



NHS Lothian Workforce Report

Workforce Planning Team

3rd Quarter

October 2005 – December 2005

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1. Purpose

The purpose of this report is to provide the EMT with:

- Overview of the NHS Lothian Workforce numbers, costs, staffing profile
- Key issues of concern and actions required
- Detail on progress with a range of workforce issues such as policy development and workforce development activity.

2. Background

This report builds on those published in the quarter 1 2005/6(Q1) and quarter 2 2005/6(Q2). With the baseline built from April 2004 it is now possible to draw meaningful comparisons and establish where variations and change are occurring.

Within NHS Lothian there is currently no single HR system, from which to draw information payroll is therefore the source for in-post and cost information as well as absence. The other information included comes from either the LUHD PWA HR system or other local systems of collection.

During the quarter the business case for the Lothian-wide role out of the PWA HR system has been approved by the Lothian Informatics Board and EMT. Once approval to proceed is given by the Finance and Performance Review Group a detailed project plan will be developed with the objective of establishing a single electronic staff record for all staff in Lothian. The establishment of this single HR system will result in a transformation in HR reporting capability, with greatly enhanced reporting, covering many areas such as training and development, recruitment and absence management.

All information within this report covers staff who are on NHS Lothian payroll, it does not cover staff employed by University etc. who work on NHS sites. GP and Dental practice staff are also not covered as a result, the Workforce Planning Team are however attempting to pull together information on these groups from other areas and will be included in the future. As a consequence the report will not match exactly workforce information published by ISD.

Within this 2005/6 Q3 report an additional section has been added to those routinely reported on, this section will provide a focus on the Allied Health Professional workforce.

All of the detailed information within this 'overview level' report can be 'drilled down'. It can also be stratified by a range of factors such as Division, grade, site, etc.

3. NHS Lothian Staffing Overview

3.1. In-post Staffing

NHS Lothian currently employs 18,309 whole time equivalent (WTE) staff. The table below details staff in post for April to December 2005/06 by staff group.

Table 1: Breakdown of Workforce by Staff Group - April 2005 to December 2005

Staff Group	Apr-05	May-05	Jun-05	Jul-05	Aug-05	Sep-05	Oct-05	Nov-05	Dec-05	YTD Average
Medical	1,722	1,733	1,732	1,733	1,688	1,750	1,753	1,750	1,747	1,734
Nursing Reg	6,233	6,174	6,195	6,183	6,190	6,191	6,201	6,208	6,242	6,202
Nursing Non-reg	2,678	2,630	2,681	2,700	2,693	2,705	2,706	2,701	2,732	2,692
P&T:A	1,665	1,668	1,674	1,690	1,689	1,681	1,677	1,672	1,683	1,678
P&T:B	1,100	1,103	1,100	1,104	1,107	1,107	1,109	1,112	1,107	1,105
A&C	3,133	3,117	3,131	3,144	3,165	3,138	3,134	3,134	3,127	3,136
Ancillary	1,482	1,460	1,478	1,487	1,501	1,613	1,615	1,478	1,471	1,509
Maintenance	201	204	203	200	202	207	208	200	199	203
Total	18,215	18,087	18,194	18,241	18,236	18,391	18,402	18,255	18,309	18,259

P&T:A include AHPs, Clinical Scientists/Psychologists, Radiographers and Pharmacists.
 P&T:B include MLSOs and MTOs

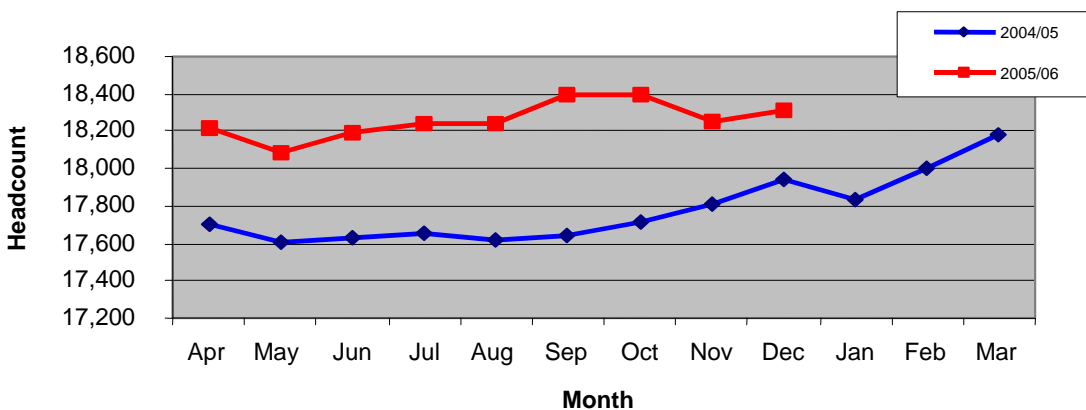
The table and chart below provide a comparison of staff in post between Q1 – 3 2004/05 and the same period in 2005/06.

Table 2: Q1 - 3 2004/05 and Q1 - 3 2005/06 Workforce comparison

Staff Group	Q1-3 2004/05	Q1-3 2005/06
Medical	1,650	1,734
Nur. Reg	5,999	6,202
Nur. Non-reg	2,589	2,692
P&T:A	1,632	1,678
P&T:B	1,091	1,105
A&C	3,072	3,136
Ancillary	1,461	1,509
Maintenance	210	203
Total	17,704	18,259

Chart 1.

NHS Lothian Workforce WTE - April 2004 and December 2005



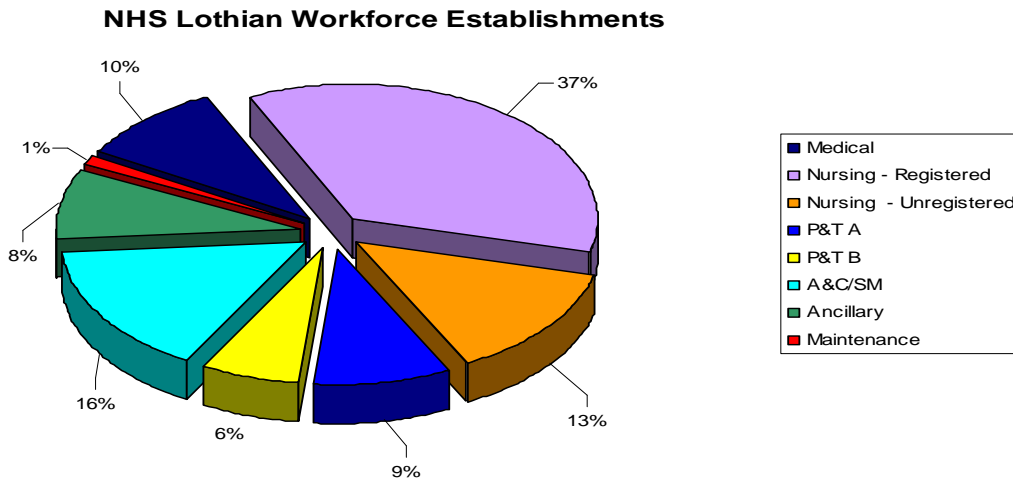
The NHS Lothian Workforce is relatively consistent in overall terms, with no major variation between months. There has however been a steady increase month on month with the exception of January and May 2005. The average for Q1 – 3 2005/06 and Q1 – 3 2004/05 has increased by 555 wte(3.3%). Within this increase there has been an increase in the average of 203 wte (3.4%) registered nurses and 84 wte in Medical staff (5.1%).

3.2. Established Posts

Workforce Establishment figures used are those held within the three financial systems within Lothian. These are the same figures that Operational Managers receive in their budget statements and use for the management of their services.

The following chart is the distribution of the workforce establishments by staff group across NHS Lothian as at December 2005.

Chart 2.



The following table shows establishment figures for each staff group within each Division. It now incorporates WLD with LUHD but splits it by division.

Table 3: Establishment figures per staff group per Division

Staff Group	Corporate	Facilities	M&AS	S&AS	LUHD Total	LH Total	LPCD Total	Grand Total
Medical	3	-	609	800	1,412	15	330	1,757
Nursing - Reg	99	-	1,723	2,218	4,040	6	2,268	6,315
Nursing - Non Reg	4	-	607	663	1,274	0	1,156	2,430
P&T A	3	-	639	192	834	1	820	1,655
P&T B	15	3	640	313	971	0	186	1,157
A&C/SM	497	156	542	524	1,719	190	1,085	2,994
Ancillary	10	910	2	52	975	0	513	1,488
Maintenance	-	124	-	-	124	0	84	207
Grand Total	631	1,193	4,761	4,763	11,349	212	6,442	18,003

Source – Divisional E-financial Systems

Within LPCD there are small number that are attributable to a particular staff group, however they do appear to fall under agency staff these have therefore been omitted from the above figures.

The establishment figures provided are below those for in post, in the year to date in-post figures have been on average 192 wte higher. This is primarily due to the fact that LPCD are c470 wte above the establishments, this is obviously an issue and the workforce planning team will liaise with finance to clarify in next quarterly report.

3.3 Vacancies

3.3.1 Vacancies Actively under Recruitment

The following vacancies are those actively under recruitment for all staff groups except medical staff (Medical staff are not recruited via any HRIT system and Ancillary are recruited locally). Vacancies that are on-hold or frozen are not included.

Chart 3 and 4 detail the vacancies under recruitment by staff group and the number under recruitment compared with last financial year.

Chart 3.

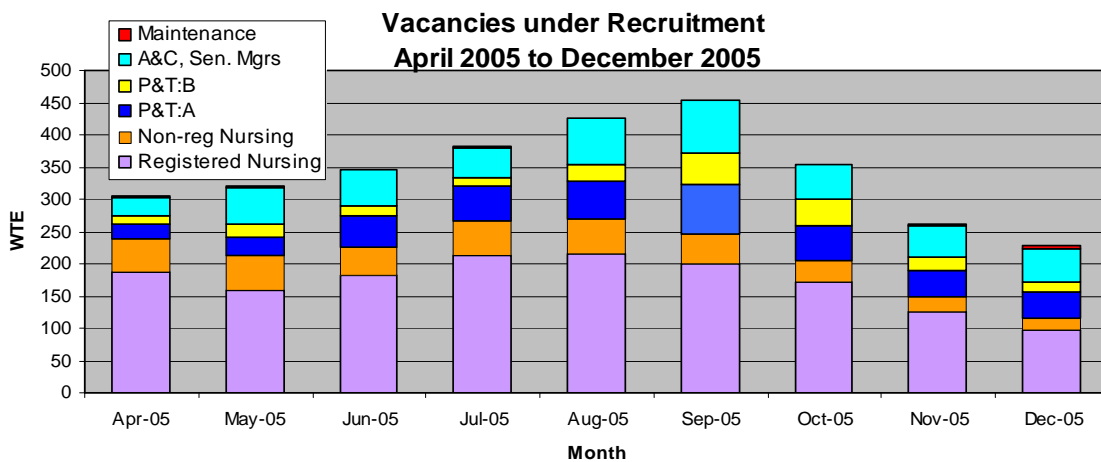
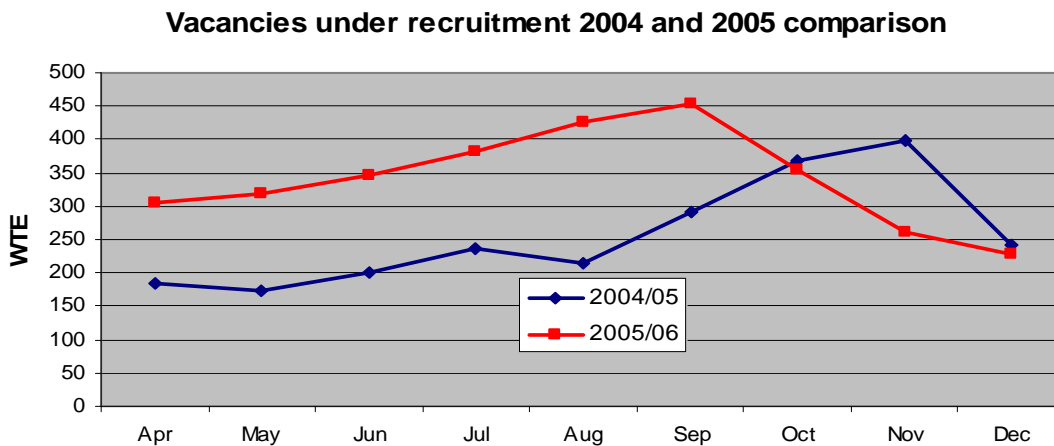


Chart 4.



It is difficult to compare the actual level of increase/decrease on last financial year, as this information was not collected in LPCD in a consistent way. However from the beginning of September all recruitment is being processed centrally using the PWA HR system and this will provide a consistent and robust source for recruitment information.

There are three Clinical Management Areas where there is a high percentage of lost workforce utilisation in registered nursing as a result of a combination of a high level of Registered Nurse vacancies and high sickness absence, these are detailed in the table below:

Table 4: Acute Clinical Management areas (UHD) with combined vacancy and absence rate over 15%

Q3 2005/06	Cardiology/ Respiratory	Orthopaedics/ Rheumatology	Critical Care
Established Posts	405.98	244.75	308.15
In post	357.58	207.92	282.21
Vacancies %	15.71	15.05	8.42
Sickness %	7.15	8.93	9.29
Combined % lost	19.08	23.97	17.71

4. NHS Lothian Workforce Costs

4.1 In year Workforce Costs

The total workforce costs for Q1-3 2005/06 were c£450m. The following table details workforce costs for April to December 2005 by staff group. These costs represent the Gross Charge to NHS Lothian and include all employers' costs and additional payroll costs such as overtime and shift premiums, details of these are included later on in this report.

Table 5: Breakdown of Workforce costs by staff group – Q1- Q3 2005/06

Staff Group	Apr-05	May-05	Jun-05	Jul-05	Aug-05	Sep-05	Oct-05	Nov-05	Dec-05	YTD Total
Medical	12,630,565	12,493,416	12,666,079	12,792,542	12,579,875	12,745,320	12,499,440	12,559,533	12,530,918	113,497,687
Nursing Reg	16,864,588	16,706,788	17,036,359	16,401,380	16,911,957	16,545,319	17,005,982	17,028,173	17,136,075	151,636,620
Nursing Non-reg	4,099,461	4,055,375	4,117,050	4,071,490	4,093,547	4,055,539	4,195,955	4,159,504	4,251,012	37,098,934
P&T:A	4,743,261	4,772,480	4,790,154	4,854,986	4,792,289	4,802,548	4,865,410	4,875,675	4,858,710	43,355,513
P&T:B	2,593,187	2,562,160	2,587,370	2,607,462	2,571,178	2,573,873	2,594,261	2,580,134	2,568,249	23,237,875
A&C	6,466,078	6,425,411	6,428,406	6,698,541	6,420,579	6,450,114	6,526,031	6,544,541	6,466,327	58,426,028
Ancillary	1,870,233	2,265,345	1,818,800	2,295,365	1,831,771	1,999,451	2,225,377	2,125,769	1,966,227	18,398,339
Maintenance	495,142	540,478	479,250	535,131	470,331	489,049	555,929	514,932	500,834	4,581,075
Total	49,762,516	49,821,452	49,923,467	50,256,898	49,671,527	49,661,213	50,468,385	50,388,261	50,278,352	450,232,072

The table and chart below provide a comparison of workforce costs between Q1-3 2004/05 and Q1-3 2005/06.

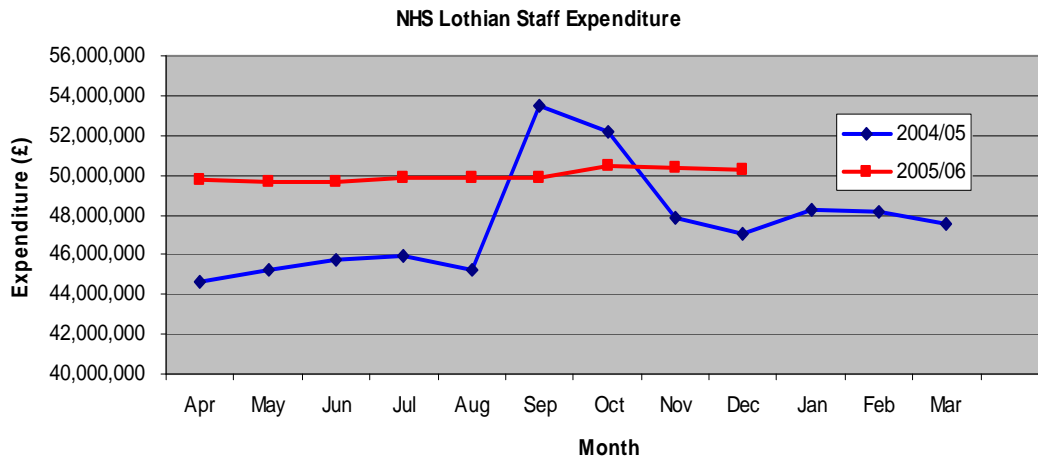
Table 6: Q1-3 2004/05 and Q1-3 2005/06 Workforce costs comparison

Staff Group	Q1-Q3 2004	Q1-Q3 2005
Medical	112,142,242	112,713,817
Nursing Reg	141,290,368	151,743,119
Nursing Non-reg	34,501,802	36,995,803
P&T:A	40,567,600	43,185,515
P&T:B	22,346,487	23,179,280
A&C	54,728,231	58,241,620
Ancillary	17,406,920	18,945,290
Maintenance	4,449,713	4,715,616
Total	427,433,363	449,720,061

Payroll costs have increased by £22.3m (5.2%) for Q1-3 when compared with the same period in 2004/5. The increase is accounted for by the following:

- 3.225% inflationary increase from April 2005 for Agenda for Change staff groups
- £10.5m increase in registered nursing cost as a result of an overall increase in wtes of 3.4% within Lothian and pay inflation

Chart 5.



4.2 Overtime Expenditure

The total overtime costs for April 2005 to December 2005 were c£5.17m the following table illustrates the distribution of overtime costs by staff group for this period.

Table 7: Distribution of Overtime costs by staff group April 2005 - December 2005

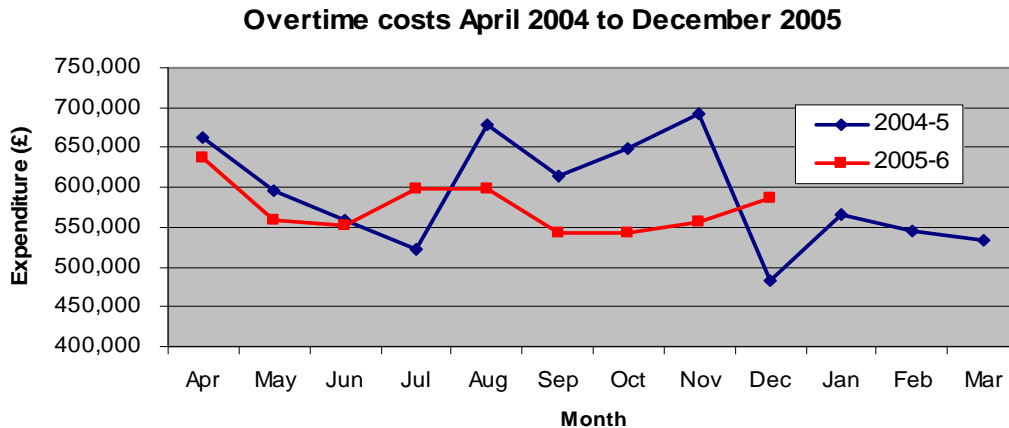
Staff Group	Apr-05	May-05	Jun-05	Jul-05	Aug-05	Sep-05	Oct-05	Nov-05	Dec-05	Total YTD
Nursing Reg	237,980	197,529	205,237	203,132	239,805	188,541	185,326	193,007	205,262	1,855,820
Nursing Non-reg	62,056	52,502	58,443	53,669	58,660	53,714	53,331	63,614	61,644	517,633
P&T:A	33,682	34,254	36,828	36,839	38,893	33,083	30,864	31,954	30,199	306,596
P&T:B	39,619	31,939	37,771	38,527	34,713	28,789	28,584	28,896	26,867	295,705
A&C	74,693	67,015	62,366	66,634	60,485	67,985	71,146	73,874	75,441	619,640
Ancillary	128,690	129,121	108,041	148,296	120,023	118,054	120,525	115,943	132,461	1,121,154
Maintenance	59,762	47,050	42,363	51,530	46,333	52,364	52,623	49,265	55,735	457,025
Total	636,482	559,410	551,050	598,627	598,912	542,529	542,400	556,553	587,610	5,173,572

The table and chart below provide a comparison of overtime costs between Q1-3 2004/05 and Q1-3 2005/06

Table 8: Q1-3 2004/05 and Q1-3 2005/06 overtime costs comparison

Staff Group	Q1-Q3 2004	Q1-Q3 2005
Nursing Reg	2,147,579	1,855,820
Nursing Non-reg	711,039	517,633
P&T:A	295,869	306,596
P&T:B	324,595	295,705
A&C	541,590	619,640
Ancillary	1,036,586	1,121,154
Maintenance	399,232	457,025
Total	5,456,490	5,173,572

Chart 6.



Overtime costs are down 5.2% in Q1-3 2005/06 when compared with the same period in the previous financial year. The largest reductions are £292k and £193k for Nursing Registered and Non-registered respectively.

Once the revised organisational structures and associated reporting structures are completed the Workforce Planning Team will link with service heads to discuss reporting requirements to ensure that detailed reporting extends to all of NHS Lothian.

4.3 Enhanced Pay Costs

These payments are made to staff working on a shift basis and as such attract an enhancement for night, un-social, Saturday and Sunday hours working.

The total enhanced costs for Q1-3 - April to December 2005 were c£16m. The following table illustrates the distribution of enhanced pay costs by staff group for this period.

Table 9: Distribution of Enhanced pay costs by staff group April 2005 - December 2005

	Apr-05	May-05	Jun-05	Jul-05	Aug-05	Sep-05	Oct-05	Nov-05	Dec-05	Total
Nursing Reg	1,004,050	1,091,415	1,284,385	1,031,327	1,167,121	1,013,142	1,125,534	1,362,180	1,101,301	10,180,454
Nursing Non-reg	339,887	356,333	383,965	341,279	376,105	335,797	365,222	448,802	377,621	3,325,012
P&T:A	6,858	8,446	7,930	5,582	6,821	6,524	19,160	7,870	6,978	76,169
P&T:B	5,999	9,108	12,227	5,287	4,928	5,065	14,378	6,145	5,409	68,546
A&C	68,836	68,450	73,149	60,334	65,837	64,672	74,841	70,927	58,850	605,897
Ancillary	181,202	240,920	176,253	215,802	176,102	223,636	218,507	174,365	183,048	1,789,835
Maintenance	3,228	5,041	3,396	2,934	3,602	4,051	5,507	2,727	3,712	34,198
Total	1,610,060	1,779,712	1,941,306	1,662,546	1,800,516	1,652,888	1,823,148	2,073,015	1,736,918	16,080,110

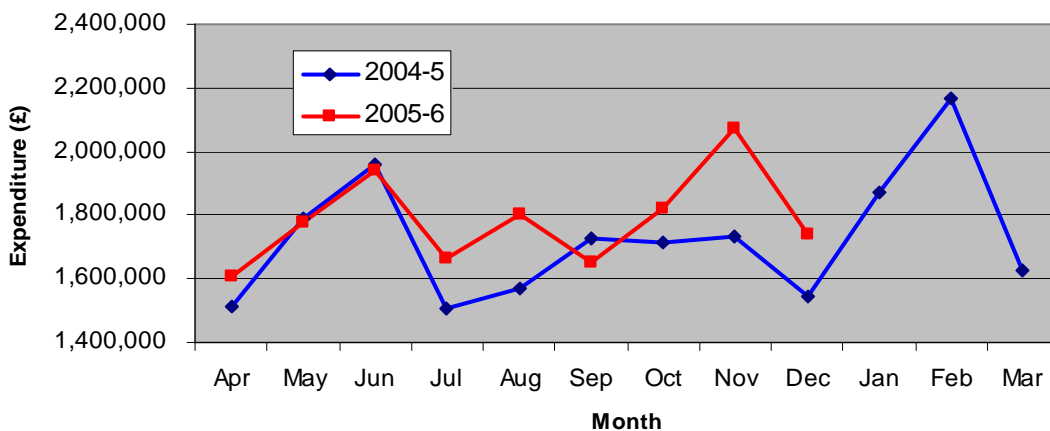
The table and chart below provide a comparison of enhanced pay costs between the first nine months 2004/05 and the same period in 2005/06.

Table 10: Q1-3 2004/05 and Q1-3 2005/06 enhanced pay costs comparison

Staff Group	Q1-Q3 2004	Q1-Q3 2005
Nursing Reg	9,434,405	10,180,454
Nursing Non-reg	3,223,122	3,325,012
P&T:A	46,399	76,169
P&T:B	49,475	68,546
A&C	620,357	605,897
Ancillary	1,659,946	1,789,835
Maintenance	29,528	34,198
Total	15,063,231	16,080,110

Chart 7.

Enhanced pay costs April 2004 to December 2005



Enhanced pay costs remained relatively static for Q1 & Q2, however since October costs have increased by an average of 12.8%. Overall there has been an increase of 6.75% overall for the Q1-3 period.

4.4 Training Grade Doctor Banding Payments

Training grade medical staff receive these payments in relation to the banding of their rota, with hours over 40 attracting a premium payment. These are as follows:

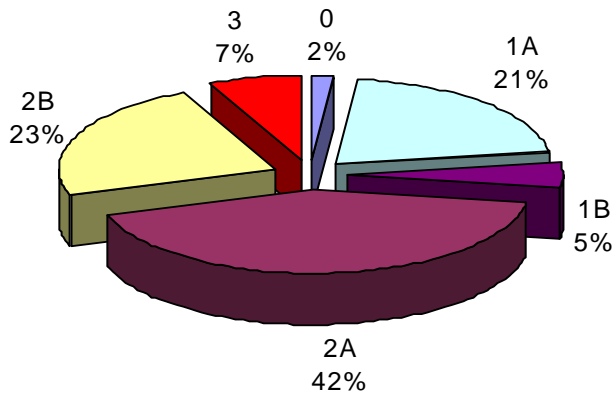
Table 11: Training grade Doctor Banding Payments

Band	% Enhancement applied to basic salary	
1a	50	Up to 48 hours (with unsocial hrs, on-call element)
1b	40	Up to 48 hours
2a	80	48-56 hours (with unsocial hrs, on-call element)
2b	50	48-56 hours
3	100	Non-compliant (Due to hours > 56, lack of breaks)

The following chart details the distribution of training grade doctors banding payment costs for December 2005.

Chart 8.

Distribution of Training grade rota bandings



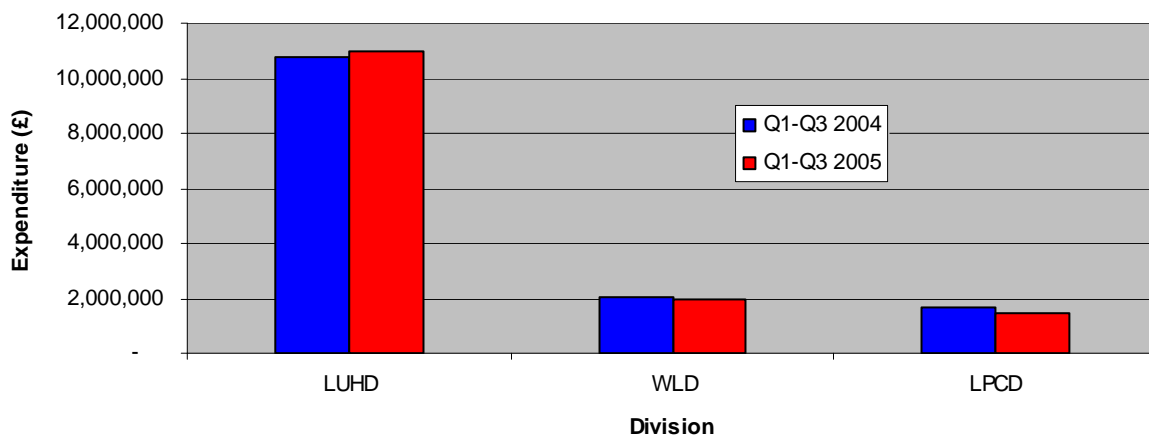
The table and chart below provide a comparison of banding pay costs between Q1-3 2004/05 and Q1-3 2005/06.

Table 12: Q1-3 2004/05 and Q1-3 2005/06 banding pay costs comparison

Division	Q1-Q3 2004	Q1-Q3 2005
LUHD	10,734,761	10,965,436
WLD	2,011,902	1,975,393
LPCD	1,694,058	1,454,321
TOTAL	14,440,721	14,395,149

Chart 9.

Q1-Q3 Comparative Figures-
Junior Doctor Banding Expenditure



The expenditure on banding payments has remained relatively static given with a decrease of 0.3% (£46k) in the period Q1-3 2005/6 when compared with the same period in the previous year.

The reduction however in real terms is approximately 3.225% as this is the level of increase that would be expected with pay inflation.

Within NHS Lothian, the University Hospitals Division accounts for 76% of all banding payments with WLD and LPCD at 14% and 10% respectively.

The following table highlights the areas where bandings have changed between Q2 and Q3.

Table 13: NHS Lothian Junior Doctors Bandings Q2/Q3 comparison

Former Division	Banding	Q2 2005	Q3 2005	Change
Acute Organisation	0	15	17	2
	1A	102	142.3	40.3
	1B	26	29	3
	2A	405.5	397	-8.5
	2B	187	225	38
	3	80	56	-24
Acute Organisation Total		815.5	866.3	50.8
PCO	1A	63	60	-3
	1B	18	17	-1
	2A	14	14	0
	3	11	10	-1
	F/T	10	10	0
PCO Total		116	111	-5
Grand Total		933.8	979.3	45.5

5. Absence Management

Across Lothian there are different processes for collecting sickness absence information with different IT systems used to collect it, the following table indicates current situation within each Division.

LUHD	Currently rolling out PWA HR System Intranet E-manager solution, which enables absence information to be input at ward manager level. This covers the range of absence reasons – sickness, maternity, careers, study leave etc. There are Service roll-out plans in place and these are being progressively implemented to ensure full coverage of all staff groups. After implementation returns can be electronically generated and forwarded to payroll services as hard copy.
LPCD	All absence information fed to payroll via manual returns. There is a reporting capability from historical payroll data, this however only covers sickness absence.
WLD	Sickness absence is currently input using the Budgetscan time and attendance system, this is done at ward manager level. This covers all staff except Medical and Nurse Bank staff and feeds payroll electronically.
LH	All absence information fed to payroll via manual returns.

Given the need for a comprehensive HR system it is intended that in the short to medium term the PWA HR system in LUHD will be rolled out across Lothian linking in with time and attendance systems where there is potential duplication.

In the absence of a common HR system and common HR process it is difficult to obtain a comprehensive report on all absences. It is however possible to pull historical sickness absence information via historical payroll reporting.

5.1 Sickness Absence

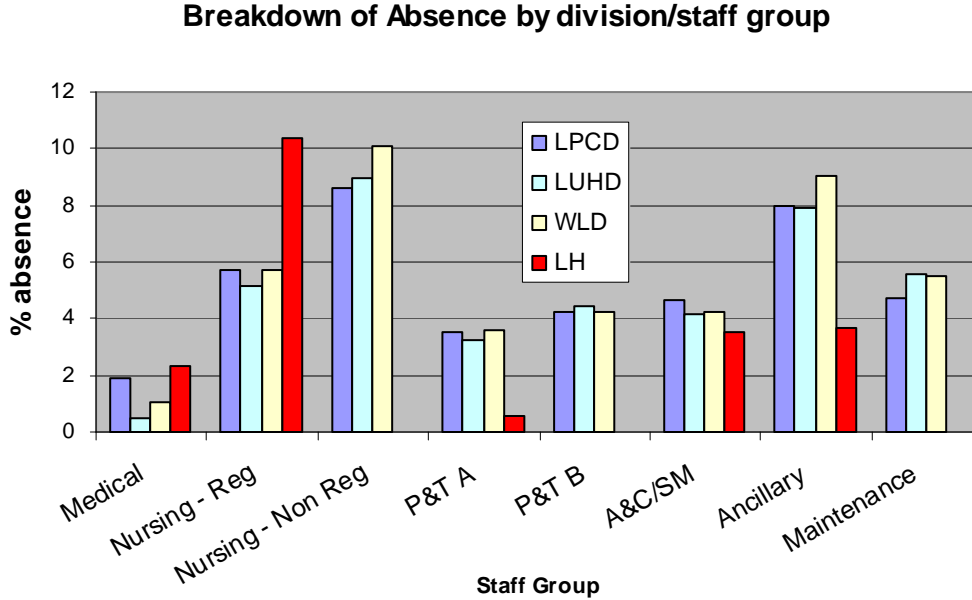
The following table and chart detail the sickness absence for each Division, for the period April 2005 to December 2005. In the table the highest figure for each staff group within Divisions has been highlighted in red.

Table 14: Sickness Absence Percentages by Division

Staff Group	LPCD	LUHD	WLD	LH
Medical	1.94	0.47	1.08	2.32
Nursing - Reg	5.74	5.12	5.72	10.38
Nursing - Non Reg	8.62	8.98	10.09	-
P&T A	3.53	3.26	3.62	0.55
P&T B	4.26	4.46	4.25	-
A&C/SM	4.67	4.16	4.24	3.55
Ancillary	7.94	7.94	9.04	3.65
Maintenance	4.71	5.57	5.50	-
Grand Total	5.80	4.80	5.97	3.65

In the case of medical staff it is difficult to determine the true level of absence as historically this is not collected and fed to payroll on a consistent basis.

Chart 10.



As with previous quarters there are significant differences in levels of sickness absence between Divisions, in some cases this is because there are a low numbers in the staff group and therefore make percentages comparatively high. It is however clear that absence levels at WLD are significantly higher than former LUHD and LPCD.

Cumulative nursing absence rates for all of Lothian are up to 5.42% compared to a Q2 2005/06 figure of 5.17% for registered nursing, this is as a result of an increase within the former LPCD. Levels within non-registered nursing has remained the same overall at 9.01% overall.

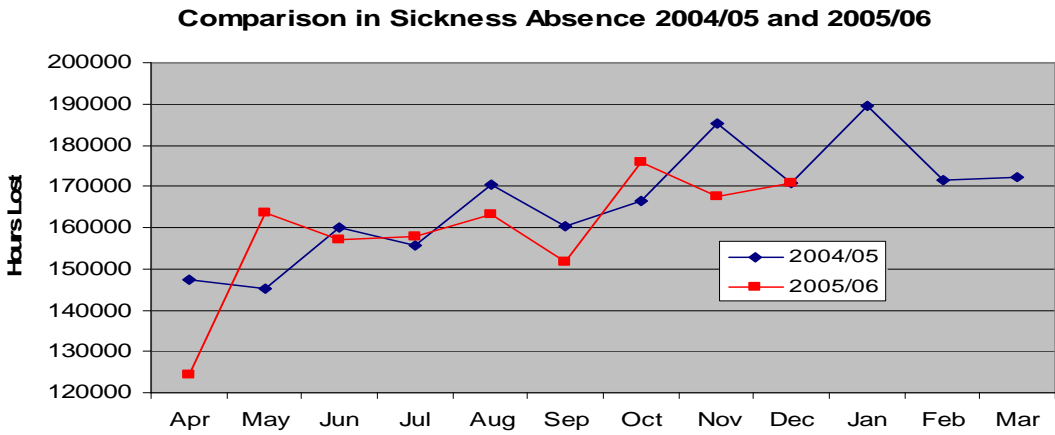
The figures by Division have varied slightly as detailed in the table below:

Table 15: Comparative Sickness Absence Percentages by Division

	LPCD %	LUHD %	WLD %	LH %
Q2	5.62	4.96	6.14	3.00
YTD	5.80	4.80	5.97	3.65
Variance	0.18	- 0.16	- 0.17	0.65

Details of total absence hours since April 2004 are detailed in the following chart.

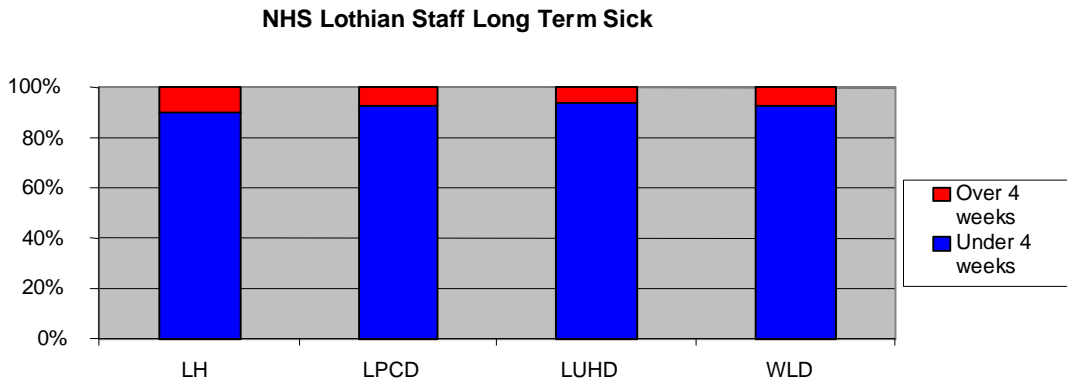
Chart 11.



5.2 Long Term Sickness Absence

The chart below shows (in percentages) the distribution of absence by division classified as 'long term sick' where individuals have been off on sick leave for longer than a four-week period in comparison to those classified as short term sick.

Chart 12.



As can be seen below there is little difference in the ratio of short to long term sick when compared to the previous quarter.

Table 16: Comparing long/short term sick by division

Q2 2005/06	LH	LPCD	LUHD	WLD
Under 4 weeks	91	93	94	93
Over 4 weeks	9	7	6	7

Q3 2005/06	LH	LPCD	LUHD	WLD
Under 4 weeks	90	93	94	93
Over 4 weeks	10	7	6	7

6. Staff Supplements

6.1 Directly Employed Medical Locums

This section details Locums paid via NHS Lothian payroll. It does not include expenditure on Locums employed via external agencies; this information will be added to the report in the Q3 report.

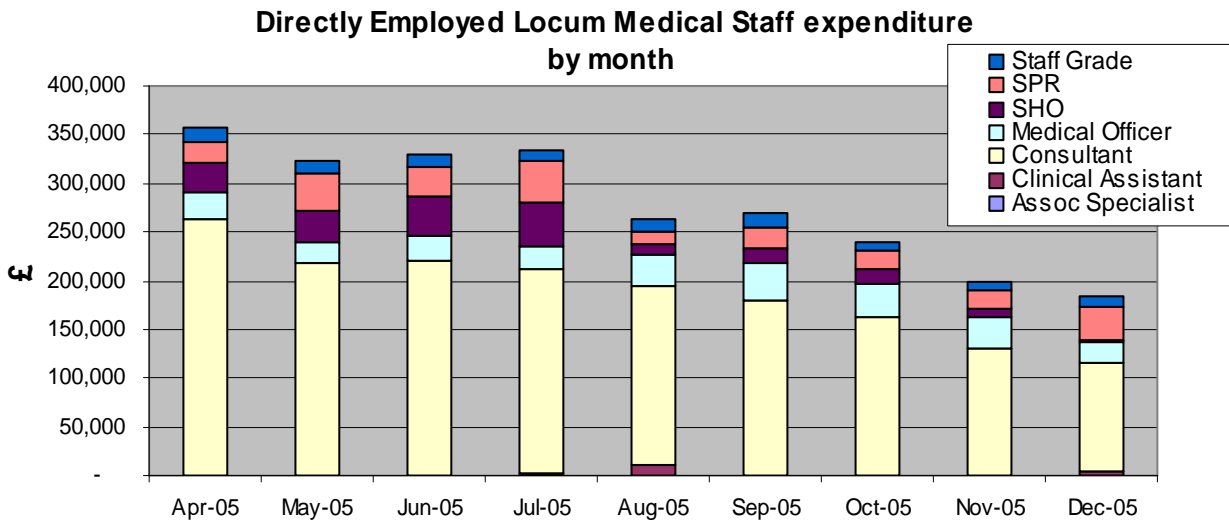
In the Q1-3 2005/6 period NHS Lothian has spent £1.9m on directly employed medical locum staff. Consultant locums represent 68% of expenditure.

The following table and chart illustrate the expenditure on directly employed locum medical staff for Q1 –3 2005/6.

Table 17: Directly Employed Locum Expenditure by Month April 2005-December 2005

Grade	Apr-05	May-05	Jun-05	Jul-05	Aug-05	Sep-05	Oct-05	Nov-05	Dec-05	Total YTD
Assoc Specialist	-	-	-	-	-	-	-	-	-	-
Clinical Assistant	404	404	404	2,809	10,779	404	391	404	3,373	2,152
Consultant	262,171	218,135	220,677	209,578	184,651	179,006	162,887	130,374	111,936	186,602
Medical Officer	29,119	22,086	25,397	23,577	31,616	37,783	33,157	31,930	21,173	28,426
SHO	29,374	30,872	40,075	43,913	9,373	16,833	15,394	8,216	3,165	21,913
SPR	20,483	39,717	29,926	43,116	14,510	20,692	18,342	18,393	32,840	26,447
Staff Grade	16,683	12,215	12,845	10,116	12,277	15,427	9,774	10,369	11,556	12,362
Total	358,234	323,429	329,325	333,109	263,205	270,145	239,945	199,686	184,043	277,902

Chart 13.



The following charts provide a comparison of utilisation and expenditure between Q1-3 2004/5 and Q1-3 2005/6

Chart 14.

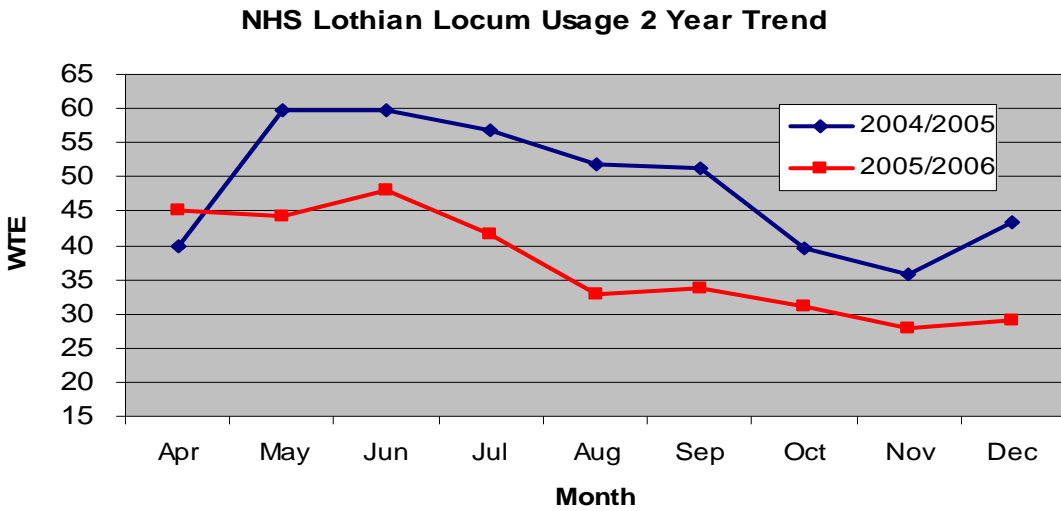
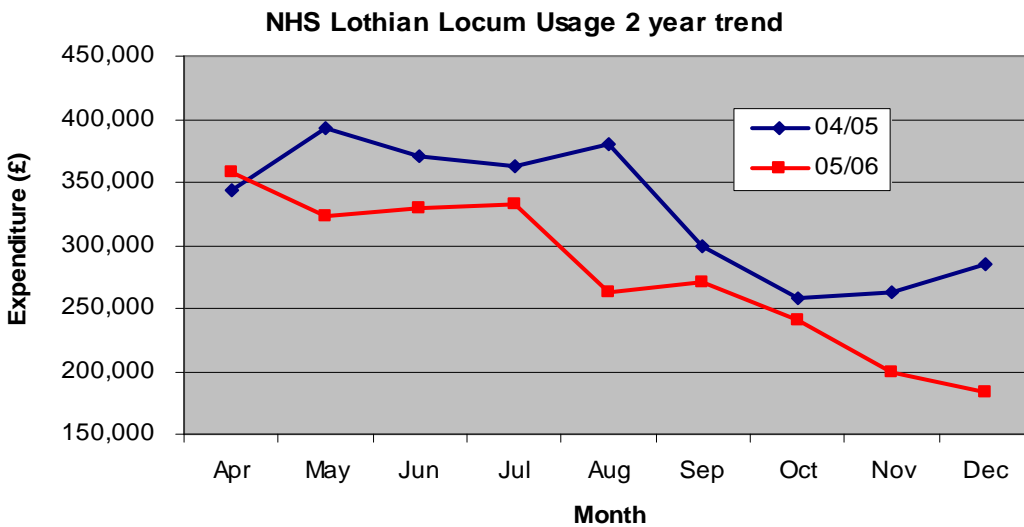


Chart 15.



There has been a continuing reduction in the utilisation of Medical Locums throughout the financial year; this has also been reflected in a reduction in expenditure of £454k in when compared with the Q1-3 period in 2004-5.

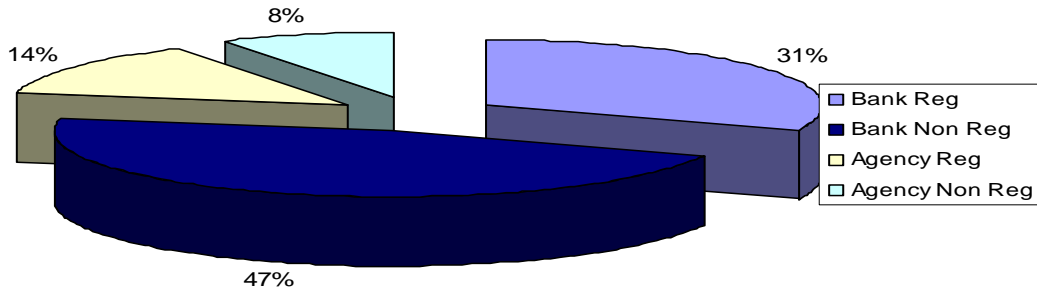
6.2 Nurse Bank and Agency Utilisation

The total bank and agency expenditure for Q1-3 2005/06 is £16.1m

The following chart details the distribution of bank and agency utilisation staff.

Chart 16.

NHS Lothian distribution of Bank Agency Staff from April 2005 to December 2005 (wte)



Source – NHS Lothian Nurse Bank system

The ratio of bank to agency is 78%:22% for the financial year to date this contrasts with 72%:28% for the last financial year. The reduction in agency staffing has continued to be the main focus for action within Divisions.

The following charts provide a comparison of utilisation and expenditure between Q1-3 2004/5 and Q1-3 2005/6.

Chart 17.

NHS Lothian Bank/Agency Staff 2004/05 and 2005/06

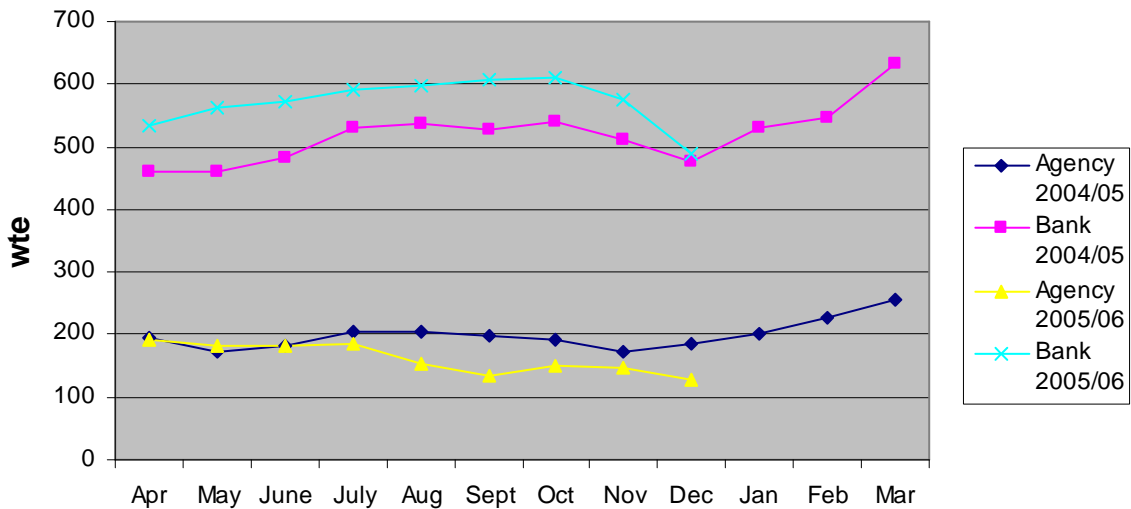
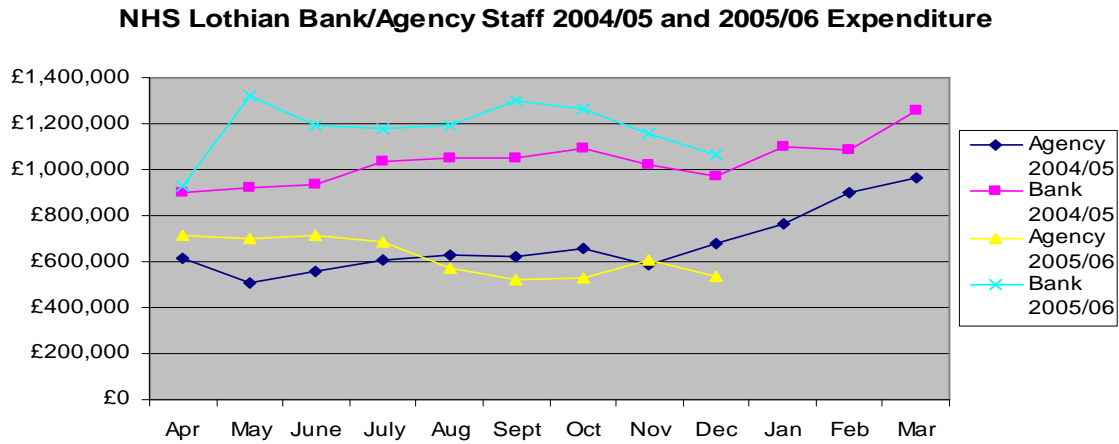


Chart 18.



Source – NHS Lothian Nurse Bank system

Combined bank and agency utilisation has increased in by an average of 40 wte overall Q1-3 2005/06 when compared with Q1-3 2004/05. Agency utilisation is however down an average of 28wte for the Q1-3 period, and remains slightly lower than previous periods of time.

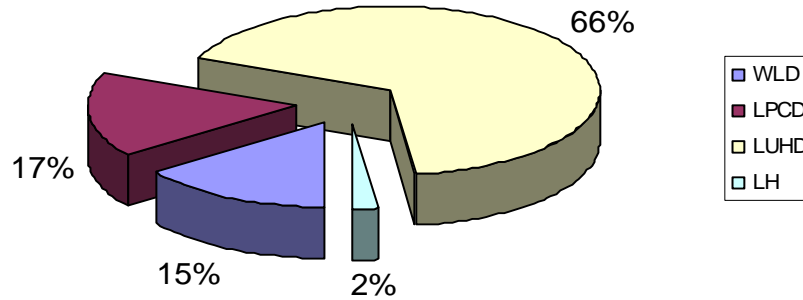
It has been necessary to combine Agency registered and non-registered expenditure as the Nurse Bank and Agency Team are unable to separate out costs held in the financial ledgers into registered and non-registered. This is intended to increase the accuracy of costs in comparison to those previously provided; this however does not enable reporting on non-registered agency expenditure, which is a matter of concern.

7. Consultant Medical Staffing

The following chart illustrates the distribution of the 602 wte consultant medical workforce.

Chart 19.

Distribution of Consultants from April 2005 to December 2005 (wte)



The following tables detail Consultant workforce and costs by month.

Table 18: NHS Lothian Consultant WTE Q1-3 2005/06

Division	Apr-05	May-05	Jun-05	Jul-05	Aug-05	Sep-05	Oct-05	Nov-05	Dec-05	YTD Average
WLD	89	89	88	89	91	91	88	89	86	89
LPCD	99	98	100	100	99	103	103	103	107	101
LUHD	395	398	402	402	404	408	406	403	404	402
LH	11	11	10	10	11	11	11	10	12	7
Total	595	597	601	602	606	612	608	606	609	604

Table 19: NHS Lothian Consultant Costs Q1-3 2005/06

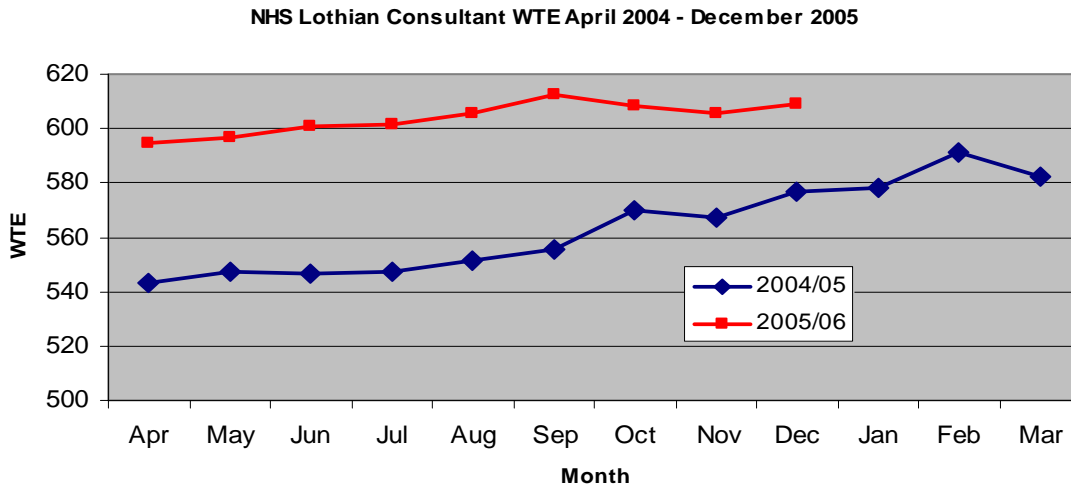
Division	Apr-05	May-05	Jun-05	Jul-05	Aug-05	Sep-05	Oct-05	Nov-05	Dec-05	YTD
WLD	1,010,237	951,580	999,125	1,120,846	1,008,891	980,706	969,983	958,914	918,895	8,919,177
LPCD	986,904	958,832	994,932	965,960	959,098	1,057,866	993,079	982,863	1,036,953	8,936,487
LUHD	4,363,277	4,367,375	4,454,149	4,434,111	4,335,229	4,395,497	4,298,323	4,372,530	4,277,610	39,298,101
LH	122,161	110,766	100,754	100,749	97,751	124,736	121,154	107,098	117,806	1,002,976
Total	6,482,580	6,388,552	6,548,959	6,621,666	6,400,970	6,558,805	6,382,539	6,421,406	6,351,264	58,156,741

The following table and chart provide a comparison of utilisation and expenditure between Q1-3 2004/5 and Q1-3 2005/6.

Table 20: NHS Lothian Consultant comparison Q1-3 2004/05 and Q1-3 2005/06 WTE

Division	Q1-Q3 2004	Q1-Q3 2005
WLD	80.42	89.02
LPCD	89.83	101.38
LUHD	375.41	402.41
LH	10.47	11.02
Total	556.13	603.83

Chart 20.

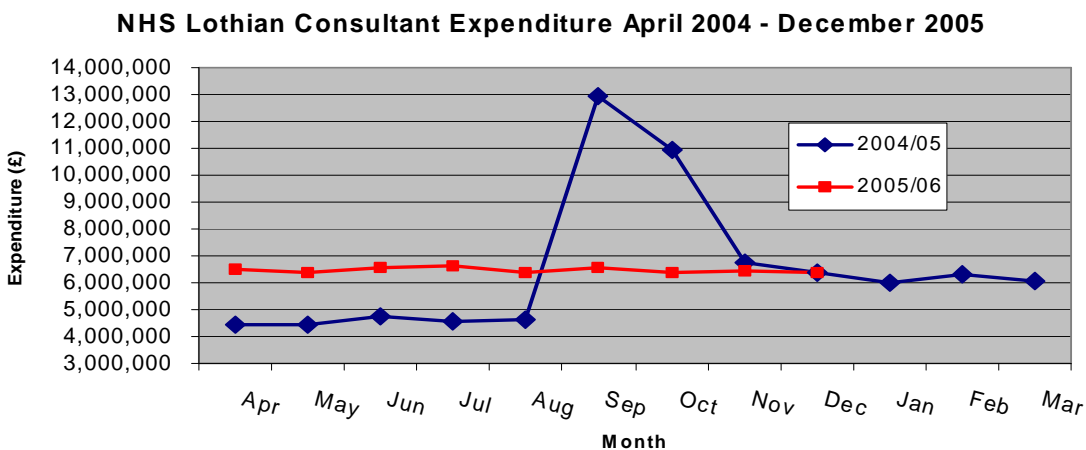


There has been an increase of 47.7 wte (8.6%) in the consultant workforce in comparison with Q1-3 2004/5. This represents a continuous increase over a period of time and reflects the impact of the new Consultants Contract.

Table 21: NHS Lothian Consultant comparison Q1-3 2004/05 and Q1-3 2005/06 -costs

Division	Q1-Q3 2004	Q1-Q3 2005
WLD	8,639,513	8,919,177
LPCD	8,780,180	8,936,487
LUHD	41,447,584	39,298,101
LH	960,817	1,002,976
Total	59,828,094	58,156,741

Chart 21.



There has been a decrease from £59.8m Q1-3 2004/5 to £58.2m Q1-3 2005/6, a decrease of £2.8m – (2.79%) in pay bill costs, this apparent decrease is as a result of the backdated payments

made in the August to October period 2004/5 for the new consultants contract. In November and December costs have been lower than the same period in 2004/5, despite an increase of on average 35 wte.

8. Temporary Staffing Measures

8.1 Fixed and Temporary Contracts

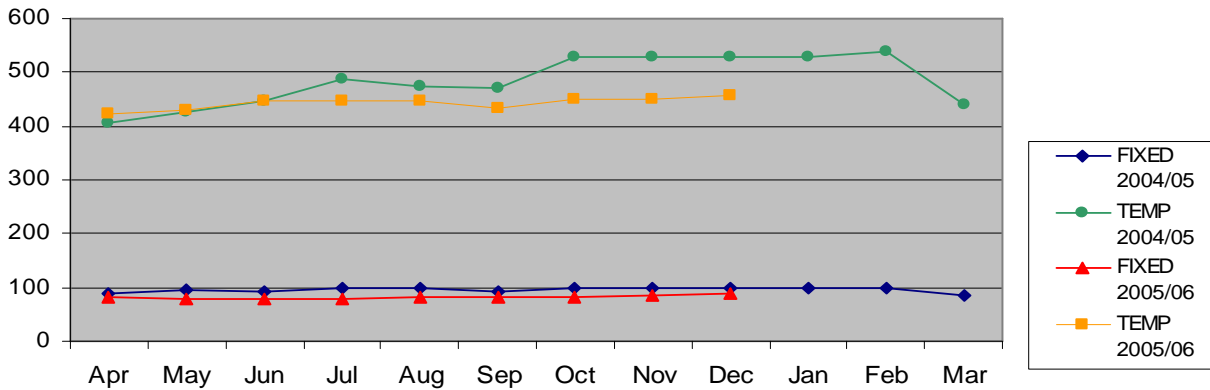
The following table and chart detail the usage of fixed term and temporary contracts, figures are for LUHD only as there are no systems in place within WLD and LPCD for recording this information. This will not be possible until there is a Lothian-wide HR information system.

Table 22: Fixed / Temporary Contracts April 2004 – December 2005 (LUHD)

Contract/Year	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
TEMP 2004/05	494	523	539	586	573	564	628	626	627	627	638	524
TEMP 2005/06	505	510	526	527	528	515	532	534	546			

Chart 22

**Comparison between Short or Temporary and Permanent or Fixed Contracts
April 2004 to December 2005**



There has been a decrease of 8% in the utilisation of temporary contracts in Q1-3 2005/6 when compared with the same period in the previous year.

8.2 Secondments

The NHS Lothian Recruitment Centre is establishing an information base on secondments, which will cover all of Lothian and enable improved monitoring of numbers and associated costs.

9. Staff Turnover

9.1 Leavers by Staff Group

The following table and chart detail the number of staff who terminated their employment with their employing Division by staff group. Note from October 2004 onwards changes between Divisions are no longer dealt with as leavers.

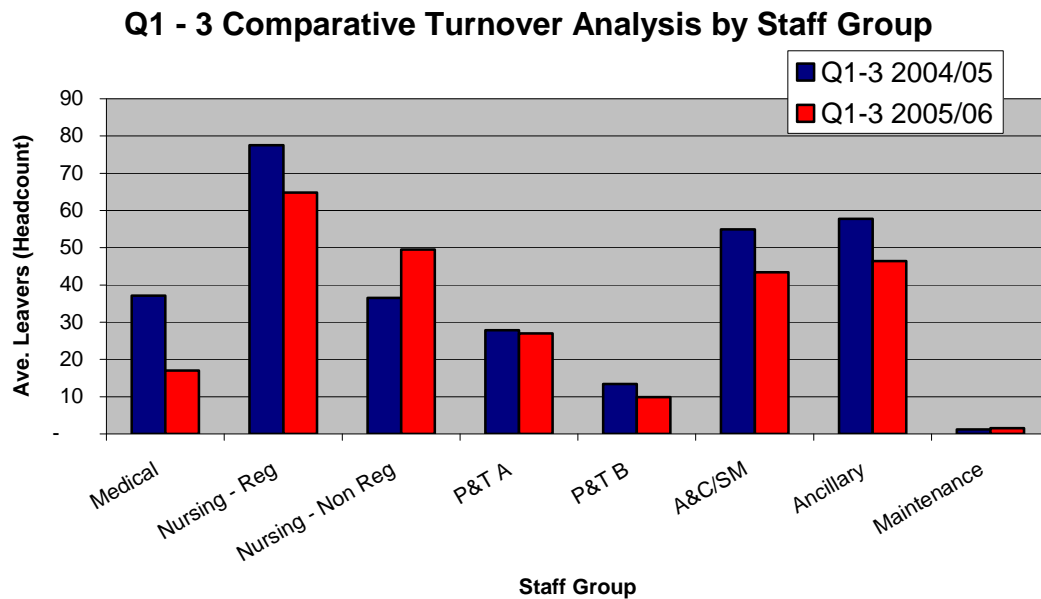
Table 23: Leavers by Staff Group Q1-3 2004/05 – Q1-3 2005/06 comparison

Staff Group	Q1/Q3 2004/05	Q1/Q3 2005/06
Medical	37	17
Nursing - Reg	78	65
Nursing - Non Reg	37	50
P&T A	28	27
P&T B	13	10
A&C/SM	55	43
Ancillary	58	46
Maintenance	1	2
Total	306	260

Note – Excludes Nurse Bank staff

Note – August and March figures for medical staff have been adjusted to account for the impact of junior doctors rotation, which result in an artificially high number of leavers.

Chart 23.



9.2 Leavers by Division

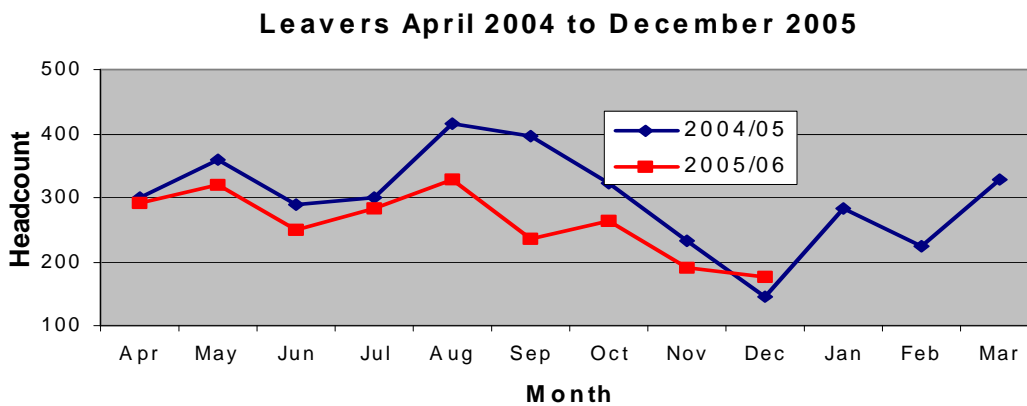
The following table and chart illustrate the number of leavers for each Division in the period April 2004 to December 2005.

Table 24: NHS Lothian Leavers by Division Q1– 3 2005/06 breakdown

Division	Apr-05	May-05	Jun-05	Jul-05	Aug-05	Sep-05	Oct-05	Nov-05	Dec-05	Total
LPCD	108	68	80	99	107	112	103	96	65	838
LUHD	137	203	117	138	167	128	130	78	79	1177
WLD	41	50	51	45	53	59	27	25	29	380
LH	6	0	1	2	0	3	4	1	2	19
Grand Total	292	321	249	284	327	302	264	200	175	2414

Note: LUHT and WLT Medical figures in August have been adjusted to remove impact of the change over in junior doctors rotations.

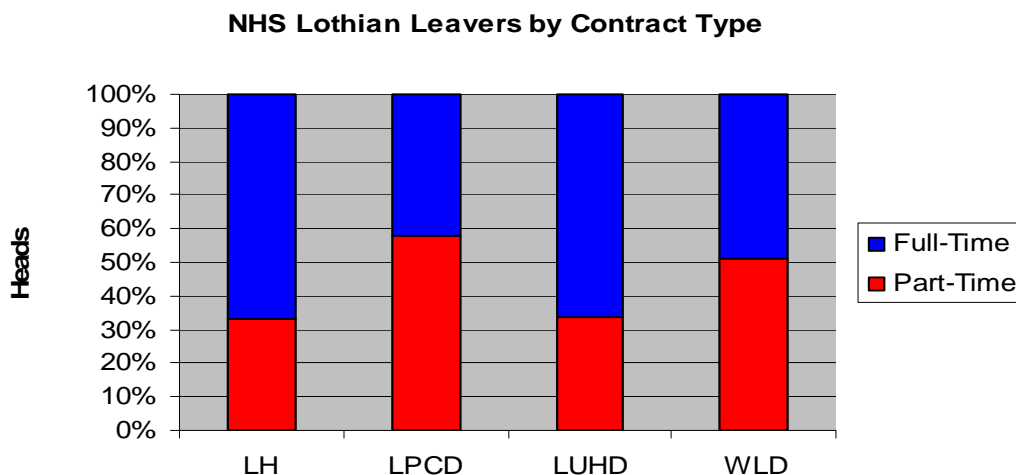
Chart 24.



Staff turnover in NHS Lothian has reduced within LPCD and LUHD, and WLD has remained steady. It is important to note that until September 2004 these leavers may have been going from one Division to another. The number of leavers for Q3 period as a whole in 2005/6 is lower than the same period in 2004/5.

9.3 Divisional Leavers by Contract Type

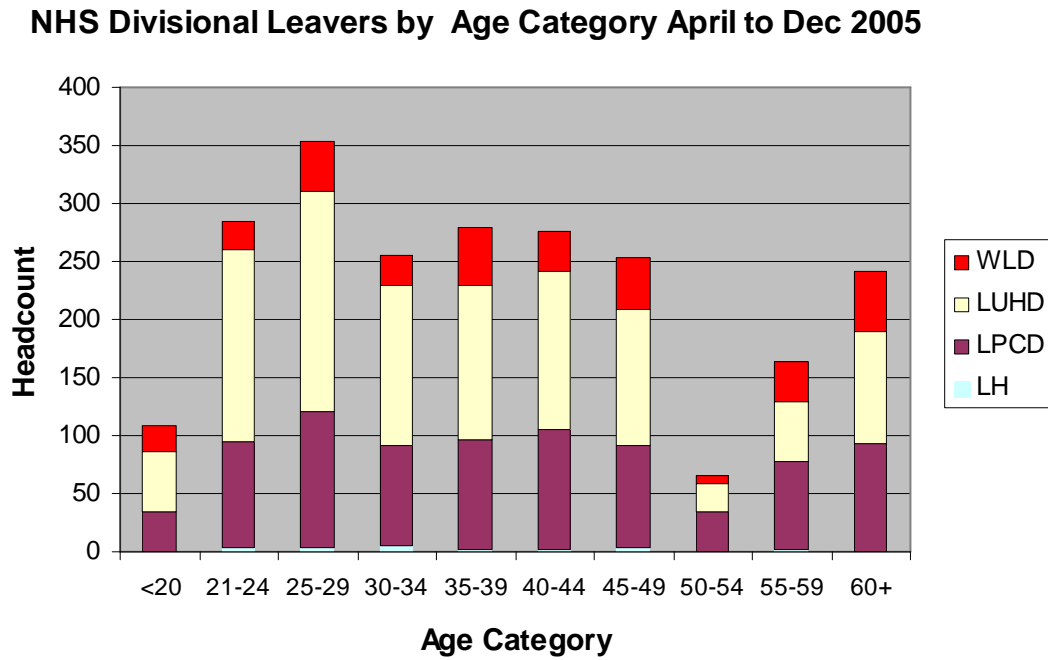
Chart 25.



Within LPCD, the high percentage of part-time leavers can be directly attributed to turnover within the nurse bank. In LUHD, trained nursing and AHP staff turnover are worthy of particular note. In order to determine reasons for leaving, it may be deemed necessary to undertake exit interviews. This is an area, which is currently being considered by the NHS Lothian recruitment team.

9.4 Divisional leavers by Age Category

Chart 26.

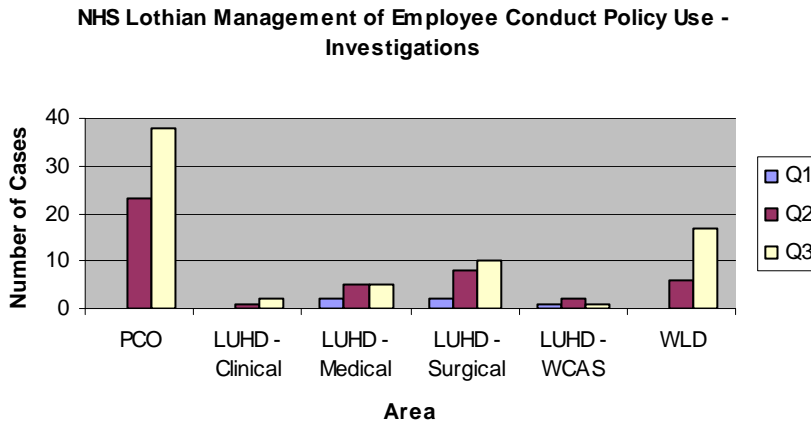


Within LUHD and LPCD, the high turnover of younger staff can be attributed, in part, to a proportionately high number of D and E Grade nurses leaving.

10. Disciplinary & Grievance

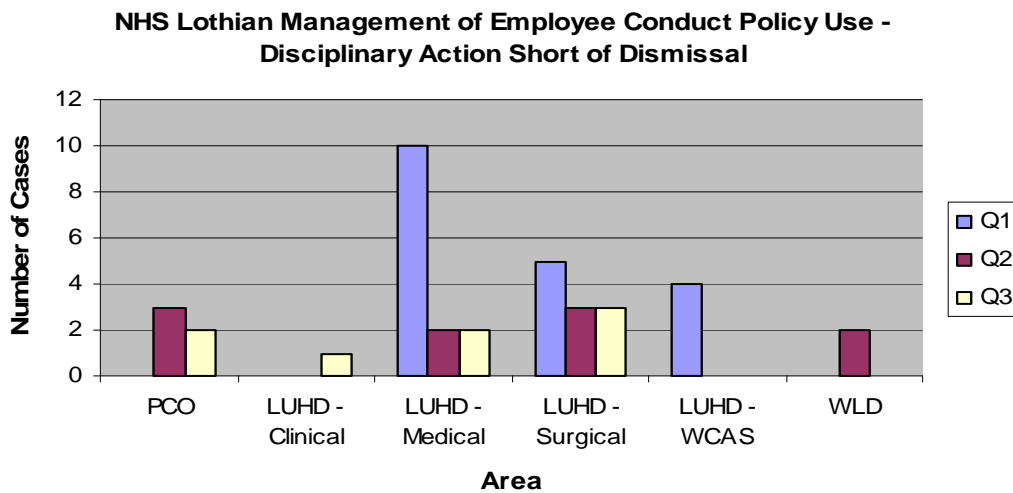
Information on policy monitoring and compliance is now being collated across NHS Lothian's former divisions. A standardized reporting structure has been implemented and will provide statistical information on currently operating and forthcoming NHS Lothian HR Policies.

Chart 27



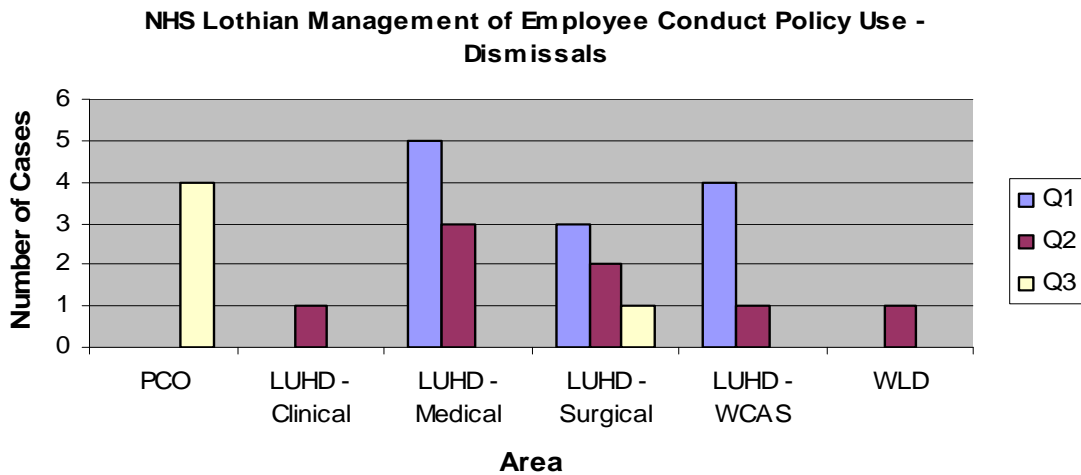
The information below reflects both ongoing and concluded Q3 investigations. Almost all investigatory hearings in Lothian have been conducted in compliance with the policy timescales. Continuing to expand policy awareness sessions will potentially address areas where a lack of understanding exists.

Chart 28



The most common disciplinary action in cases where dismissal is not considered appropriate is a recorded verbal warning. However, it is clear that all policy options short of dismissal, where considered appropriate, are being utilized.

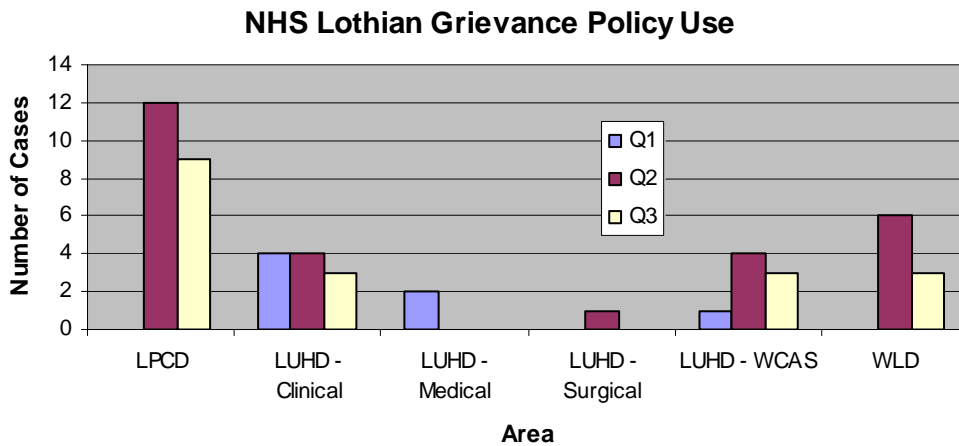
Chart 29.



During Q3, 5 members of staff were dismissed. Of these, 2 dismissals were in relation to incapacity and 2 in relation to unsatisfactory probationary periods.

Statistics are not yet available to enable analysis of which stage grievances are most frequently resolved. With the introduction of the new NHS Lothian Grievance Policy and a renewed emphasis on informally resolving grievances, it is anticipated that the number of grievances will continue to rise.

Chart 30:



11 Human Resources Policy Development

NHS Lothian HR Policy Group Policy Update as at December 2005

Policies completed, approved by Lothian Partnership Forum and issued *(implementation as from April 2005)*

Adoption Leave
Facilitating Breastfeeding on Return to Work
Management of Employee Capability
Career Breaks
Carer Leave
Leave for Civil and Public Duties
Compassionate Leave
Management of Employee Conduct (Disciplinary Policy)
Facilities Agreement
Flexible Working for Working Parents
Grievance Policy
Homeworking
Job Sharing
Maternity Leave
Organisational Change
Parental Leave
Paternity Leave
Redeployment
Over/Underpayment of Salaries
Secondment
Special Leave

Policies completed, approved by Lothian Partnership Forum and in process of distribution

Management of Violence and Aggression
Promoting Attendance

Home Computing Initiative (Salary Sacrifice Scheme)

Policies completed, approved by Lothian Partnership Forum and awaiting implementation *(supporting infrastructure being put in place)*

Dignity at Work
Equal Opportunities
Race Equality

Policies at final draft stage **(local consultations conducted)**

Adverse Weather/Major Transport Disruption
Term Time Working
Flexi-Time Systems

Policies due for first /reconsideration by HR Policy Group

Lone Working

Policies currently in preparation/to be developed during 2005/2006

Absence Records
Alcohol and Substance Misuse
Dealing Positively with Stress

“Salary Sacrifice” Schemes:

Child Care Vouchers
Loans for Bicycle Purchase

Flexible Working Options:

Annual Hours Working
Compressed Working Week
Flexible Working Hours
Phased Retiral
Team Based Self Rostering
Voluntary Reduced Hours
Zero Hours Contracts

PIN Guideline - Managing Health at Work:

Biological and Chemical Hazards
Reducing Work-Related Driving Risks
Promoting Safe Manual Handling
Glove Selection

New PIN Guideline: Fixed Term Contracts

Revised PIN Guidelines:

Facilities Arrangements
Personal Development Planning and Review

Long Service Awards

Removal Expenses
Staff Development

Study Leave

Note:

Employment Policy Manuals containing all the policies implemented from April 2005 have been distributed to all departments across NHS Lothian; the policies are also accessible on the four intranet sites.

Awareness sessions have been conducted for line managers across a range of sites (28 three-hour sessions between June and September). A training programme in support of specific policies is in preparation.

12. Focus on Allied Health Professionals (AHP)

This section looks at the wte, expenditure, contract type and demographic details (including gender mix, age, and home location) of Allied Health Professionals. AHPs are a key element of NHS Lothian's Workforce. The AHP staffing category covers a range of key specialties including chiropody, dieticians, occupation therapy, optical, pharmacy, physiotherapy, psychology, radiology, speech therapy, orthotics and those who deal with the music play therapy and PT instructors. The following charts show the wte by the categories listed above and division and expenditure.

Chart 31: Breakdown of NHS Lothian AHP wte by Group

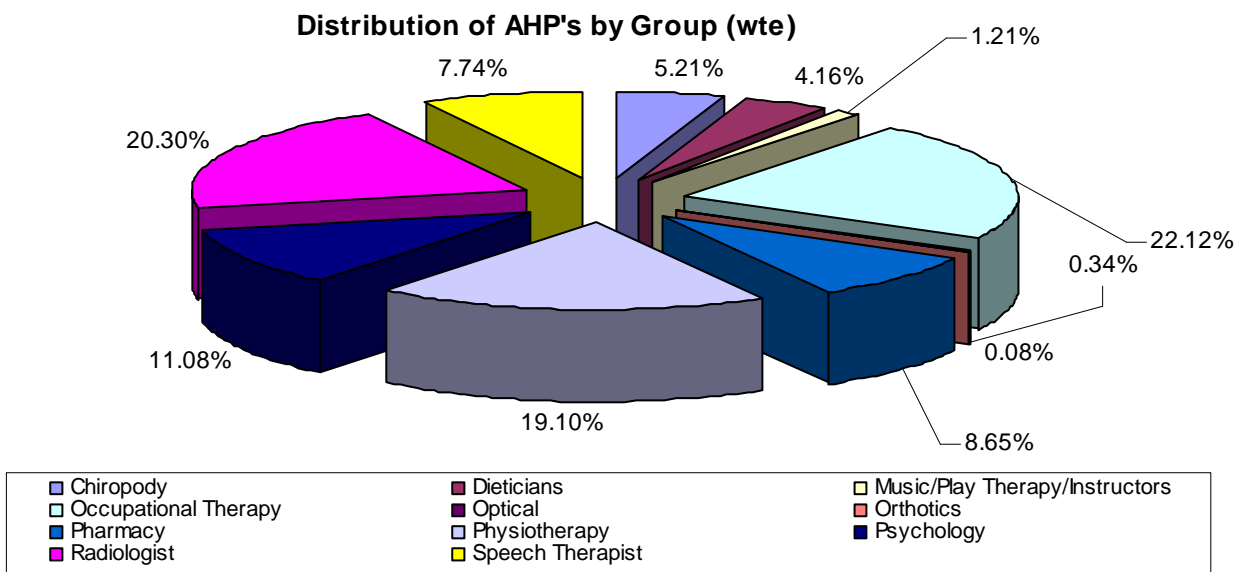
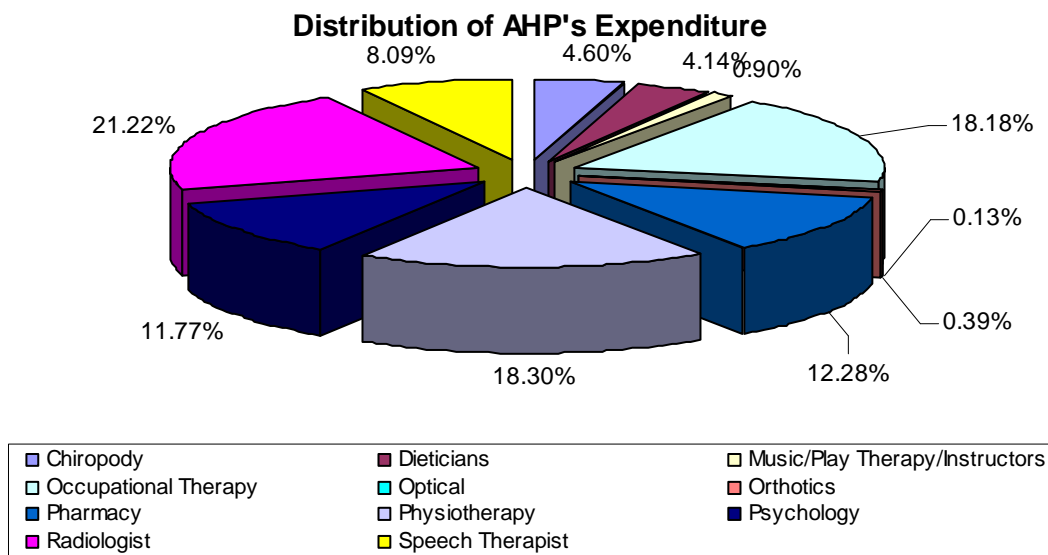


Chart 32: Breakdown of NHS Lothian AHP expenditure by group



The following chart shows the spilt of the above group by division

Chart 33: Distribution of AHP Group and Division

Breakdown of AHP Workforce by Division

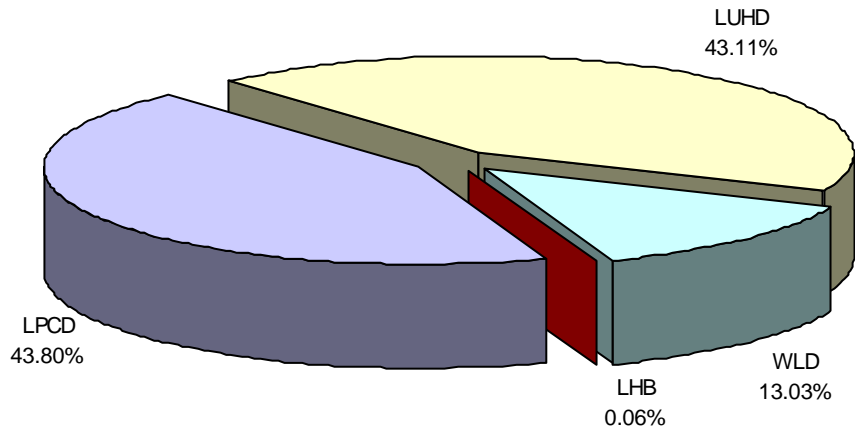
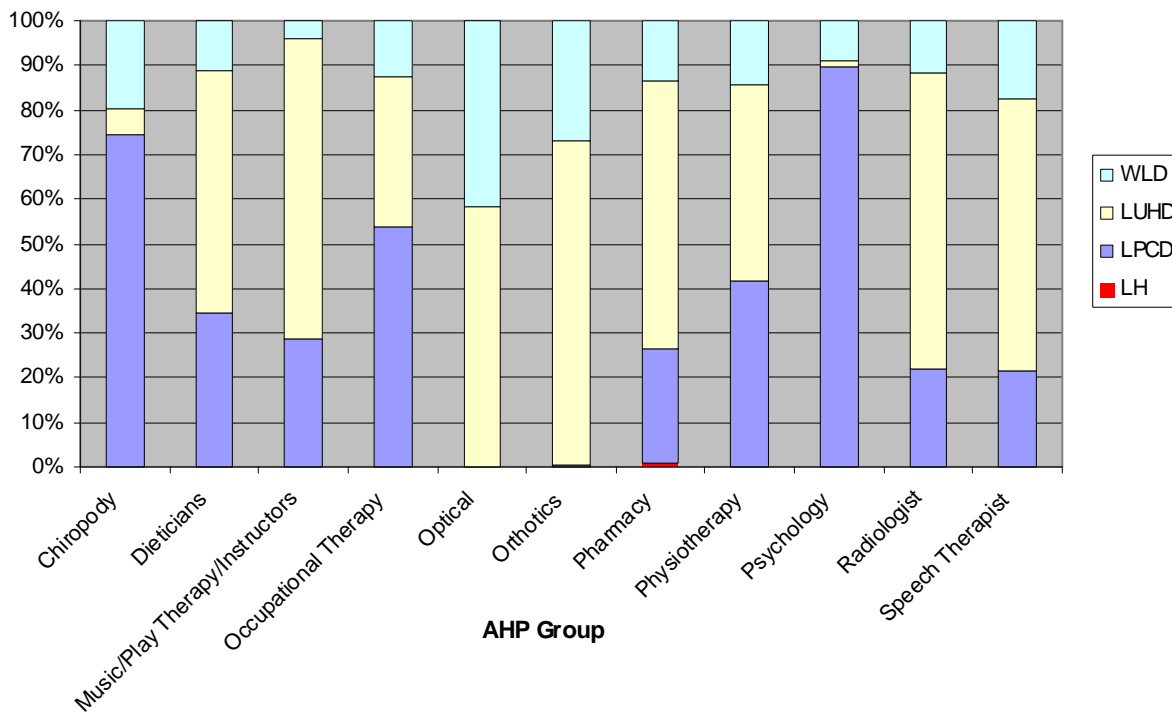


Chart 34: Breakdown by division and AHP Group

Breakdown of AHP Groups by Division



The following table details wte, headcount and average wte associated within each AHP Group

Table 25: Table showing wte and headcount by AHP Group

Group	wte	Headcount	ave wte
Chiropody	82.83	103	0.80
Dieticians	66.15	95	0.70
Music Play			
Therapy/Instructors	19.18	32	0.60
Occupational Therapy	351.56	493	0.71
Optical	1.25	7	0.18
Orthotics	5.46	10	0.55
Pharmacy	137.52	174	0.79
Physiotherapy	303.69	467	0.65
Psychology	176.21	230	0.77
Radiology	322.71	442	0.73
Speech Therapy	123.10	193	0.64
Grand Total	1,589.66	2246	0.71

As detailed in the above table the average wte in the overall AHP Group is 0.71 this however varies between each group. When looked at overall by division the figures show an approximate 50:50 ratio between those AHP staff on full time and part time contracts.

The following table and chart show part time full time split by division and AHP Group.

Table 26: Table showing breakdown by Division and contract type

Contract Type	LH	LPCD	LUHD	WLD	Grand Total
Part time	0	512	482	132	1126
Full time	1	472	508	139	1120
Grand Total	1	984	990	271	2246

Chart 35: Distribution of full time and part time contracts for NHS Lothian

Distribution of Full time/Part time contracts by AHP Group (% of headcount)

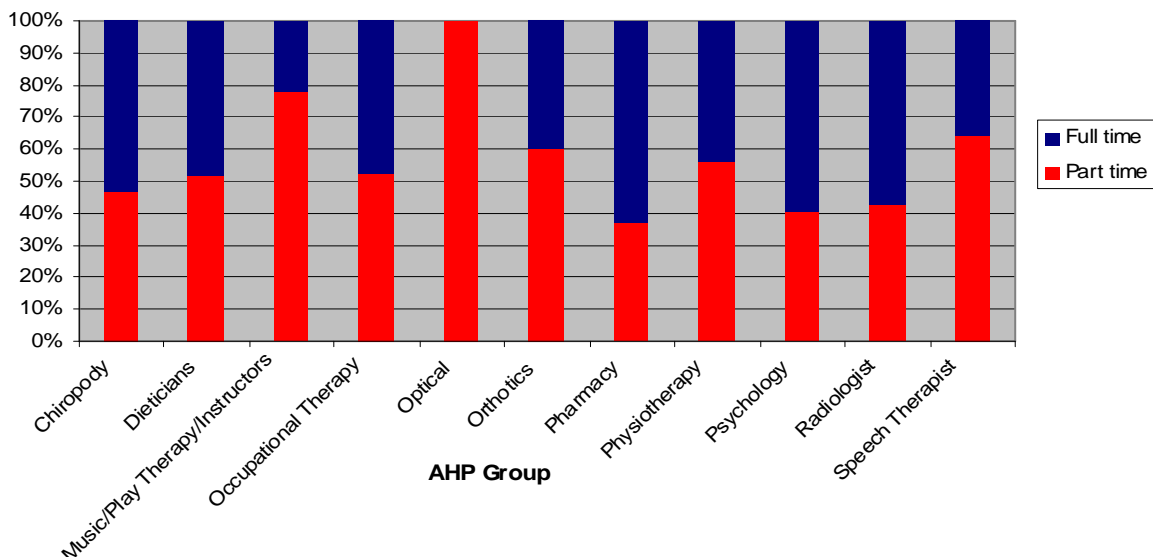
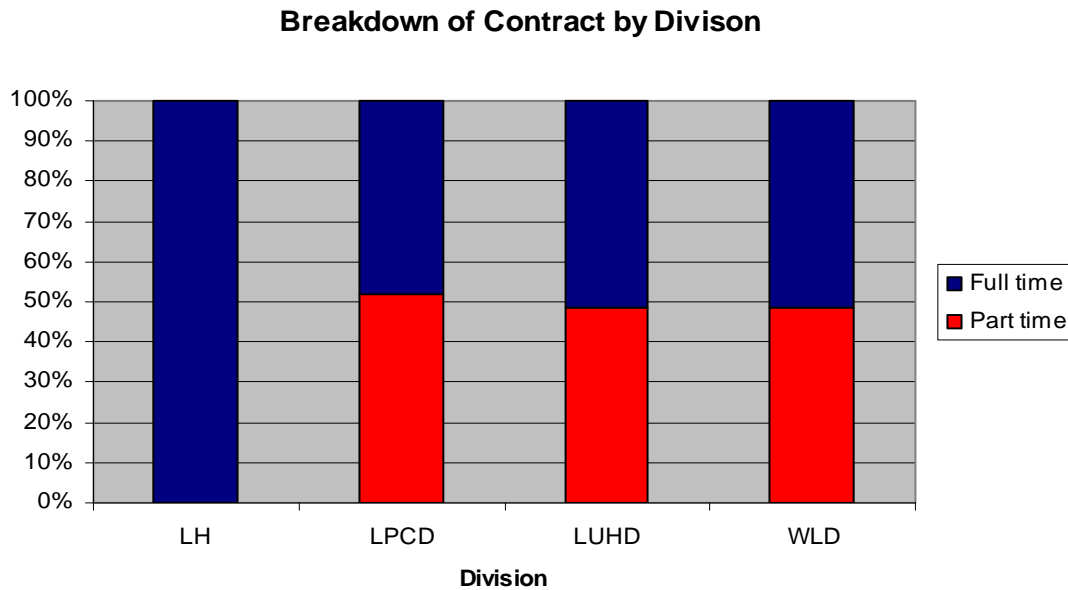


Chart 36: Breakdown of Full time/Part time contracts by division



The 50:50 ratio between part and full time staff within this area is consistent through both divisional level and within the AHP Groups with the exception of the one pharmacist who works full time at LHB and the Optical staff all of who work part time.

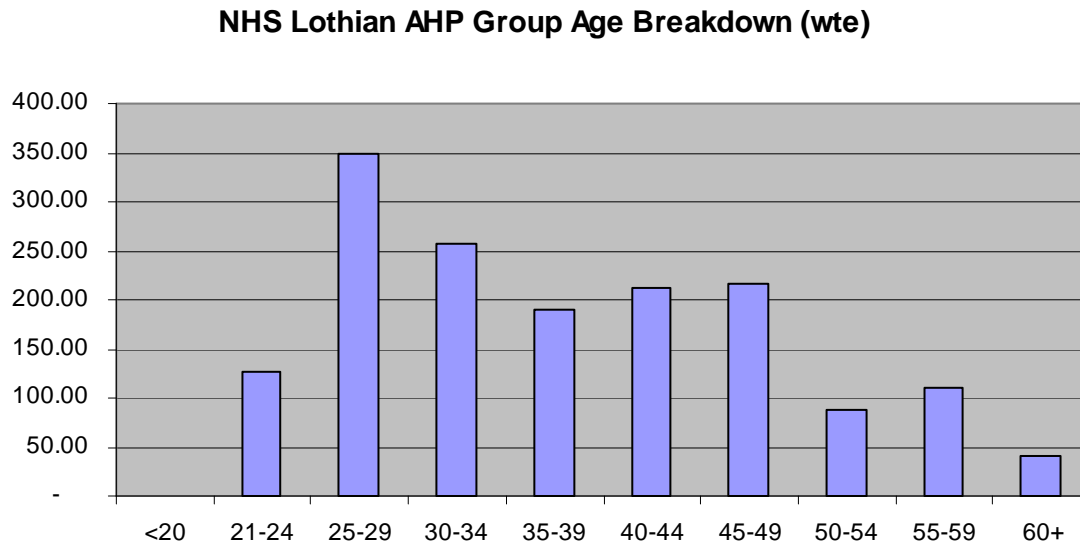
12.1 Demographics

The following table and chart show the demographic profile of AHP Staff for the whole of NHS Lothian and a split by group.

Table 27: Table detailing breakdown of age by AHP Group

AHP Group	<20*	21-24*	25-29*	30-34*	35-39*	40-44*	45-49*	50-54*	55-59*	60+	Grand Total
Chiroprody	-	3.59	14.79	13.95	13.53	11.45	11.71	4.00	8.81	1.00	82.83
Dieticians	-	2.91	11.25	13.81	10.75	6.50	11.08	5.79	2.21	1.85	66.15
Music/Play Therapy/Instructors	-	-	1.97	1.99	1.47	0.53	6.48	1.93	3.22	1.59	19.18
Occupational Therapy	-	29.85	76.56	55.46	39.42	49.77	52.73	18.64	19.94	9.19	351.56
Optical	-	-	0.05	0.51	-	0.05	0.20	0.12	0.32	-	1.25
Orthotics	-	1.00	-	2.98	-	-	0.46	-	0.02	1.00	5.46
Pharmacy	-	13.00	25.17	22.49	22.62	23.72	13.49	8.16	7.05	1.82	137.52
Physiotherapy	1.00	27.75	52.41	48.68	40.36	46.28	43.56	14.42	24.30	4.93	303.69
Psychology	-	10.00	67.47	32.92	15.61	17.44	14.93	6.62	6.76	4.46	176.21
Radiologist	-	29.42	84.53	38.35	30.69	37.64	41.72	20.05	29.72	10.59	322.71
Speech Therapist	-	8.43	15.75	25.19	14.63	19.36	19.46	7.69	7.69	4.91	123.10
Grand Total	1.00	125.95	349.95	256.33	189.08	212.74	215.82	87.42	110.04	41.33	1,589.66

Chart 37: Breakdown of age for the AHP Group for NHS Lothian



The workforce demography overall is well balanced when compared with other staff groups such as nursing and medical staff, with a relatively young workforce. However within some groups there are underlying issues, the table below details the proportion of staff over 50.

Table 28: Details of the AHP Groups over 50

AHP Group	Over 50
Chiropody	16.7%
Dieticians	14.9%
Music/Play Therapy/Instructors	35.1%
Occupational Therapy	13.6%
Optical	35.2%
Orthotics	18.7%
Pharmacy	12.4%
Physiotherapy	14.4%
Psychology	10.1%
Radiologist	18.7%
Speech Therapist	16.5%
Grand Total	15.0%

Within this overall picture there are groups where a significant percentage are over the age of 50, this may cause future staffing problems particularly where small numbers are involved.

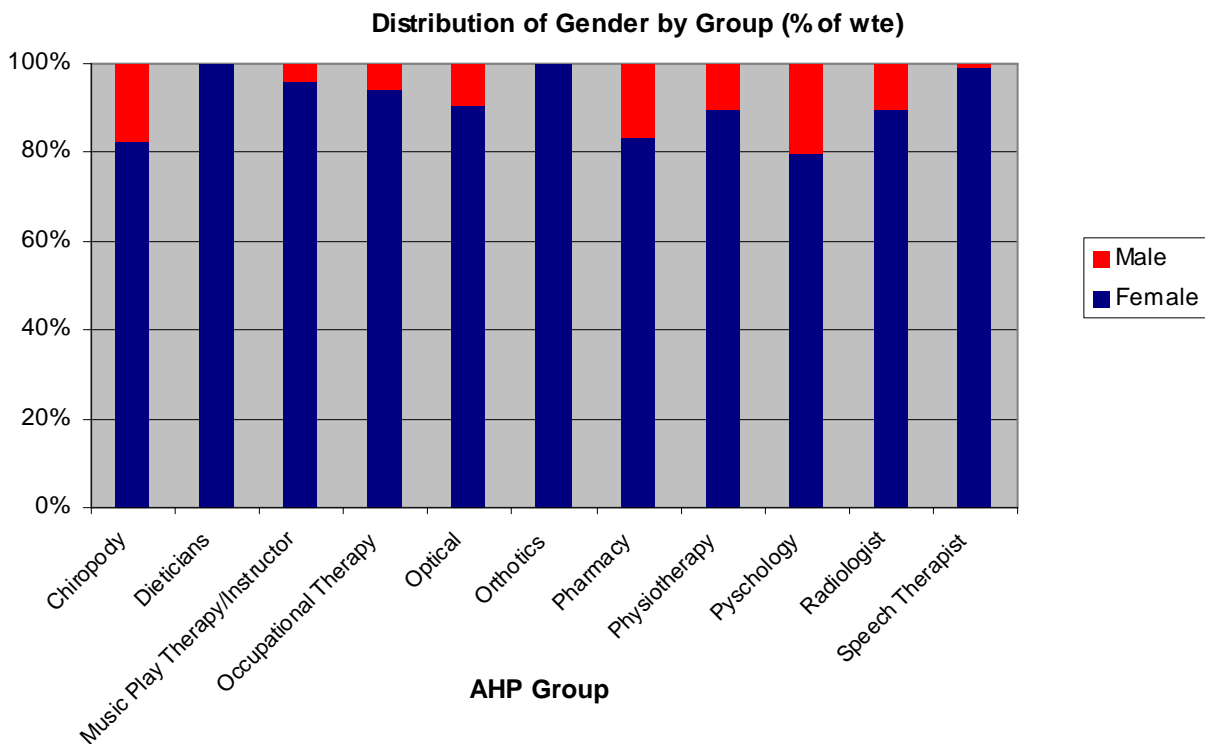
12.2 The Gender Split

The gender split for the AHP Group of staff can be seen in the following table and charts.

Table 29: Breakdown of Gender Split

Gender	LH	LPCD	LUHD	WLD	Totals
Female	1	883	925	244	2,053
Male	-	101	65	27	193
Totals	1	984	990	271	2,246

Chart 38: Breakdown of Gender Split within the AHP Groups



As can be seen above the majority of AHP staff are female – 91%. Within this 91% -50% are under 40 years old. In this situation there will be additional costs associated with maternity cover when compared with older age groups.

12.3 AHP Workforce Home Location

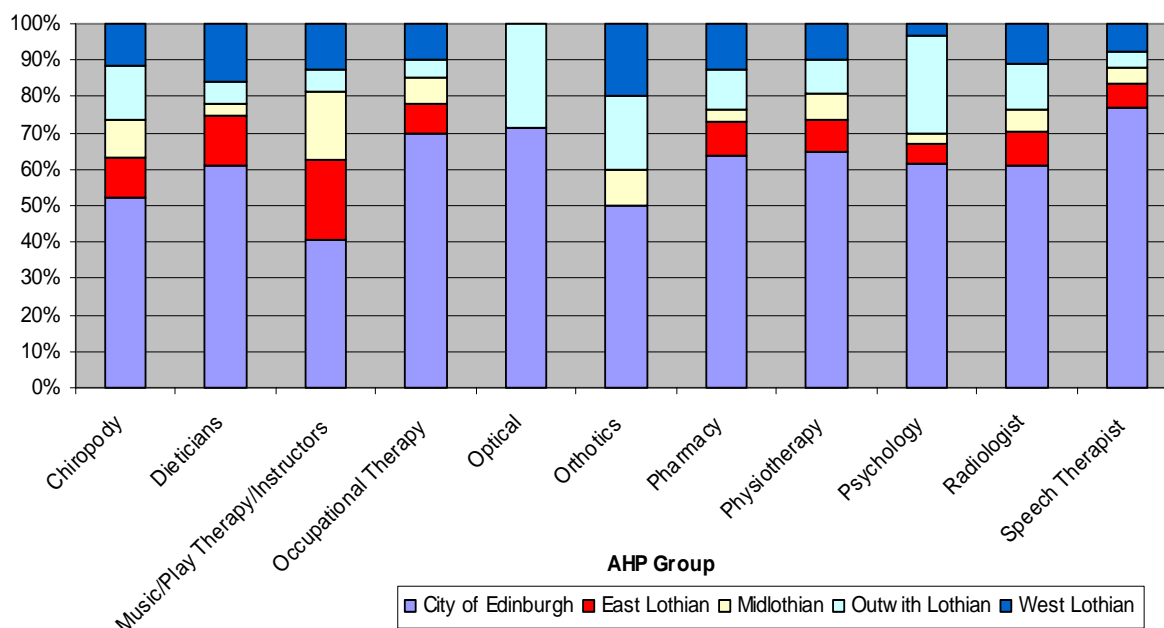
The home location of the NHS Lothian AHP workforce is an issue of importance as it is a determinant of employee flexibility and therefore is potentially a constraining factor in service developments. The following table and chart detail the home location of AHP staff by council area.

Table 30: Postcode Breakdown for AHP staff by Division

Division	City of Edinburgh	East Lothian	Mid Lothian	Outwith Lothian	West Lothian	Grand Total
LH	-	-	-	1	-	1
LPCD	641	127	60	114	42	984
LUHD	726	66	73	75	50	990
WLD	84	5	4	49	129	271
Grand Total	1451	198	137	239	221	2246

Chart 39: Postcode Breakdown for AHP staff by Group

AHP Staff Postcode Breakdown as at December 2005



These figures are based on headcount of staff and show that 65% live in the area classified as the City of Edinburgh. 24% of the AHP workforce live within the Lothian area and the remaining 11% are based outwith the Lothian area. This may have implications when considering the redesign of service and impact of the Delivering for Health Report and the other initiatives such as taking services into the community.

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