



**NHS Lothian Workforce Report
Workforce Planning Team**

4th Quarter

January 2005 – March 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

Prior to the introduction of single system working there has been no consistent workforce reporting for NHS Lothian. Furthermore there was no common workforce information base or human resources information system from which to draw information.

Since April 2004 the Workforce Planning Team have been developing a workforce information base derived from payroll. This now covers all Divisions in NHS Lothian and allows system wide reporting.

A detailed matrix of required workforce information for NHS Lothian has now been developed and circulated to HR Teams across NHS Lothian. The information in this report represents the first outputs of this approach. Work is underway to establish sources and mechanisms for reporting the remaining information.

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.

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.

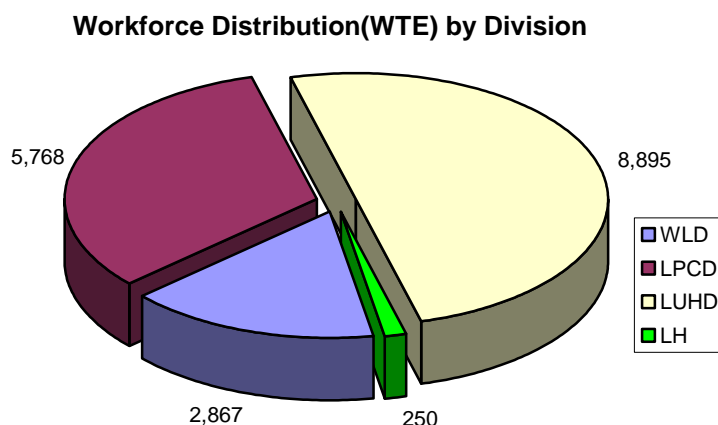
Given the reorganisation of NHS Lothian from April 2005 the structure of this report will change for the first quarter of 2005. To ensure year on year comparisons the Workforce Planning Team will restructure 2004/5 workforce information.

3. NHS Lothian Staffing Overview

3.1. In-post Staffing

NHS Lothian currently employs 17,920 whole time equivalent (WTE) staff. The chart below details the distribution by Division.

Chart 1.



The following table provides a detailed breakdown of the workforce by Staff Group by month for April 2004 to March 2005.

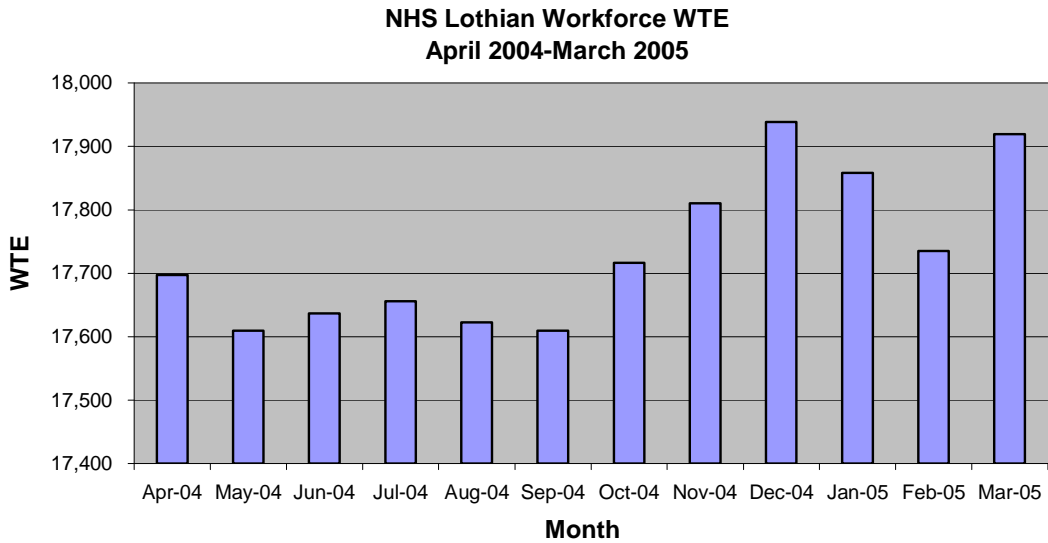
Table 1: Breakdown of Workforce by Staff Group - April 2004 to March 2005

Staff Group	Apr-04	May-04	Jun-04	Jul-04	Aug-04	Sep-04	Oct-04	Nov-04	Dec-04	Jan-05	Feb-05	Mar-05	YTD Average
Medical	1,630	1,638	1,638	1,626	1,598	1,603	1,681	1,681	1,696	1,677	1,679	1,651	1,650
Nursing Reg	6,007	5,970	5,993	5,975	5,955	5,956	5,992	6,039	6,106	6,072	6,218	6,117	6,033
Nursing Non/reg	2,643	2,601	2,591	2,600	2,600	2,595	2,543	2,576	2,570	2,459	2,508	2,859	2,595
P&T:A	1,621	1,609	1,618	1,618	1,619	1,620	1,652	1,652	1,668	1,649	1,673	1,681	1,640
P&T:B	1,082	1,086	1,095	1,091	1,092	1,088	1,095	1,097	1,101	1,102	1,052	1,139	1,094
A&C	3,027	3,017	3,032	3,073	3,092	3,090	3,092	3,097	3,131	3,216	2,882	2,865	3,051
Ancillary	1,472	1,475	1,458	1,467	1,451	1,442	1,455	1,460	1,459	1,453	1,518	1,425	1,461
Maintenance	216	213	211	206	215	216	207	209	208	230	206	184	210
Total	17,698	17,610	17,637	17,656	17,623	17,610	17,716	17,810	17,938	17,858	17,735	17,920	17,734

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

P&T:B include MLSOs and MTOs

Chart 2.



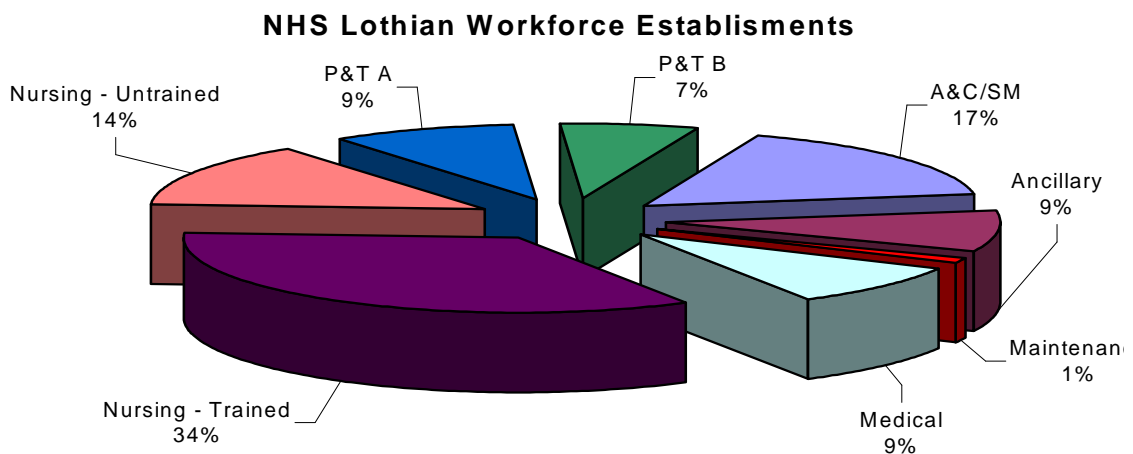
The NHS Lothian Workforce is relatively consistent in overall terms, with minimal variation between months. There has however been an increase of an average WTE per month since September, reflecting the recruitment to winter beds - 150 wte (2.46%) of increase has been in trained nursing. It had been expected that overall numbers would begin to fall again in March/April as winter beds are scaled down, however this has not happened. With the move into the next financial year it will be easier to determine cyclical trends as we now have a baseline and as a result forecasting will be improved.

3.2. Established Posts

Workforce Establishment figures used are those held by the four 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. Work is underway to review establishment figures across Lothian.

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

Chart 3.



The following table shows establishment figures for each staff group within each Division.

Table 2: Establishment figures per Staff Group per Division

	LUHD	LPCD	WLD	LH	TOTAL
A&C/SM	1,400	872	447	190	2,909
Ancillary	636	505	384		1,525
Maintenance	67	60	54		181
Medical	1,080	249	202	15	1,546
Nursing – Reg	3,165	1,811	902	6	5,884
Nursing – Non/reg	1,012	995	400		2,407
P&T A	735	595	196	1	1,527
P&T B	806	186	129		1,121
Grand Total	8,901	5,273	2,714	211	17,099

Source – Divisional E-financial Systems

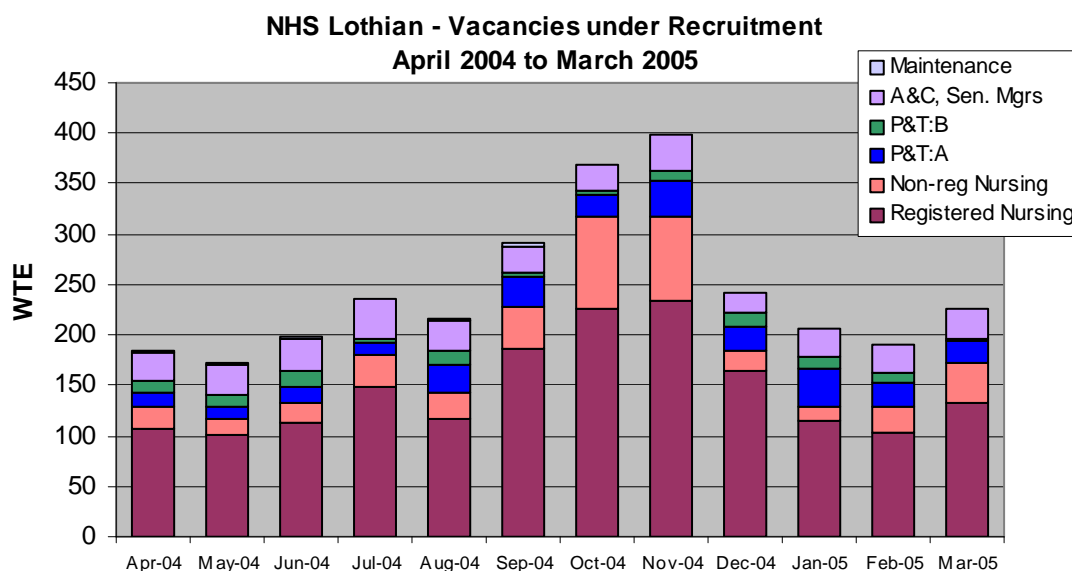
The establishment figures provided are below the in-post for LPC and WL Divisions, within LUH Division this is not an issue. The reason for the differences will be investigated to determine the underlying causes and these will be included in future reports.

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). Vacancies that are on-hold or frozen are not included.

Chart 4.



Note: Figures for LPCD not available

Recruitment is currently carried out separately within each Division, using a mixture of IT and paper based systems. The introduction of single system working draws focus on the need for a common NHS Lothian recruitment process, and IT infrastructure to support and modernise recruitment methods.

There are several areas with a very high level of vacancies within Medical and Surgical Services in the UHD. These include the areas in the table below:

Table 3: Medical & Surgical Services areas (UHD) with high vacancy level

	Theatres & Anaesthetics	ODP	Neurosciences	Cardiothoracic	Combined Assessment	PAEP
Establishment wte	383.86	74	134.66	412.49	118	64.5
Vacant wte	42.41	7.78	15.21	42.73	12.9	14.35
% vacancies	11.0%	10.5%	11.3%	10.4%	10.9%	22.2%

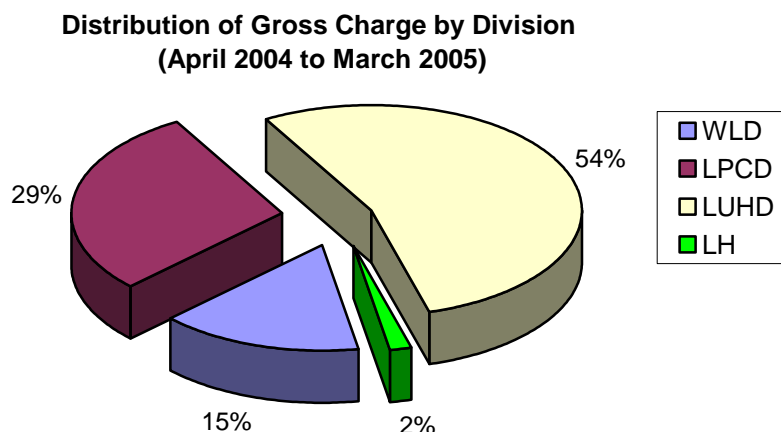
In order to address these high levels of vacancies a recruitment strategy is currently being developed by the NHS Lothian Recruitment Centre.

4. NHS Lothian Workforce Costs

4.1 In year Workforce Costs

The chart below details the distribution of workforce gross charge by Division. The total workforce cost April 2004 to March 2005 was c£570m.

Chart 5.



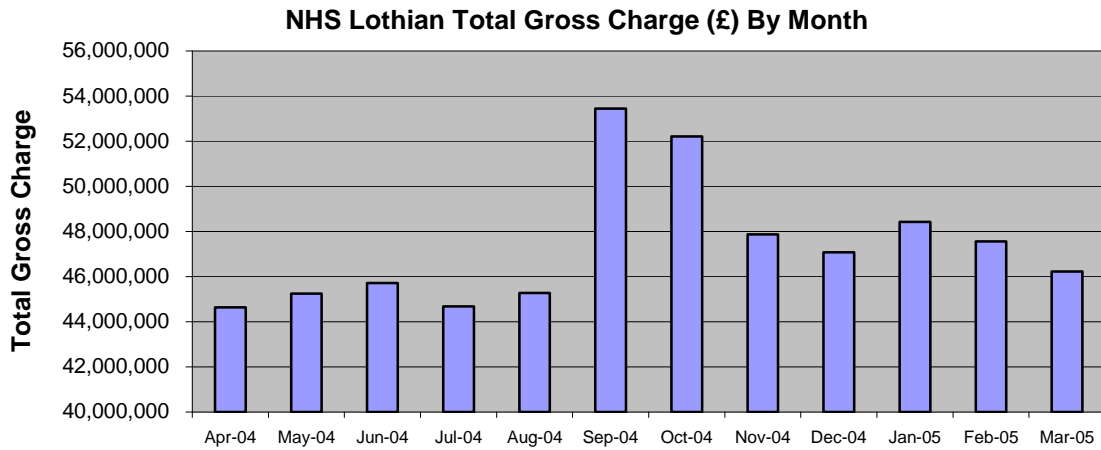
The following table gives a breakdown by Staff Group. These costs represent the Gross Charge to NHS Lothian and include all employers' costs and additional payroll costs such as overtime and shift premiums, details of these are included later on in this report.

Table 4: Workforce costs breakdown by Staff Group

	Apr-04	May-04	Jun-04	Jul-04	Aug-04	Sep-04	Oct-04	Nov-04	Dec-04	Jan-05	Feb-05	Mar-05	YTD Total
Medical	10,058,057	10,098,008	10,711,076	10,274,515	10,275,556	18,822,753	16,798,238	12,566,373	12,213,005	11,905,793	12,197,747	11,517,745	147,438,934
NursingReg	15,538,885	15,633,327	15,855,405	15,442,629	15,490,486	15,580,701	15,734,580	15,970,652	15,714,414	15,951,720	16,776,498	15,828,886	189,518,203
NursingNonreg	3,880,078	3,925,809	3,880,787	3,762,643	3,848,597	3,805,654	3,821,670	3,850,694	3,719,802	3,688,024	3,809,557	4,147,979	46,111,235
P&T:A	4,477,133	4,429,823	4,477,050	4,469,958	4,428,094	4,491,254	4,541,755	4,528,072	4,556,562	4,548,320	4,641,620	4,611,262	54,200,893
P&T:B	2,465,327	2,461,345	2,487,970	2,460,575	2,466,182	2,442,225	2,455,650	2,592,586	2,477,577	2,586,288	2,485,555	2,526,103	29,907,239
A&C	5,945,104	5,974,079	6,006,110	6,060,437	6,077,932	6,085,205	6,116,990	6,099,817	6,201,765	6,872,888	6,165,635	6,267,052	73,863,065
Arailay	1,844,881	2,182,941	1,746,683	1,743,859	2,160,052	1,755,546	2,231,085	1,815,936	1,746,362	2,290,305	1,837,368	1,738,038	23,094,056
Maintenance	472,946	541,189	537,668	462,263	529,544	456,064	518,961	463,933	447,950	572,483	478,693	429,122	5,910,817
Total	44,632,420	45,246,521	45,712,749	44,676,879	45,276,513	53,440,402	52,218,809	47,878,064	47,077,466	48,425,821	47,557,812	46,226,774	570,044,552

October 2004 saw the payment of backdated monies (from April 2003) associated with the implementation of the New Consultant Contract (see section 7). Please also note the increase in A&C in January 2005, which represents public holidays and back dated senior managers pay.

Chart 6.



There has been an increase in the average costs for the last 5 months of the financial year in comparison of 5.15% overall. The largest increase has been within Medical staff costs where there has been an increase of 17% in the main due to the introduction of the consultants contract.(see section 7)

4.2 Overtime Expenditure

The following chart and table illustrate the distribution of overtime costs from April 2004 to March 2005. In this period overtime staffing costs were £7,099,159, with Registered Nursing accounting for 38% of expenditure.

Chart 7.

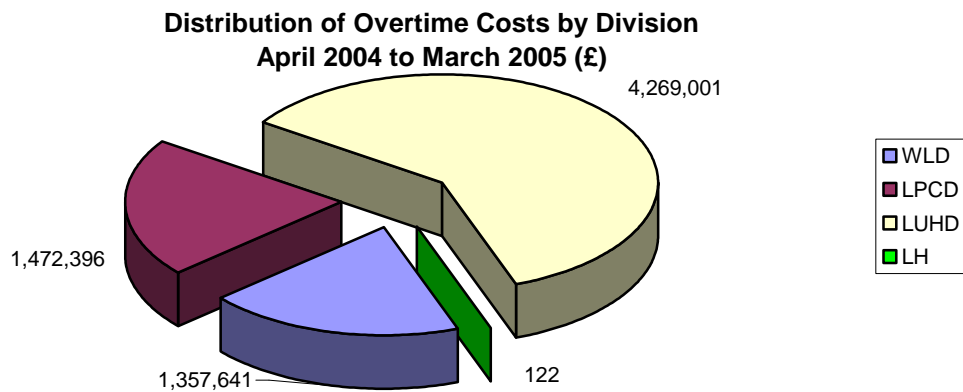
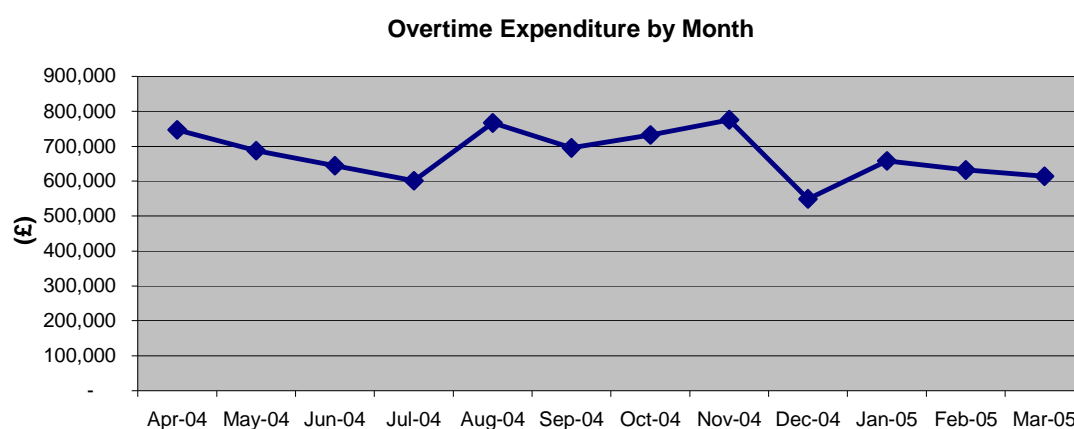


Table 5: Distribution of Overtime Costs by Staff Group April 2004 - March 2005

	Apr-04	May-04	Jun-04	Jul-04	Aug-04	Sep-04	Oct-04	Nov-04	Dec-04	Jan-05	Feb-05	Mar-05	Total YTD
Nursing	294,727	225,039	203,618	202,887	250,368	239,854	247,855	303,273	179,957	193,939	186,461	199,402	2,727,382
Nursing non-reg	91,132	74,735	71,089	74,652	94,163	88,329	74,247	94,986	47,706	43,056	48,392	49,808	852,296
P&T:A	32,142	29,925	33,428	35,813	33,278	34,477	30,200	34,995	31,611	39,050	40,189	31,347	406,456
P&T:B	40,368	36,625	39,027	35,785	35,812	32,153	36,148	33,042	35,634	31,352	34,135	37,466	427,548
A&C	53,891	59,602	52,231	56,366	62,907	59,939	62,771	65,715	68,169	69,646	50,309	55,050	716,594
Ancillary	103,655	114,177	111,676	77,861	152,688	116,643	153,790	114,472	91,623	133,598	135,546	117,617	1,423,347
Maint.	46,429	54,655	47,365	39,697	49,955	42,921	44,401	45,535	28,273	54,533	49,402	42,370	545,537
Total	662,343	594,758	558,436	523,062	679,171	614,317	649,412	692,019	482,973	565,174	544,435	533,060	7,099,159

Note – Figures for Ancillary and Maintenance will be higher in May, August, October and January as these pay months include 5 weeks.

Chart 8.



Overtime payments for the Q3&4 of the 04/05 financial year are 7.3% lower than Q1&2, it is difficult however to determine whether this is likely to be a continuing trend or merely a seasonal variation. In order to assess this it is necessary to look at costs at a service level and build up historical trends.

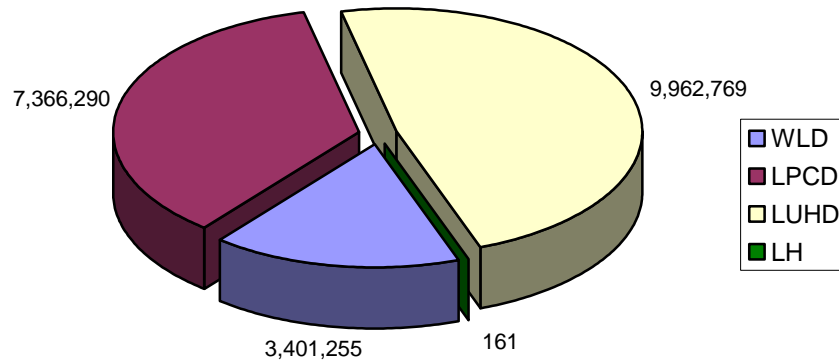
Within the UHD overtime, enhanced, locum and banding payments are reported locally to Service Managers by the Workforce Planning Team, highlighting areas where costs are comparatively high. Once the revised organisational structures and associated reporting structures are completed the Workforce Planning 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

The following chart and table illustrate the distribution of expenditure on Enhanced Pay from April 2004 to March 2005. 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. Total enhanced pay costs for this period were c£20.7m.

Chart 9.

Distribution of Enhanced Pay Costs by Division
(April 2004 to March 2005)



The following table and chart detail expenditure by month.

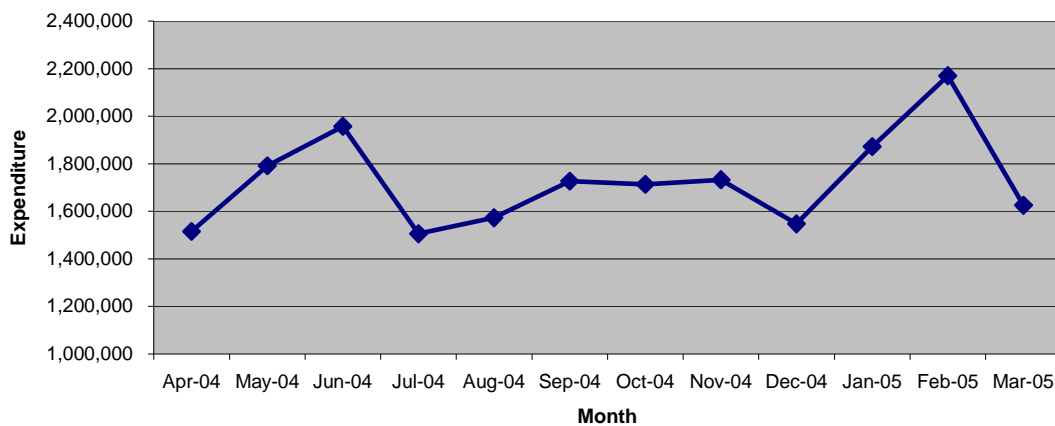
Table 6: Distribution of Enhanced Costs by Staff Group April 2004- March 2005

	Apr-04	May-04	Jun-04	Jul-04	Aug-04	Sep-04	Oct-04	Nov-04	Dec-04	Jan-05	Feb-05	Mar-05	Total YTD
Nursing Reg	923,119	1,070,665	1,268,720	956,492	961,966	1,103,797	1,050,487	1,121,797	977,362	1,106,806	1,490,920	968,038	13,000,168
Nursing Non-reg	322,120	394,095	427,967	322,520	337,251	360,001	359,310	369,602	330,255	342,817	395,108	392,049	4,353,096
P&T:A	3,992	5,446	7,532	4,015	4,456	5,114	6,446	4,693	4,704	7,813	9,225	6,577	70,014
P&T:B	3,421	10,485	8,252	3,439	3,941	4,389	7,687	4,465	3,395	17,815	10,072	6,659	84,021
A&C	61,672	83,654	81,760	59,166	65,272	68,343	79,652	64,279	56,560	82,804	87,186	65,398	855,745
Ancillary	198,138	224,423	159,741	157,521	196,552	181,554	206,250	165,027	170,739	303,898	175,415	183,033	2,322,292
Maintenance	2,932	3,395	3,198	2,698	3,256	3,361	3,858	2,843	3,986	9,970	1,939	3,703	45,139
Total	1,515,395	1,792,164	1,957,171	1,505,852	1,572,694	1,726,559	1,713,690	1,732,705	1,547,001	1,871,922	2,169,865	1,625,457	20,730,475

The increase in June and February reflect the cost of public holidays being worked in May, December and January.

Chart 10.

Enhanced Pay Costs Expenditure
April 2004 - March 2005



4.4 Training Grade Doctor Banding Payments

The following charts and table illustrate the distribution of expenditure on training grade doctors banding payment costs from April 2004 to March 2005. 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 7: 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)

Chart 11
Distribution of Banding Payments by Division (April - December 2004) £

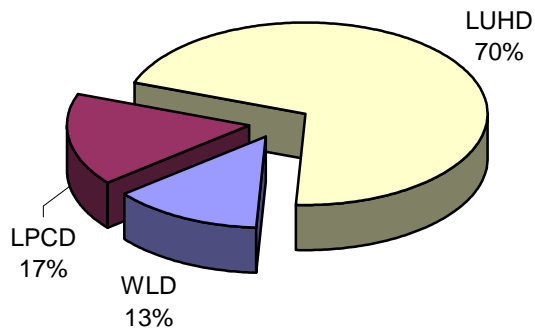
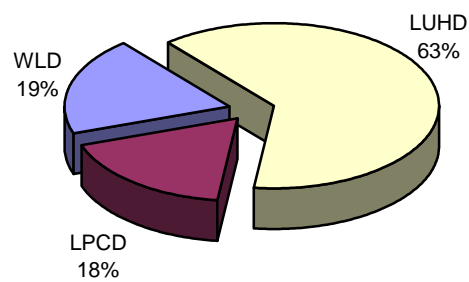
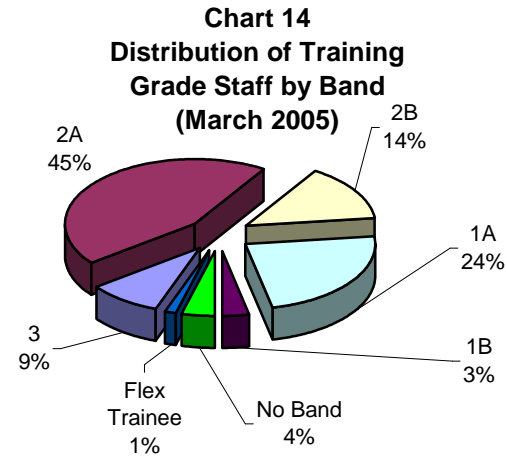
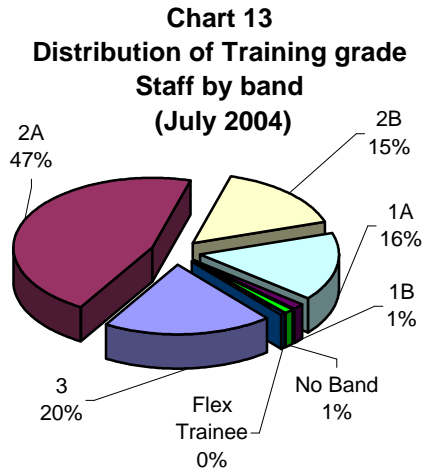


Chart 12
Distribution of Banding Payments by Division (April 2004 - March 2005)

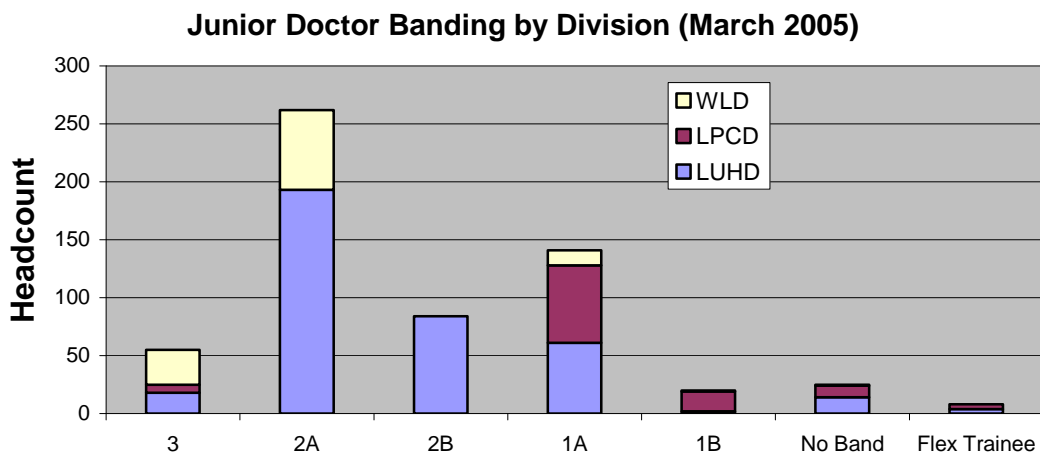


The above analysis illustrates the progress made in decreasing banding payments to junior doctors. Since January, NHS Lothian has recorded an average monthly decrease in banding payments of 3%. Banding payments are at their lowest level for over 12 months and have decreased from a monthly high of £1,637,733 in October 2004 to £1,407,242 in March 2005.



As demonstrated by Charts 13 and 14, progress in reducing banding payments across NHS Lothian is apparent. The decrease in banding payments has positively affected all payments proportionally and has resulted in the 11% decrease in the highest banding payments being transferred to an increase in the lowest levels of banding.

Chart 15.



Within NHS Lothian, the University Hospitals Division accounts for almost two thirds (63%) of all banding payments. However, within the highest banding level, West Lothian Healthcare Division represents 55% of band 3 payments.

The following table highlights the areas where the band 3 payments arise. The table shows both rotas and actual headcount

Table 8: NHS Lothian Junior Doctors on Band 3

Area	No of Rotas				No of Headcount			
	LPCD	LUHD	WLD	Grand Total	LPCD	LUHD	WLD	Grand Total
A&E	-	-	1	1	-	-	2	2
Anaesthetics	-	-	3	3	-	-	13	13
CFMHS Snr Rota	1	-	-	1	2	-	-	2
Haem/Onc	-	1	-	1	-	5	-	5
Medical Paeds (Specialty)	-	1	-	1	-	8	-	8
Plastics	-	-	3	3	-	-	15	15
RVH/A&E/Wstrn	1	-	-	1	5	-	-	5
Surgical Paeds	-	1	-	1	-	5	-	5
Grand Total	2	3	7	12	7	18	30	55

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.
LCPD	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, this report will seek to monitor this on an on-going basis.

5.1 Sickness Absence

The following table and chart detail the sickness absence for each Division, for the period April 2004 to March 2005. In the table the highest figure for each staff group within Divisions has been highlighted in red.

Table 9: Sickness Absence Percentages by Division

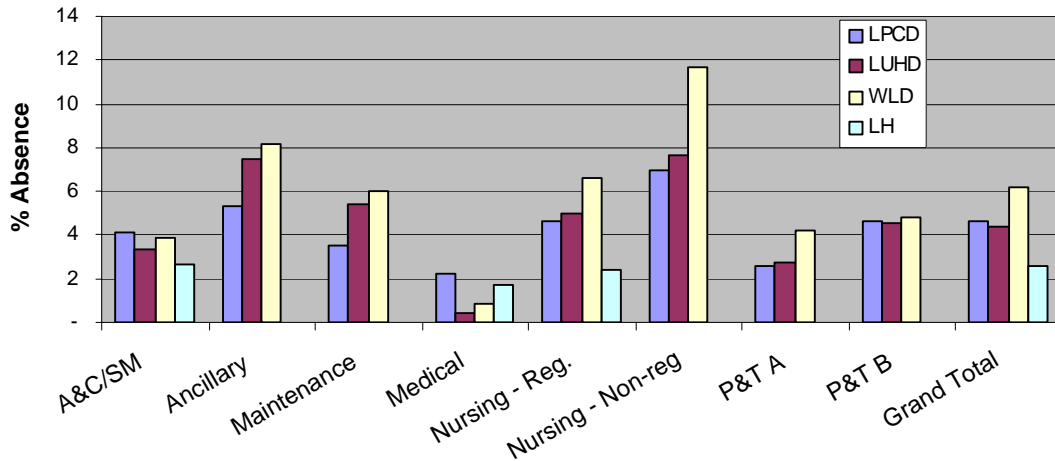
	LPCD (%)	LUHD (%)	WLD (%)	LH (%)
A&C/SM	4.09	3.37	3.83	2.63
Ancillary	5.32	7.46	8.15	
Maintenance	3.52	5.44	6.05	
Medical	2.21	0.44	0.87	1.76
Nursing – Registered	4.67	4.99	6.58	2.39
Nursing – Non-Reg	6.95	7.67	11.69	
P&T A	2.58	2.74	4.18	
P&T B	4.65	4.58	4.81	
Grand Total	4.60	4.35	6.21	2.57

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. However this

low absence percentage affects the overall figure 4.73% and if medical staff are excluded the overall figure would be 5.5%.

Chart 16.

Sickness Absence by Division

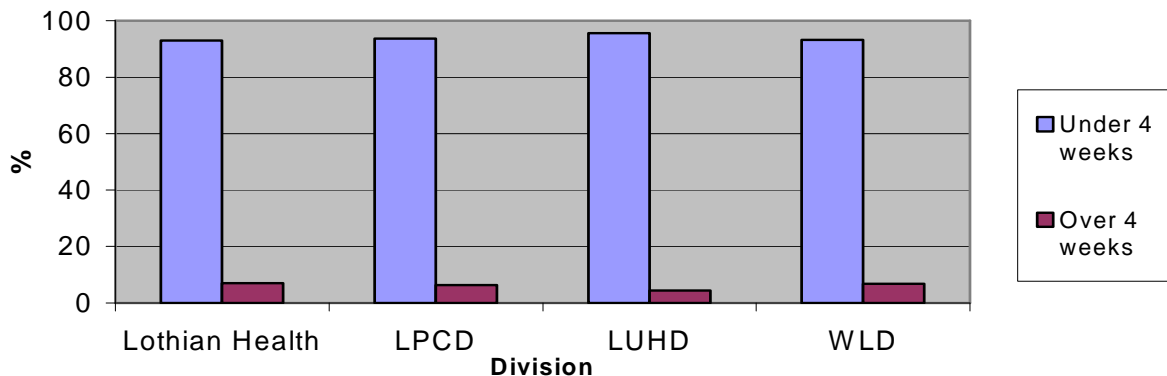


There are significant differences in levels of sickness absence between Divisions, in some cases this is because there are a low number in the staff group and therefore make percentages comparatively high. Nursing absence rates are 6.1% for Registered Nursing and 9.8% for Non-registered Nursing for NHS Lothian; this varies between the Division with WLD highest with 6.6% for Registered and 11.7% for non-registered respectively.

The chart below shows (in percentages) how many by division are classified as 'long term sick' have been off on sick leave for longer than a four-week period in comparison to those not classified as long term sick.

Chart 17

**NHS Lothian Staff Comparison
Long / Short Term Sick**



Future reports will look at absence trends by month and compare with the previous financial year.

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 future.

The following chart and table illustrate the distribution of directly employed locum medical staff by Division, grade and month.

In the period April 2004 to March 2005, NHS Lothian has spent £3,874,372 on directly employed medical locum staff. Consultant locums represent 56% of expenditure.

Chart 18.

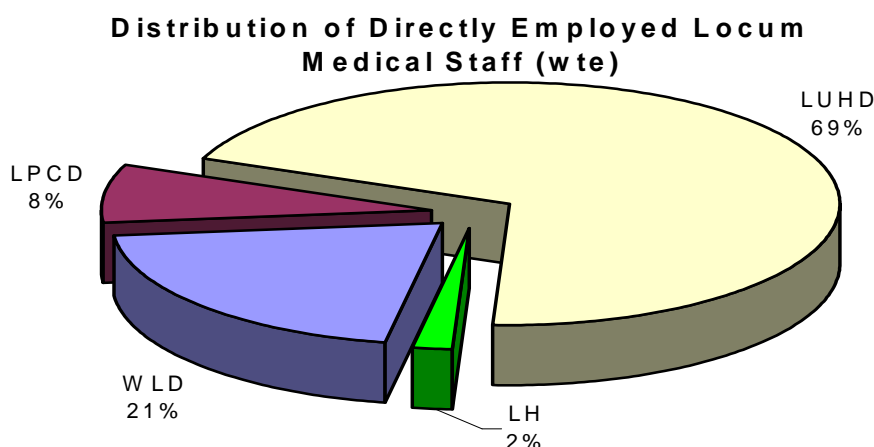
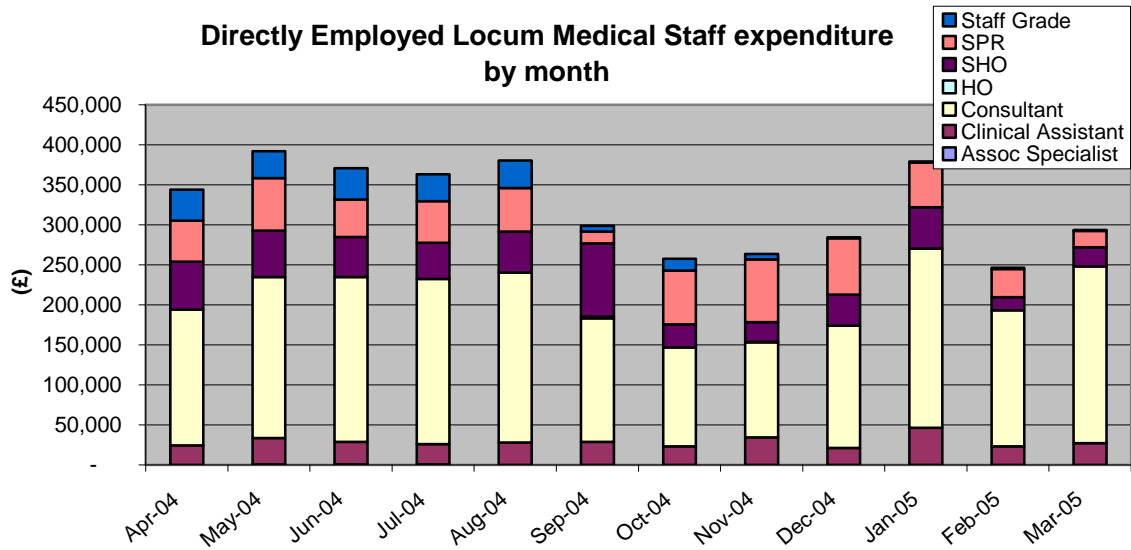


Table 10: Directly Employed Locum Expenditure by Month April 2004 - March 2005

	Apr-04	May-04	Jun-04	Jul-04	Aug-04	Sep-04	Oct-04	Nov-04	Dec-04	Jan-05	Feb-05	Mar-05	YTD Total
Assoc Specialist	-	689	691	673	168	-	-	-	-	-	-	-	2,220
Clinical Assistant	24,235	32,962	28,184	25,358	27,907	28,930	23,201	34,492	21,256	46,547	23,247	27,093	343,412
Consultant	169,610	201,264	205,730	206,418	212,353	154,396	123,469	118,539	152,557	223,870	170,096	221,063	2,159,366
HO	-	-	-	-	-	1,826	-	1,031	-	-	-	-	2,857
SHO	60,222	57,926	50,101	45,208	50,983	91,573	28,779	24,314	38,878	51,622	16,274	23,883	539,763
SPR	51,095	65,719	46,797	51,812	54,574	14,977	67,459	78,351	70,458	55,903	35,291	20,318	612,753
Staff Grade	39,038	33,531	39,217	33,749	34,307	7,278	14,556	6,754	1,393	1,393	1,393	1,393	214,001
Total	344,199	392,090	370,720	363,218	380,292	298,981	257,464	263,480	284,542	379,336	246,300	293,751	3,874,372

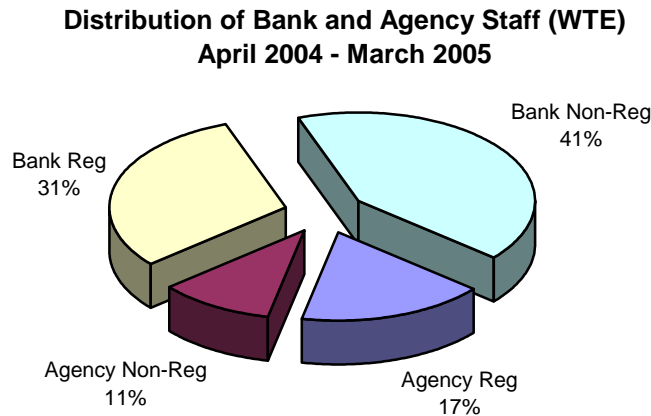
Chart 19.



6.2 Nurse Bank and Agency Utilisation

The following charts detail utilisation levels of bank and agency staff and the associated costs.

Chart 20.



The ratio of bank to agency is 72%:28% for the financial year, this has varied on a month to month basis with the highest ratio in November 2004 at 75%:25%. The reduction in agency staffing continues to be the main focus for action within Divisions. There appears to be an increase in utilisation of agency staff in Q4, this is primarily within the UHD.

The average annual rate for a whole time equivalent (WTE) of registered agency nursing is £46k where the rate via in-house Nurse Bank is £34k. This 35% premium for registered nurses is mirrored within un-registered nursing costs with cost for agency staffing 43% higher at £27k per WTE compared to in-house bank rate of £19k. The average for an in-house registered nurse is £32k and £17.9k for non-registered.

Chart 21.

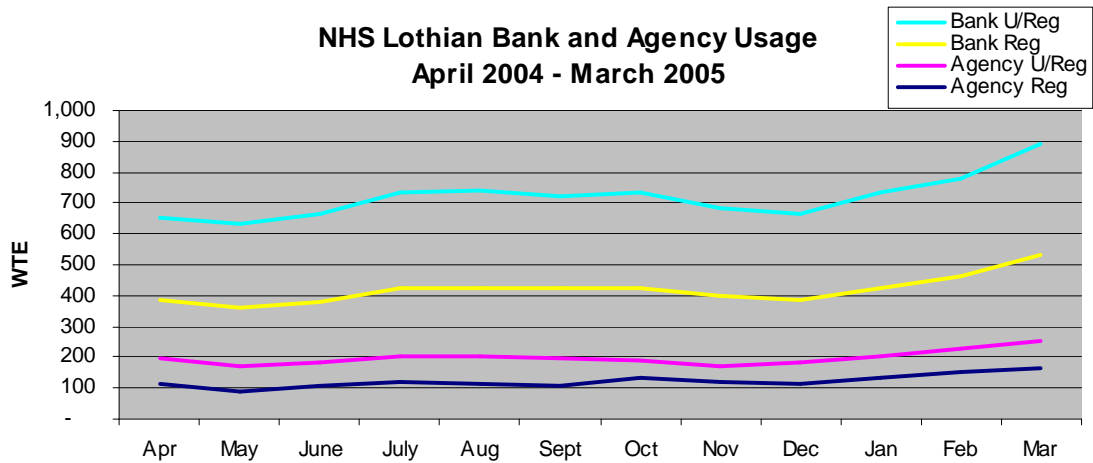
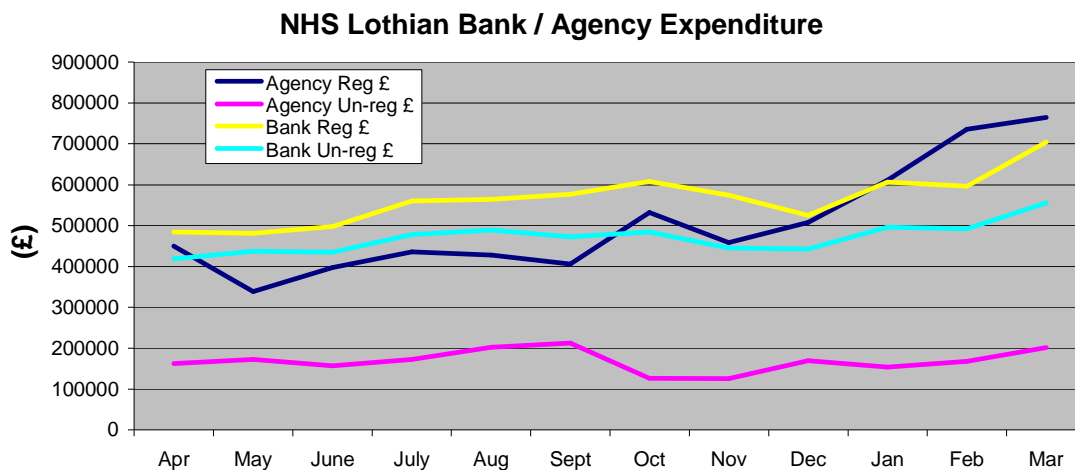


Chart 22.



Source – Lothian NHS Bank System

It has been indicated by the Nurse Bank and Agency Manager that the figures contained in the chart above may contain discrepancies as the costing data that comes from the bank system software is unreliable. It has been indicated that the most reliable costs would be those contained within the Financial ledgers, this however does not enable separation of costs on a trained and untrained basis. Given that some major concerns exist around the usage and cost of non-registered nursing (c£2m) figures have been used for indicative purposes.

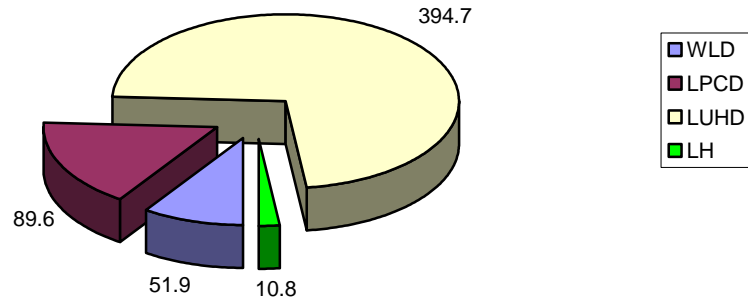
The Workforce Planning Team will work with the Nurse Bank and Agency Team in order to agree a reliable information source that will satisfy reporting requirements.

7. Consultant Medical Staffing

The following chart illustrates the distribution of NHS Lothian Consultant Medical Staffing.

Chart 23.

Distribution of Consultant Workforce March 2005 (WTE)



The following tables detail Consultant workforce and costs by month.

Table 11: NHS Lothian Consultant WTE by Month April 2004 – March 2005

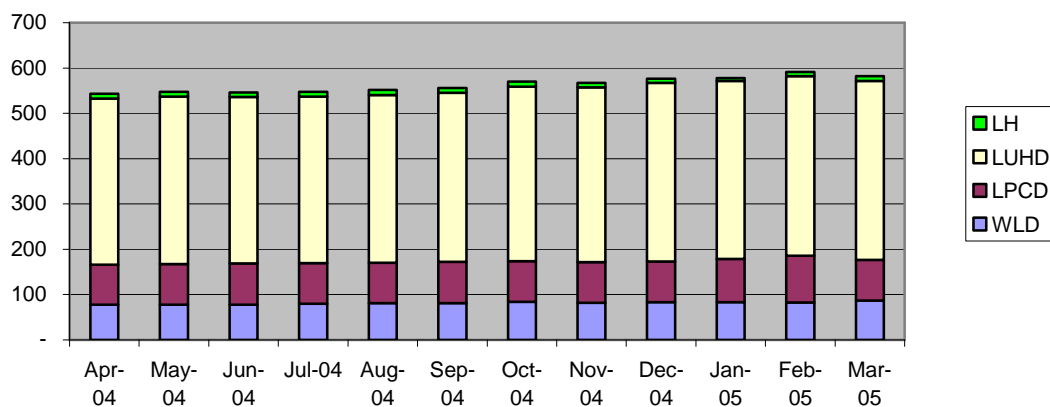
	Apr-04	May-04	Jun-04	Jul-04	Aug-04	Sep-04	Oct-04	Nov-04	Dec-04	Jan-05	Feb-05	Mar-05	YTD Average
WLD	78	77	78	80	81	81	84	82	83	83	83	87	81
LPCD	88	90	91	90	89	91	90	89	90	95	103	90	91
LUHD	367	370	367	367	371	373	384	386	394	393	396	395	380
LH	10	10	11	10	11	11	11	10	10	7	9	11	10
Total	543	547	546	548	551	556	570	567	577	578	591	582	563

Table 12: NHS Lothian Consultant Costs by Month April 2004 – March 2005

	Apr-04	May-04	Jun-04	Jul-04	Aug-04	Sep-04	Oct-04	Nov-04	Dec-04	Jan-05	Feb-05	Mar-05	YTD
WLD	666,757	676,014	672,617	681,378	722,019	1,681,979	1,684,926	933,362	920,462	825,685	882,567	889,840	11,237,605
LPCD	720,093	721,921	814,861	740,396	726,692	1,831,484	1,505,102	872,093	847,538	912,496	1,004,277	815,556	11,512,508
LUHD	2,961,435	2,985,842	3,184,170	3,031,563	3,064,662	9,299,184	7,583,779	4,806,807	4,530,140	4,176,524	4,309,210	4,239,692	54,173,009
LH	83,541	81,532	90,586	85,864	89,564	154,223	160,392	120,198	94,917	93,850	114,971.19	117,925.32	1,287,564
Total	4,431,826	4,465,309	4,762,234	4,539,201	4,602,937	12,966,870	10,934,199	6,732,461	6,393,057	6,008,555	6,311,024	6,063,013	78,210,686

Chart 24

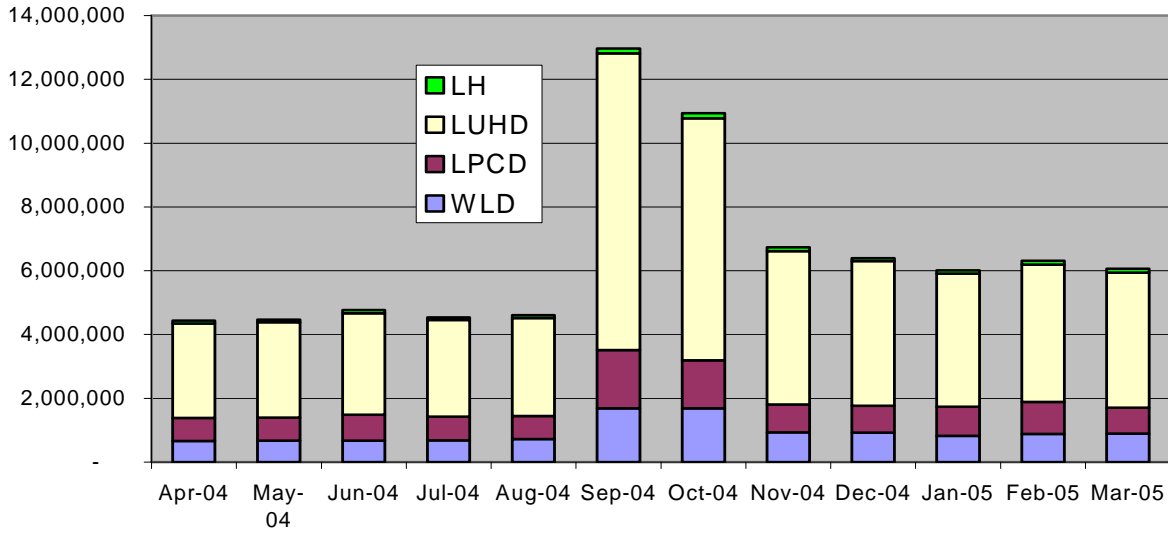
NHS Lothian Consultant Workforce April 2004 onwards (wte)



There has been an increase from an average of £4.6m per month for the first five months of the financial year to an average of £6.3m per month this represents a 38% increase in paybill costs. This is as a result of the new consultants contract.

Chart 25.

NHS Lothian Consultant Workforce April 2004 onwards (£)



8. Temporary Staffing Measures

8.1 Fixed and Temporary Contracts

Table 13: NHS Lothian Fixed / Temporary Contracts April 2004 – March 2005

NHS Lothian	Apr-04	May-04	Jun-04	Jul-04	Aug-04	Sep-04	Oct-04	Nov-04	Dec-04	Jan-05	Feb-05	Mar-05
FIXED	90	97	91	100	100	92	98	96	96	99	98	101
TEMP	404	426	448	486	473	472	530	528	529	466	477	461
TOTAL	494	523	539	586	573	564	628	624	625	565	575	562

8.2 Secondments

The following table and chart illustrate the number of secondments that are in place within NHS Lothian broken down by secondments to external NHSiS, Inter-division and Intra-division.

Chart 26.

NHS Lothian Secondments September 2004 (wte)

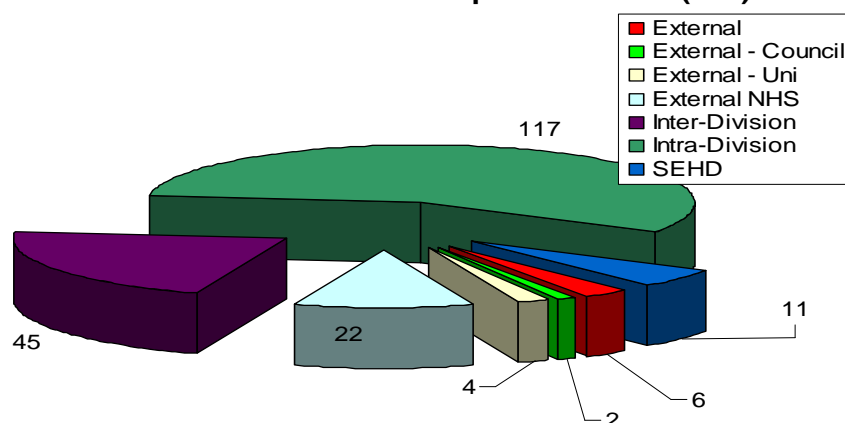


Table 14: NHS Lothian Secondments to September 2004

Secondment type	LUHD	LUHD	LPCD	LPCD	WLD	WLD	LH	LH	TOTAL	TOTAL
	WTE	HEADS	WTE	HEADS	WTE	HEADS	WTE	HEADS		
External	5.27	6							5.27	6
External - Council	1.4	2							1.4	2
External - Uni	3.03	4							3.03	4
External NHS	14.21	16			1	1	5	5	20.21	22
Inter-Division	34.25	41					3.5	4	37.75	45
Intra-Division	84.51	103			6.75	8	6	6	97.26	117
SEHD	6.55	8			1	1	2	2	9.55	11
Grand Total	149.22	180			8.75	10	16.5	17	169.2	201

Note - no return as yet received from LPCD

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

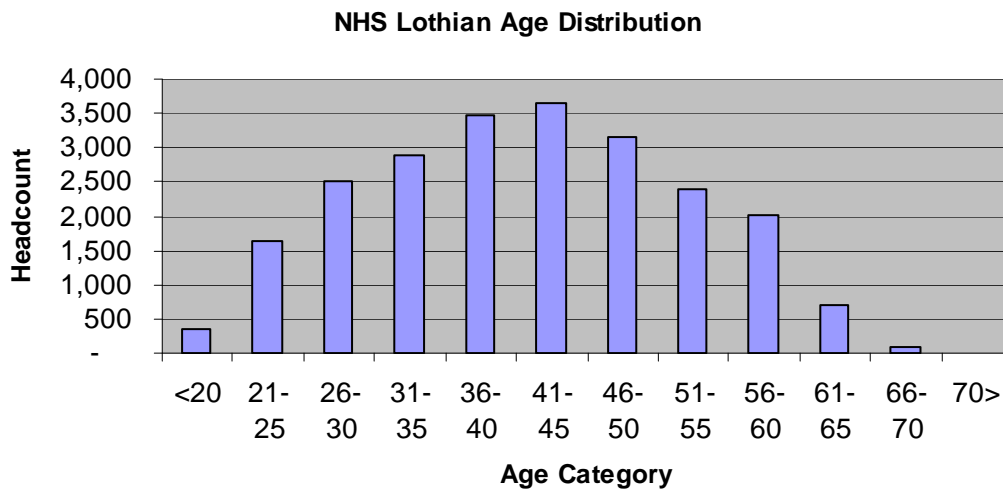
9. Demographics

9.1 Age Distribution

The demographic profile of the workforce within Lothian and Scotland is seen as a key issue.

The following charts illustrate the age distribution of the NHS Lothian workforce across Lothian, by Division and by staff group. (Headcount)

Chart 27.



NHS Lothian, as a whole, shows a normal age distribution. However, these figures mask certain aspects of the workforce demographic, which may be a cause for concern. For example, over 75% of maintenance staff are aged over 50 and registered nurses, whilst maintaining an overall average age of 39, show differences across NHS Lothian Divisions. (LPCD ave. 42; LUHD ave. 37; WLD ave. 41). The overall difference, as demonstrated below in chart 27, is largely attributable to the University Hospitals Division registered nursing staff.

Chart 28

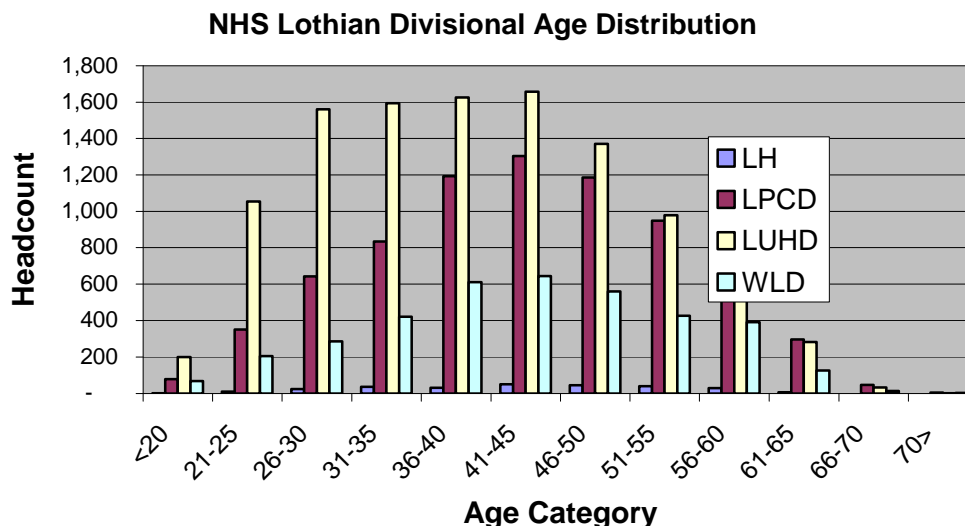
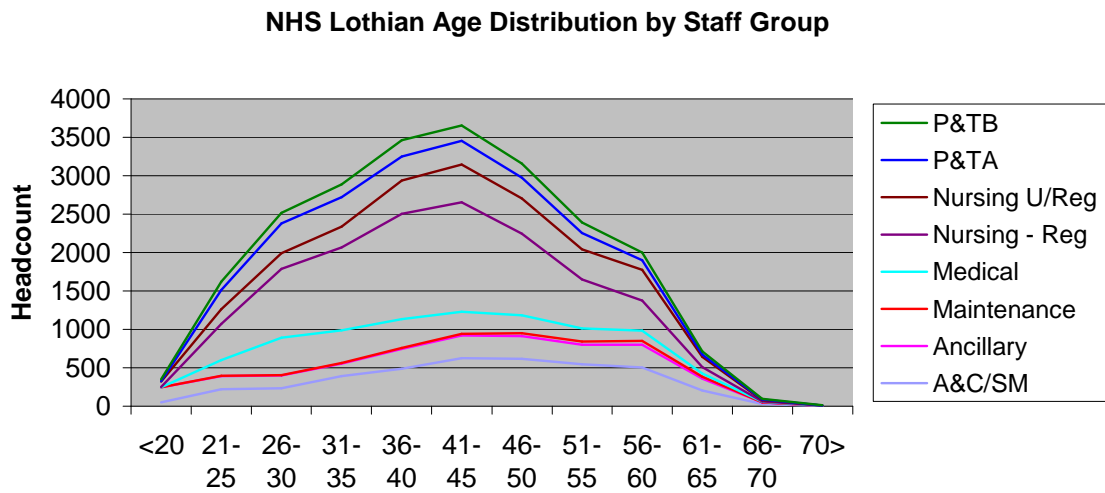


Chart 29.

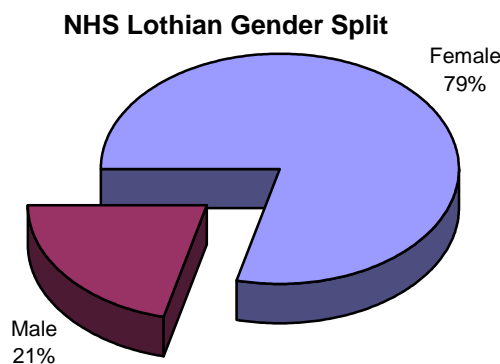


As above, the normal age distribution within specific staff groups masks an underlying divisional difference. Examples include Medical staff who are, on average, 5 years younger in LUHD than in LPCD and AHP staff who are, on average, 4 years younger in LUHD than in WLD. Further detailed analysis of nursing employee demographics can be found in Section 13.

9.2 Gender Distribution

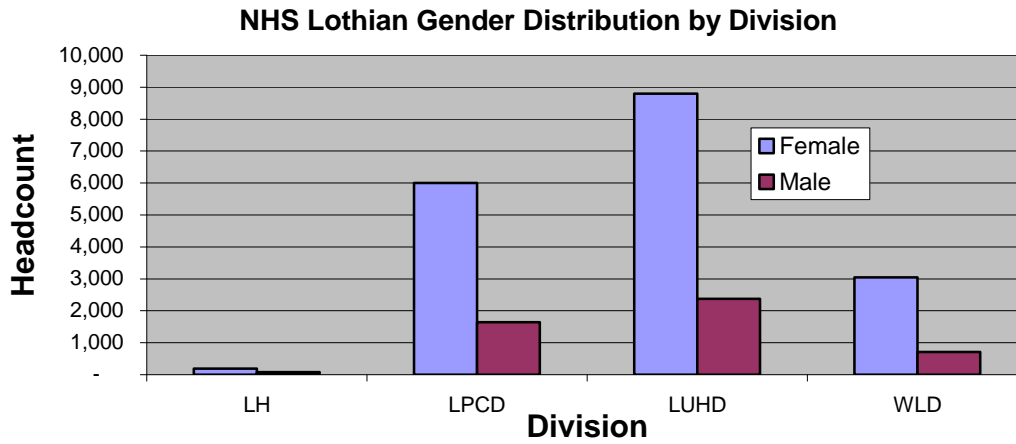
The following charts illustrate the gender distribution of the NHS Lothian workforce across Lothian, by Division and by staff group. (Headcount)

Chart 30.



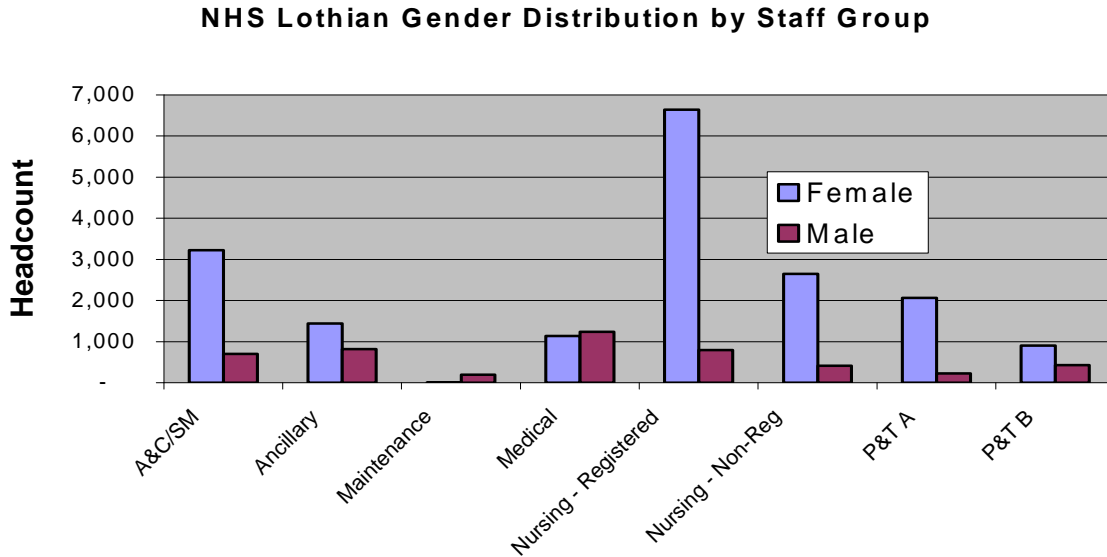
The gender demographic of NHS Lothian mirrors the national situation. However, analysis of maintenance and consultant staff, demonstrated in Chart 31, show male dominance of 98% and 66% respectively.

Chart 31.



The overall percentage gender demographic is continued at divisional level with the exception of Lothian Health Board where, although still largely populated by female staff, the gender split is slightly more even at 70%/30%.

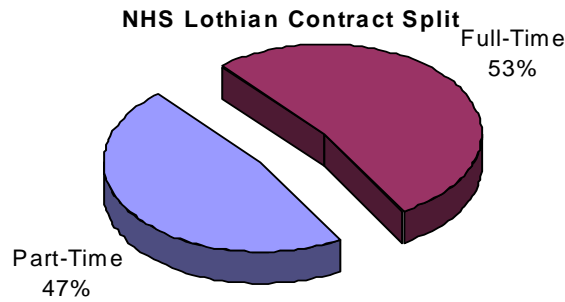
Chart 32.



9.3 Distribution of Full / Part-Time Workforce

The following charts illustrate the distribution by contractual obligation of the NHS Lothian workforce across Lothian, by Division and by staff group. (Headcount)

Chart 33.



The majority of staff groups show a relatively even numerical split between full-time and part-time staff. One particular exception, as shown in Chart 34, is maintenance staff who, within the group of 201 employed staff, have only one part-time employee. 76% of NHS Lothian ancillary staff are employed on a part-time basis. Chart 33 below demonstrates the divisional distribution with the notable exception of LPCD whose workforce is two thirds constituted by part-time employees.

Chart 34.

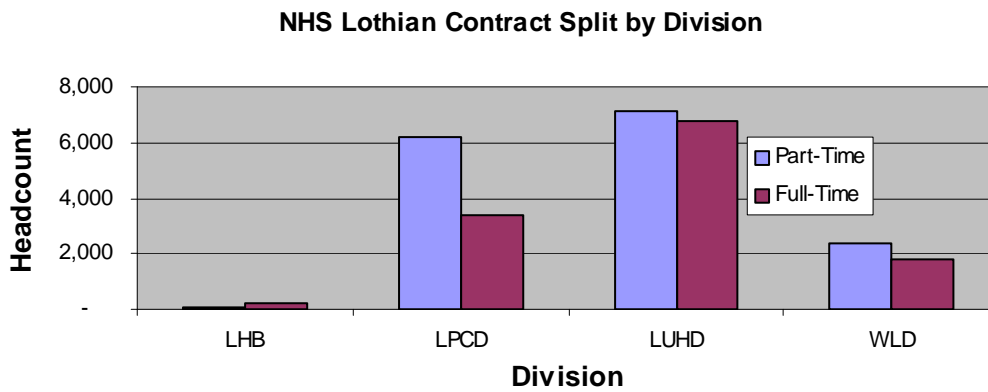
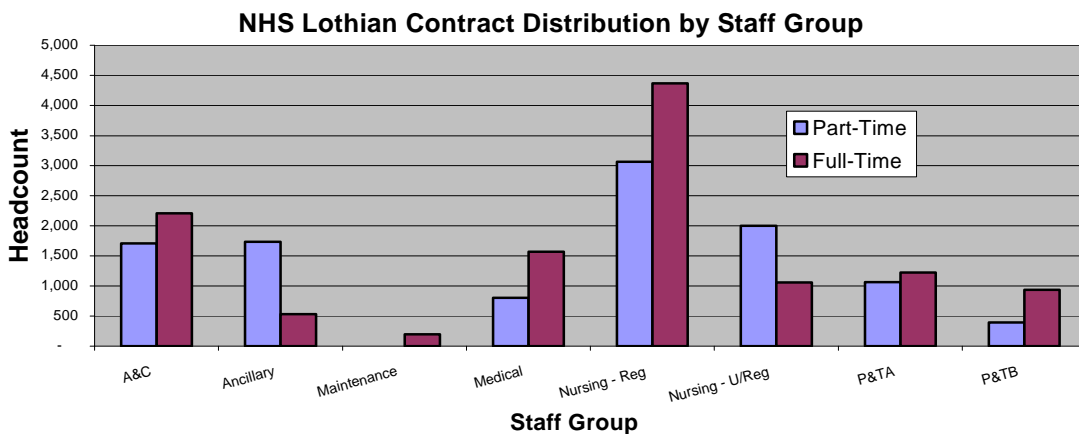


Chart 35.



As shown above in chart 34, ancillary and unregistered nursing are constituted by a higher percentage of part-time employees. Within these staff groups, a significant proportion lives locally.

10. Staff Turnover

10.1 Leavers by Staff Group

The following table and chart illustrate the number of staff who terminated their employment with their employing Division. It is important to note that until September these leavers may have been going from one Division to another. In future months however staff transfer between Divisions as opposed to terminating employment with one and joining another. As a result of this change leavers (shaded grey below) in future will be only those leaving employment within NHS Lothian.

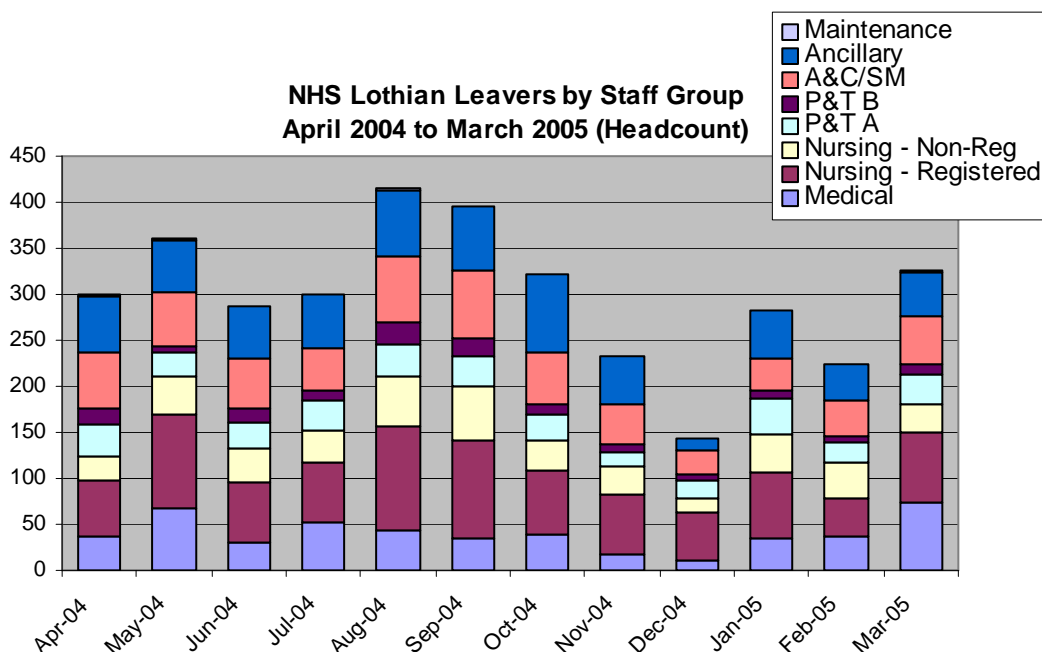
Table 15: NHS Lothian Leavers by Staff Group April 2004 – March 2005

Staff Group	Apr-04	May-04	Jun-04	Jul-04	Aug-04	Sep-04	Oct-04	Nov-04	Dec-04	Jan-05	Feb-05	Mar-05	Grand Total
Medical	36	67	31	53	43	35	40	18	11	35	36	75	480
Nursing - Registered	62	103	65	64	113	107	68	65	51	72	43	76	889
Nursing – Non-Reg	26	40	37	35	54	57	34	29	17	40	38	29	436
P&T A	35	26	28	32	35	34	27	16	18	40	23	34	348
P&T B	17	7	16	11	25	19	11	8	7	9	6	10	146
A&C/SM	62	60	53	46	72	74	56	45	26	34	38	53	619
Ancillary	60	56	57	58	70	69	85	52	13	52	39	46	657
Maintenance	2	1	1	2	3	0	1		1	1	1	4	17
Grand Total	300	360	288	301	415	395	322	233	144	283	224	327	3592

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 36.



10.2 Leavers by Division

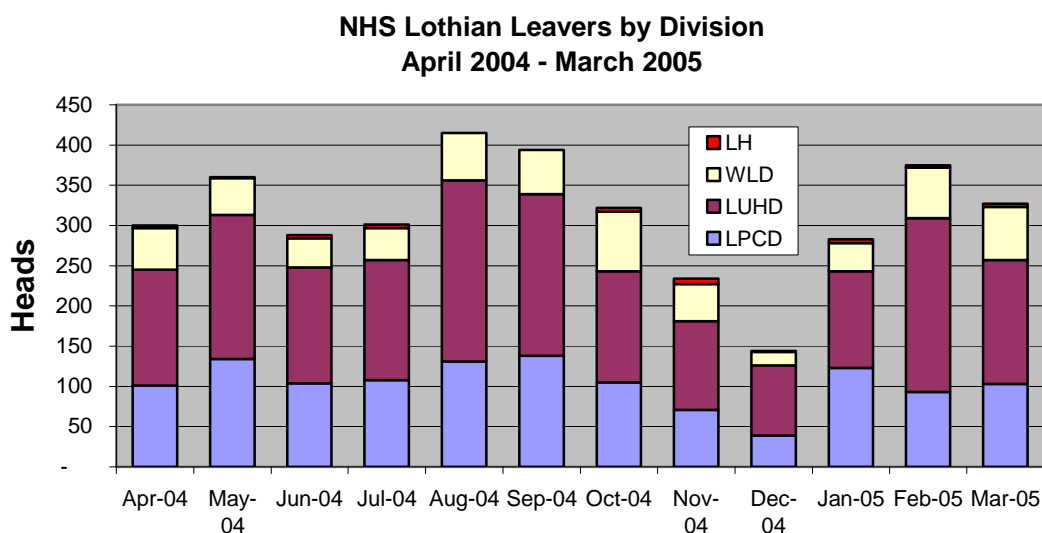
The following table and chart illustrate the numbers of leavers for each Division in the period April 04 to March 05.

Table 16: NHS Lothian Leavers by Division April 2004 – March 2005

Division	Apr-04	May-04	Jun-04	Jul-04	Aug-04	Sep-04	Oct-04	Nov-04	Dec-04	Jan-05	Feb-05	Mar-05	Grand Total	% Leavers
LPCD	101	134	104	108	131	138	105	71	39	123	93	103	1,250	12.3%
LUHD	144	179	144	149	225	201	138	110	87	120	216	154	1,867	12.7%
WLD	52	46	36	40	59	55	74	46	17	35	63	66	589	11.6%
LH	3	1	4	4	-	-	5	7	1	5	3	4	37	8.3%
Grand Total	300	360	288	301	415	394	322	234	144	283	375	327	3,743	12.3%

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

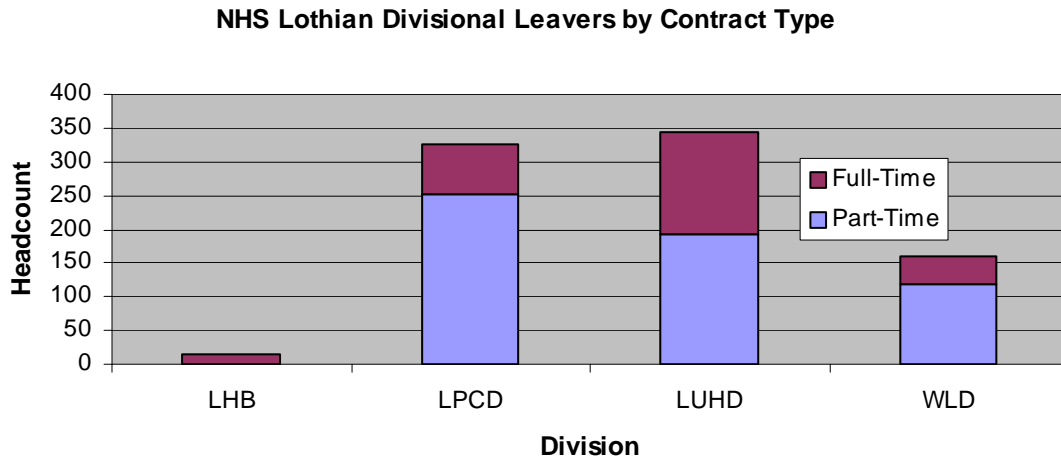
Chart 37.



Staff turnover in NHS Lothian is consistent with the staffing levels and relative size of each division within the organisation. Trend analyses will be undertaken from 2005 Quarter 1 to further identify potential staffing issues resulting from seasonal staffing shifts.

10.3 Divisional Leavers by Contract Type

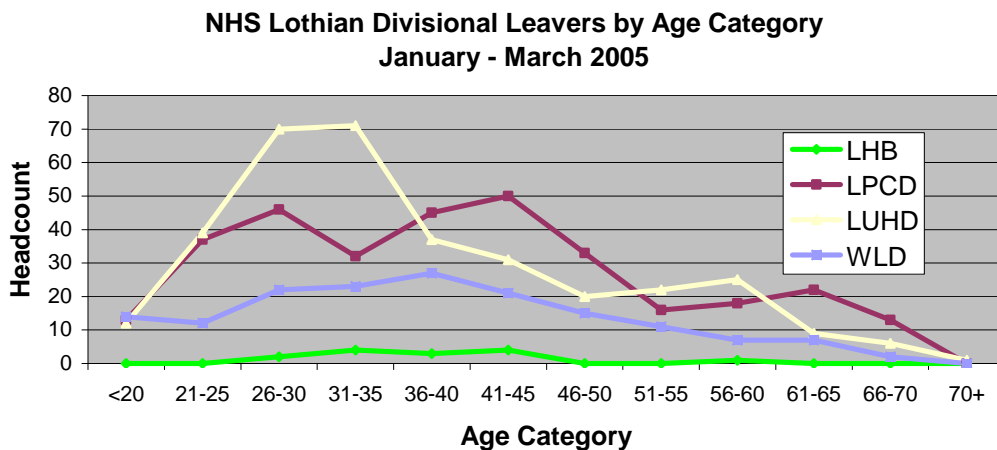
Chart 38.



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.

10.4 Divisional leavers by Age Category

Chart 39.



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.

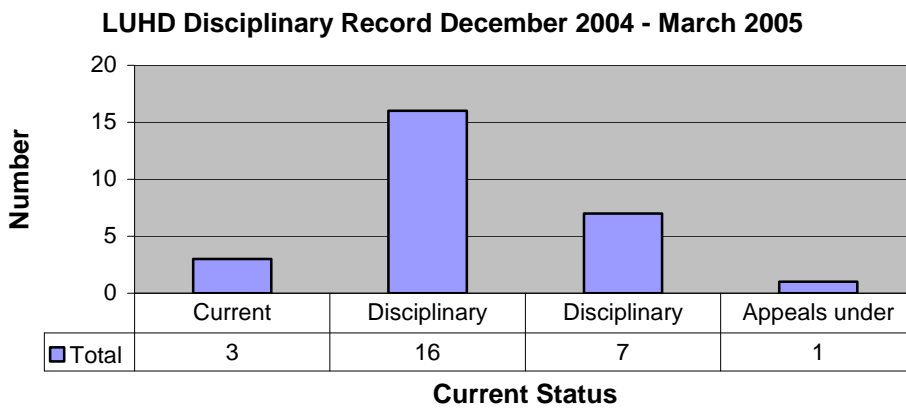
In future, as mention earlier in this report, a further breakdown will be made available and show details of the service area in which leavers can be found.

11. Disciplinary & Grievance

A template for recording details of disciplinaries and grievances has been developed for use across Lothian. This template will shortly be adapted to capture detailed activity within both the NHS Lothian Grievance and Management of Employee Conduct procedures.

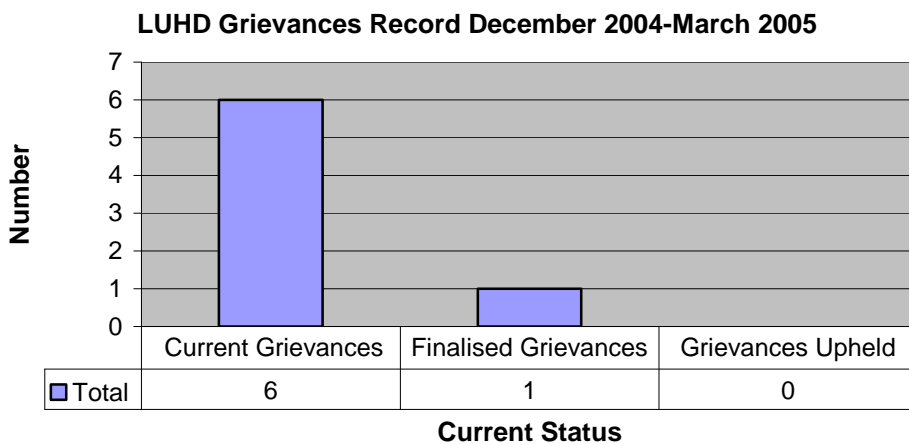
The following table details the number of cases within the disciplinary process.

Chart 40.



Figures only available for LUHD

Chart 41.



Figures only available for LUHD

Data only received from LUHD. At this time it is only possible to supply reports on grievances and disciplinary matters from LUHD, this situation will change in the future reports.

12. Focus on Nursing

12.1 Nursing In-post 100 year trend (wte)

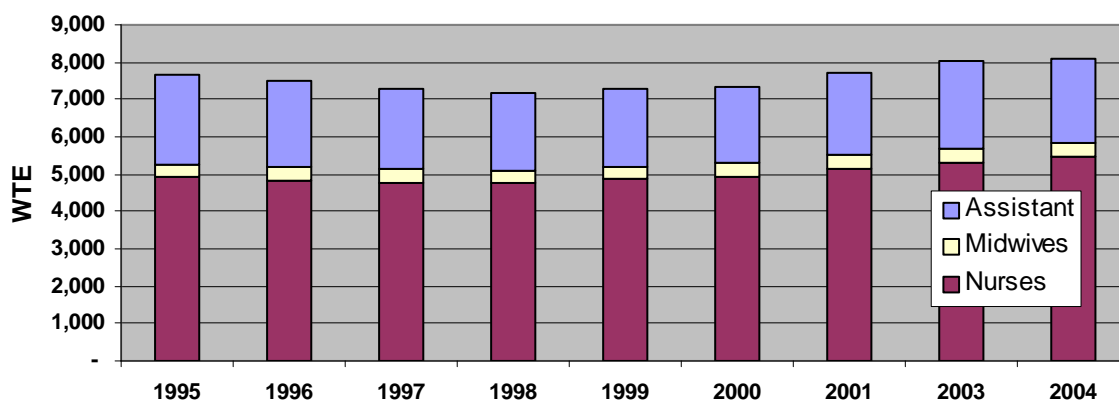
The registered nursing workforce has increased significantly – over the last 10 years,. There has however been a slight decrease with midwives and non registered nurses, as detailed in the table and chart below:

Table 17: Nursing in-post wte 1995 - 2004

Category	1995	1996	1997	1998	1999	2000	2001	2003	2004	1995 to 2004 % Change
Registered Nurses	4,903	4,827	4,767	4,764	4,863	4,940	5,157	5,322	5,460	11%
Midwives	367	356	364	341	340	346	348	359	358	-3%
Non-registered Nurses	2,376	2,298	2,149	2,072	2,060	2,072	2,226	2,339	2,296	-3%
Grand Total	7,646	7,481	7,280	7,177	7,263	7,358	7,731	8,020	8,114	6%

Chart 42.

Nursing staff distribution by category from 1994 to 2004



The increase in registered nursing has been particularly evident since 2001 (5.8% over this period).

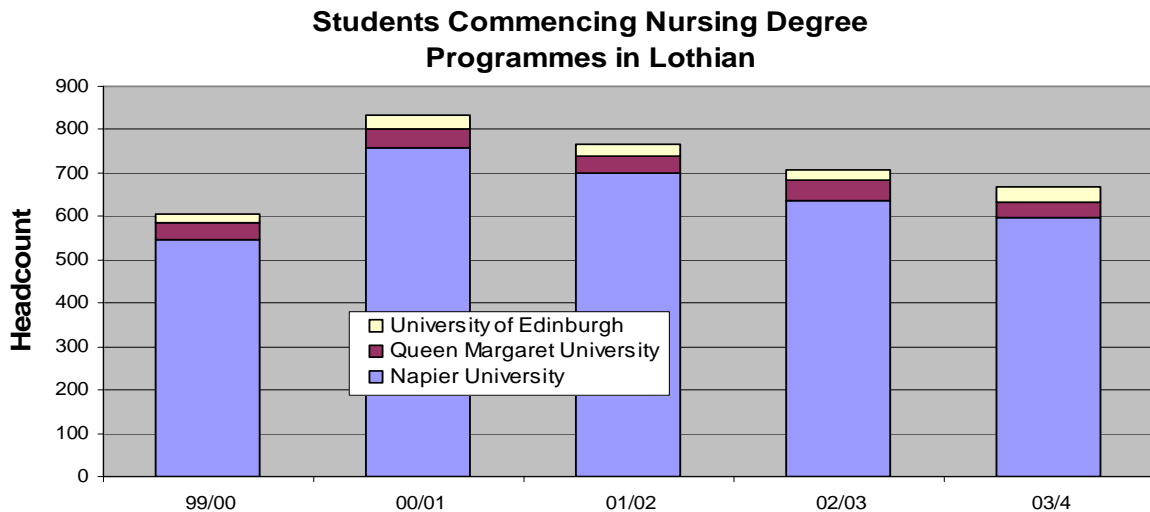
Despite the significant increase in staffing levels there are still areas where it is apparently difficult to recruit and/or retain staff. Anecdotally there are a significant number of vacancies and NHS Lothian continues to spend £20.5m on Bank and Agency staffing supplements. There is therefore considerable pressure to increase the Nursing workforce further, the following are some of the key drivers:

- Minimising Bank & Agency spend
- Agenda for change (changes in annual leave)
- Modernising Medical Careers
- Workload
- Hospital at night
- Service redesign

12.2 Student Nurse Intake and Output

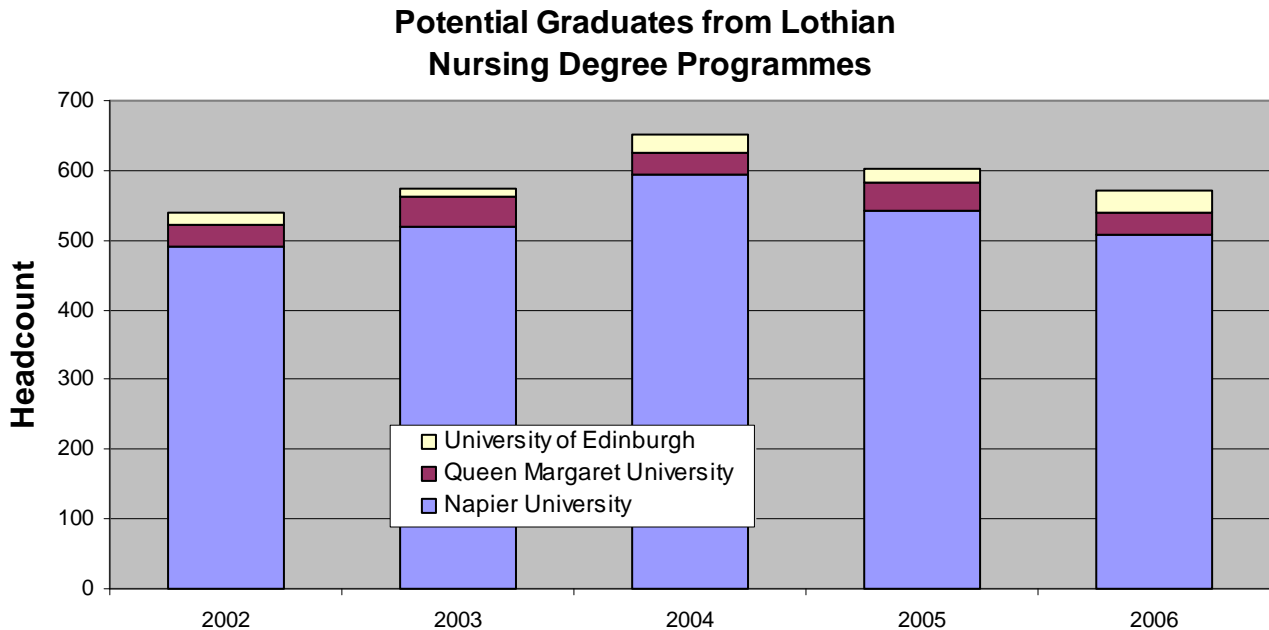
The 2000/1 student nursing intake into Lothian Universities increased by 37% from the previous year and the corresponding output can be seen in the 2003 outturn. The number of students entering the Nursing programmes in Lothian has however declined since 2000/01 with 2003/4 down 19% from this peak. The following charts detail shows the movement in nursing intake numbers.

Chart 43.



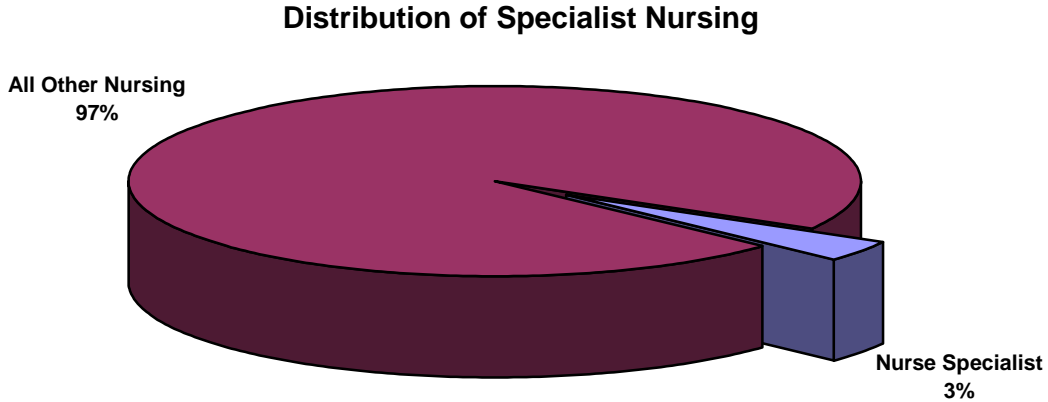
Extrapolating the figures above by 'ageing' the numbers by the length of the course and factoring in forecasted attrition rates, results in the following potential number of newly qualified nurses entering the labour market.

Chart 44.



12.3 Nurse Specialists

Several of these will result in registered nurses taking on work from training grade medical staff through the extension roles and increased specialisation. The following chart demonstrates the proportion of the registered workforce who are defined as nurse



specialist (this does not include all practitioners/extended scope as a result of an ISD definition).

Chart 45.

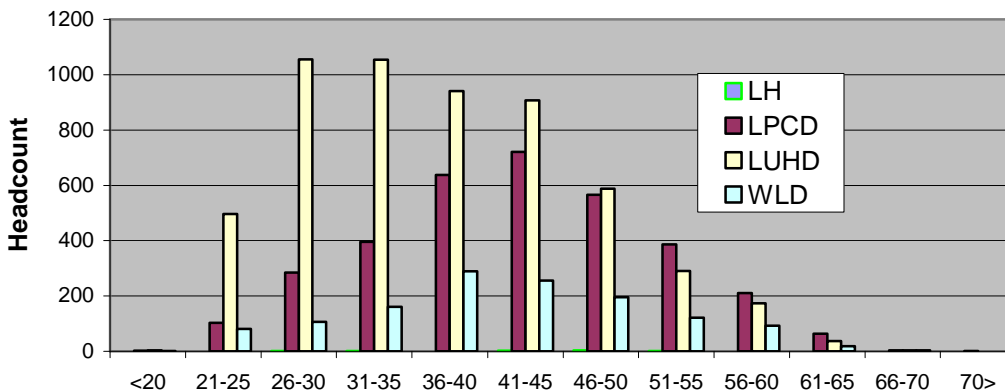
With the increased demand for Specialist/Extended nurses there may be an issue with maintaining existing ward based staffing levels. In the medium to long term the demographic profiles of Scotland indicate that it is unsustainable for the NHSiS to keep increasing the size of this workforce, as there will be intense demand for a smaller number of people in the workforce.

12.4 Demographics

Future demographics also pose further challenges for NHS Lothian as a result of its ageing workforce. The following charts detail the demographic profile of the registered nursing workforce by grade, division and age category.

Chart 46.

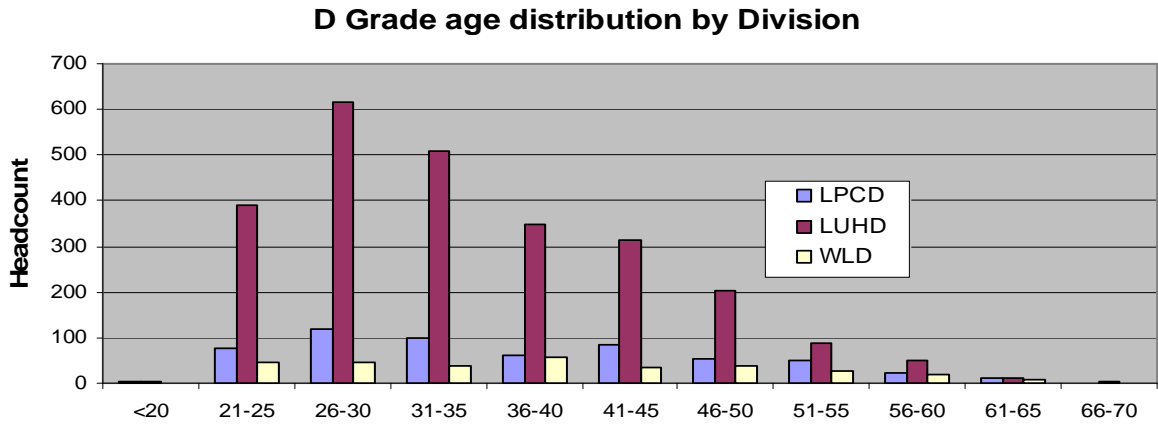
Registered Nurse Age Distribution by Division



The above chart indicates the significant differences between Divisions in particular it highlights that the majority of nurses aged between 21 and 50 are working within the LUHD.

Below is a breakdown by grades including grades D,E,F,G and H

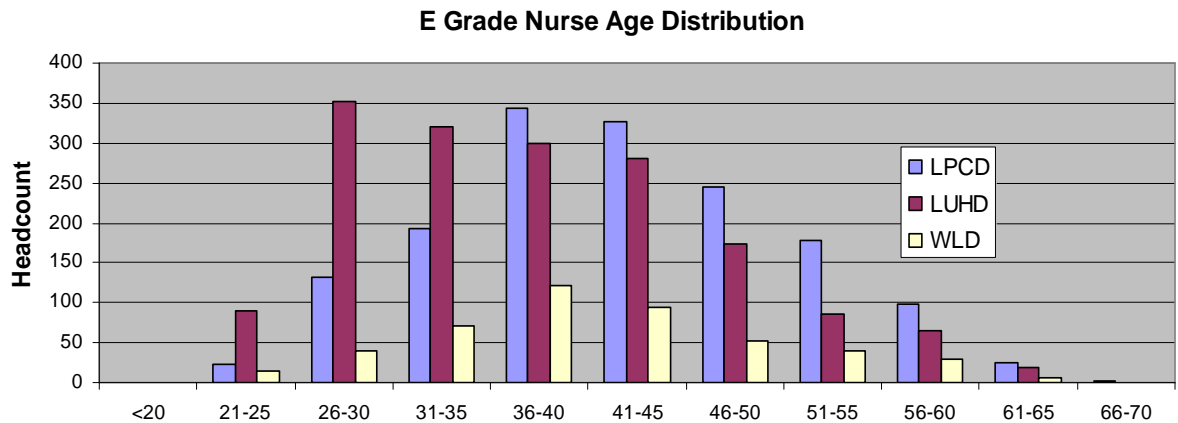
Chart 47.



The average ages of a D grade nurse within Lothian are as follows:

- LUHD 32 years old
- LPCD 35 years old
- WLD 38 years old

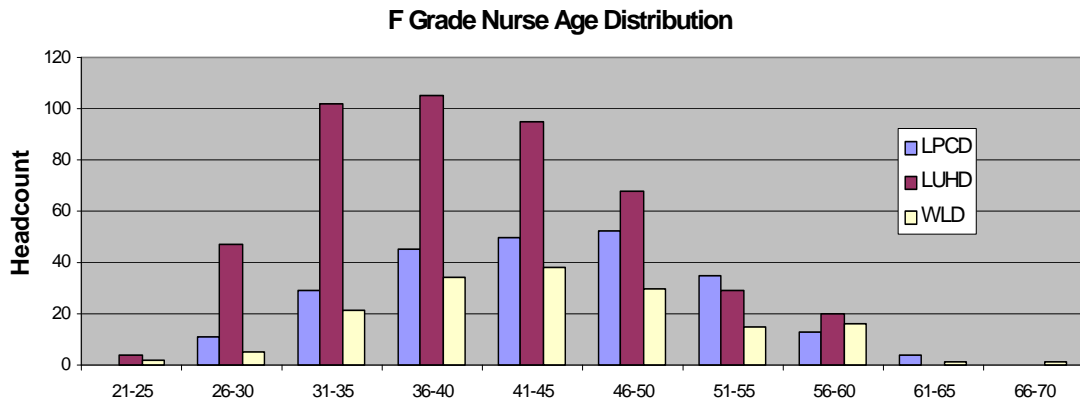
Chart 48.



The average ages of an E grade nurse within Lothian are as follows:

- LUHD 36 years old
- LPCD 41 years old
- WLD 39 years old

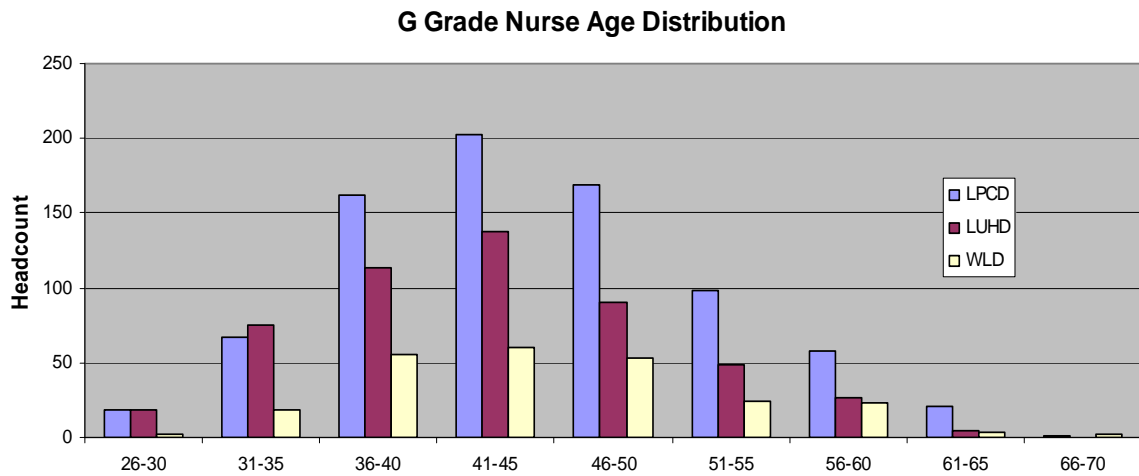
Chart 49.



The average ages of an F grade nurse within Lothian are as follows:

- LUHD 39 years old
- LPCD 44 years old
- WLD 43 years old

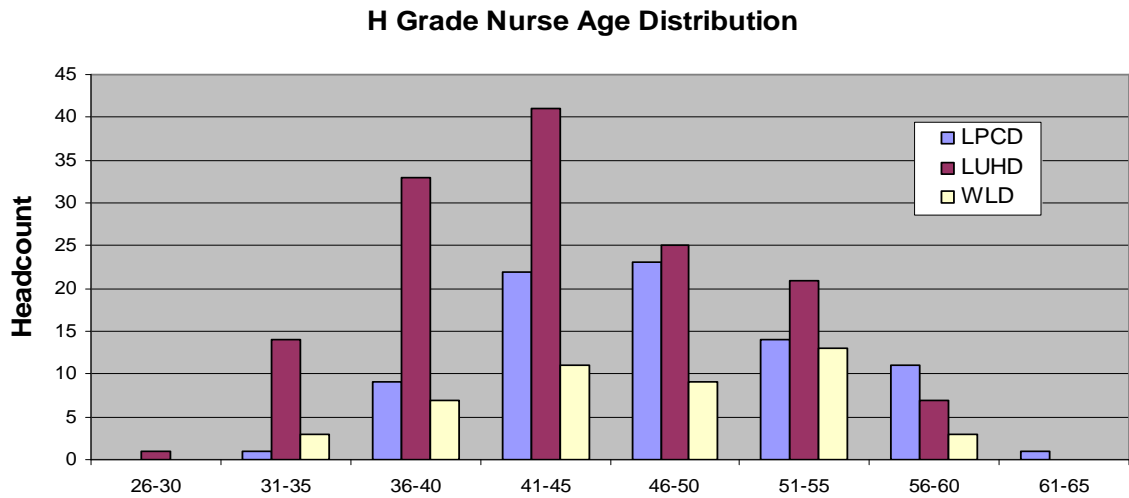
Chart 50.



The average ages of a G grade nurse within Lothian are as follows:

- LUHD 36 years old
- LPCD 41 years old
- WLD 39 years old

Chart 51.



The average ages of an H grade nurse within Lothian are as follows:

- LUHD 43 years old
- LPCD 47 years old
- WLD 46 years old

To summarise the above charts indicate:

- The lowest average age for all grades within LUHD.
- The range between the average age within LUHD and the highest average age is 5 years except for H grade where it is 4 years.
- LPCD has the highest average age within all grades except D grade; WLD average ages are however only approximately 2 years younger.

Further more detailed work is required to fully understand the potential impact of the demographic patterns of the workforce. The workforce planning team are now able to stratify this information by a range of factors such as service, site and specialty and will ensure that demographic factors are taken into account in all service workforce planning.

13. Human Resources Policy Development

Policy Update as at 31 March 2005

Policies completed and approved by Lothian Partnership Forum

(ready for implementation as from April 2005)

Adoption Leave
Facilitating Breastfeeding on Return to Work
Management of Employee Capability
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
Maternity Leave
Organisational Change
Parental Leave
Paternity Leave
Over/Underpayment of Salaries
Secondment
Special Leave

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

Dignity at Work
Equal Opportunities
Freedom of Speech
Race Equality

Policies submitted for approval by Lothian Partnership Forum

Career Breaks
Homeworking
Job Sharing

Policies subject to local consultations

Promoting Attendance
Redeployment

Policies due for first /reconsideration by HR Policy Group

Lone Working
Management of Violence and Aggression
Term Time Working
Flexi-Time Systems

Policies currently in preparation

Flexible Working Options: Annual Hours Working

Compressed Working Week
Flexible Working Hours
Part Time Workers Policy
Phased Retiral
Team Based Self Rostering
Voluntary Reduced Hours
Zero Hours Contracts

Policies proposed for development during 2005/2006

“Salary Sacrifice” Schemes:

Child Care Vouchers
Home Computing Initiative
Loans for Bicycle Purchase

Absence Records
Adverse Weather Policy
Alcohol and Substance Misuse
Biological and Chemical Hazards
Reducing Work-Related Driving Risks
Promoting Safe Manual Handling
Removal Expenses
Dealing Positively with Stress
Study Leave

Note:

Employment Policy Manuals containing all the policies to be implemented from April 2005 are in process of being distributed to all departments across NHS Lothian; the policies will also be accessible on the four intranet sites.

An introductory training session on the new employment policies was conducted in March 2005 for HR staff and staff representatives. Awareness sessions for line managers across a range of sites are planned for June/July.

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