.4 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:-

	Target spend (£'000)	Actual spend (£'000)	Variance (£'000)
<b>Apr-18</b>	£1,245	£1,079	-£166
<b>May-18</b>	£1,245	£1,224	-£21
<b>Jun-18</b>	£1,245	£1,678	£433
<b>Jul-18</b>	£1,245	£1,664	£419
<b>Aug-18</b>	£1,245	£1,585	£340
<b>Sep-18</b>	£1,245	£1,633	£388
<b>Oct-18</b>	£1,245	£1,695	£450
<b>Nov-18</b>	£1,245	£1,806	£561
<b>Dec-18</b>	£1,245	£1,680	£435
<b>Jan-19</b>	£1,245	£1,720	£475
<b>Feb-19</b>	£1,245	£1,624	£379
<b>Mar-19</b>	£1,245	£1,926	£681
<b>Apr-19</b>	£1,129	£985	-£144
<b>May-19</b>	£1,129	£1,136	£7
<b>Jun-19</b>	£1,129	£1,054	-£75
<b>Jul-19</b>	£1,129	£1,110	-£19
<b>Aug-19</b>	£1,129	£1,206	£77
<b>Sep-19</b>	£1,129	£1,183	£54



## Immediate actions

- Following the meetings between the Executive Directors and the Delivery Units to focus on their medical workforce plans Medacs and the Medical Workforce team meet each specialty by Delivery Unit monthly. Regular updates are provided via the HVO Programme structure and to the Directors directly.
- Progress to reduce the number of long term locums is summarized below:
- Outlined below are the actual conversions in post. Savings so far are circa £295K. However this is the lowest possible saving as some of the posts are Deanery doctors so we will get 50% of the salary.

Dr - initials	DU	Speciality	Grade	Annual cost Agency	Replaced on/by (date)	Annual cost HB appointment	Indicative cost saving
MK	Singleton	Obs & Gynae	SD	£167,853	April 2019	£84,240	£83,595
BS	Singleton	General Medicine	ST3	£163,966	August 2019	£95,277 Based on max point of scale	£68,689
EG	Singleton	General Medicine	ST1	£98,009	August 2019	£60,507 Based on min point of scale due to grade	£37,502
RV	Morrison	General Medicine	ST1	£135,928	August 2019	£64,472 Based on min point of scale due to grade	£71,455
MS	Neath	General Medicine	ST3	£98,030	September 2019	£63,409	£34,621

In addition the following are in train.

- ***Morrison Hospital***
- **Radiology**  
1 candidate interviewed and an offer has been made and accepted. A start date is anticipated for end of October/beginning November.

Radiology locums are sourced through Athona so Medacs is unable to give an agency savings cost. There are 3 or 4 off contract agency workers sourced through Athona and they are exceptionally expensive – often more than £200K pa. Once the offer is made and the current costs identified the annual savings will be close to £100K (but tbc).



- **Singleton Hospital**
- **Haematology**  
1x candidate interviewed and appointed as a Locum Consultant through TRAC, with a start date of 9<sup>th</sup> September 2019. This has not resulted in the removal of any long term locums.
- **Paediatrics**  
Interviews took place on the 9<sup>th</sup> October with 1x Medacs candidate, 5x BDI candidates and 1x TRAC/NHS jobs candidate. Offers made to 1x BDI candidate and a provisional offer made to 1x Medacs candidate. The provisional offer to the Medacs candidate is awaiting financial sign off on the 14<sup>th</sup> October 2019. Currently 1x long-term locum in the service so if we can appoint with a substantive doctor this will see an annual saving of £99,863 on exit of the agency locum.
- **Neonates**  
Appointed 2x Specialty Doctors via TRAC/NHS jobs of which one doctors requires a certificate of sponsorship but is hoping to commence beginning to mid-November having already relocated to the Swansea area and the second doctor has a commencement date of the 28<sup>th</sup> October 2019. There are no long term locums in this specialty
- **Neath Port Talbot Hospital**
- **General Medicine**
- 4x candidates: Appointed 3x Medacs plus 1x TRAC/NHS Jobs. One doctor commenced 23<sup>rd</sup> September 2019 with 2x commencing mid-November and the last doctor commencing January 2020. This will allow the exit of two long term locums with the potential to save circa £69,300.
- There is a long-term Medacs Locum Specialty Doctor currently filling an ANP gap. Meeting to be arranged to discuss options to move funding to a Medical vacancy instead of ANP due to successful recruitment over the last few months.
- Kendall Bluck recently met with the Executive Directors and senior representatives of the ED Dept at Morriston. Further work is taking place by November with the view to then implement the recommendations. Their work around locum opportunities has been absorbed into the removal of long standing locums and the work underpinning this is detailed above. There are four rotas that require addressing and meetings have been scheduled for November.
- The Medacs contract has been extended to November 2020 in order to participate in the All Wales work exploring Master Vend –v- Neutral Vend. It should be noted that the All Wales work appears to have stalled and discussions with the Head of Procurement have commenced in order to protect the Health Board’s position.
- The Locum on Duty project began its roll out on the 1<sup>st</sup> May. This will digitalize the booking of all locums, have a link to pay and introduce an internal medical Bank. It

is anticipated that the project will take a minimum of six months to complete and will provide a more comprehensive suite of intelligence in real time to help try to drive costs down and current locums are being contacted to request they agree to register with the Medical Locum Bank.

## **WELSH GOVERNMENT QUARTERLY SUBMISSION**

Welsh Government have requested the Health Board to report quarterly and therefore the submission will be included in the October report.

### **3. GOVERNANCE AND RISK ISSUES**

The main risk with this work relates to the overall challenging recruitment market and the overall supply of doctors.

### **4. FINANCIAL IMPLICATIONS**

The financial details are set out in section 2 and in the table below.

### **5. RECOMMENDATION**

Members are asked to:

- **NOTE** the metrics for September 2019
- **NOTE** the immediate actions outlined

<b>Governance and Assurance</b>		
<b>Link to Enabling Objectives</b> <i>(please choose)</i>	<b>Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities</b>	
	Partnerships for Improving Health and Wellbeing	<input type="checkbox"/>
	Co-Production and Health Literacy	<input type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	<b>Deliver better care through excellent health and care services achieving the outcomes that matter most to people</b>	
	Best Value Outcomes and High Quality Care	<input type="checkbox"/>
	Partnerships for Care	<input type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input type="checkbox"/>
Outstanding Research, Innovation, Education and Learning	<input type="checkbox"/>	
<b>Health and Care Standards</b>		
<i>(please choose)</i>	Staying Healthy	<input type="checkbox"/>
	Safe Care	<input type="checkbox"/>
	Effective Care	<input type="checkbox"/>
	Dignified Care	<input type="checkbox"/>
	Timely Care	<input type="checkbox"/>
	Individual Care	<input type="checkbox"/>
Staff and Resources	<input checked="" type="checkbox"/>	
<b>Quality, Safety and Patient Experience</b>		
Whilst there are significant recruitment difficulties the supply of locum doctors is vital to safe patient care.		
<b>Financial Implications</b>		
Securing these doctors at appropriate rates is also key to the recovery and sustainability of the Health Board		
<b>Legal Implications (including equality and diversity assessment)</b>		
Not applicable.		
<b>Staffing Implications</b>		
None other than the need to improve the supply of the medical workforce.		
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>		
Not applicable.		
<b>Report History</b>	This report was previously reported monthly to the Performance and Finance Committee and therefore this is the seventh report for the Workforce and OD Committee to scrutinise the Welsh Government submission in line with their timetable.	
<b>Appendices</b>	None	