



Workforce Monitoring Report

1 April 2014 - 30 September 2014

	Executive Summary	3
SECTION 1	_CURRENT WORKFORCE	5
SECTION 2	RECRUITMENT	8
SECTION 3	SICKNESS ABSENCE	10
SECTION 4	WORK-LIFE BALANCE	12
SECTION 5 5.1 5.2 5.3 5.4 5.5 5.6 5.7 5.8 5.9	PROTECTED CHARACTERISTS Gender Age Race Faith & Religion Disability Sexual Orientation Gender Reassignment Pregnancy & Maternity Marriage and Civil Partnership	16 17 18 20 22 23 24 25 26

EXECUTIVE SUMMARY

Introduction

This six monthly Workforce Monitoring Report covers the period 1st April 2014 to 30th September 2014.

The table below illustrates the key workforce information over the past six months. The Board headcount has increased by 70 to 1,653. The increase is a result of the continued expansion programme across a number of different areas within the Board. Our employee's average age remains in the 40-49 age bracket although the gap is closing with staff aged 30-39 increasing over the past six months. The summary below highlights that the Boards percentage of staff with a disability and percentage of staff from an ethnic minority have both increased.

Summary of Key Employee				
	Mar 13	Sep 13	Mar 14	Sep 14
Headcount	1448	1492	1583	1653
Male/Female ratio	1 to 3	1 to 3	1 to 3	1 in 3
Percentage of staff with a disability	0.90%	0.93%	0.95%	1.15%
Age bracket containing highest number of staff	40-49	40-49	40-49	40-49
Percentage of staff in an ethnic minority group	5.25%	4.15%	5.5%	6.72%

Equality and Diversity

A workforce monitoring report is presented every six months to the Senior Management Team and the Board. This is in line with the Equality Act (Specific Duties) (Scotland) Regulations 2012 and the PIN Policy "Embracing Equality, Diversity & Human Rights in NHS Scotland." The PIN policy supports monitoring of the protected characteristics of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation as defined in the Equality Act 2010. It also entails an extensive list of areas for monitoring during recruitment, employment and termination of employment.

This report highlights the data that is currently available for equality monitoring with the NHS National Waiting Times Centre (NWTC) and where gaps in intelligence remain. Data has been sourced from 1st April 2014 to 30th September

2014. It was highlighted in the previous six monthly report that the Board requires to undertake an exercise to improve the data held on employees. This exercise will now commence in December 2014 with a view to improving the information held for the next six monthly report.

Recruitment Activity

Work has continued with the performance and planning department to further develop and improve the recruitment processes in the Board. Recruitment activity has increased from 118 posts to 192 posts in the current reporting period. There continues to be a stringent process for the approval of vacancies through the Workforce Review Group, which meets fortnightly. The sheer volume of expansion of our services has led to an increase in headcount of 70, which equates to a 4.2% increase of our total workforce.

Sickness Absence

The overall sickness absence figure for the last six months, reported in SWISS, was 4.17%. This is an increase of 0.62% on the previous six-month reporting period. Managers and Human Resources are working together to address this increase in percentage and are confident that the Board will once more meet its Heat target of 4% by the 31st March 2015.

Stress, Anxiety and Depression continue to be the biggest reason for absence within the organisation. All staff who are absent in this category are seen by Occupational Health if they are absent for two or more weeks.

Occupational Health offer a variety of psychological support mechanisms including, where appropriate, Cognitive Behavioural Therapy (CBT). Further supports can now also be accessed through an SLA with NHS Greater Glasgow & Clyde. This allows the Board to provide enhanced mental health support to our employees who most need it.

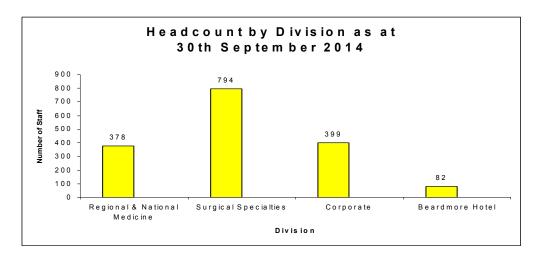
Performance Management

Performance Management systems are now firmly embedded for all staff groups within the Board. Appraisal for Medical Staff is now in its second year and ensures all doctors have a yearly appraisal. 60% of agenda for change staff have undertaken a current KSF PDR by the 30th September 2014. Senior Managers performance is reviewed through the Team Domino system with 100% compliance rates.

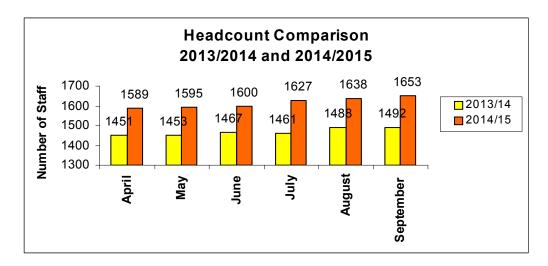
David Miller Head of Human Resources Oct 2014

1. CURRENT WORKFORCE

The number of substantive staff employed by the Board at the 31 March 2014 is shown below by Division. Headcount has increased rapidly in the past 6 months by 70 (WTE) to a total of 1,653. The roles recruited to have been across all job families but the majority within Nursing, Medical and Administration.

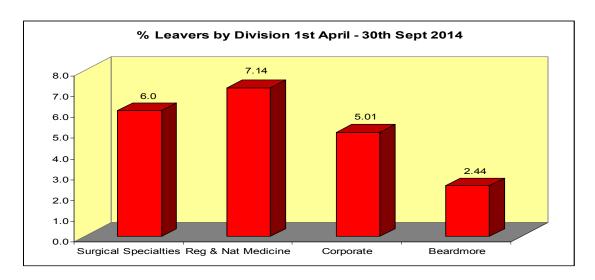


The graph below illustrates a month on month increase in headcount within the Board and a comparison against the previous 12 months to highlight the growth.

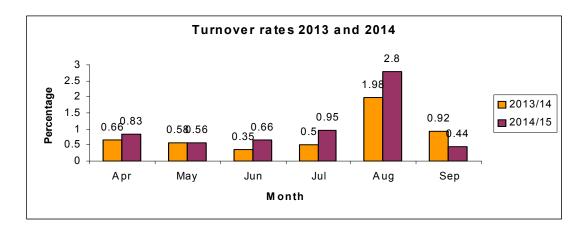


Employee Turnover

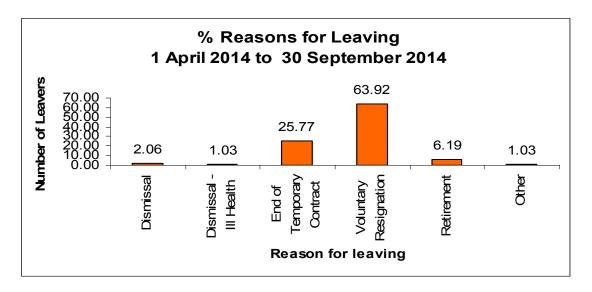
Employee turnover remains low, with a total number of leavers for the six-month reporting period at 97. The total number of staff leaving in this period has increased slightly to 97 from 65 for the previous six-month period. Exit Interviews will be carried out with all leavers, with these being undertaken by an HR Advisor. Further work has commenced to ensure any trends identified are highlighted to the correct level of management within the Board.



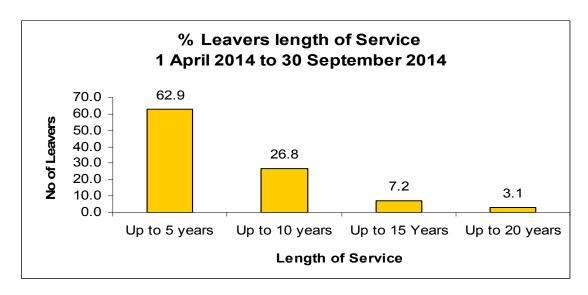
The percentage turnover rates by month are shown in the graph below. The information highlights turnover rates in month below 1% apart from on one occasion over the past 6 months. This peak is due to junior doctors moving to other boards. The turnover percentage for the past 12 months is 8.85%, which is classed as low nationally. The Boards turnover has been consistent year on year.



The reasons for leaving are shown below and include the category other. Other is where an employee has refused to detail where they are going on leaving the Board.



The length of service of the leavers who left over the past six months can be viewed below. You will note that the majority of the leavers had less than five years service and most moved for career reasons.

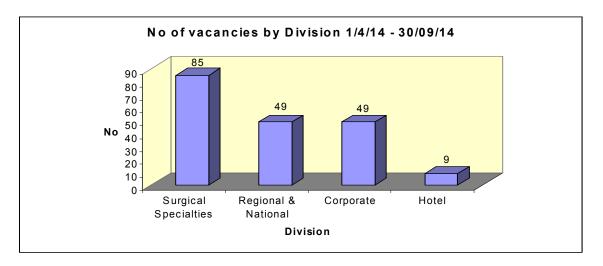


No identifiable trends have been identified from the exit interview data over the past six months. Exit interview feedback forms are shared with the appropriate line manager and the relevant Senior Manager. They are also incorporated into departmental investigations to ensure any trends can be acted upon and any issues that arise dealt with promptly.

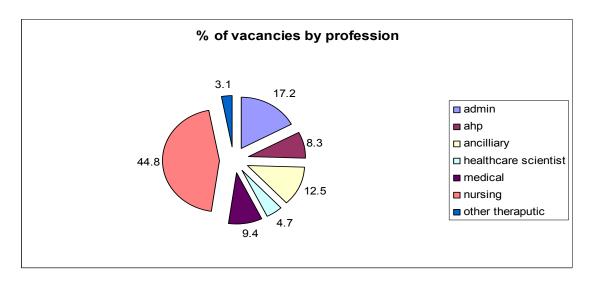
2. RECRUITMENT

Recruitment activity has increased greatly from the last six-month monitoring period. The figures show an increase in vacancies across all divisions, with a total of 192 vacancies against 118 vacancies in the previous reporting period. This volume of recruitment is higher than it has been for several years and does remain challenging to manage across the organisation.

The number of applications received for individual posts remains largely unchanged, with specialist posts attracting lower numbers of candidates and posts within the Support Services areas appealing to larger numbers. We continue to advertise the majority of our posts for between seven and nine days to control the number of applications that are received.



The pie chart below highlights that the majority of our recent appointments have been within patient-facing clinical services, with nursing being the highest.



Over the past six months, the recruitment team has processed 1,908 application forms. Out of these, 283 were shortlisted for interview and 150 new employees appointed to posts.

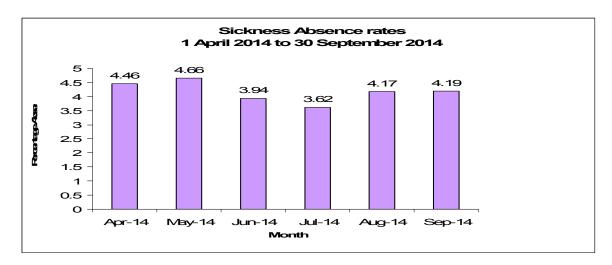
Significant work has taken place to standardise and improve the processes within the Recruitment function with a view to reducing the timescales to recruit. As a result of this work a number of Key Performance Indicators have been agreed which will be reported through the Performance and Planning Committee. These are:

- Percentage of short-listing packs returned to the Recruitment Team within 4 days of notification of availability
- Percentage of interview details confirmed to candidates by HR within 3 working days of receipt of short listing pack
- Percentage of interview notes and candidate information returned to the Recruitment Team within 4 working days of the interview date.
- Percentage of offers of employment made within 8 weeks of the closing date for advertising the vacancy
- Percentage of successful candidates in post within 14 weeks of the closing date for advertising the vacancy

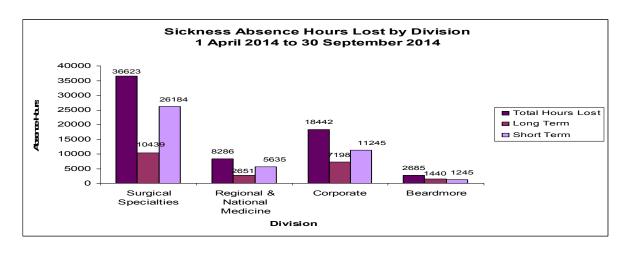
A Managers Schedule has also been developed showing the target dates for each step of the process and clarifying the roles and responsibilities of everyone involved with the recruitment. This schedule is now emailed to the recruiting manager immediately the advert has been placed.

SICKNESS ABSENCE

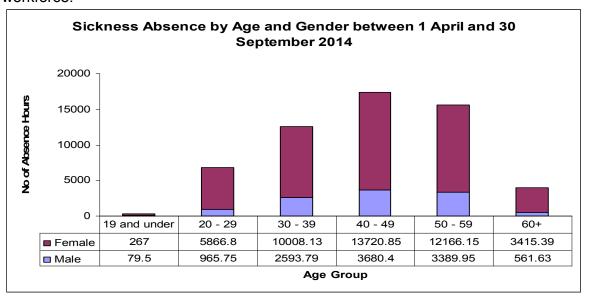
The data from this section is taken from the SWISS national workforce system, which reports sickness absence and workforce planning data on behalf of NHS Scotland. The overall Board figure for sickness absence for the past six months remains slightly above the 4% Heat Standard month on month with the exception of two months. The sickness absence percentage for the Board over the past six months has been reported nationally as 4.16%. This is an increase of 0.62% from the last six months. Managers and Human Resources are working together to address this increase in percentage and are confident that the Board will once more meet the Heat target of 4% by the 31st March 2015.



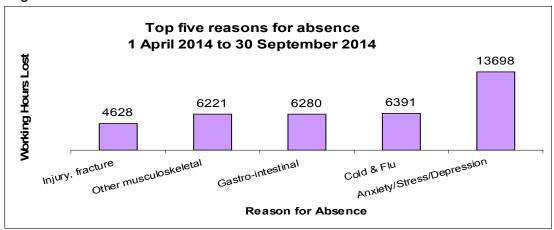
Although long term absence has decreased by 698 hours, short term absence increased by 6493 over the past six months. This meant that total hours lost to sickness absence in the Board has increased by 5793 hours over the past six months. That equates to an estimated cost pressure of £75,309 over the past six months due to increased short term absence in the Board. Measures are in place to monitor and manage short term absence to ensure this rectified for the 31st March 2015.



The graph below has split the sickness absence hours lost over the past six months by age and gender to examine if any underlying trends are present. However the data does illustrate that our highest sickness is by females in the 40-49 age range. This is in line with the average age and gender of our workforce.



The top five reasons for absence remain unchanged. Anxiety remains the most significant and accounts for 23.07% of the total hours lost for the period. This has remained static since the last reporting period. Cold and Flu is the second highest reason for sickness absence in the reporting period, remaining at just above 10%. Both the HR and Occupational Health teams continue to work with individuals and managers to try to resolve any work-related situation at an early stage.

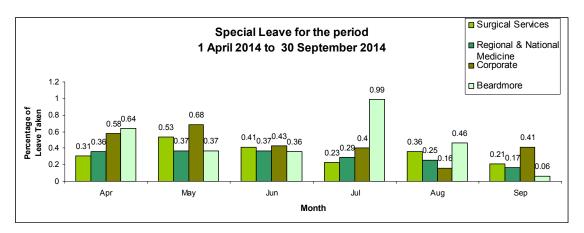


The Board reports sickness absence rates and sickness related to stress / anxiety through its Values Dashboard. This is then further analysed in conjunction with the stress risk assessment and Occupational Health to define what is work-related stress. The current percentage as at 30th September for staff absent with work related stress is 0.27%.

3. WORK LIFE BALANCE

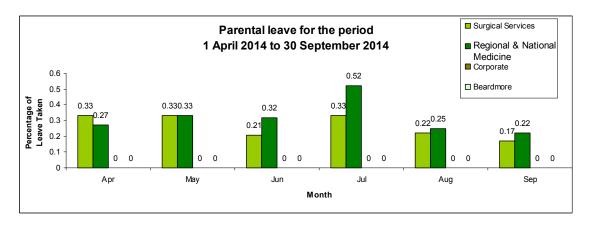
Special Leave

Managers remain fully aware of the reasons for the use of special leave and continue to utilise it appropriately. The number of hours granted for special leave has increased by 218 over the past six months, which still remains low for the Board. It should be noted that hospital appointments, bereavement leave, etc are all recorded within the special leave category.



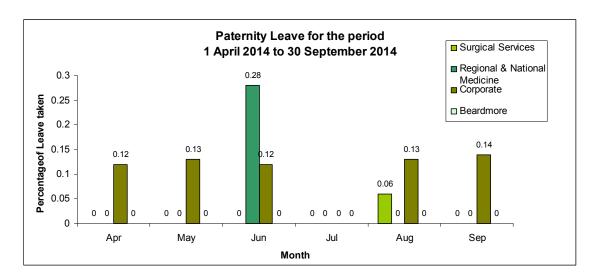
Parental Leave

The uptake of Parental Leave has increased by 500 hours during this period. Parental leave is generally applied for over the summer months when child care difficulties arise. Reminders are regularly given during meetings with managers to ensure that members of staff understand how to access this type of leave.



Paternity Leave

The number of staff taking Paternity Leave has also increased over the past six months by 199 hours. This equates to three members of staff accessing this leave.



4. Equality and Diversity

We are committed to supporting and promoting dignity at work by creating an inclusive working environment. The Board approved a new Embracing Equality, Diversity and Human Rights Policy earlier this year. This policy makes equality, diversity and human rights at the heart of everything the Board does.

The information presented below is based on self-reporting by NWTCB staff. Data is collected via staff engagement forms when people join or change roles within the organisation.

The protected characteristics covered by the Equality Duty are:

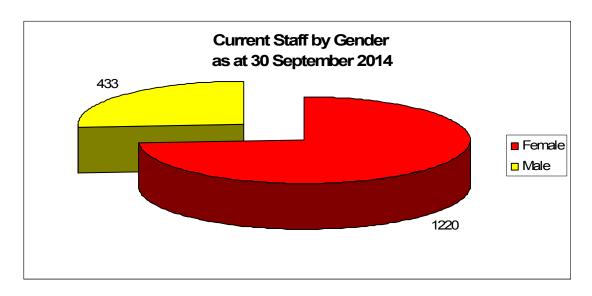
- 1 Gender
- 2 Age
- 3 Race
- 4 Faith and Belief
- 5 Disability
- 6 Sexual Orientation
- 7 Gender Reassignment
- 8 Pregnancy and Maternity
- 9 Marriage and Civil Partnerships

The protected characteristics not reported on in earlier sections are covered within this part of the report. We will continue to capture further data where possible and are using the implementation of our new Workforce system eESS to encourage staff to provide further information.

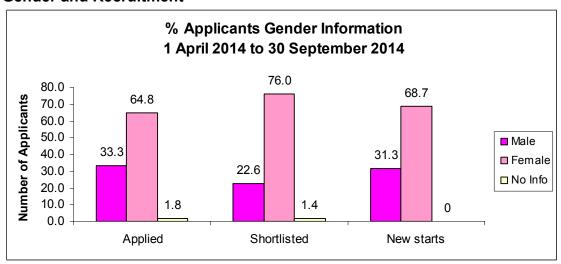
The Board has now trained 30 members of staff to be diversity champions in the Board and also is in its fourth year of holding an annual equalities week every October.

5.1 Gender

74% of the NWTC workforce is female. According to the last UK Census, there are roughly equal numbers of males and females in Scotland. Traditionally, however, most members of the Nursing and Allied Health Professions have been female, resulting in a much higher proportion of female to male staff. This is the case across NHS Scotland. We have increased our number of men employed in the Board by 18 over past six months and 52 females.

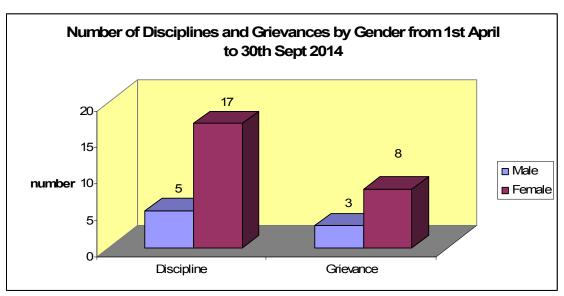


Gender and Recruitment

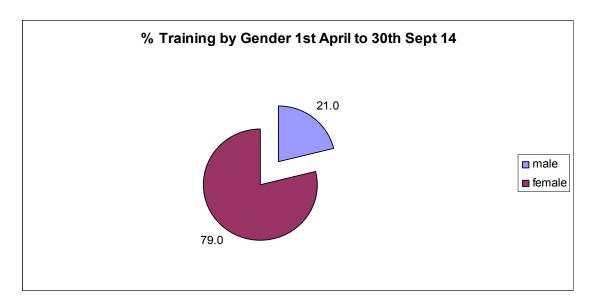


A total of 33% of applicants for our vacancies were male. Of this 33%, 22% were shortlisted, translating into 31% of new starts. This still left 69% of new starters being female, which is in line with our current gender demographic in the Board. This figure is in line with our staffing complement. This is a slight increase from the previous six-monthly report which highlighted that 26% of new starts were male.

All applications are shortlisted without information relating to gender and regular checks are carried out by the recruitment team into the quality of shortlisting to ensure fairness. Values based competency recruitment training continues to be delivered throughout the Board, with training for recruiting managers and supervisors. The graph on the next page highlights the number of disciplines and grievances that have been undertaken in the Board over the past six months by gender.

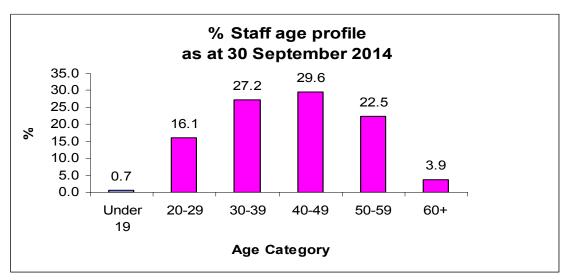


The graph below highlights the number of staff split by gender who have been on training in the past six months.



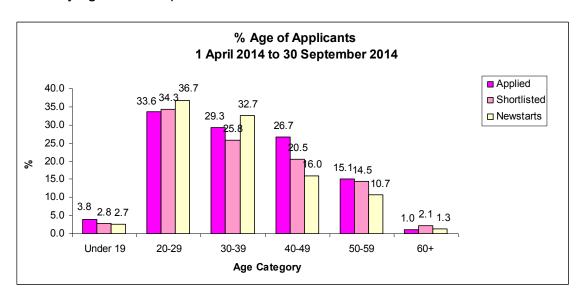
5.2 Age

The chart on the next page illustrates the age profile of the Boards current workforce. There is little change since the last reporting period with a slight increase in all categories with most staff being aged 40-49. The age range of our current staff continues to be monitored to ensure that we are planning for future skill gaps where significant numbers of staff reach possible retirement age.

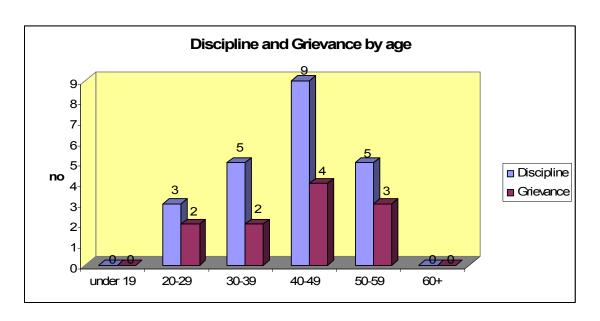


Age and Recruitment

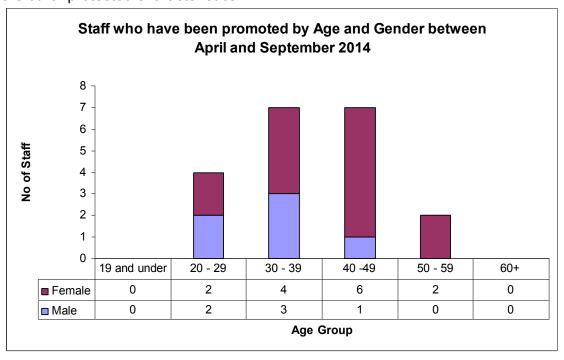
The graph below highlights the numbers of staff who have applied for posts in the Board by age over the past six months.



Working with the Equalities Lead for Age, we have been able to analyse our successful candidates by age in a more detailed manner than in the past. This has highlighted that over the past six months by percentage the most successful age range for appointments was the 60+ category. This has changed greatly from the past six months in which under 19 was the most appointed to. We will continue to monitor this trend over the next six months. The graph on the next page highlights the number of disciplines and grievances by age range.

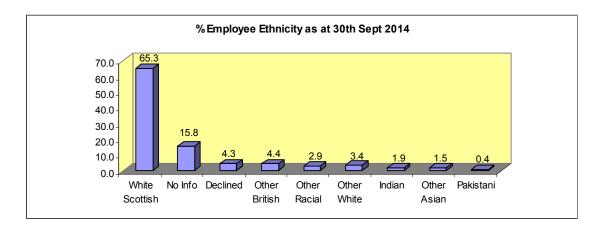


The graph below highlights the staff who have been promoted by age and gender over the past six months. This is the first time this data has been available to the Board and over the next six months this will further evolve to be available to all of the other protected characteristics



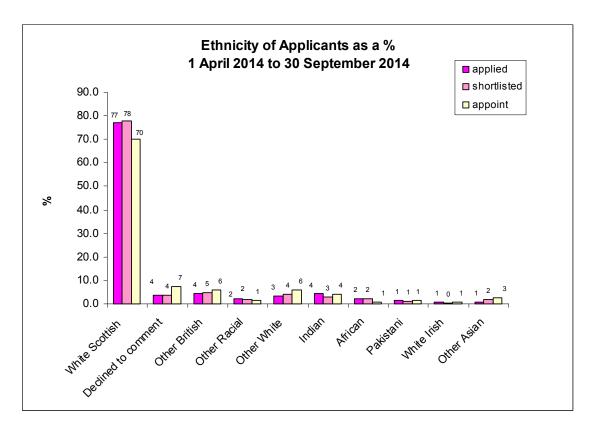
5.3 Race

The current racial split of our substantive staff is shown below; 6.72% of our staff are from minority ethnic groups. This is a slightly higher ratio than the 4% of the population of Scotland shown in the last UK Census. This figure also illustrates a 1.22% increase from 31st March 2014.



Ethnicity and Recruitment

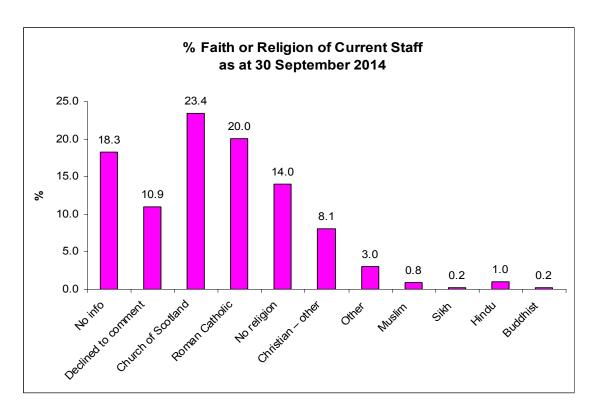
Applications, interviewees and new starts continue to be predominantly White Scottish, which is in line with the last UK Census outcomes. The number of applicants from other racial groups has increased as the Board recruits and advertises overseas for hard to fill posts. It is envisaged that the Board will continue to increase the number of applicants for other racial groups over the next six months as the Board continues to expand. Whilst we are required to advertise on the SHOW website, we are continually exploring other advertising mechanisms, including social media, to ensure that we advertise as widely as possible.



5.4 Religion, Faith and Belief

The Board continues to gather information in respect of the faith or religious beliefs of our staff. The amount of information recorded has increased slightly with information being recording in respect of 81% of our staff. All faiths for which there are fewer than five members of staff (such as Jewish, Sikh, Buddhist) are not reported individually and they are captured within the "other" category.

The Board still has less than 20% of employees where no information is held. Discussions have been held with the Spiritual Care Lead on best ways to address this. An exercise will be undertaken with line managers and staff to explain why the monitoring information is important for the Board.



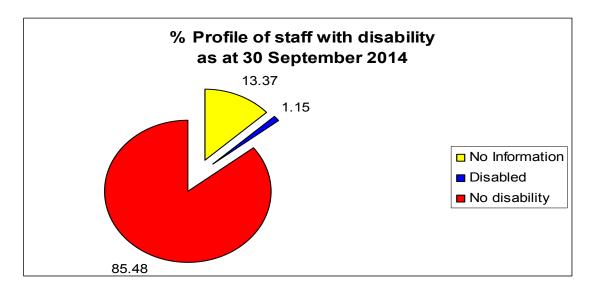
At all stages of the recruitment process, equality and diversity information is held confidentially within the HR Department and is not disclosed to managers. The data held is for monitoring and reporting purposes to ensure, as a Board, we meet our Public Sector Equality Duties and identify areas of concern and development. The table below highlights the applications received, shortlisted and successful applicant by faith or religion.

	Applied	Shortlisted	Newstarts	as a %
Buddhist	2	1	1	50
Christian – other	165	22	14	8.48
Church of Scotland	469	76	27	5.75
Declined to				
comment	175	32	36	20
Hindu	12	4	5	41
Muslim	34	8	4	11.7
No religion	465	53	31	6.67
Other	56	4	6	10.71
Jewish	0	0	0	0
Roman Catholic	520	81	26	5
Sikh	9	2	0	0

The table highlights that the majority of our applicants are Roman Catholic, Church of Scotland or of no religion. On closer examination, the no religion category has delivered the most new appointments, however, appointments were made across almost all faith groups.

5.5 Disability

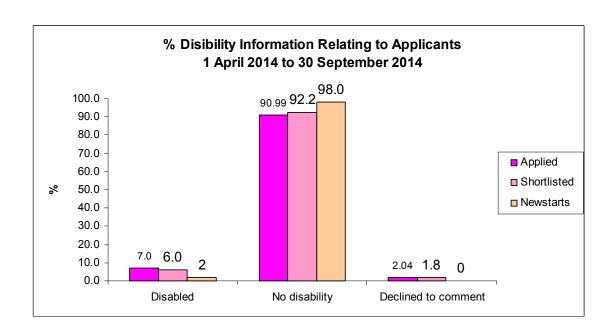
There has been little change to the information held in relation to this protected characteristic, with the number of staff for whom no information was held sitting at 13.4%. Of our current workforce, 1.15% reported that they have a disability. This is a slight increase from the previous reporting period. The Board believe this percentage should be higher; whilst some employees do not class or recognise their underlying health condition as being a disability, it may be defined as such nationally. Work has commenced to raise the awareness of disability definition.



The number of applicants declaring any type of disability continues to increase for the Board. Of the 133 applicants who stated that they had a disability, 17 were shortlisted and three were appointed. This demonstrates progress since the last six monthly report on applicants received, shortlisted and appointed. This requires to be monitored on an ongoing basis.

The Disability Symbol Scheme continues to be implemented fairly and consistently and is regularly monitored as part of the normal recruitment process. This ensures that anyone who indicates that they have a disability and meets the essential criteria for the role will be guaranteed an interview.

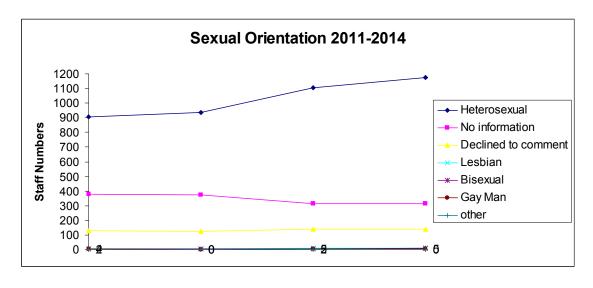
We continue to advertise vacancies on the SHOW website for financial reasons and also because of the number of applicants we currently receive. Vacancies listed on SHOW are automatically listed with Job Centre Plus in an attempt to reach a wider audience.

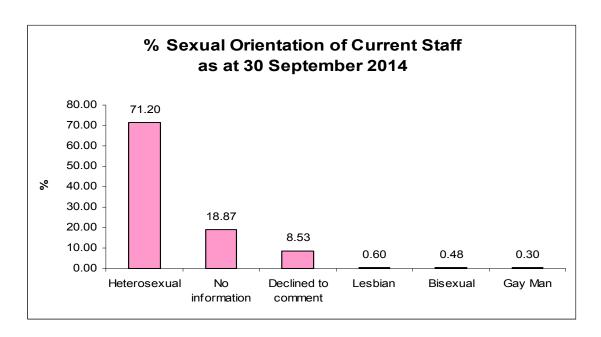


5.6 Sexual Orientation

Working with the Board Lead for Sexual Orientation, we have been able to undertake some trend analysis of the data held on sexual orientation over the past four years. The graph below illustrates that heterosexual staff have increased year on year. Looking back over past 18 months, we can see a reduction in the 'no information held' in Board despite expanding staff numbers. We have also increased the number of staff who have self-declared as lesbian, bi-sexual and gay man although the numbers are low.

The graph below highlights the numbers of staff by sexual orientation.





The table below highlights the appointments by sexual orientation over the past six months. Further work will be undertaken to try and reduce the 'declined to comments' but this is down to personal choice of the applicant whether they wish to declare sexual orientation.

	Applied	Shortlisted	Newstarts	as a %
Heterosexual	1729	262	130	7.52
Declined to				
comment	81	11	19	23.45
No Info	45	5	0	0
Lesbian	15	2	0	0
Bisexual	21	2	1	4.76
Gay man	15	1	0	0
Other	2	0	0	0

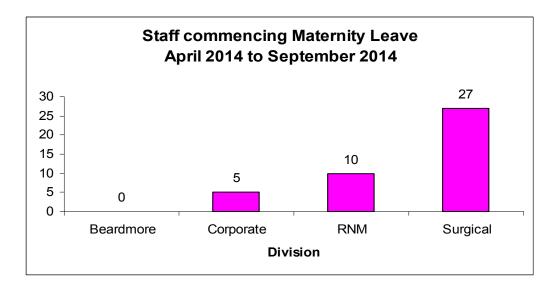
5.7 Gender Reassignment

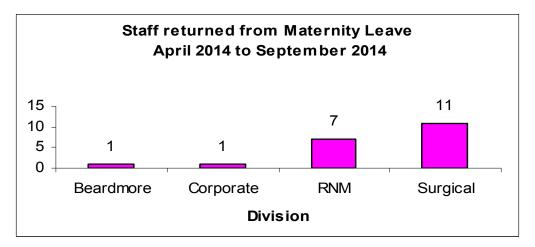
We currently have no staff recorded in this category. The Board continues to update its Board policies and raise awareness for staff and managers about gender re-assignment with patients and with colleagues.

5.8 Pregnancy and Maternity

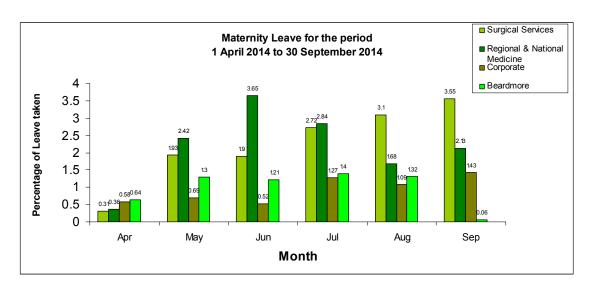
The Board now reports on the number of staff who have either commenced, or returned from, maternity leave during the last six months. The graphs providing this information by division are shown below. The Board continues to provide

support to employees who become pregnant and when they return to work following their maternity leave.





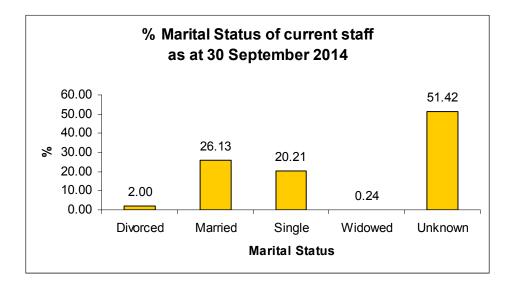
The number of staff taking Maternity Leave has increased by 47,810 hours to 67,975 hours in the past six months. This is a large increase for the Board which has led to staffing pressures in clinical areas. These pressures were all managed locally with local workforce planning tools all being utilised annually.



5.9 Marriage and Civil Partnership

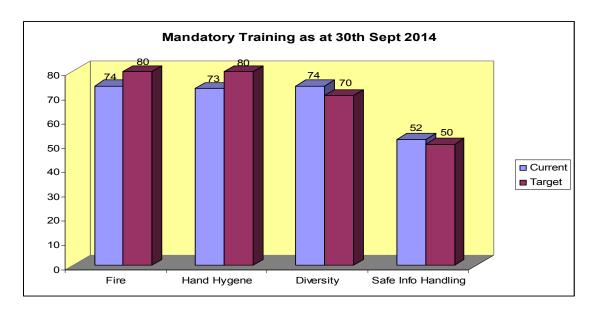
According to the last UK Census, 45% of adults are noted as married (or remarried), whilst 35% of adults have never married or registered a same sex civil partnership.

Within our current staff, only 26.2% are listed as married which is significantly lower than the national profile. It should also be noted that we do not currently collect information on same sex civil partnerships. The Board has a high percentage of unknown information in relation to the longer serving existing employees and this will be addressed in the data collection exercise which will commence in December 2014.



5. DEVELOPMENT

The percentage of staff that have completed the mandatory training across the organisation by the 30th September 2014 can be viewed below. The Board has met two of the targets and is on track to meet the remaining two targets by the end of March 2015.



Personal Development Reviews

The percentage of staff with a current PDR by Directorate is highlighted below as at 30th September 2014. The overall Board percentage was 60%. The Board has six months to meet the Heat Standard of 80% by 31st March 2015 and a detailed plan is in place for achievement of this standard.

