

Staff Bank Freedom of Information (FOI)
Request

Please answer the below questions in relation to your organisations staff bank utilisation for each staffing group	Medical & Dental	Allied Health Professionals (AHPs)	Nursing & Midwifery	Non-Medical Non-Clinical (including admin and estates)
1a. Does your organisation have staff bank? (an entity of staff managed by either the organisation or a third-party, who are temporarily contracted to take on shifts)	No	No	Yes	Yes
1b. If yes, what type of bank is in place: i) Internal bank supported by third-party technology ii) Managed bank iii) Outsourced bank iv) In-house (no third-party involved, possibly managed on Excel)	N/A	Outsourced via MEDACS as direct engagers	Internal Bank	Internal Bank
2a. What is the monthly average number of workers (headcount) on the bank in the last 12 months?	N/A	19	201	75
2b. What is the monthly average utilisation rate for your bank in the last 12 months? (calculated based on the % of vacant shifts filled by bank workers)	N/A	Not available	63%	Not available
2c. What is the average utilisation rate for your bank in November 2019?	N/A	Not available	60%	Not available
2d. What is the average utilisation rate for your bank in December 2019?	N/A	Not available	48%	Not available
2e. What is the average utilisation rate for your bank in January 2020?	N/A	Not available	65%	Not available

Please answer the below questions in relation to the organisations staff bank supplier for each staffing group	Medical & Dental	Allied Health Professionals (AHPs)	Nursing & Midwifery	Non-Medical Non-Clinical (including admin and estates)
3a. Please state the name of the third-party supplier(s) used to manage the supply of your bank staff, inclusive of any outsourced or managed arrangements (i.e. NHSP, Patchwork, Allocate, Liaison, PlusUs, Locum's Nest etc)	N/A	Medacs	Internal	Internal
3b. Please state the name of the software used to book and manage your bank staff (i.e. NHSP:Connect, TempRE Bank, Allocate BankStaff etc.)	N/A	Allocate	Allocate	Allocate
3c. Do your bank workers book shifts via a mobile app? If yes, please state the name of the app being used	N/A	N/A	Yes - Employee On Line (EOL)	Yes - Employee On Line (EOL)
3d. Do your bank workers submit electronic timesheets using the software?	N/A	No	No	No
3e. Does your organisation make use of an API (Application Programming Interface) i.e. allows for interaction/communication with other software.	N/A	No	No	No
3ei. If yes to the above, please state the software integrations that are currently being utilised e.g. Ryalto with NHSP, Reed with Patchwork etc.	N/A	N/A	N/A	N/A
4a. What framework was used to procure the supplier?	N/A	Crown Commercial Services Framework for Multidisciplinary Temporary Healthcare Personnel ref: RM3711	N/A	N/A
4b. What is the contract start date? (dd/mm/yy)	N/A	Extended from 1st August 2019	N/A	N/A
4c. What is the contract end date? (dd/mm/yy)	N/A	31st July 2020	N/A	N/A
4d. What was the average monthly fee paid to the supplier in the last 12 months?	N/A	Please see below*	N/A	N/A
4e. What is the pricing structure of the fees paid to the supplier? I.e. % of costs processed, fixed transactional fee, license fee etc	N/A	100% license fee	N/A	N/A

* This information is withheld. Section 43 of the Act sets out an exemption for the right to know if release of the information is likely to prejudice the commercial interests of any person (a person may be an individual, a company, the public authority itself or any other legal entity). Section 43 is a qualified exemption. That is, it is subject to the public interest test.

The Health Board accepts that there is a public interest in ensuring openness and transparency and there is an interest in the public being aware of how much money is spent and the benefits derived from that expenditure. However, the Health Board believes that disclosure of information in a manner which fails to protect the interests and relationships arising in a commercial context could have the effect of discouraging companies from dealing with the Health Board because of fears that the disclosure of information could damage them commercially. In turn this could then jeopardise the Health Boards ability to compete fairly and pursue its function to bring forward development in the area and obtain value for money. It was therefore decided that it is not in the publics' interest to disclose this information.

