Meeting Date	30 October 2019	Agenda Item	2.4
Report Title	**Kendall Bluck ED Workforce & Activity Review**		
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Report Sponsor	Hazel Robinson, Director of Workforce and OD		
Presented by	Hazel Robinson, Director of Workforce and OD		
Freedom of Information	Open		
Purpose of the Report	To update the Workforce and OD Committee on current progress, status and key achievements in three High Value Opportunity schemes under Workforce Modernisation & Efficiency theme within the financial plan: ➢ Medical ➢ Nursing ➢ Therapies.		
Key Issues	➢ Projects under Nursing and Therapies are progressing on track ➢ E-Job Planning and Locum on Duty under Medical Workforce workstream are off track and mitigating action are being put in place ➢ Current financial delivery confidence for the projects are: • Medical – Amber • Nursing – Green • Therapies – Amber		

Specific Action Required *(please choose one only)*	**Information**	**Discussion**	**Assurance**	**Approval**
	☒	☐	☒	☐

Recommendations	**Workforce and OD Committee is asked to:** Note the progress made in all 3 High Value Opportunity schemes under Workforce Modernisation & Efficiency theme: ➢ Medical ➢ Nursing ➢ Therapies.

WORKFORCE MODERNISATION AND EFFICIENCY
UPDATE ON HIGH VALUE OPPORTUNITIES WORK PROGRAMME

1. INTRODUCTION

The purpose of this report is to update the Workforce and OD Committee on the current progress, status and key achievements of three High Value Opportunity (HVO) schemes under the Workforce Modernisation & Efficiency theme within the annual plan for the Health Board, These areas cover:

➢ Medical
➢ Nursing
➢ Therapies.

2. BACKGROUND

2.1. Medical Workforce

Introduction:
The main objective of the medical workstream is to ensure that there is a consistent and equitable process and intelligent systems which allow management of the medical workforce resource efficiently and effectively in alignment with our clinical service requirements. It supports work towards a sustainable workforce to deliver safe and quality care.

The table below summarises the key projects, their objectives and key milestones.

Project	Objectives	Key Milestones
Locum on Duty system implementation	Implement "Locum On Duty" system by November 2019 to Standardise an electronic process to book locum and agency shifts and the Establishment of an internal medical bank facility	▪ Project Launch-Kick off meeting – 26/08/19 (Completed) ▪ Go-live- 12/01/2019 Potentially 15th December
E-Job Planning System implementation	Implementation of E-Job Planning system by December 2019 & Reconciliation of all Job Plans to activity by March 2020 to ensure there are consistent equitable and standardised practices observed	▪ Job Planning Guidance - LNC Sign off -November 2019 (revised) ▪ Re-Establish Project Plan –October 2019
Junior Doctor Rota Review – Kendal Bluck	Implement the recommendations signed off on the rota review completed by Kendall Bluck to achieve the safety, efficiency and financial benefits.	▪ Re-banding opportunity- Meetings with 4 X speciality Clinical and management leads to progress with Re-Banding process – Nov 19 ▪ Locum Opportunities- Recruitment and vacancy position against

		plan -Sep 2019 (Half Year position)
Emergency Department Workforce & Activity Review (Kendall Bluck)	Complete Review of Nursing and Medical workforce in line with activity and demand in Morriston ED by June 2019	▪ Exec Sign off on report – October 19
Long term Locums & Agency Cap Compliance	Engage with Medacs and specialty teams to develop an action plan for each long term agency locum by July 2019 and Improve compliance with medical agency cap using improved intelligence from introduction of locum on duty and working with Delivery units	▪ Long Term-Locum Opportunities-Recruitment and vacancy position against plan -Sep 2019 (Half Year position)

Current Progress and Key Achievements:

Emergency Department Workforce & Activity Review (Kendall Bluck)
The aim of this work is to establish a sustainable workforce solution for the Emergency Department that will enable improved performance and staff and patient experience. Following receipt of final report and action plan in August 2019, there were some concerns raised by the emergency department clinical team about proposed workforce plan and implementation process. In a joint meeting to resolve this in September 2019 with Executive team, Kendall Bluck and ED team, it was decided to submit amended report to executive team in October. The amended report and implementation plan will clearly reflect on changes to be made as specific progressive points are reached in agreed establishment via recruitment.

Junior Doctor Rota Review (Kendal Bluck)
Recommendations covering financial savings under locum opportunities recruitment plan has been absorbed into the removal of long standing locums and the work underpinning this is detailed below. There are four rotas that require addressing under re-banding recommendations and meetings have been scheduled for November.

E-Job Planning System implementation
As part of implementing E-Job planning system, under Job planning consistency checking process 9 Specialities covering 72 Job plans have been covered. A log of all issues and findings has been created to summarise themes, decisions required to standardise practices and financial and non-financial benefit implications. Doctor's Rotation and annual leave in August contributed to slippage in agreed plan for E-Job planning consistency checking. A baseline of current status of all aspects of projects including Job plans on system, consistency checking and training is being established to complete a gap analysis from 2019-20 objectives to re align project plan in October. This will include implications of key project team member possible long-term sickness absence.

Locum on Duty system implementation

Project technical roll out started as scheduled in August 2019. There was delay in signing off the Health board rate card which will be used for advertising locum shifts. This now has been signed of considering financial implications, hard to fill areas and consistency across all grades. The delay in signing off the rate card will have implications on planned go live date in November 2019. Considering critical pathway, Christmas holidays and pay periods a revised Go-Live date has been established for 12th January 2020. Attached for information is the agreed Rate card. This has been circulated virtually to the senior leadership team and will be ratified by Executive team on the 8th November.

Long term Locums & Agency Cap Compliance

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. Progress to reduce the number of long term locums and recruit under Kendall Bluck Locum opportunities is summarized in below table.

Unit/Service	Recruited	Started in Post
Morriston/Medicine	15	9
Reserve candidates are being reviewed for remaining 5 vacancies. Post have also been put forward for the 2019 BAPIO initiative		
Morriston/Radiology	1 x NHS Locum doctor recruited	Due to start in November 3x long term agency locum remain
Singleton/Oncology	Oncology-2x substantive consultant recruited	1xdue to start in November 1 x joining date TBC after exam results 18/10/19
NPT/Medicine	3 x substantive recruitment completed via Medacs permanent; All (3x Long term locum) to exit in November	1x started 23/09/19 Remaining two due to start in November and December
MH&LD	2 x Speciality doctor recruited	1 Due to start Nov 1 Needs IELTS ,starting date TBC

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	Morriston	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

Key achievements:

E-Job Planning
▪ consistency checking completed for 9 specialities covering 72 Job plans
▪ Below signed off by Programme board
   o Job Planning Sign off and Appeals process
   o Travel Matrix
   o SPA Tariff

Locum on Duty
▪ SB UHB rate card established and signed off
▪ Go-Live Date -12th January 2020

Recruitment progress Including Long Term Locum and Kendall Bluck Locum Opportunity
▪ Successful recruitment initiative in Various areas including Morriston Medicine, NPT Medicine, Radiology , Oncology and MH&LD

Current delivery confidence remains amber through September and October.

2.2. Nursing

Introduction

The main objective of the project is to improve the processes and practices that will ensure that the nursing workforce is utilised efficiently and effectively.

Project	Objectives	Key Milestones
Top of licence working "The right **Skills** for the right patient"	• Recruitment and retention of Nurses. • Recruitment of Health Care Support Workers. • Implement Assistant Practitioner role - Band 4. • Standardised job descriptions for HCA Band 2, 3 and Assistant Practitioners. • Identify Service Delivery Unit workforce re-design projects. Enable the sharing of this learning to facilitate upscaling**.**	**Recruitment activity for the Assistant Practitioners :** • Training of the Band 4 roles **(Started on October 7th. Inducted into clinical areas in December 2019)** • Recruitment of the Band 3 Trainee Assistant Practitioner **(Role advertised in October 2019)** • Continue the Induction Process on the wards for the recently graduated qualified nurses **[Supernumerary during October 2019)**
Efficient nursing workforce "the right **Time** for the right patient"	• Implement the 'E-Roster' system for the nursing workforce within all the Service Delivery Units. • Implement the 'Efficiency Framework' for Nursing Rostering in all Service Delivery Units. • Monitor KPI compliance against the Nurse Rostering Policy. • To implement the 'Safe Care' module in the Service Delivery Units.	• Progress the refresh / implementation of E-Roster System in Gorseinon, Neath Port Talbot (Theatres), Singleton (Maternity). • Implement consistent 'Scrutiny Panels' for E-Roster in Service Delivery Units (September 2019). • Embed the main KPIs applied in the *'Insight Report'* in Service Delivery Units that are using E-Roster (October 2019) • Start the implementation of the Allocate 'Safe Care' (February 2020).
Enhanced supervision	• Identify the usage for Enhanced Supervision in hotspots areas within hospitals.	• Implement a plan to launch the finalised 'Enhanced Observation and Support Framework'.**(October 2019)**

| "the right **Care** for the right patient" | • Implement a Health Board Framework for Enhanced Supervision.
 • Evaluate the Quality and Care for patients requiring Enhanced Supervision.
 • Reduce the number of avoidable Enhanced Supervision additional requests (which are above the normal substantive budgeted establishments). | • Implement a consistent approach and policy for the use of Enhanced Supervision for patients in three areas [1:1, Acuity, Co-horting] (October 2019).
 • |

Current Progress and Key Achievements:

- Recruitment process completed for the Band 4 Assistant Practitioner Role (5 candidates recruited).

- Recruitment process commenced for the Band 3 Trainee Assistant Practitioner Role (15 - 20 new roles anticipated).

- Allocation of the recently recruited nurses to roles within the hospitals from September 2019 (120 substantive positions filled).

- Trial of the 'Enhanced Observation and Support Framework' undertaken in Singleton, Neath Port Talbot and Morriston Hospitals.

- Undertaken two 'Point Prevalence Audits' (Survey) of Enhanced Supervision in Singleton, Morriston, Neath Port Talbot, Gorseinon Hospitals.

- Process now in place from September 2019 to receive Monthly 'Insight' reports from Allocate.

- Standard Operating Procedures published for the Nurse Rostering Scrutiny Process in the Service Delivery Units.

- Monthly 'metrics tracker' created for the 3 work-streams.

The delivery confidence of project remains on 'Green'. Anticipated savings for 2019/2020 is £0.5m. Anticipated full year savings are £1.1m

2.3. Therapies

Introduction:

The project objective is to ensure the structure of the therapies workforce is optimal in terms of quality governance, efficiency, sustainability, and integrated working. As part of this work, the project will consider in the second phase the potential for different ways of working to enhance the delivery of therapy services and achieve efficiencies and savings.

Project	Objectives	Key Milestones
Therapies	Stage 1 – to realign budgets and management of the therapies workforce underneath the relevant specialist Head of Service	Stage 1 (summarised) • To complete databases identifying all therapies employees including vacancies dates here (completed 01.08.19) • To baseline the current workforce and identify services and individuals to be consolidated (completed Sept 19) • To propose and agree revised structures to accommodate integrated resource and identify initial savings (TBC) • Consult and implement consolidation of the therapies workforce (TBC)

Current Progress and Key Achievements:

Quality Impact Assessments have been undertaken on proposals to date, and returned positive impacts on quality. Further QIA will be undertaken to monitor impact of proposals following more detailed development.

The exercise to identify all therapies resource and agree a scope for integration of outlying resource is now complete. Financial and management elements of this scoping exercise are summarised in below table. Heads of Service have now been asked to propose their revised structures encompassing the findings of the scoping exercise. These structures should primarily seek to integrate the additional resource as well as identifying potential preliminary savings. On receipt, these structures will be tested by a panel, to include Chris White (COO).

The current levels of financial accountability as at September 2019 are as follows	The project is aiming for the following levels of financial accountability per therapy specialism
OT – 31% (headcount 105, WTE 87) Phys – 46% (headcount 174, WTE 148.14) N&D – 71% (headcount 61, WTE 48.85) SaLT – 62% (headcount 70, WTE 56.73)	OT – 94% (headcount 318, WTE 275.09) Phys – 95% (headcount 358, WTE 300.07) N&D – 100% (headcount 85, WTE 69.05) SaLT – 100% (headcount 112, WTE 92.25)

Pod – 94% (headcount 3, WTE 3) Psych - 9% (headcount 9, WTE 6.4)	Pod – 100% (headcount 51, WTE 42.15) Psych - 100% (headcount 97, WTE 92.25)
The current levels of management accountability as at September 2019 are as follows	**The project is aiming for the following levels of management accountability per therapy specialism**
OT – 39% (headcount 134, WTE 110.11) Phys – 62% (headcount 236, WTE 196.85) N&D – 85% (headcount 73, WTE 59.18) SaLT – 62% (headcount 70, WTE 56.73) Pod – 94% (headcount 48, WTE 39.15) Psych - 80% (headcount 78, WTE 68.17)	OT – 94% (headcount 318, WTE 275.12) Phys – 95% (headcount 358, WTE 300.08) N&D – 100% (headcount 85, WTE 69.05) SaLT – 100% (headcount 112, WTE 92.25) Pod – 100% (headcount 51, WTE 42.15) Psych - 100% (headcount 97, WTE 92.25)

Project delivery confidence remains amber through September and October due to the level of work requiring completion prior to identification and realisation of savings.
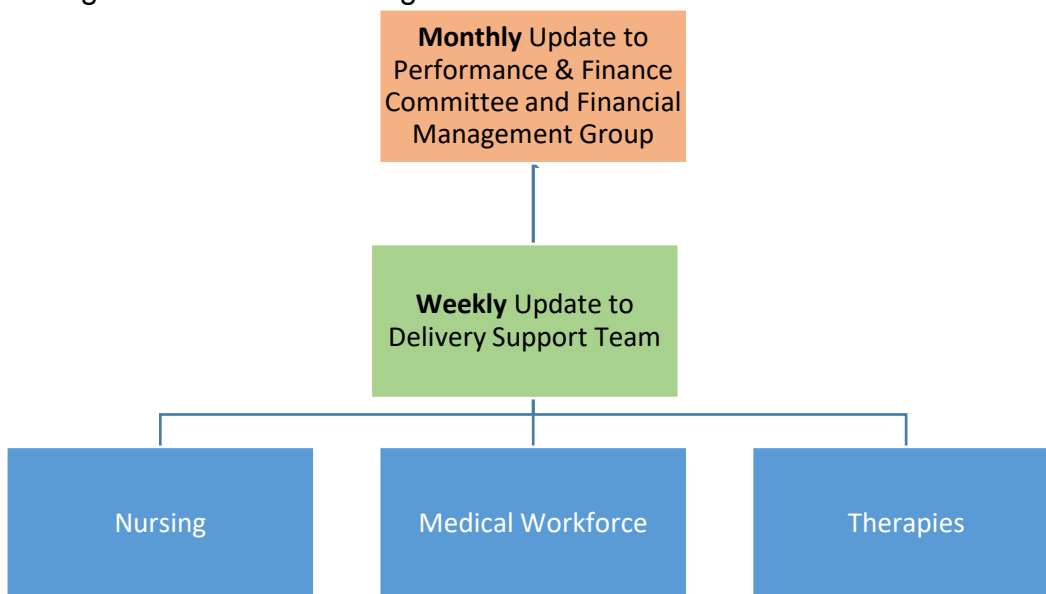
3. GOVERNANCE AND RISK ISSUES

All three projects have completed a Quality Impact Assessment (QIA) which has been submitted and reviewed by the QIA Panel.

The Swansea Bay University Health Board QIA assesses for risk against 4 quality domains – Patient safety, patient experience, clinical quality, whole system. Keys risks and potential impacts on quality have been identified through the screening process and full QIAs have been completed on those which identified as having a risk score of eight or above. The schemes which have been though the full QIA process have mitigating actions against any potential risks and measures for monitoring quality.

Reporting arrangements

Each project reports into their project board. Regular updates are also provided to the following Health Board meetings:

Monthly Update to Performance & Finance Committee and Financial Management Group

Weekly Update to Delivery Support Team

Nursing | Medical Workforce | Therapies

Risk Management

Each project has an individual RAID (risks, actions, issues, decisions) log which is managed through the project management governance arrangements.

4. FINANCIAL IMPLICATIONS

Failure to deliver the savings identified within the financial plan or to identify mitigating actions will impact on the Health Board's ability to contain its deficit to that set out in the savings plan and will pose a risk going into the next financial year. Hence, it is important to firm up savings detail and delivery confidence.

Table Below summarises current financial saving position:

Scheme Name	Original Target	Savings Anticipated 2019/20	Savings Anticipated FYE	Delivery Confidence
Medical Workforce	£1.0m	£0.250m	£0.7m	Amber
Nursing	£ 0.5m	£ 0.5m	£ 1.1m	Green
Therapies	£0.1m	£0.1m	£tbc	Amber

5. RECOMMENDATION

Workforce and OD Committee is asked to:
Note the progress made in all three High Value Opportunity schemes under Workforce Modernisation & Efficiency theme in the annual plan:
➢ Medical
➢ Nursing
➢ Therapies

Governance and Assurance		
Link to Enabling Objectives *(please choose)*	**Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities**	
	Partnerships for Improving Health and Wellbeing	☒
	Co-Production and Health Literacy	☐
	Digitally Enabled Health and Wellbeing	☐
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	☒
	Partnerships for Care	☐
	Excellent Staff	☒
	Digitally Enabled Care	☒
	Outstanding Research, Innovation, Education and Learning	☒
Health and Care Standards		
(please choose)	Staying Healthy	☐
	Safe Care	☒
	Effective Care	☒
	Dignified Care	☐
	Timely Care	☒
	Individual Care	☐
	Staff and Resources	☒

Quality, Safety and Patient Experience
Project scoped under these workstreams will impact on efficiency and effectiveness of how we utilise our workforce and will improve quality, safety and patient experience. Improvement measures are detailed in project outline document and will be tracked via respective workstream project structure.
Financial Implications
Failure to deliver the agreed savings plan will have an adverse impact on the Health Board's overall position and ability to meet its control target.
Legal Implications (including equality and diversity assessment)
No specific implications to highlight
Staffing Implications
No specific implications to highlight
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)

Report History	N/A
Appendices	Workforce Modernisation & Efficiency-HVO update to Performance & Finance Committee Sep 19 -Slide Deck (for information)