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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	9th February 2021	Agenda Item	4.2
Report Title	Medical Agency and Locum Utilisation		
Report Author	Sharon Vickery, Assistant Director Workforce & OD		
Report Sponsor	Kathryn Jones, Director of Workforce & OD (Interim) Dr Richard Evans, Executive Medical Director		
Presented by	Sharon Vickery, Assistant Director Workforce & OD		
Freedom of Information	Open		
Purpose of the Report	To set out for the Workforce and OD Committee salient information regarding the utilisation of agency and locum doctors during 2020. This report will also cover November and December 2020		
Key Issues	To update the snapshot of locum and agency utilisation during 2020 to allow a benchmark for further monitoring in 2021.		
Specific Action Required <i>(please choose one only)</i>	Information	Discussion	Assurance
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recommendations	Workforce and OD Committee are asked to : <ul style="list-style-type: none"> • Note that 2020 may not be a representative year due to the pandemic. • Note the development of the Internal Medical Bank with over 1,100 doctors registered so far. • Note draft plans for 2021, which will be dependent on the effects of the Pandemic. 		

MEDICAL AGENCY AND LOCUM UTILISATION

1. INTRODUCTION

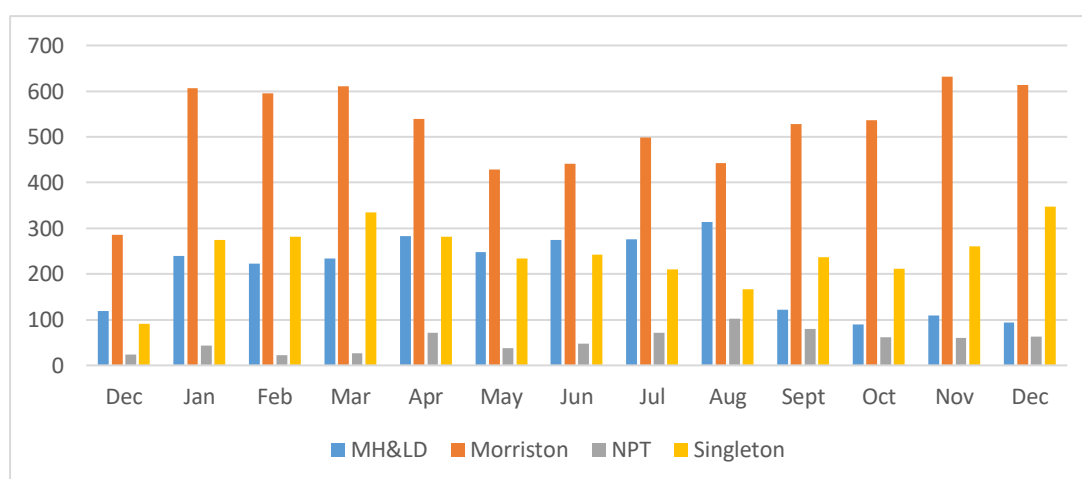
To set out an update for the Workforce and OD Committee (WOD) in respect of salient information regarding the utilisation of agency and locum doctors during 2020.

2. BACKGROUND

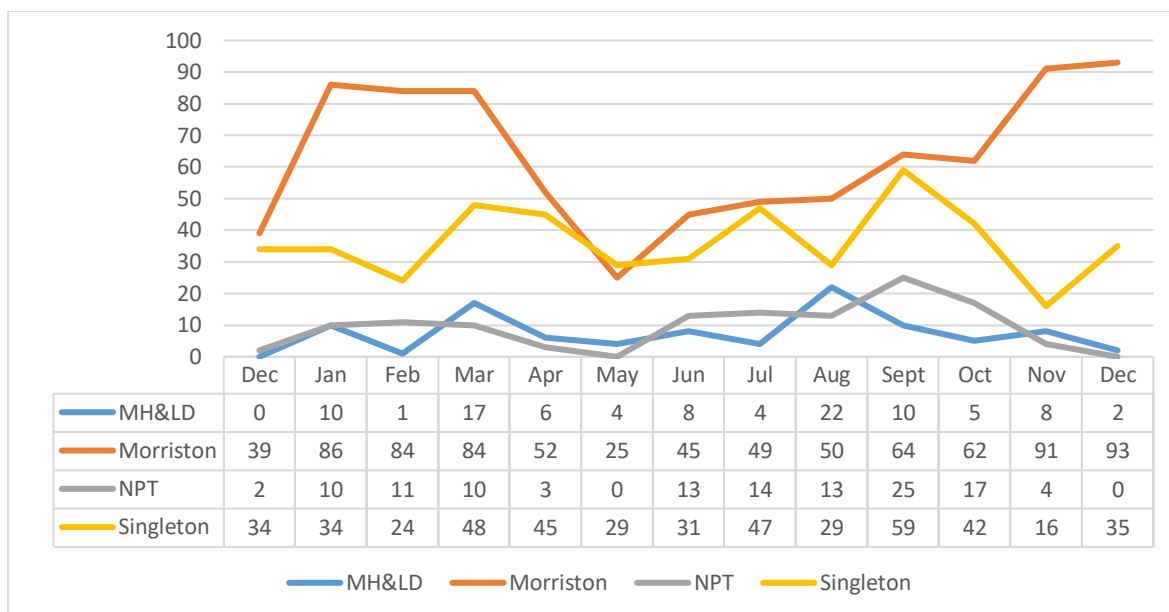
It has been usual practice to report medical agency and locum utilisation and expenditure to the WOD Committee. The Pandemic has disrupted this reporting and the work associated with this. Below is an updated snapshot from 2020, which could form the baseline for further tracking which may be dependent on COVID in the first few months of 2021.

Agency and Locum Data

The graph below depicts the total locum usage during the last 13 months broken down by individual Service Groups. The updated information includes November and December 2020. The graph shows that during November and December there was an increase in usage, which may correlate with increased clinical activity and staff absence due to Covid. Usage in these two months was the highest in the last 13 months.

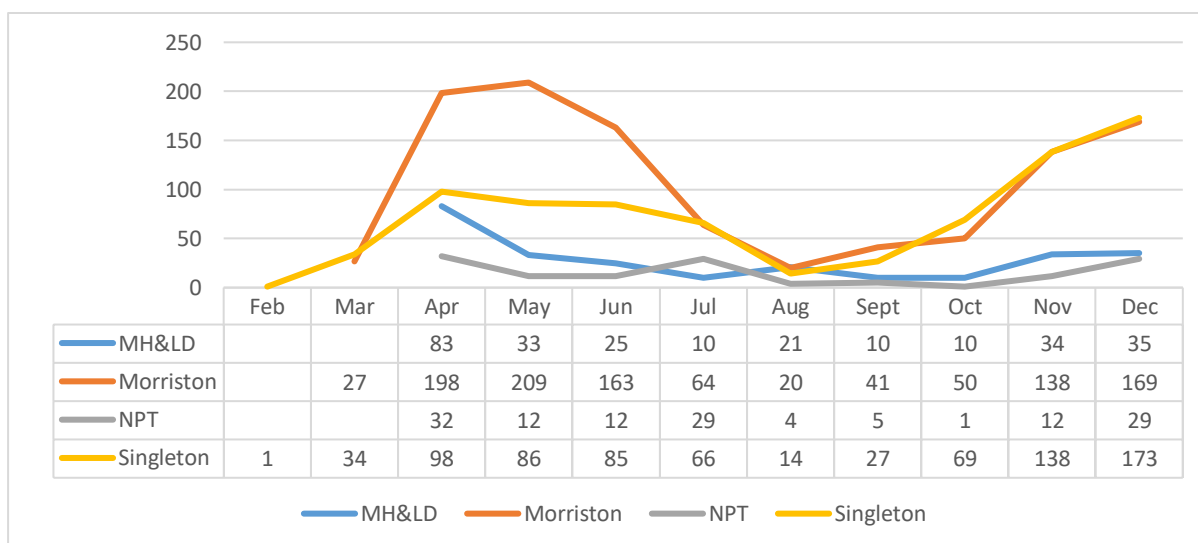


On average 1,000 shifts a month are being processed for agency and locum doctors and the main reasons for the Locum usage can be identified as a result of Deanery gaps and vacancies. The data is also identifying the amount of locum cover that is being requested due to sickness (graph below). Both Morriston and Singleton Service Groups reported increases during November and December.



COVID

The graph below illustrates the locum and agency usage that has been created due to COVID. The data shows a significant increase within Morriston and Singleton Delivery Units for November and December 2020. This highlights that Singleton utilised the highest number of Covid shifts in these months. However, Morriston used a higher number of shifts in April and May 2020.



Internal Locums

To date there are 1,100 medical staff actively using Locum on Duty. The Health Board is continuing to see an increase in staff registering for our internal bank, which is assisting in reducing agency costs. The recent data shows an increase in Locum costs leading up to December where previously it had begun to decline. The increase however is in Morriston and Singleton with the other two service groups reducing expenditure in December. There is a slightly different pattern in agency cost by service group

Costs

SG	Internal April	Internal October	Internal November	Internal December
Singleton	128,769	106,258	110,259	139,192
Morriston	290,684	283,691	336,611	322,376
MH & LD	58,217	52,725	63,002	46,432
Neath	30,674	27,615	29,762	23,057
Total	508,344	470,290	539,634	531,507

SG	Agency April	Agency October	Agency November	Agency December
Singleton	22,196	39,984	197,340	185,211
Morriston	149,199	207,649	156,259	138,320
MH & LD	332,914	97,052	177,102	122,979
Neath	Nil	8,664	41,144	47,453
Total	504,332	353,063	571,845	493,963

Please note that the internal financial figures reflect actual spend in month. The Medacs data is based on booked data, which may mean that not all shifts are worked in month.

Compliance with the Welsh Government Capped Rates.

The first table below outlines the average locum shifts in April, October, November and December 2020 that have been booked both below and above the capped rates. The data illustrates there has been an increase in the number of internal shifts that have been booked above the Welsh Government Capped rates. This increase can be seen on a month by month basis from February 2020 and could be as a direct result of COVID and possibly due to the exhaustion that many staff are now feeling.

It is important to highlight that many Service Groups negotiate locum rates below the Health Board's rate card. Whilst the majority of shifts are below the cap there has been an increase in the number of shifts that are being negotiated above this ceiling. It is likely that this is linked to the impact of COVID and the shortage of staff in general.

The second table shows the same data but for agency staff. The trends are the same however, compliance is much lower with Agency staff than with internal staff. This reflects the normal patterns but has deteriorated further during 2020. It should be

noted that it is becoming increasingly difficult to source doctors in medicine due to the UK wide demands as a result of COVID. This is further increasing rates.

Internal Locum	Apr-20	Oct-20	Nov-20	Dec-20
Individuals Booked	269	243	327	357
Individuals Booked At/Below Cap	198	162	203	226
Individuals Booked At/Below Cap %	73.60%	66.66%	62.08%	63.30 %
Individuals Booked Above Cap	71	81	124	131
Individuals Booked Above Cap %	26.39%	33.33%	37.92%	36.69%
Hours Booked	10,116.5	8775.41	10630.85	11526.61
Hours Booked At/Below Cap	7608	6043.08	6824.01	7889.6
Hours Booked At/Below Cap %	75.20%	68.86%	64.20%	68.44%
Hours Booked Above Cap	2508.5	2732.33	3806.84	3637.01
Hours Booked Above Cap %	24.80%	31.14%	35.80%	31.56%
Jobs Booked	930	898	1069	1119
Jobs Booked At/Below Cap	675	614	660	723
Jobs Booked At/Below Cap %	72.58%	68.37%	61.73%	64.70%
Jobs Booked Above Cap	255	284	409	396
Jobs Booked Above Cap	27.42%	31.63%	32.27%	35.30%
Agency	Apr- 20	Oct - 20	Nov 20	Dec 20
Individuals Booked	22	18	21	25
Individuals Booked At/Below Cap	4	2	1	2
Individuals Booked At/Below Cap %	18.81%	11.11%	4.76%	8%
Individuals Booked Above Cap	18	16	20	23
Individuals Booked Above Cap %	81.18%	88.89%	95.24%	92%
Hours Booked	6,701.50	4,888.50	7,091.00	6,741.00
Hours Booked At/Below Cap	2,802.00	990.00	450	762.00
Hours Booked At/Below Cap %	41.81%	20.25%	6.35%	11.30%
Hours Booked Above Cap	3,899.50	3,898.50	6,641.00	5,979.00
Hours Booked Above Cap %	58.18%	79.75%	93.65%	88.69%

Jobs Booked	38	30	54	32
Jobs Booked At/Below Cap	4	2	1	2
Jobs Booked At/Below Cap %	10.52%	6.67%	1.85%	6.25%
Jobs Booked Above Cap	34	28	53	30
Jobs Booked Above Cap %	89.47%	93.33%	98.15%	93.75%

Future Developments

As Locum on Duty is now embedded within the Health Board it is essential that the digital journey continues. During 2021 specific focus will include:

- Review Health Board rate card
- Reduce the number of times locums are booked above the Welsh capped rates.
- Continue to develop the internal locum bank
- Develop and increase intelligence reporting from Locum on Duty
- Implement the Medical Rostering Module which will complete the Medical Optimising package from Allocate. This will mean that E- job planning, Locum on Duty and Medic on Duty will be able to work together to allow greater insight into the management of the medical workforce and so improve deployment, optimise utilization and increase capacity and productivity. The Medical rostering module will also provide software packages to record sickness absence, manage annual leave and study leave.
- Further work is needed to tackle long standing Medacs locums and to replace with NHS appointments.
- Further efforts are needed to attempt to tackle the low compliance of Medacs' locums with the agency capped rates.

3. GOVERNANCE AND RISK ISSUES

Greater governance has been achieved through the introduction of Locum on Duty due to the increased reporting resulting in greater transparency.

4. FINANCIAL IMPLICATIONS

There are financial implications associated with the provision of locum and agency staff. Many however fill vacant posts although usually at premium rates.

5. RECOMMENDATIONS

The Workforce and OD Committee are asked to:

- **Acknowledge** the introduction of Locum and on Duty, which delivers an increased reporting functionality.
- **Note** that 2020 may not be a representative year due to the pandemic.
- **Note** the development of the Internal Medical Bank with over 1,000 doctors registered so far.
- **Note** the plans for 2021, which may be dependent on the effects of the Pandemic.

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	<input type="checkbox"/>
	Co-Production and Health Literacy	<input type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input checked="" 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"/>
Health and Care Standards		
(please choose)	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"/>
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 is the 11 th Report	
Appendices	None	