



# Workforce Monitoring Report

1 October 2013 – 31 March 2014

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## **EXECUTIVE SUMMARY**

### **Introduction**

This six monthly Workforce Monitoring Report covers the period 1 October 2013 to 31 March 2014.

The table below illustrates the key workforce information over the past six months. The Board headcount has increased by 91 whole time equivalent (WTE) to 1,583 substantive staff. The increase is a result of an ongoing expansion programme across a number of different areas within the Board, including Orthopaedics and Ophthalmology. Our employee's average age remains in the 40-49 age bracket. Whilst we have no immediate workforce planning issues, we are focusing on succession planning and more effective vacancy management.

| <b>Summary of Key Employee Information</b>             |               |              |                 |
|--|---------------|--------------|-----------------|
|  | <b>Mar-13</b> | <b>Sep13</b> | <b>March 14</b> |
| <b>Headcount</b>                                       | 1448          | 1492         | 1583            |
| <b>Male/Female ratio</b>                               | 1 to 3        | 1 to 3       | 1 to 3          |
| <b>Percentage of staff with a disability</b>           | 0.90%         | 0.93%        | 0.95%           |
| <b>Age bracket containing highest number of staff</b>  | 40-49         | 40-49        | 40-49           |
| <b>Percentage of staff in an ethnic minority group</b> | 5.25%         | 4.15%        | 5.5%            |

### **Equality and Diversity**

All Boards have responsibilities to provide and analyse management information to comply with the Equalities Act – both general and specific duties. We now report on the following protected characteristics on a six-monthly basis. The Board has published its equality outcomes and monitors these on a regular basis.

- Recruitment and promotion
- Numbers of part time and full time staff
- Training and development
- Return to work of women on maternity leave
- Appraisals
- Grievances
- Disciplinary action
- Dismissals and other reasons for leaving
- Training
- Pregnancy and Maternity
- Promotions

- Marriage and Civil Partnerships
- Gender Re-assignment

It has been highlighted throughout this monitoring period that the Board requires to undertake an exercise to improve the data held on employees within the Board. An action plan with timeframes to address data shortages will be presented to the Equalities Group in May 2014. The action plan will then be taking forward in partnership with the Equalities Group and monthly update reports provided.

### **Recruitment Activity**

Work continues to review recruitment processes in the Board with a view to linking them to the new workforce system, eESS, when it is ready for implementation later 2014. Recruitment activity has decreased slightly in the current period to 118 posts. 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 91 WTE posts, which equates to a 5.7% increase of our total workforce.

### **Sickness Absence**

The overall sickness absence figure for the last six months, reported in SWISS, was 3.55%. This is a decrease of 0.59% on the previous six-month reporting period. The sickness absence percentage for the Board for 2013/14 has been reported nationally as 3.36%. This is a reduction of 0.35% from the 2012/13 and an estimate saving to the Board of £173,000.

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 support mechanisms including, where appropriate, Cognitive Behavioural Therapy (CBT), regardless of whether the issue relates to work or not. They also signpost alternative external agencies where appropriate.

The Human Resources (HR) team continue to use the Individual Stress Risk Assessment tool to help support early solutions to work related issues. This is being used in conjunction with interventions suggested by Occupational Health.

### **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. Knowledge and Skills Framework (KSF) Personal Development Reviews (PDRs) have been absorbed into business as usual across the Board and significant work has taken place to support managers to continue to conduct these. The Board has

ended with a figure of 54% of staff having a current PDR at the 31 March 2014. Senior Managers performance is reviewed through the Team Domino system with 100% compliance rates.

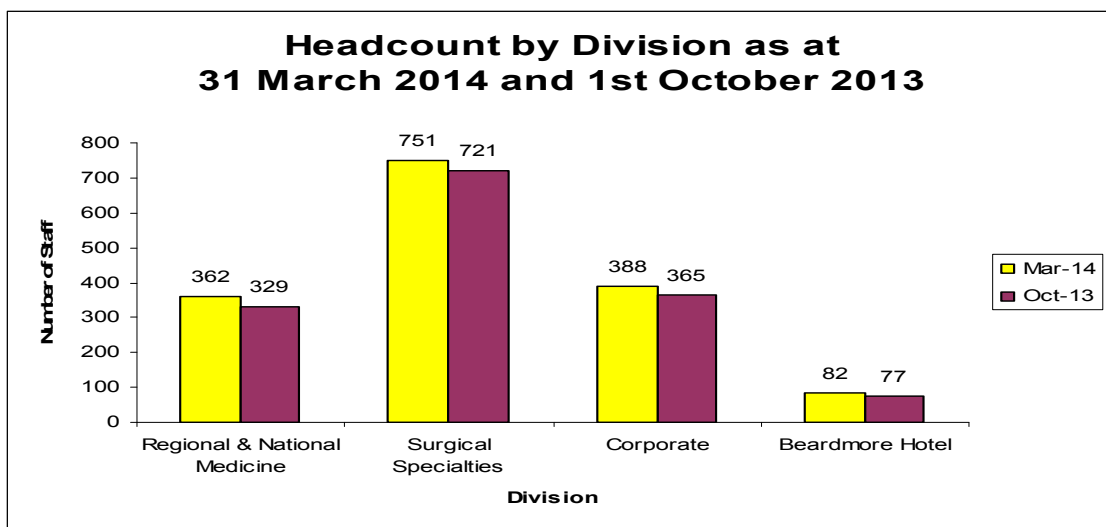
Further detailed information can be viewed throughout this report.

David Miller  
Head of Human Resources  
April 2014

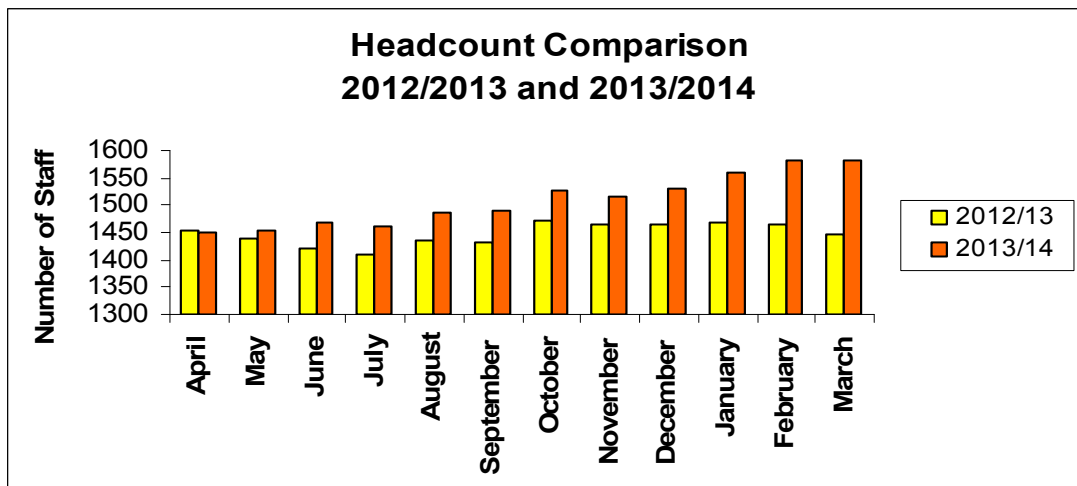
# 1. Current Workforce

## 1.1 Board Headcount and Whole Time Equivalent

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 91 (WTE) to a total of 1,583. The roles recruited to have been across all job families but the majority within Nursing, Medical and Administration. Further information can be viewed on page nine about the new employees recruited over the past six months.

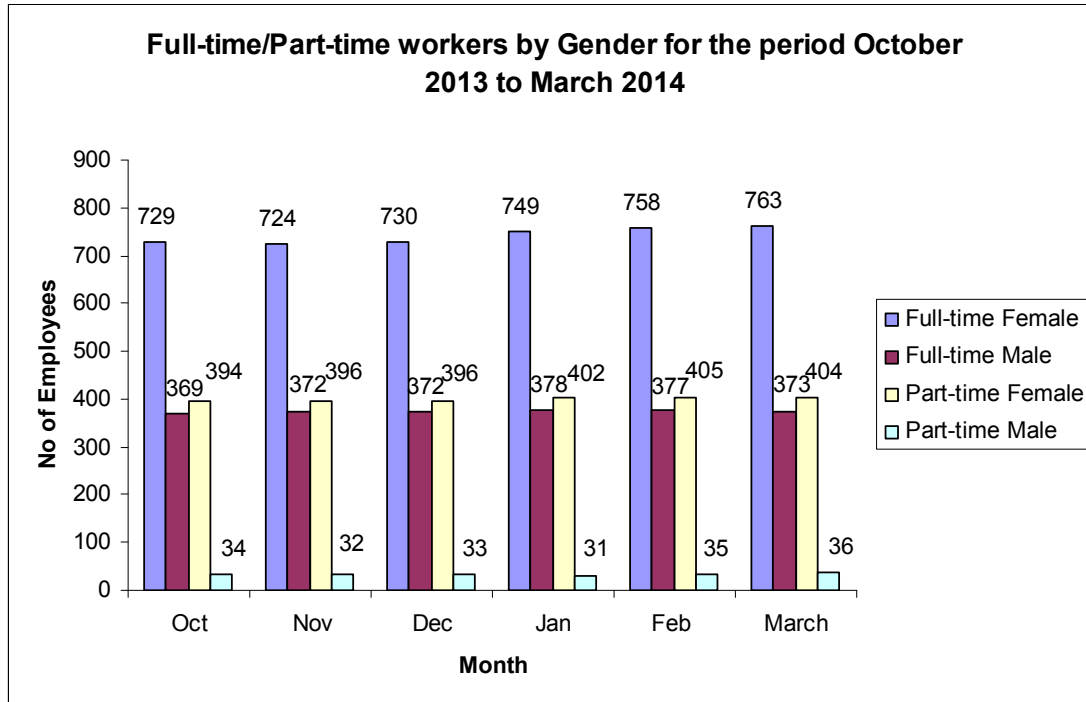


This increase reflects the continued Orthopaedic and Ophthalmology expansion programmes that continue to take place across the Board as well as expansion in the Beardmore Hotel, Corporate Division and Regional and National Services Division. Headcount will continue to increase over the next six months because of continued expansion. The graph below illustrates a month on month increase in headcount within the Board and that trend below will be replicated in the next six-monthly report.



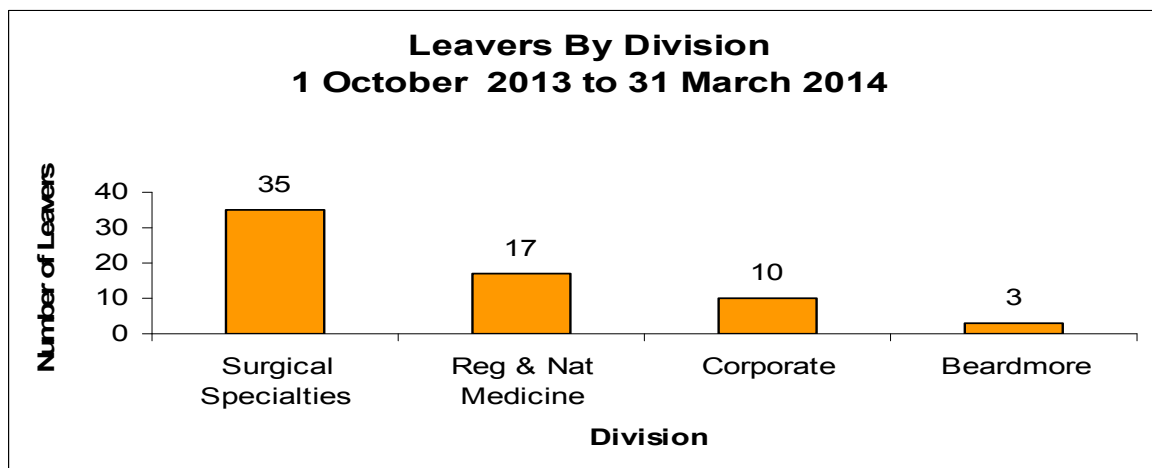
## 1.2 Full Time/Part Time

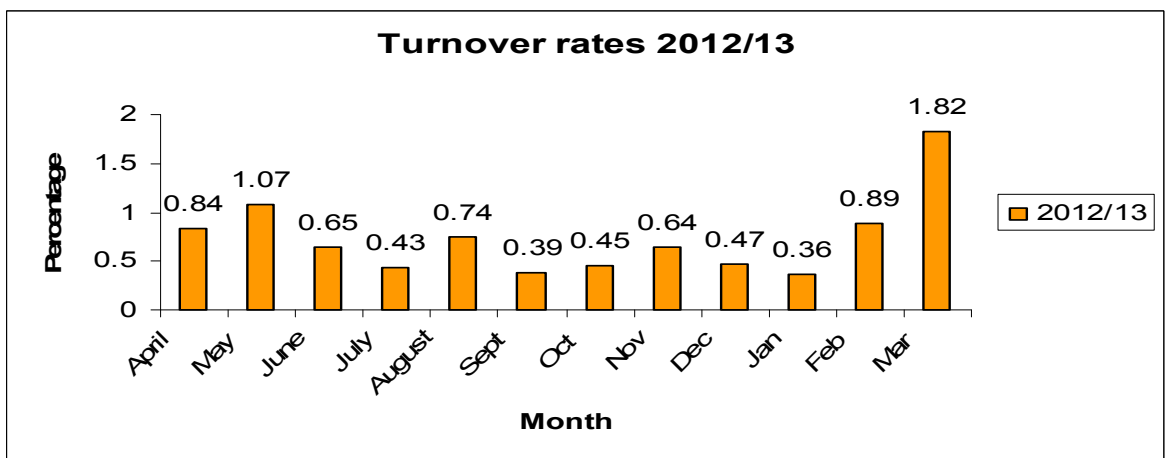
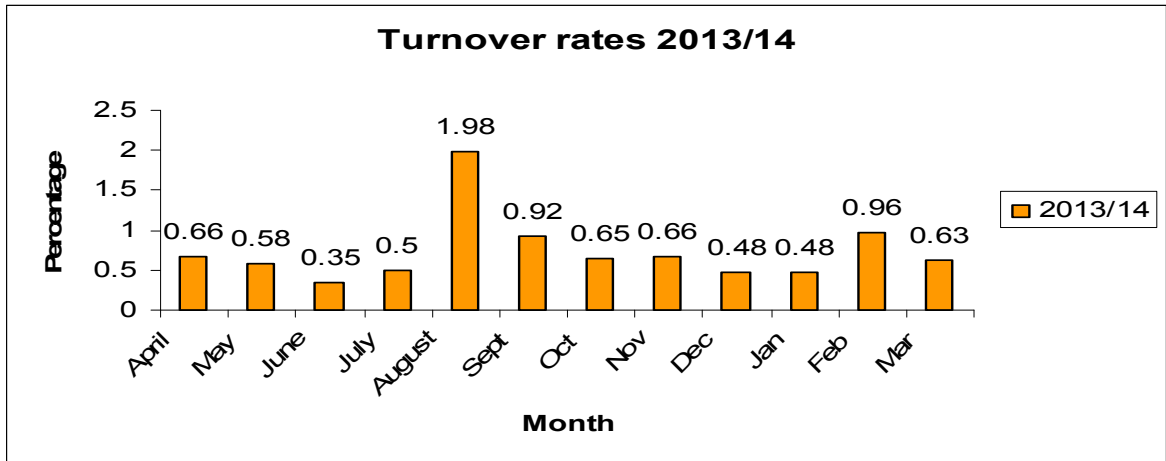
The number of part-time workers in the Board can be viewed below; 27% of the Board workforce is part-time with females making up 92% of that figure. The Board now employs more full-time females than it did six months ago. Full-time male and part-time male / female roles have remained relatively static over the reporting period.



## 1.3 Turnover

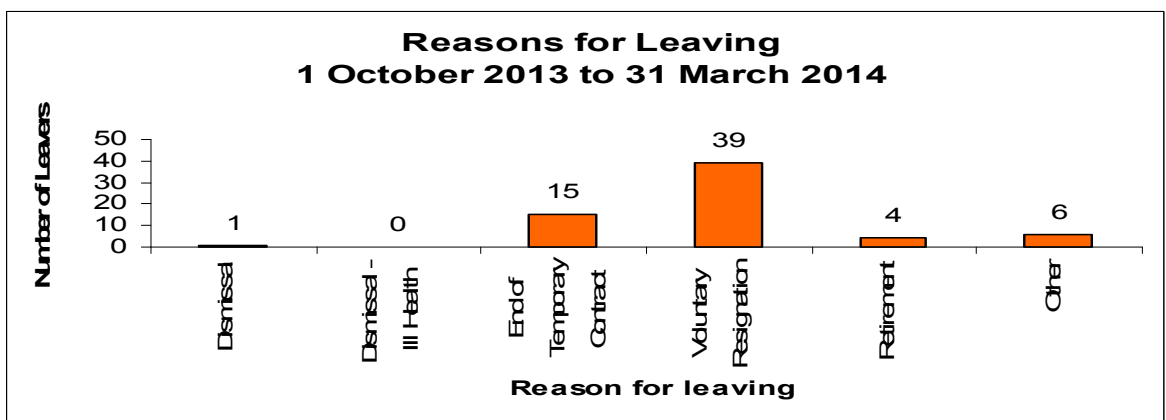
Employee turnover remains low, with a total number of leavers for the six-month reporting period at 65. The total number of staff leaving in this period has decreased slightly to 77 from 65 for the previous six-month period. Exit Interviews are now carried out with all leavers, with these being undertaken 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 two graphs above. The information highlights turnover rates in month below 1% apart from on one occasion over the past 12 months. The annual turnover percentage for the past 12 months is 8.85%, which is classed as low nationally.

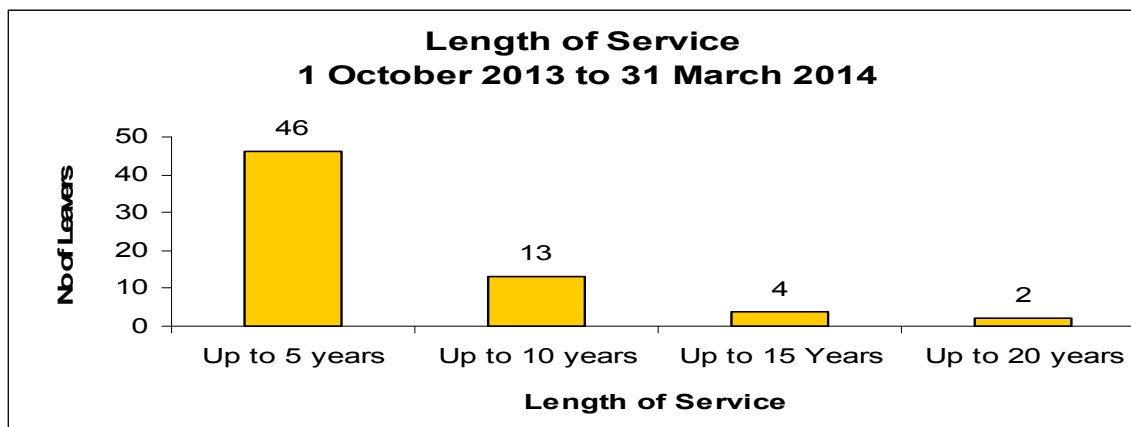
The reasons for leaving are shown below and include the category other. Other is where an employee has refused to detail where they are going on leaving the Board.



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. It should be noted that, as part of the organisation's expansion plan, it was not possible to offer



permanent contracts initially as funding was not approved at the outset of the expansion. This resulted in a significantly higher number of temporary contracts. Subsequently a number of those staff with temporary contracts did receive permanent contracts.



### **Retention**

| Quarter                     | Number of Leavers with more than one year's service |
|-----------------------------|---|
| October 2011 – March 2012   | 41  |
| April 2012 - September 2012 | 57  |
| October 2012 – March 2013   | 51  |
| April 2013 - September 2013 | 48  |
| October 2013 – March 2014   | 22  |

No identifiable trend has been identified from the exit interview data over the past six months. However exit interviews have now been incorporated into any departmental investigations to ensure any trends can be acted upon.

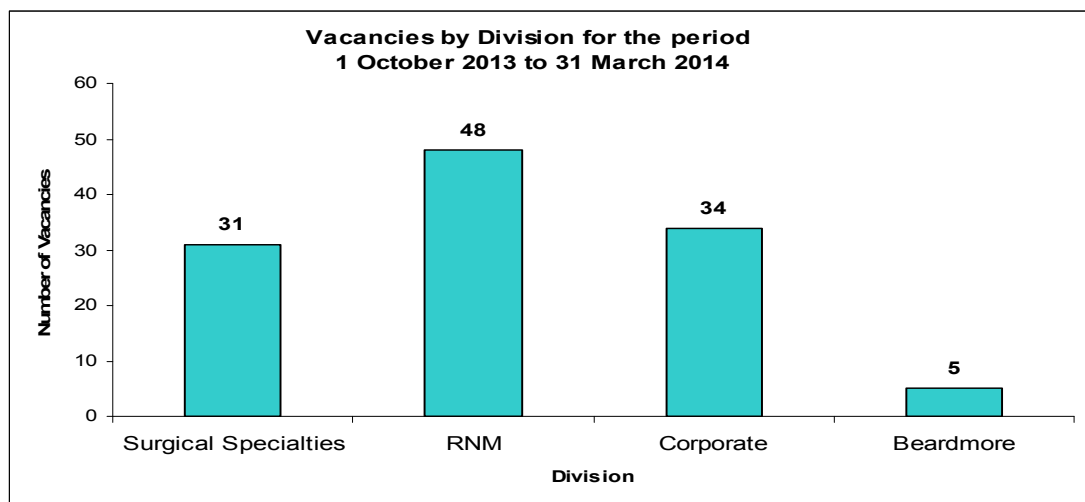
The previous section on employee turnover described the main reasons and staff groups that left the Board in the past six months. Fixed term contracts coming to an end and rotational doctor contracts make up about one third of our turnover. The UK Labour turnover rate according to the CIPD is 18%. As a Board we are half the percentage of the UK turnover rate.

## 2.0 Recruitment

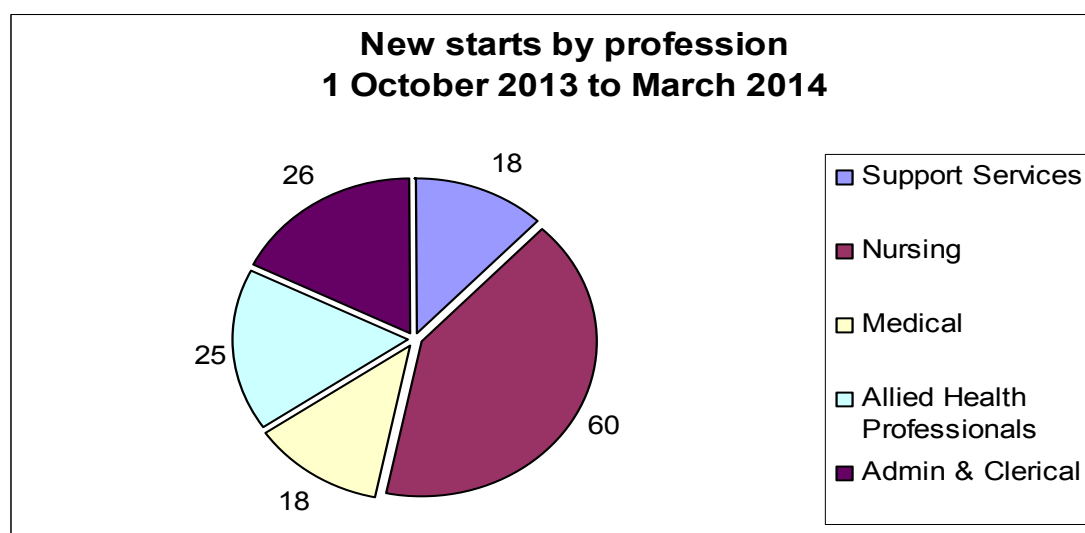
### Current Recruitment Activity

Recruitment activity has reduced slightly from the last six-month monitoring period, when the majority of the Board expansion took place. The figures show a slight decrease in vacancies across all divisions, with a total of 118 vacancies against 145 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.



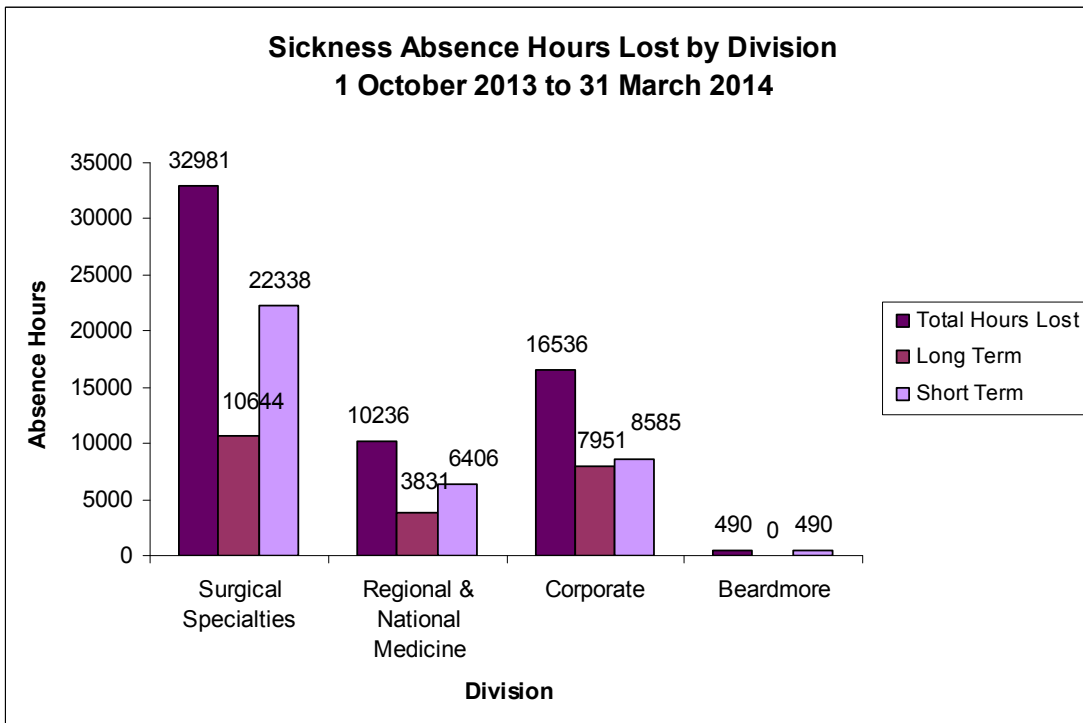
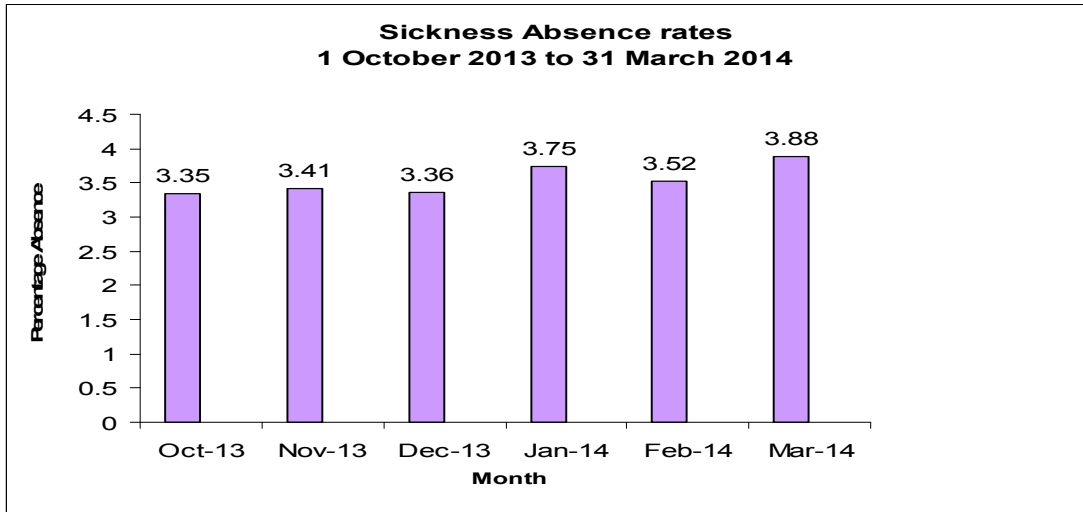
Over the past six months, the recruitment team has processed 1,579 application forms. Out of these, 413 were shortlisted for interview and 140 new employees appointed to posts. The average time to fill a post from advert to start date is still 15 weeks. The recruitment team are working with Performance and Planning and managers to reduce this 'time to fill' average from 15 weeks to 12 weeks by the end of this year.

Recruitment will support a further expansion over the next six months which will result in 55 new posts being recruited to. As a result of the ongoing high levels of recruitment, a project plan to manage the recruitment process has been agreed with senior managers and a tracking process has been implemented which enables senior managers to review the progress of specific vacancies. This will provide them with early notification any areas of concern and enable the HR team to work with them to resolve these.

The recruitment team was audited by the Performance and Planning department in November and December 2013. This audit provided feedback to the function on manager's opinions of the service and views from successful and unsuccessful candidates who applied for posts over the past six months. This feedback has been valuable to help adapt and make any changes that users of the service feel would improve what is currently offered. Recruitment aim to deliver a person centred exemplar service to the Board and will continually improve to deliver this objective.

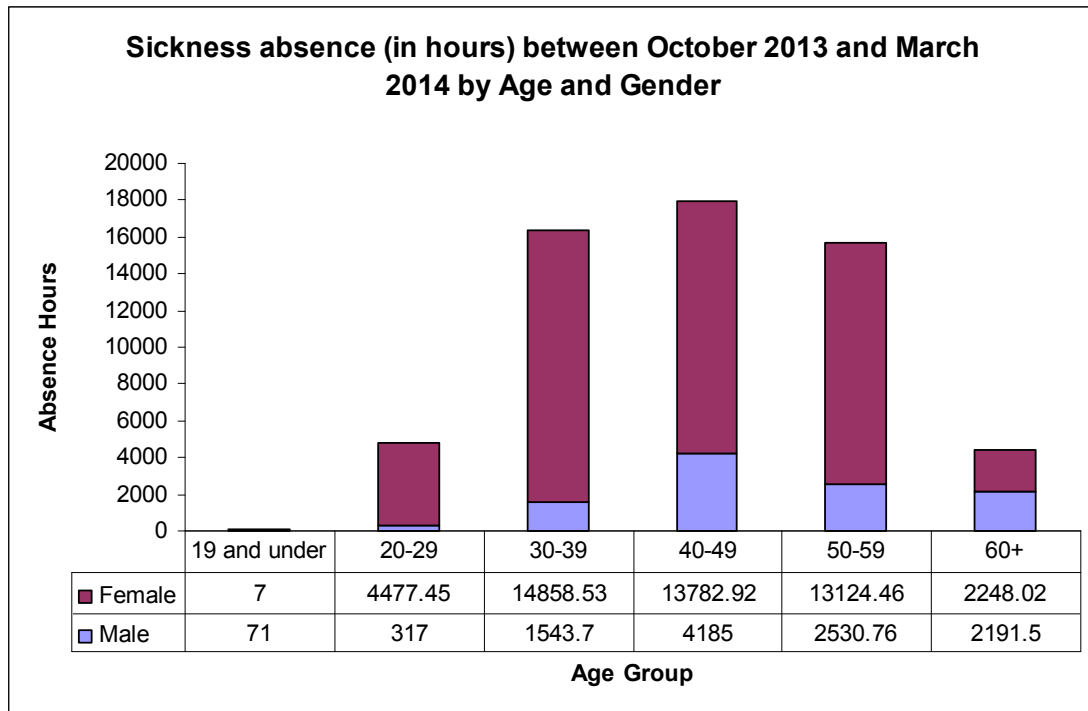
### 3. Sickness Absence

The data from this section is taken from the SWISS national workforce system, which reports sickness absence and workforce planning data on behalf of NHSScotland. The overall Board figure for sickness absence for the year remains below the 4% Heat Standard month on month. The sickness absence percentage for the Board for 2013/14 has been reported nationally as 3.36%. This is a reduction of 0.35% from the 2012/13 and an estimate saving to the Board of £173,000.

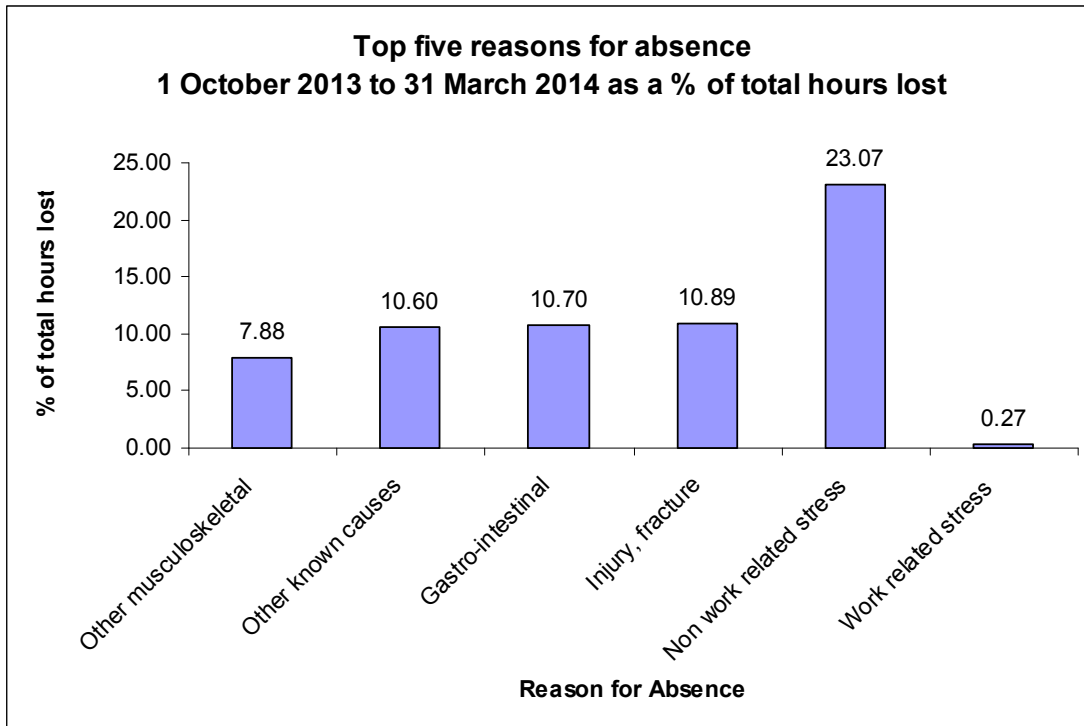


Although long term absence increased by 4,029 hours, short term absence decreased by 7478 over the past six months. This meant that total hours lost to sickness absence in the Board has dropped by 3449 hours. That equates to an estimated cost saving of £73,000 over the past six months.

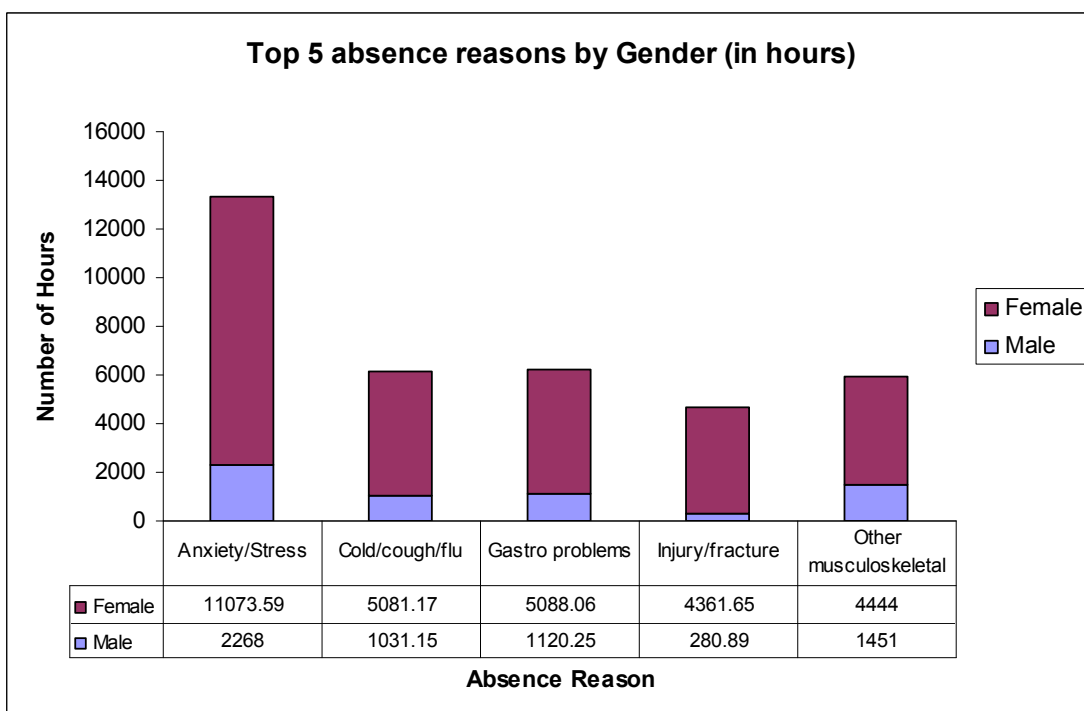
The graph below has split the sickness absence hours lost over the past six months by age and gender to examine if any underlying trends are present. However the data does illustrate that our highest sickness is by females in the 40-49 age range. This is in line with the average age and gender of our 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 decreased by 2% since the last reporting period. Injury and Fracture 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.

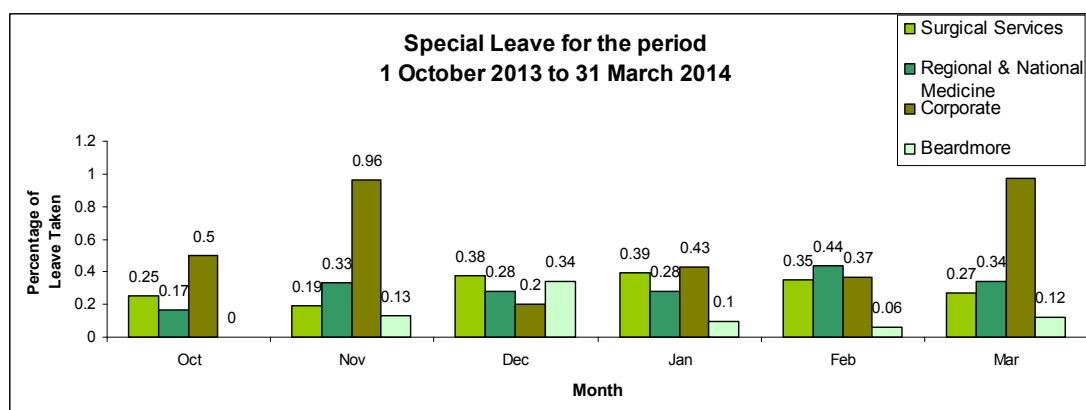


Sickness reasons by gender can be viewed in the graph above. This highlights that the gender breakdown of absence is in line with the Board's gender staffing complement. The Board reports sickness absence rates and sickness related to stress / anxiety through its Values Dashboard. This is then further analysed in conjunction with the stress risk assessment and Occupational Health to define what is work-related stress.

## 4. Work Life Balance

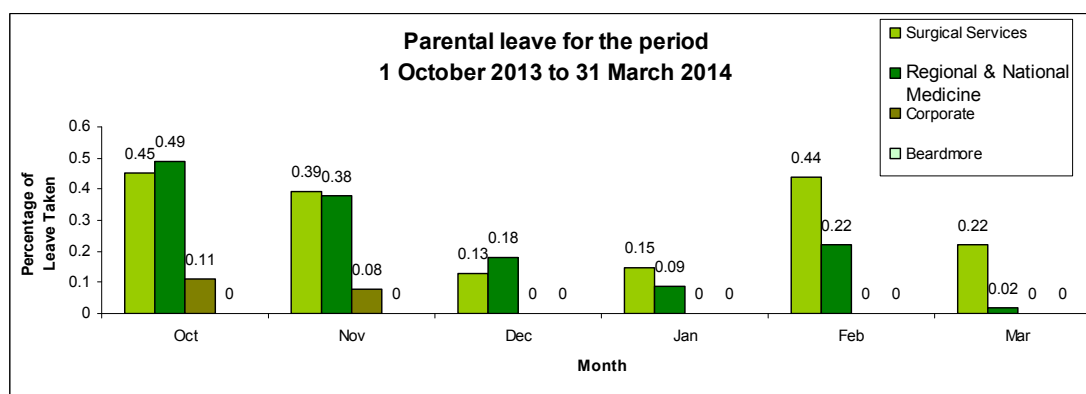
### 4.1 Special Leave

Managers remain fully aware of the reasons for the use of special leave and continue to award it appropriately. The number of hours granted for special leave has increased by 200 over the past six months, which would be expected over the winter months. It should be noted that hospital appointments, bereavement leave, etc are all recorded within the special leave category.



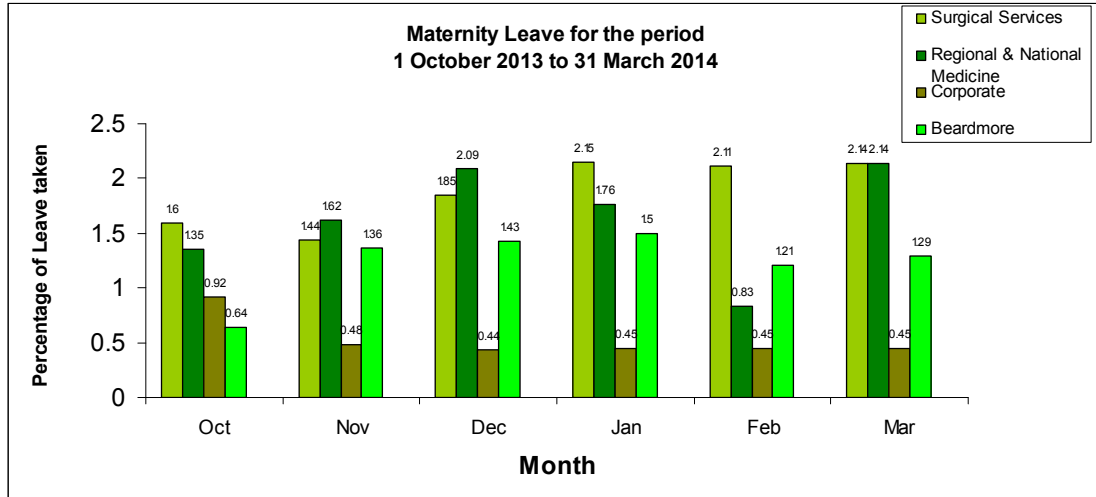
### 4.2 Parental Leave

The uptake of Parental Leave has reduced by around 0.3% 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.



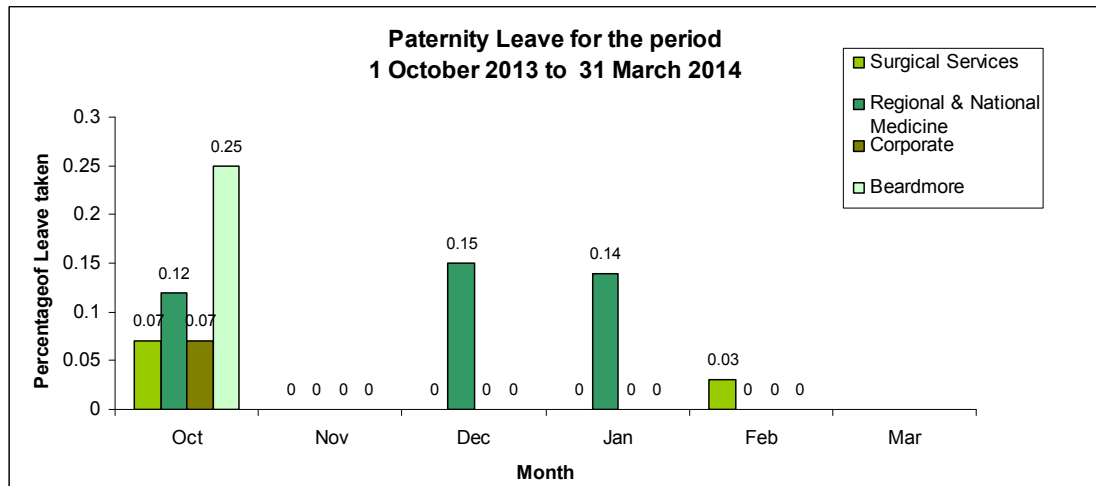
### 4.3 Maternity Leave

The number of staff taking Maternity Leave has increased by 4,000 hours to 20,165 in the past six months. This increase breaks the reduction trend for maternity leave illustrated in the past two six-monthly monitoring reports. A further two graphs on maternity leave can be viewed on page 24.



#### 4.4 Paternity Leave

The number of staff taking Paternity Leave has increased by 170 hours to 384 hours in the past six months. This increase also breaks the reduction trend for paternity leave illustrated in the past two six-monthly monitoring reports.





## 5. 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 in May 2014. 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:

- Age
- Disability
- Gender Reassignment
- Marriage and Civil Partnership
- Pregnancy and Maternity
- Race
- Religion or belief
- Sex
- Sexual Orientation

The protected characteristics not reported on in earlier sections are covered within this part of the report.

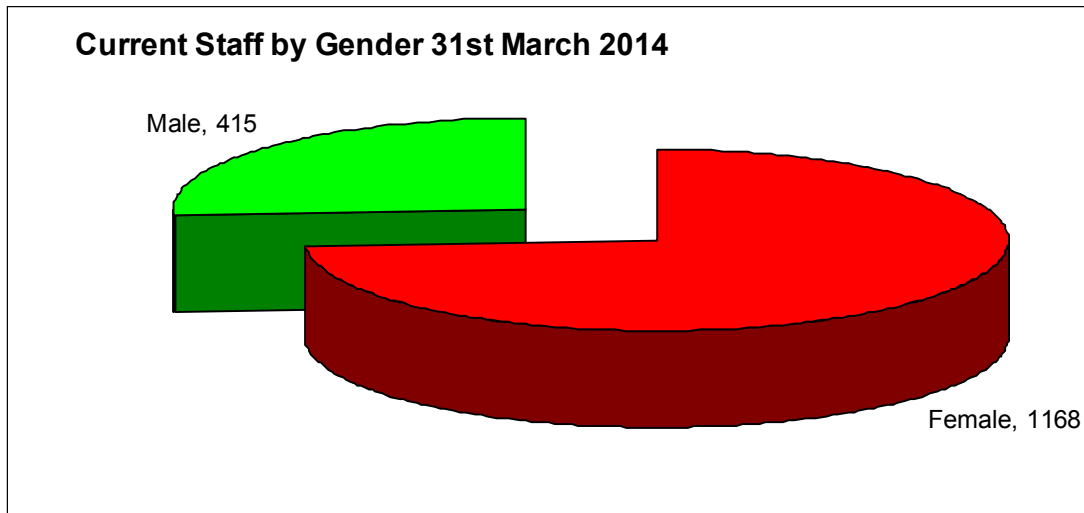
We will continue to capture further data where possible and are using the implementation of our new Workforce system eESS to encourage staff to provide further information.

### **Protected Characteristics Updates**

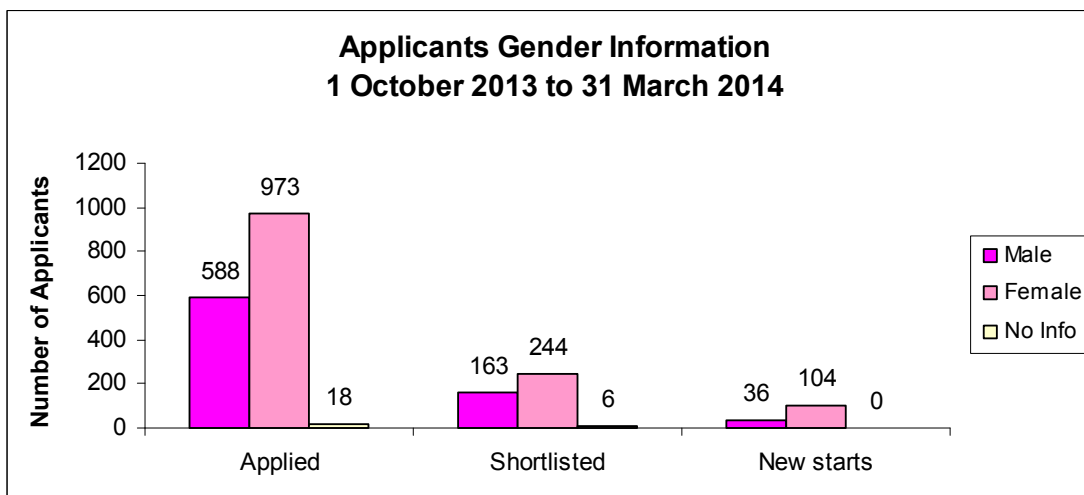
#### **5.1 Gender**

The gender split of our workforce remains approximately three quarters female as shown below. This is proportionally representative of NHSScotland as a whole (benchmarked against ISD figures).

According to the 2011 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 NHSScotland.



### Gender and Recruitment



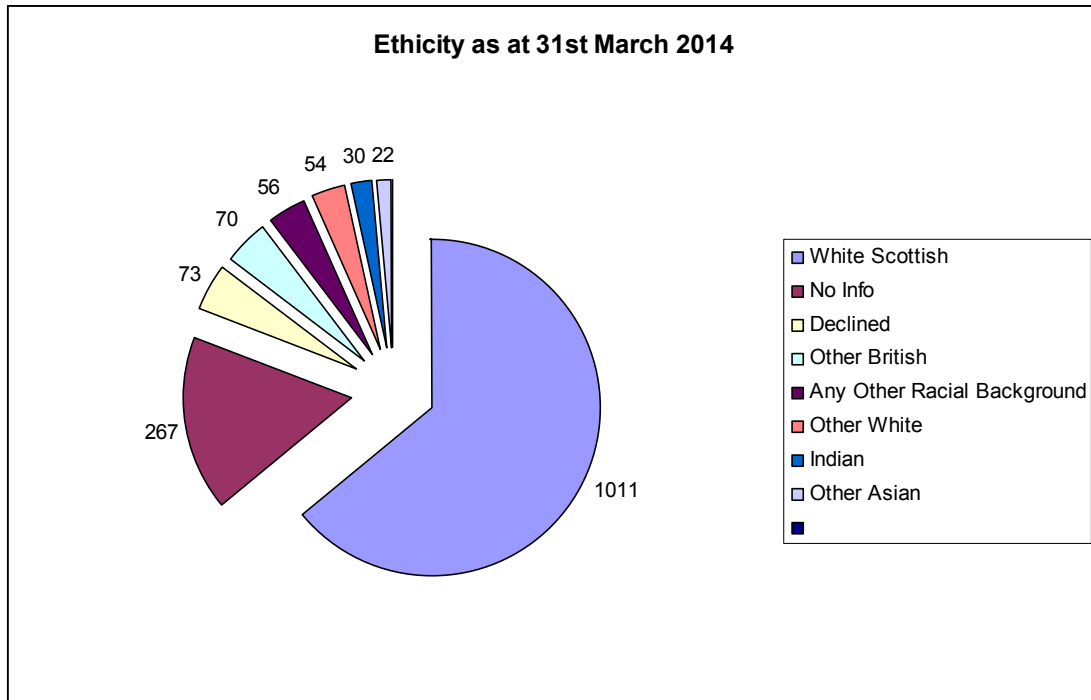
A total of 37% of applicants for our vacancies were male. Of this 37%, 39% were shortlisted, translating into 25.7% of new starts. This still left 74.3% of new starters being female, which is in line with our current gender demographic in the Board. This figure is in line with our staffing complement. The previous six-monthly report 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. Competency based recruitment continues to be rolled out across the Board, with training for recruiting managers and supervisors. The HR team are supporting managers through this process and are able to offer individual guidance where required.

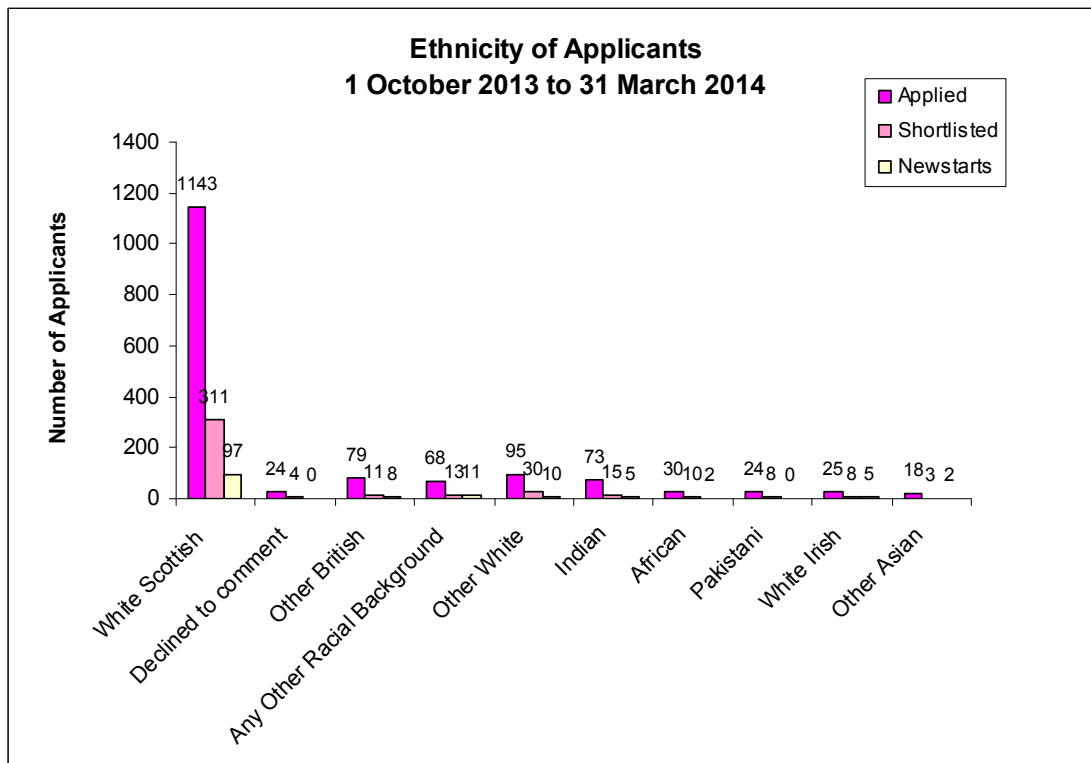
### **5.2 Race**

The current racial split of our substantive staff is shown below; 5.5% 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 2011 Census. This figure also

illustrates a 0.25% increase from March 2013. It should be noted that the Caribbean and Chinese racial groups all have less than five staff members so have not been included in these graph. We currently have no staff falling into the categories African, African Other, Bangladeshi and Other Black.



**Race and Recruitment**

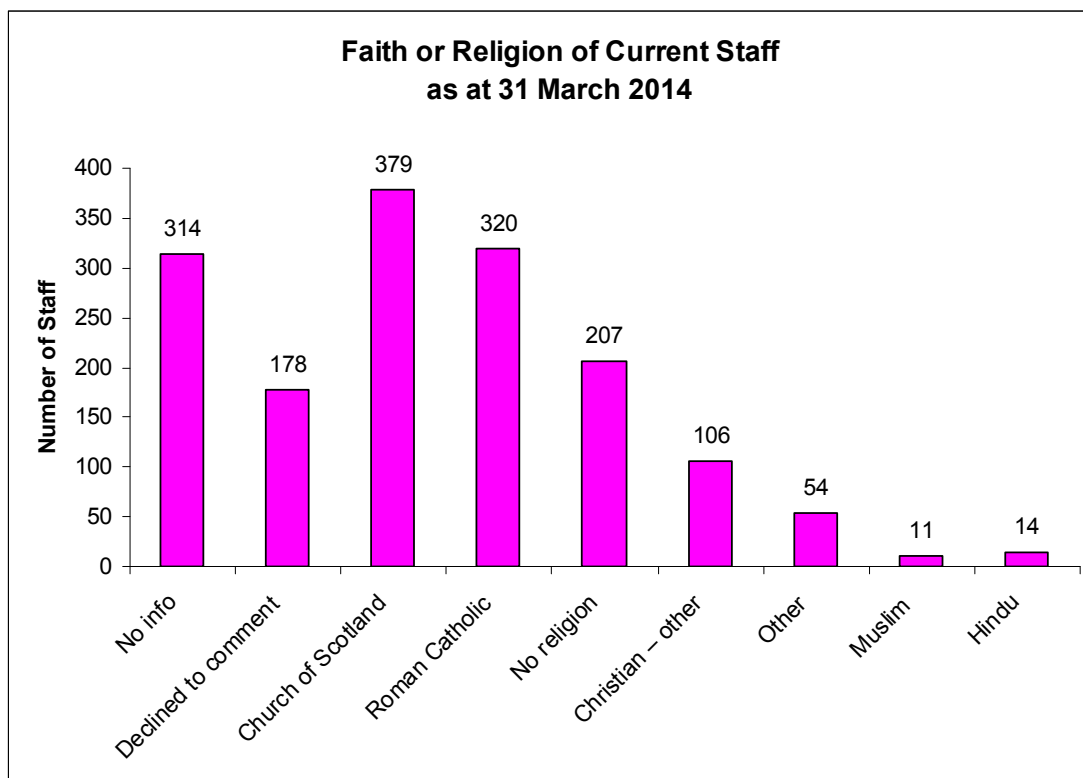


Applications, interviewees and new starts continue to be predominantly White Scottish, which is in line with the 2011 Census outcomes. The number of applicants from other racial groups has increased as the Board recruits and advertises overseas for hard to fill posts. It is envisaged that the Board will continue to increase the number of applicants for other racial groups over the next six months as the Board continues to expand. The Board will continue to monitor this trend and report any further changes later this year.

### 5.3 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 76% 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 just over 20% of employees where no information is held. Discussions have been held with the Hospital Chaplain 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.



### Faith and Belief and Recruitment

At all stages of the recruitment process, the 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.

|                     | <b>Applied</b> | <b>Shortlisted</b> | <b>New starts</b> | <b>New starts as a %</b> |
|---------------------|----------------|--------------------|-------------------|--------------------------|
| Buddhist            | 6              | 2                  | 1                 | 16%                      |
| Christian – other   | 154            | 43                 | 16                | 10%                      |
| Church of Scotland  | 346            | 99                 | 34                | 9.8%                     |
| Declined to comment | 182            | 42                 | 18                | 11.8%                    |
| Hindu               | 32             | 7                  |                   | 0                        |
| Muslim              | 36             | 9                  | 3                 | 8.3%                     |
| No religion         | 379            | 93                 | 38                | 10%                      |
| Other               | 55             | 16                 | 5                 | 9%                       |
| Jewish              | 0              | 0                  |                   | 0                        |
| Roman Catholic      | 383            | 102                | 25                | 6.5%                     |
| Sikh                | 6              | 0                  | 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.

According to the 2011 Census, 32% of people living in Scotland stated that they belonged to the Church of Scotland and 16% that they were Roman Catholic. A total of 22% of applicants were from the Church of Scotland and 24% were Roman Catholic. This highlights an increase by 2% of applications received by Roman Catholics and a slight reduction of 2% of applications received by Church of Scotland over the past six months.

#### **5.4 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 14.3%. Of our current workforce, 0.95% 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.

### Profile of Employees with a Disability at 31st March 2014



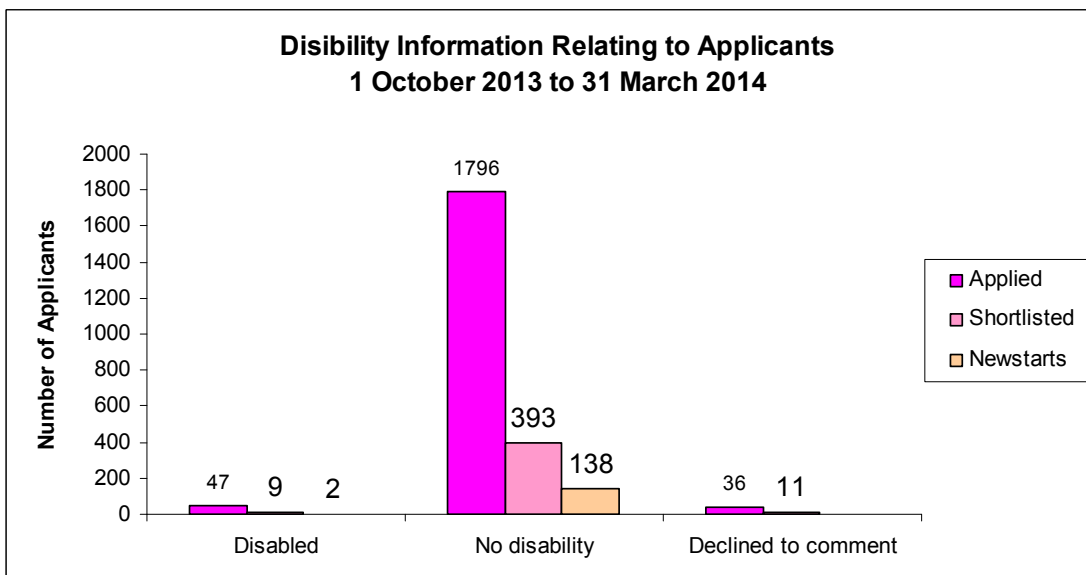
### Disability and Recruitment

The number of applicants declaring any type of disability continues to be extremely low. Of the 47 applicants who stated that they had a disability, nine were shortlisted and two were appointed. This demonstrates progress since the last six monthly report, where no disabled applicants had been appointed.

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.

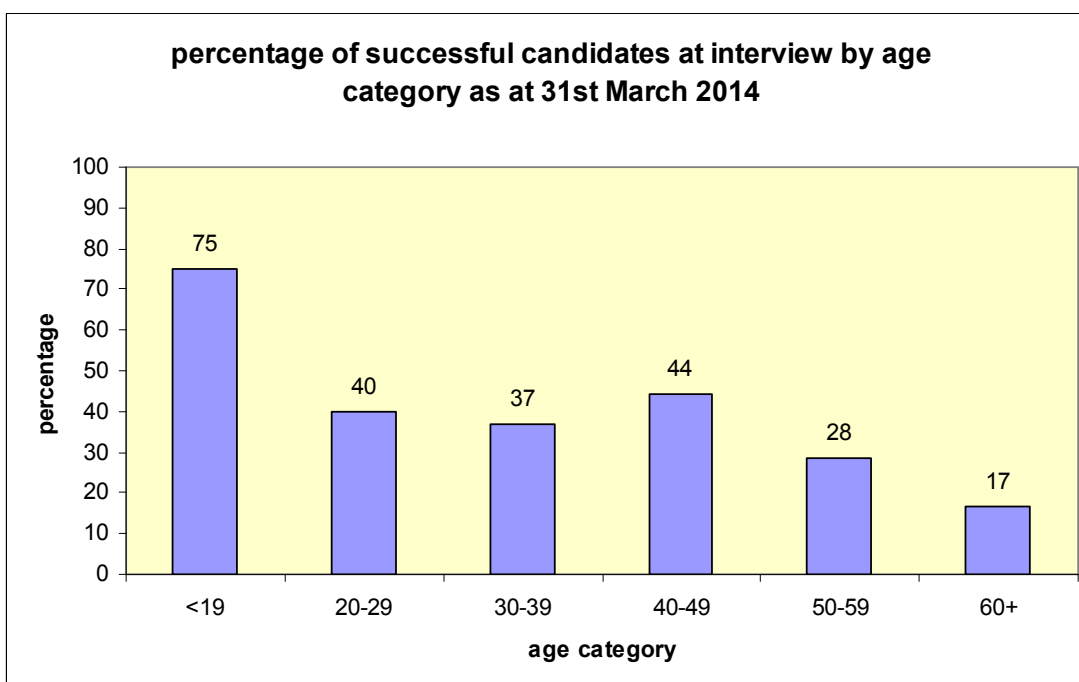
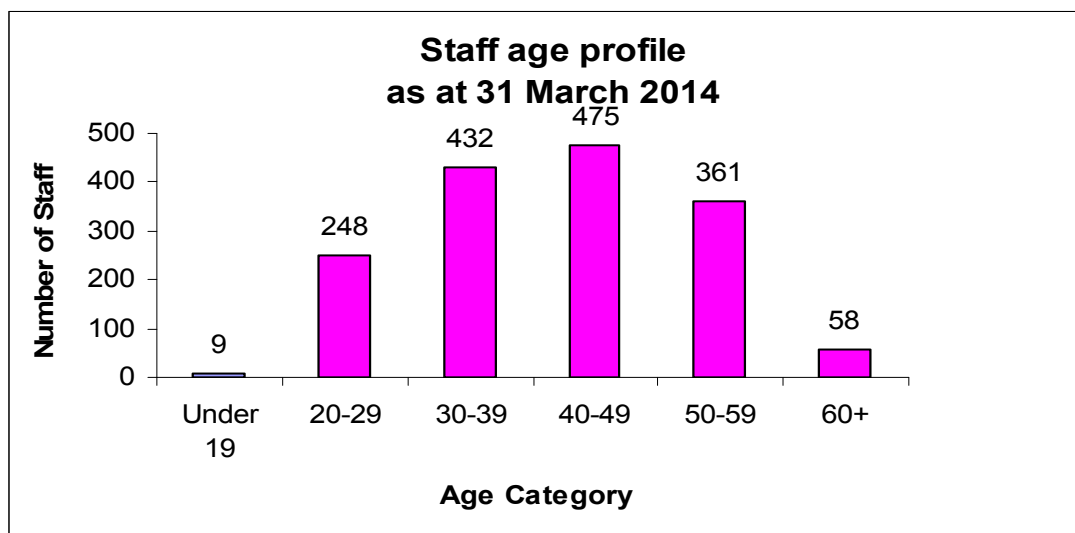
We continue to advertise vacancies on the SHOW website for financial reasons and also because of the number of applicants we currently receive. Vacancies listed on SHOW are automatically listed with Job Centre Plus in an attempt to reach a wider audience.

### Disability Information Relating to Applicants 1 October 2013 to 31 March 2014



## 5.5 Age

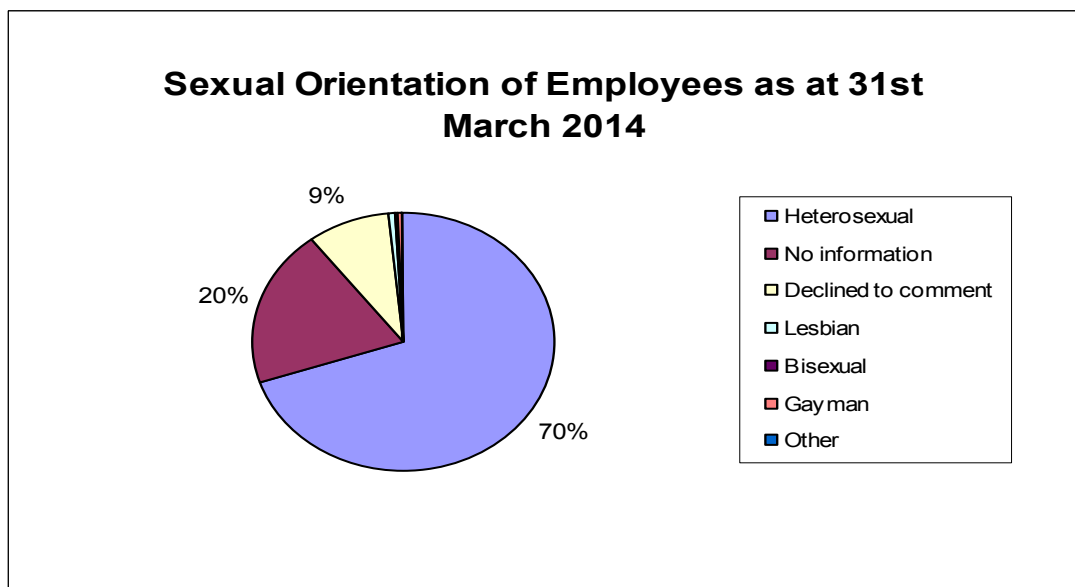
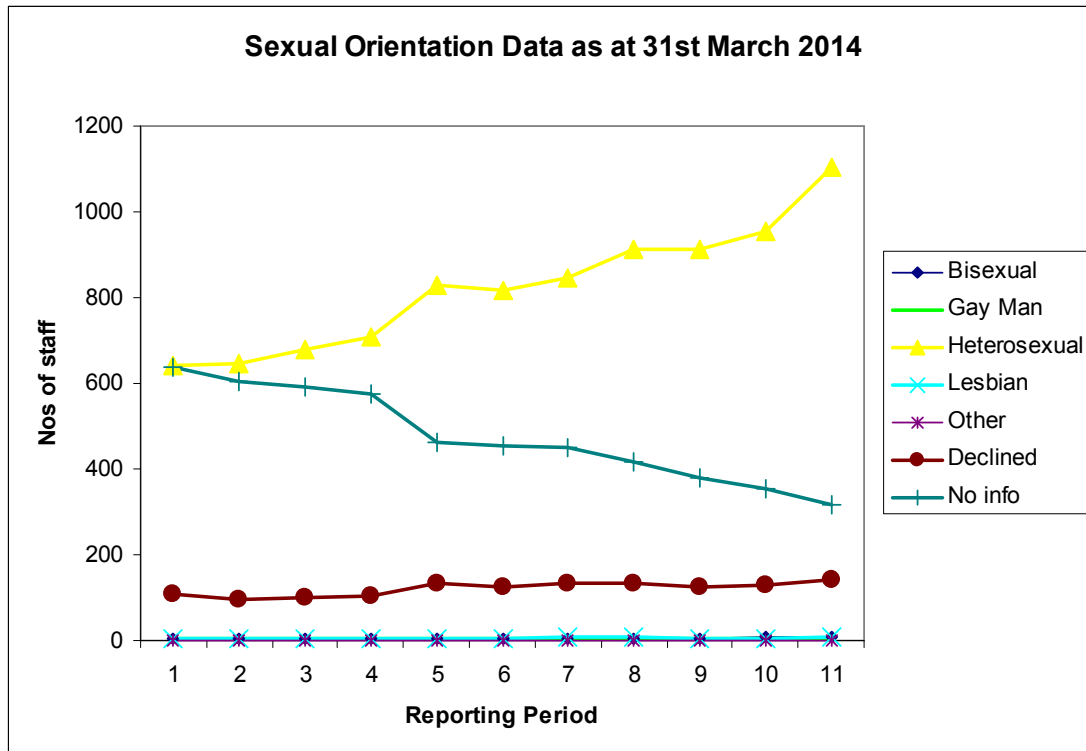
The following chart illustrates the age profile of staff. There is little change since the last reporting period with a slight increase in all categories. The age range of our current staff continues to be monitored to ensure that we are planning for future skill gaps where significant numbers of staff reach possible retirement age.



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 under 19 category. This has changed greatly from the past six months, which is in part down to vacancies within the Hotel and catering departments. However this does mirror the national strategy from the Scottish Government about increasing the amount of youth workers in NHS Boards on an annual basis.

## 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 five years. The graph on the next page illustrates that the sexual orientation of heterosexual staff has 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.





|                     | Applied | Shortlisted | New starts | New starts as a % |
|---------------------|---------|-------------|------------|-------------------|
| Heterosexual        | 1443    | 382         | 110        | 76%               |
| Declined to comment | 85      | 18          | 16         | 18%               |
| Lesbian             | 13      | 5           | 0          | 0                 |
| Bisexual            | 15      | 4           | 0          | 0                 |
| Gay man             | 12      | 3           | 0          | 0                 |
| Other               | 11      | 1           | 0          | 0                 |

The table above 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.

### 5.7 Gender Reassignment

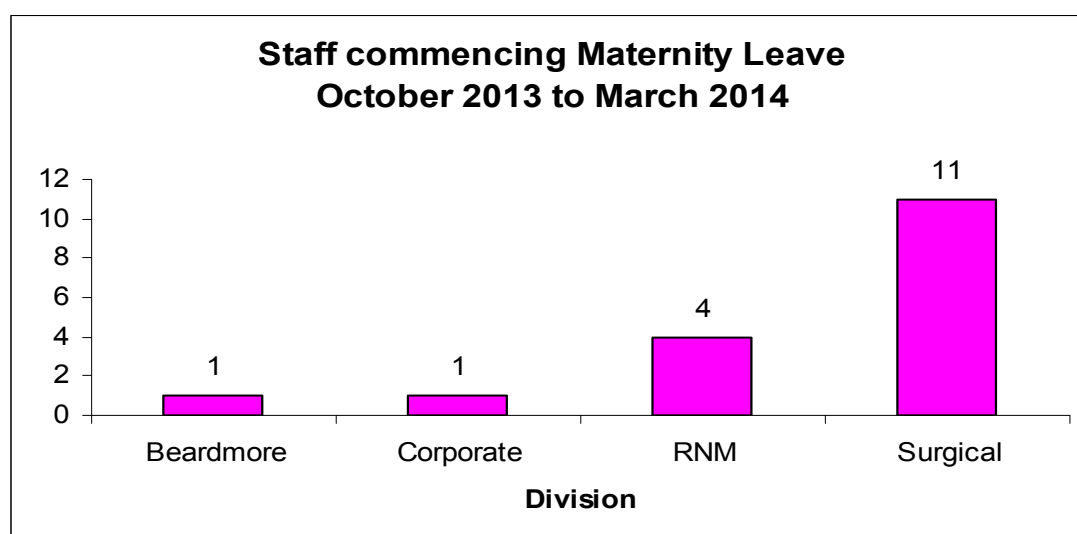
We currently have no staff recorded in this category.

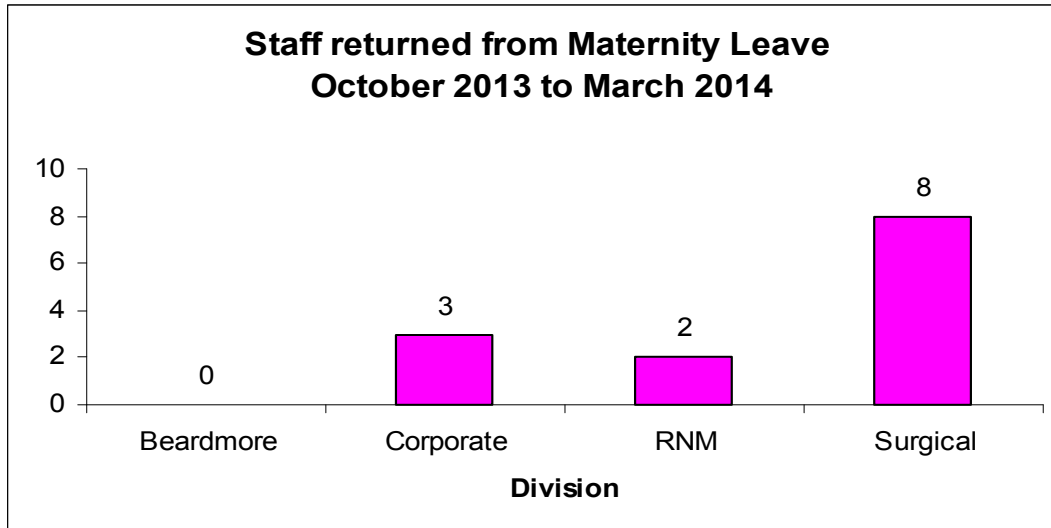
### 5.8 Discipline, Grievance & Equality

During the past six months there have been a total of seven disciplinary cases; three resulted in first and written warnings, three resulted in no formal action being taken and one resulted in dismissal. This is a reduction on the last reporting period, however following analysis of the available data there is no suggestion of any issues with regard to discrimination.

### 5.9 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.





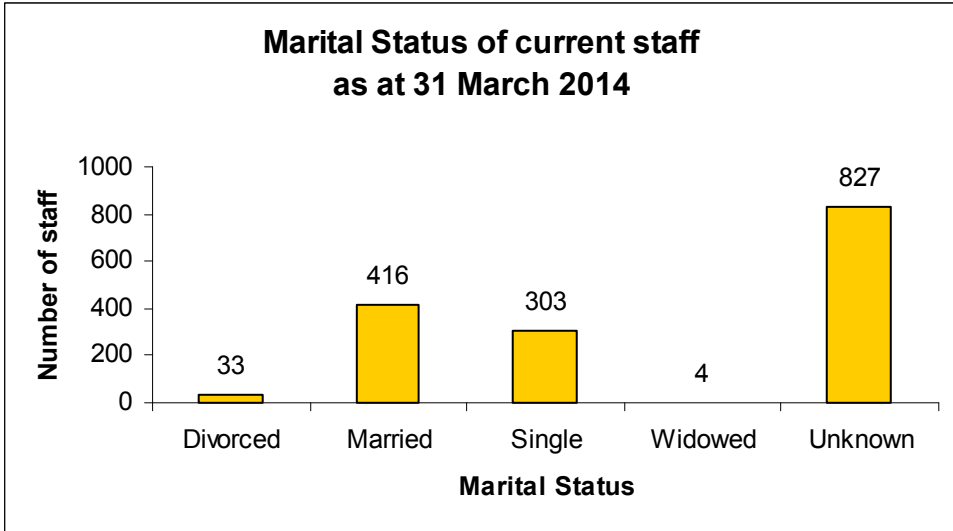
### **5.10 Promotions**

During the current reporting period, 14 members of staff were promoted within the organisation, all of whom were White Scottish; 11 were female and three male, with none stating that they have a disability. The age range was split from 30-59. Ten of the staff promoted said they were heterosexual and one has stated that they are Lesbian. This data would be in line with our staffing profile as a whole.

### **5.11 Marriage and Civil Partnership**

According to the 2011 Census, 45% of adults are noted as married (or remarried), whilst 35% of adults have never married or registered a same sex civil partnership.

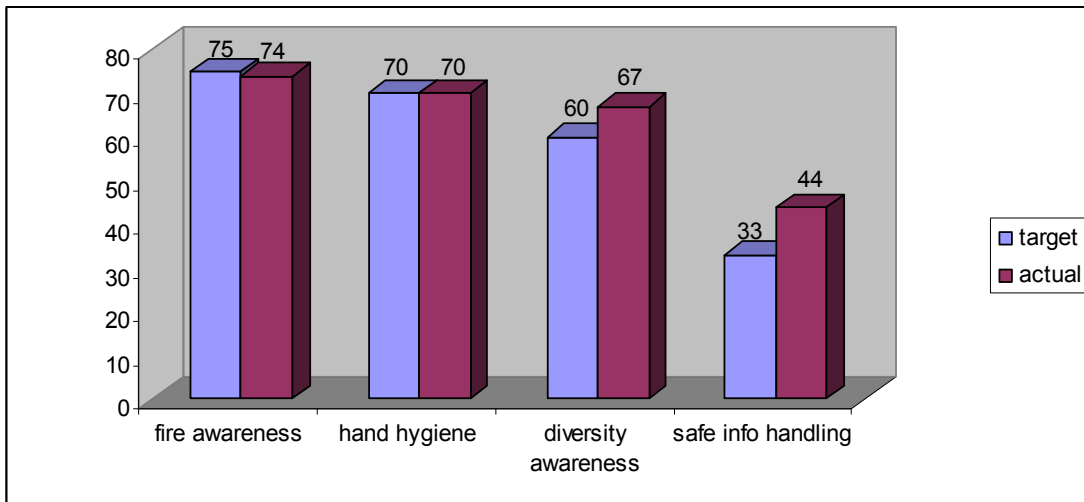
Within our current staff, only 26.2% are listed as married which is significantly lower than the national profile. It should also be noted that we do not currently collect information on same sex civil partnerships. A high proportion of staff have not previously shared this information with us. We will attempt to encourage more detailed provision of information as discussed earlier in this report.



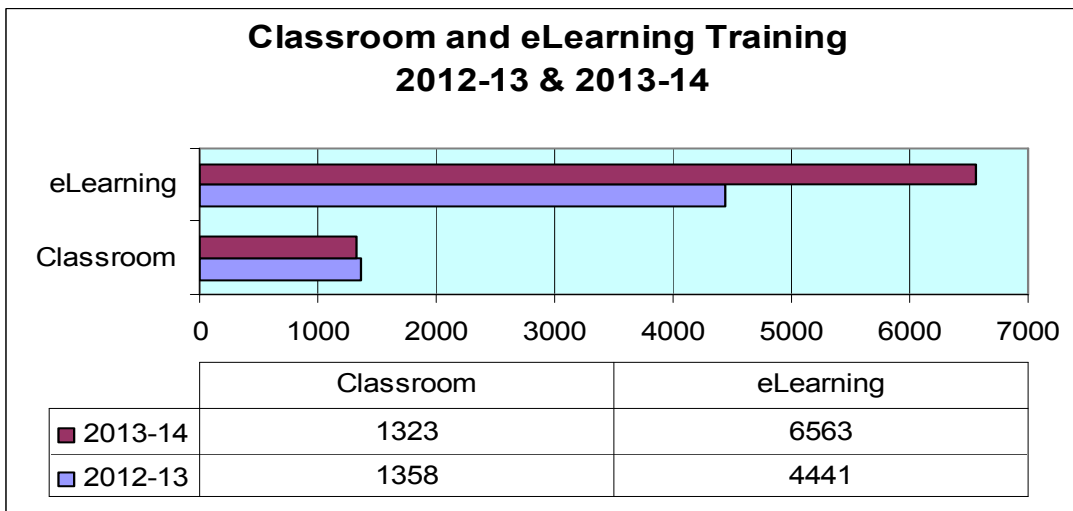
## 6. Training Information

### 6.1 Training Opportunities

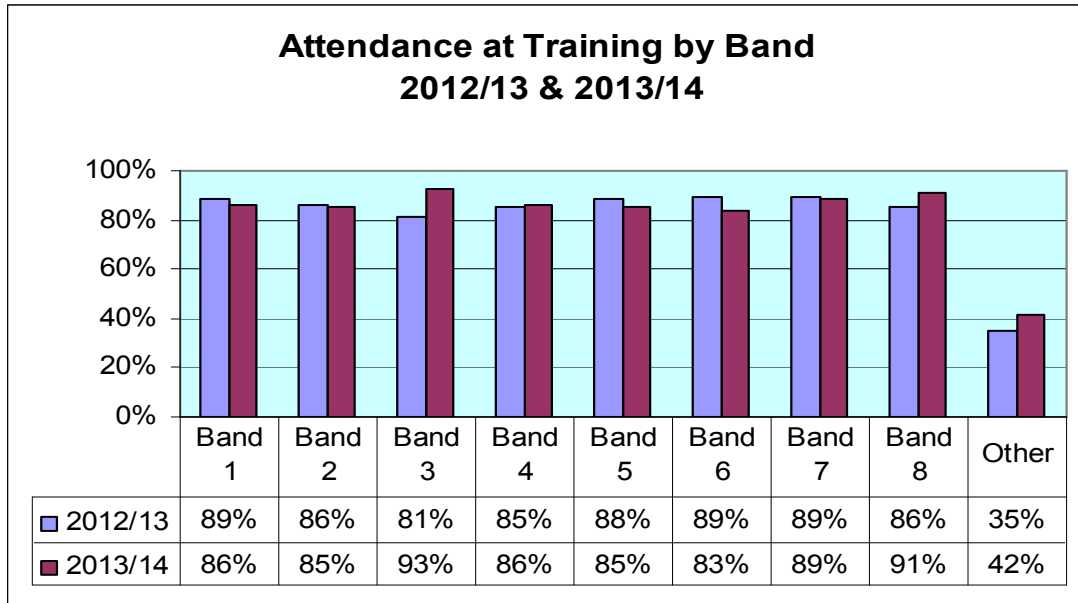
The percentage of staff that have completed the mandatory training across the organisation by 31 March 2014 can be viewed below. The Board fell short of the 75% fire awareness training compliance by 1%.



Over the last 12 months, 81% of our employees accessed one or more learning and development activities which were delivered in-house in the Board. This represents a 1% increase from 2012/13. This is broken down by pay band on page 27.

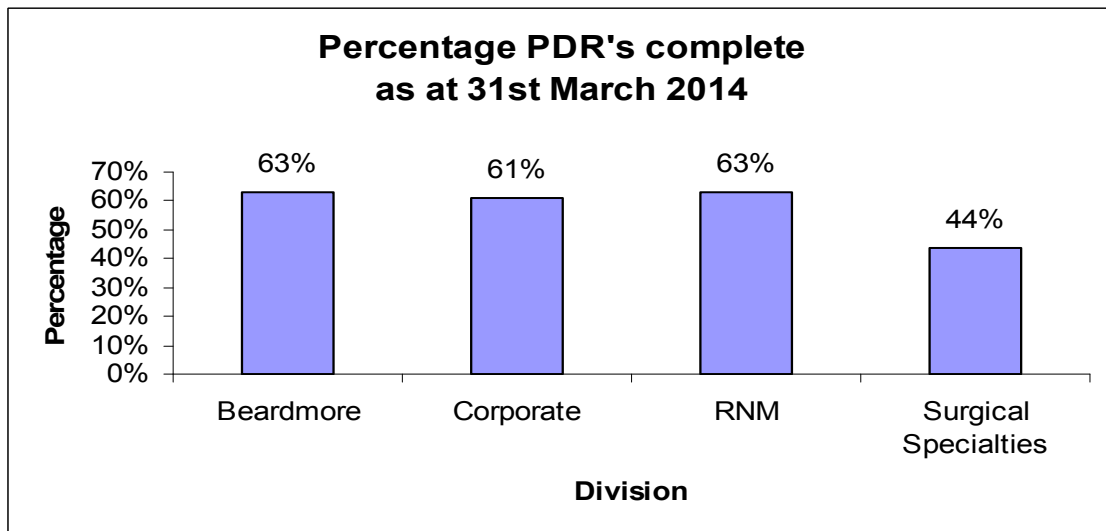


During 2013/14, the number of staff attending classroom sessions and completing e-learning training has increased despite a decrease in the number of classroom sessions offered. This is as a result of larger class sizes and increased use of e-learning.



## 6.2 Personal Development Reviews

The percentage of staff with a current PDR by Directorate is highlighted below as at 31 March 2014. The overall Board percentage was 54%.



The table on the next page highlights the number of PDRs undertaken by band. Band 5 employees have undertaken the most PDRs, which can be viewed positively as this is where we employ most staff. It is also the band a trained nurse commences employment on and the PDR is vitally important to support and build on the learning for that nurse.

