Brighton and Hove Integrated Care Service
Annual Workforce Report

ANNUAL WORKFORCE REPORT
1 August 2013 – 31 July 2014

Purpose: To advise the Board of the workforce activities throughout the previous year and to present future plans
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Contents

1   Purpose

The following report and action plan for the BICS workforce has been submitted by the Corporate Services Manager.   Its purpose is to update the Board and summarise the position of the BICS workforce detailing its staff changes and activity during the period 1 August 2013 – 31 July 2014. Through the collation of this information it is hoped the Board will have a clearer understanding of our workforce and visibility of HR activity.

All data contained within this report has been gathered using Sage HR and our BICS Training Matrix. Further, the CCG has requested that from January 2015 we are able to report on various areas for the MSK service separately and BICS overall. Other partners have made similar requests, so further work is underway to address these requests in time for when they are required. Note, following CCG and Partners guidance, the bulk of this reporting does **not** include casual/bank staff.

2   Equality Data

Currently we only gather data on age and gender for our staff at the time of recruitment; this is recorded on Sage HR. It is proposed we should consider what other protected characteristics of our staff that we gather and monitor. The characteristics to consider are:

1. Age

2. Disability

3. Gender re-assignment

4. Pregnancy and maternity

5. Race

6. Religion or belief

7. Sex

8. Sexual orientation

9. Civil partnership or marital status

It is felt that at the very least we should also have an understanding of staff race and disabilities. Middles proposes we adopt a process of asking staff to voluntarily complete a monitoring form (please see Appendix i) which will capture further information at the time of employment. Further, we propose asking current staff to complete a simple anonymous survey based on the same form.
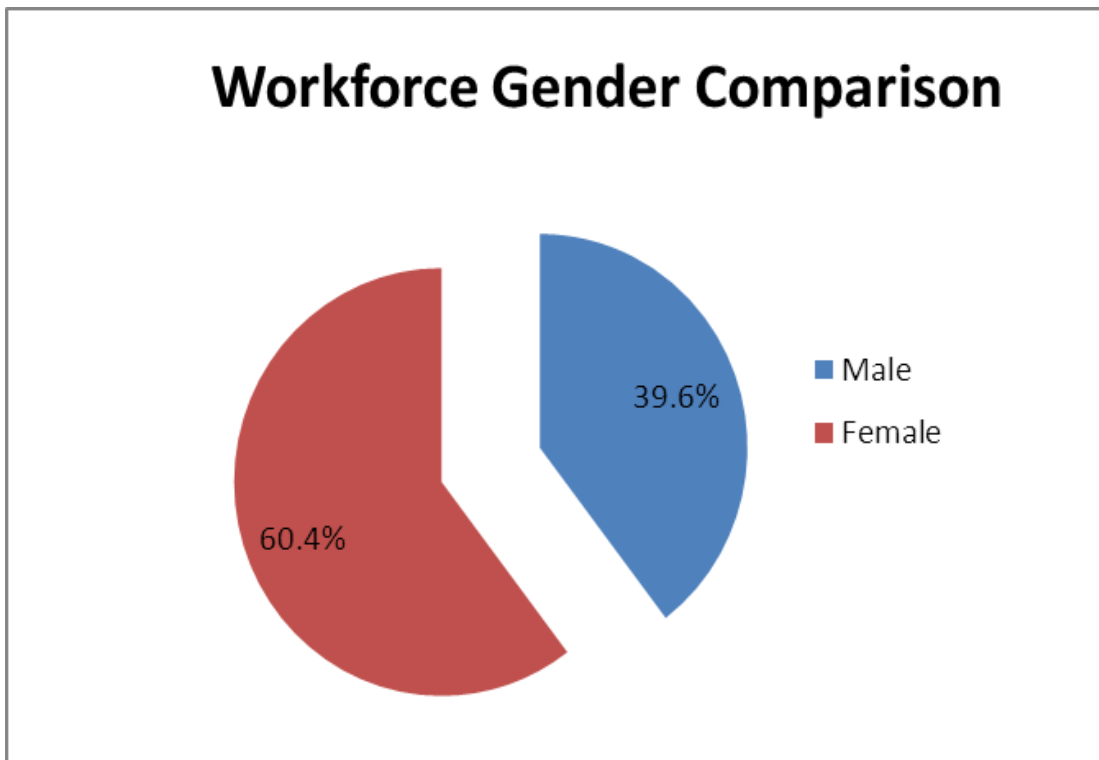
This section of the report provides an analysis of workforce by age.

2.1   Composition of Workforce by Age
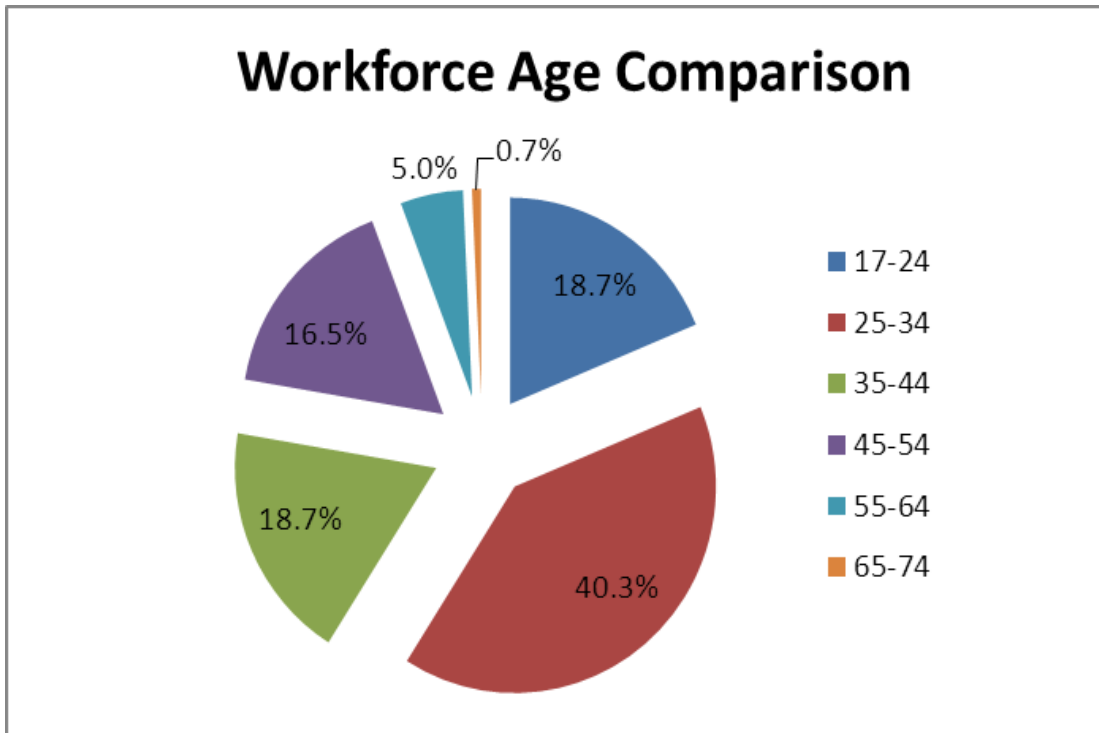
Note - this data does not include casual staff. The chart shows that the bulk of staff fall within the 25 – 34 year age group, followed by an even split between 17 – 24 year age group and 35 – 44 age group

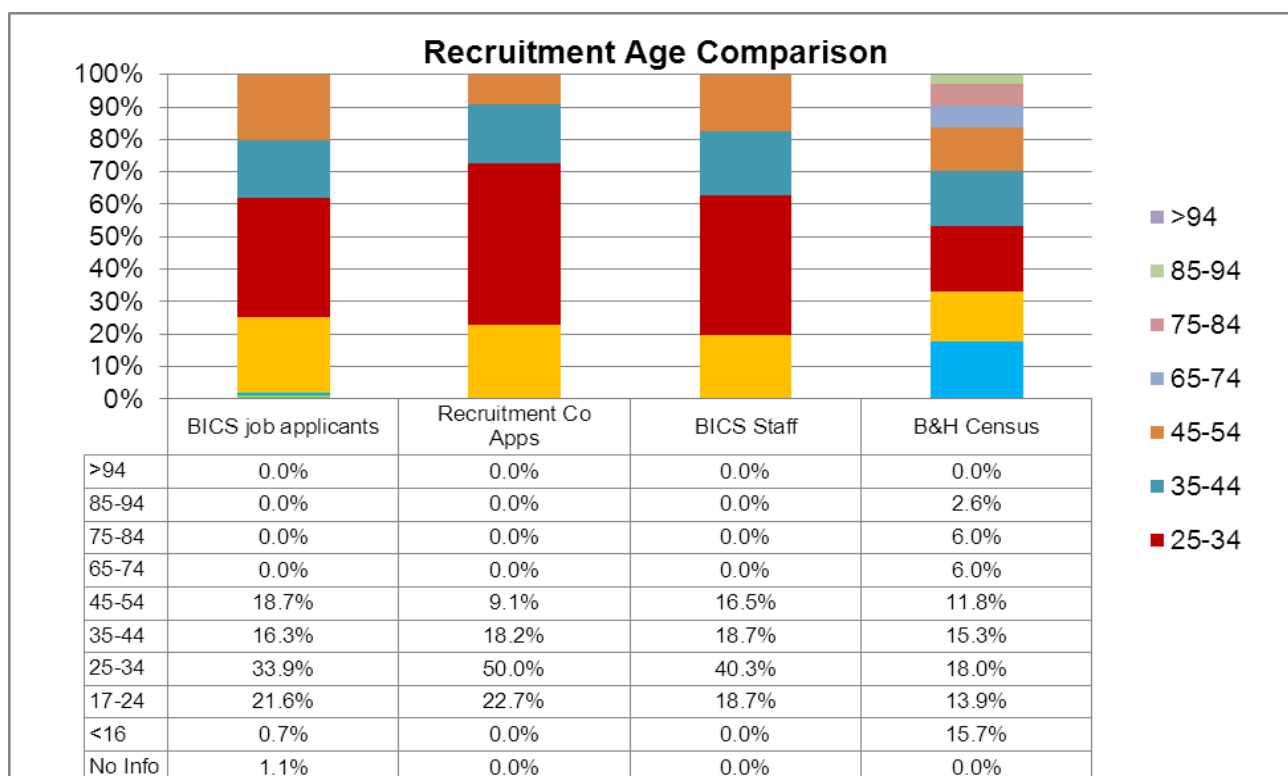## 2.2   Composition of Workforce by Gender

Note - this data does not include casual staff. The chart shows that almost 2/3 of our staff are female.

2.3   Equality Summary

BICS is committed to building a workforce that is reflective of the diverse communities that we serve.   BICS has statutory duty to collate, monitor and review data in relation to equality. The purpose of this section of the workforce report is to provide a profile of our workforce by age and gender. It is proposed that information related to all other equality targets will be collected and will be included in future reports.

2.4   Equality in our Recruitment

Recruitment Age Comparison

	BICS job applicants	Recruitment Co Apps	BICS Staff	B&H Census
>94	0.0%	0.0%	0.0%	0.0%
85-94	0.0%	0.0%	0.0%	2.6%
75-84	0.0%	0.0%	0.0%	6.0%
65-74	0.0%	0.0%	0.0%	6.0%
45-54	18.7%	9.1%	16.5%	11.8%
35-44	16.3%	18.2%	18.7%	15.3%
25-34	33.9%	50.0%	40.3%	18.0%
17-24	21.6%	22.7%	18.7%	13.9%
<16	0.7%	0.0%	0.0%	15.7%
No Info	1.1%	0.0%	0.0%	0.0%

The purpose of monitoring age is to establish if our recruitment processes are in any way impacting or influencing the age of staff actually recruited. We have compared job applications that have come directly to BICS and recruitment company applications against our actual workforce. By doing this we are able to establish if there are any anomalies or concerns raised that would require a review of our recruitment processes. We are satisfied there are no concerns noted for this time period

Recruitment Gender Comparison - 2 years of data
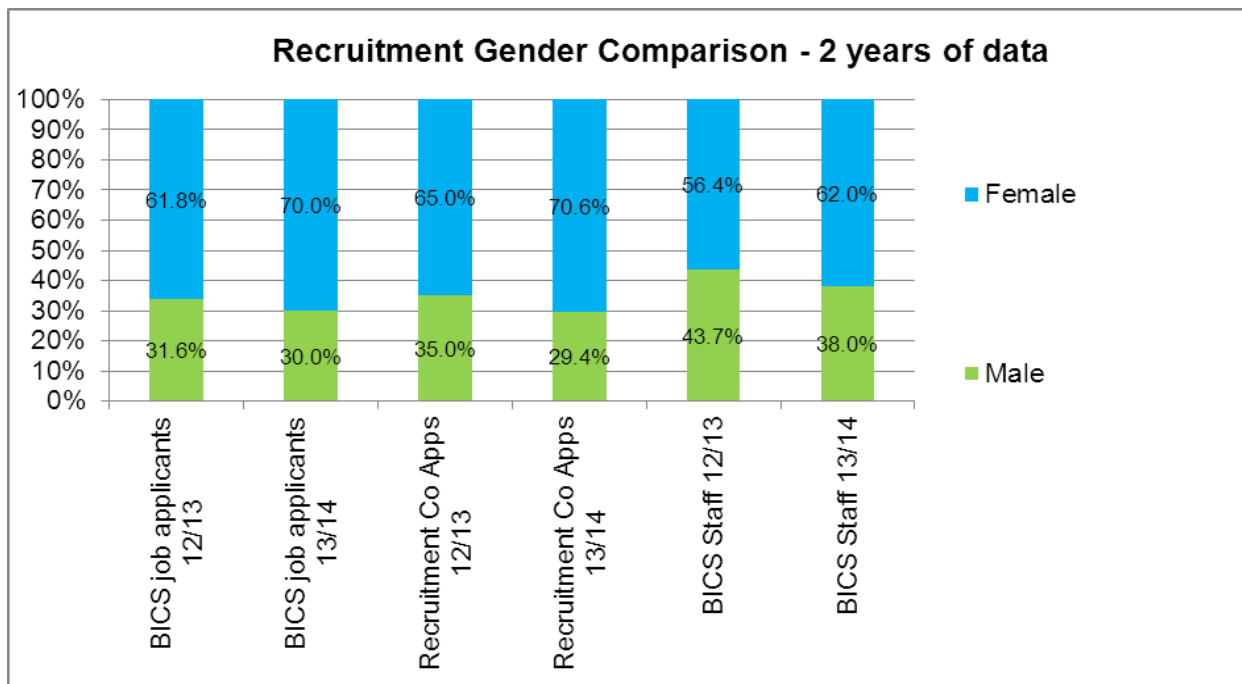
Similarly to the above, we also monitor gender to ensure our recruitment processes are fair and not impacting the gender of staff recruited. Again, by comparing the data provided by direct job applications with our recruitment company applications against our actual workforce it becomes evident if there are any issues we need to address. Here we have shown two years of data to establish trends. There has been a drop in male applicants from both our direct applicants and recruitment company applicants this year from last. Similarly there has been a drop in male staff members at BICS. It is proposed we always ensure when recruiting staff that interviewing is completed by two individuals, one of each gender whenever possible.

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3   Staff

3.1   Monthly Headcount v WTE

Monthly Headcount vs WTE

	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14
Headcount	86	93	98	98	100	99	103	100	105	106	109	109
WTE	73	77	78	81	82	85	88	88	87	89	92	95
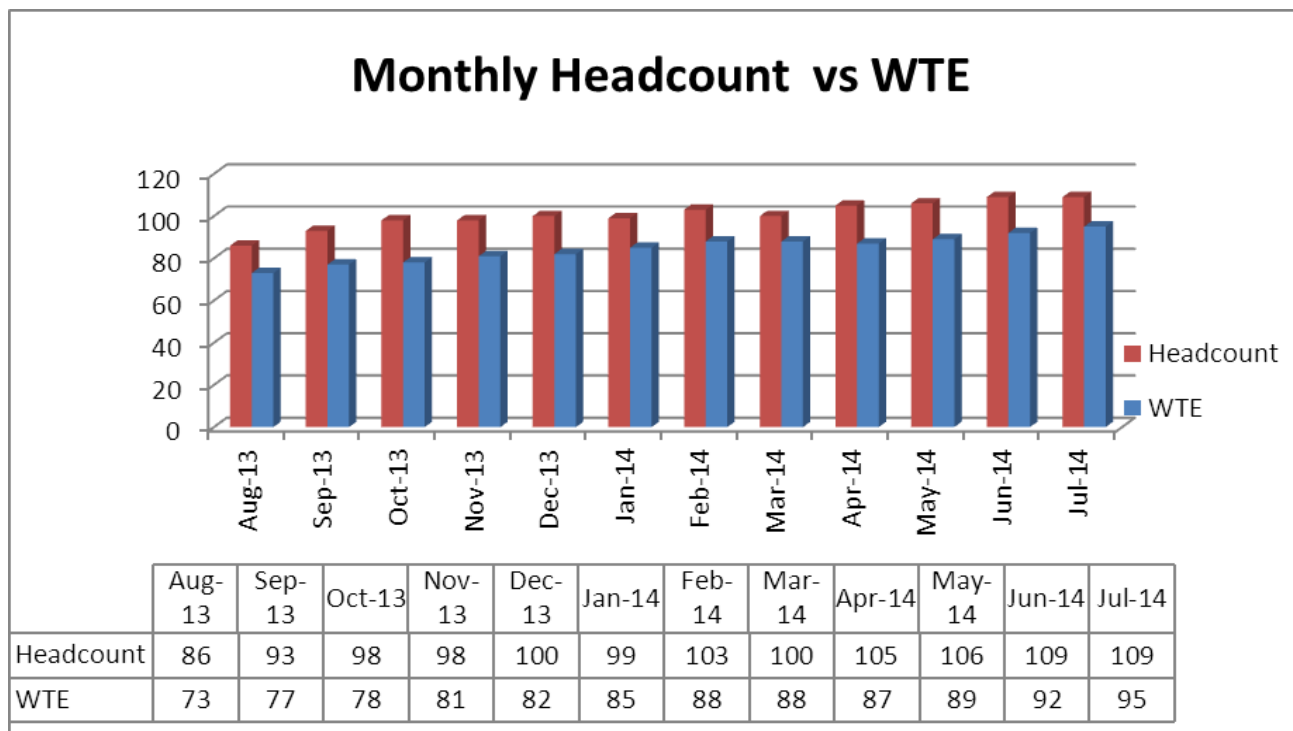
Note - this data does not include casual staff. The above chart details a month by month summary of our staff headcount vs WTE (whole time equivalent). As at 31 July 2014 BICS employs 109 staff, which equates to 95% WTE.

Throughout the year, WTE varies between 82% and 88% of our headcount.

As at the end of October the figure is 129 employees and 109 WTE.

3.2   Types of Staff Leave approved and recorded by HR

	1 August 2013 – 31 July 2014
Compassion leave requests	4
Training and Study leave requests	14
Career break requests	0
Maternity and Paternity leave requests	2
Flexible working requests	1
Time off for dependants leave requests	2
Unpaid Leave	4

The above is a simple record of the various types of leave taken during this period.

3.3   Staff Performance Monitoring

	1 August 2013 – 31 July 2014
Disciplinary activity	2 (dismissed)
Grievance activity	0
Capability activity – formal	1

The above is a summary of the formal performance activity during this period.

3.4   Other Workforce Activity

	1 August 2013 – 31 July 2014
Whistleblowing activity	0
Bullying and Harassment activity	0
Discrimination activity	0
Substance abuse activity	0
Redundancy	1
TUPE	0
Sickness informal review	2
Sickness formal review	2
IMA referrals to Occupational Health	6
*Change to Terms and Conditions	111

*** Change to terms and conditions can be broken down as follows:**

Acting Up	26
Change in hours	17
Change in responsibilities	36
Change to fixed term from casual	4
Change to substantive from fixed term/casual	13
Extend fixed term contract	14
Extend secondment	1

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Please note each Change of Terms is allocated into one category only (not double counted) and requires the completion of a HR form and Director signature which prompts HR to complete a new formal Change to Terms letter which is duly agreed and signed by employee and Director before being returned to HR.

As you can see, HR has processed a large volume of changes to terms and conditions. The bulk of the changes are due to staff progression through change in responsibilities (new role) and acting up arrangements. Also employing staff on substantial contracts who were initially on fixed term or casual arrangements.

4   Recruitment

4.1   Vacancies per month
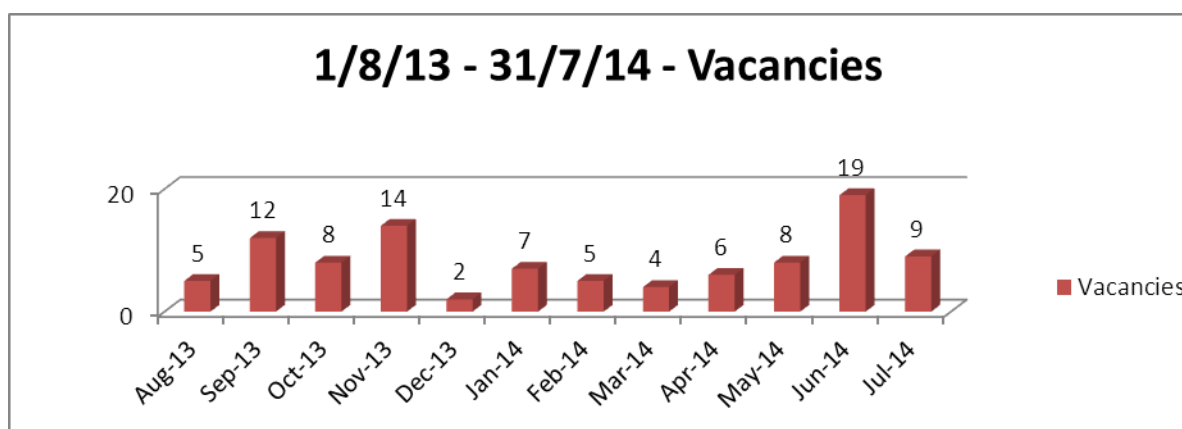
Note - this data does not include casual staff. We had a peak of 19 roles being recruited to in June 2014. This was in the main due to the MSK project. The month of October 2014 saw 10 roles being recruited to. Total recruitment for the year was 99 roles, either fixed term or substantive.

4.2   Recruitment Audit

The HR team have initiated a regular audit of the previous 3 months recruitment to assure ourselves that all standard recruitment processes are adhered to (see the Recruitment and Selection Procedure for details). There are times when recruitment is undertaken very swiftly and the standard process does not happen in the usual order, so it is important that a check is made to ensure all elements of recruitment are followed and the correct paperwork is in place following the employee starting work. Steps to audit are:

- ESR1, confirmation of recruitment
- Job Description in place
- Person Specifications in place
- Role Appropriately advertised
- Application forms completed
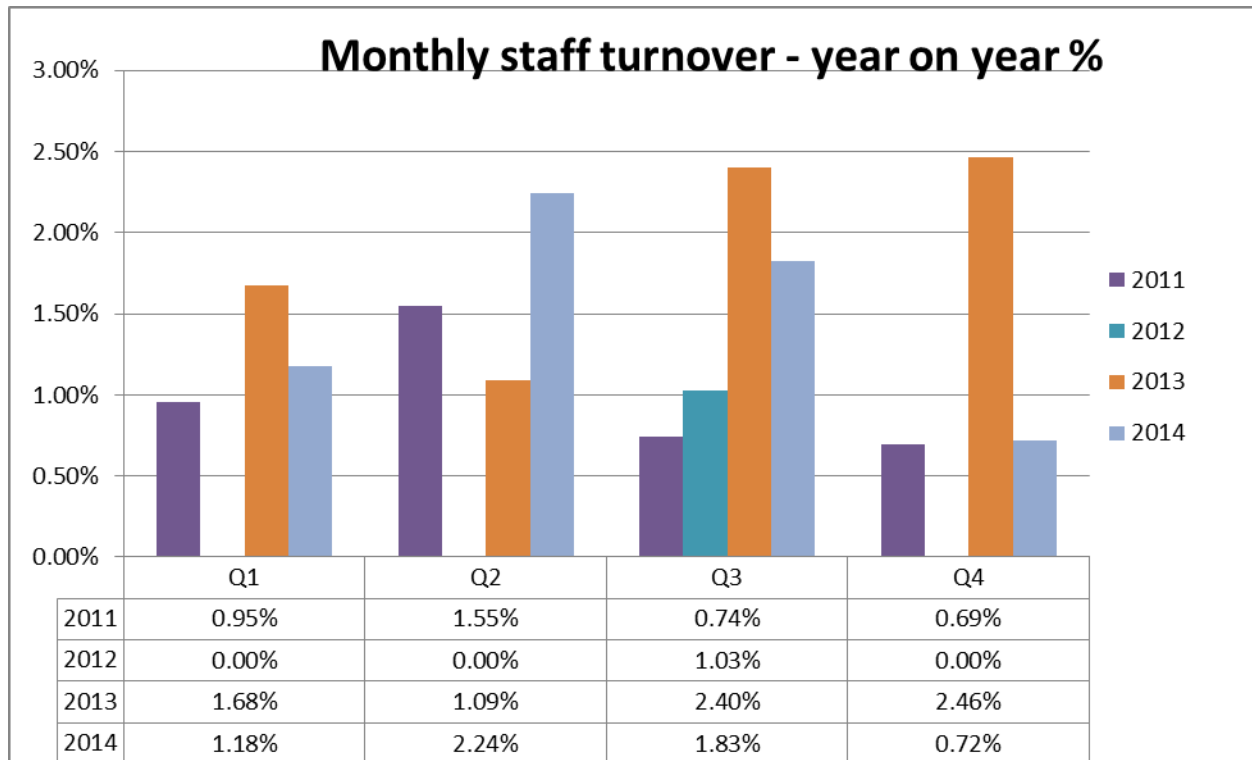- Interviews undertaken

5   Leavers

5.1   No of Leavers
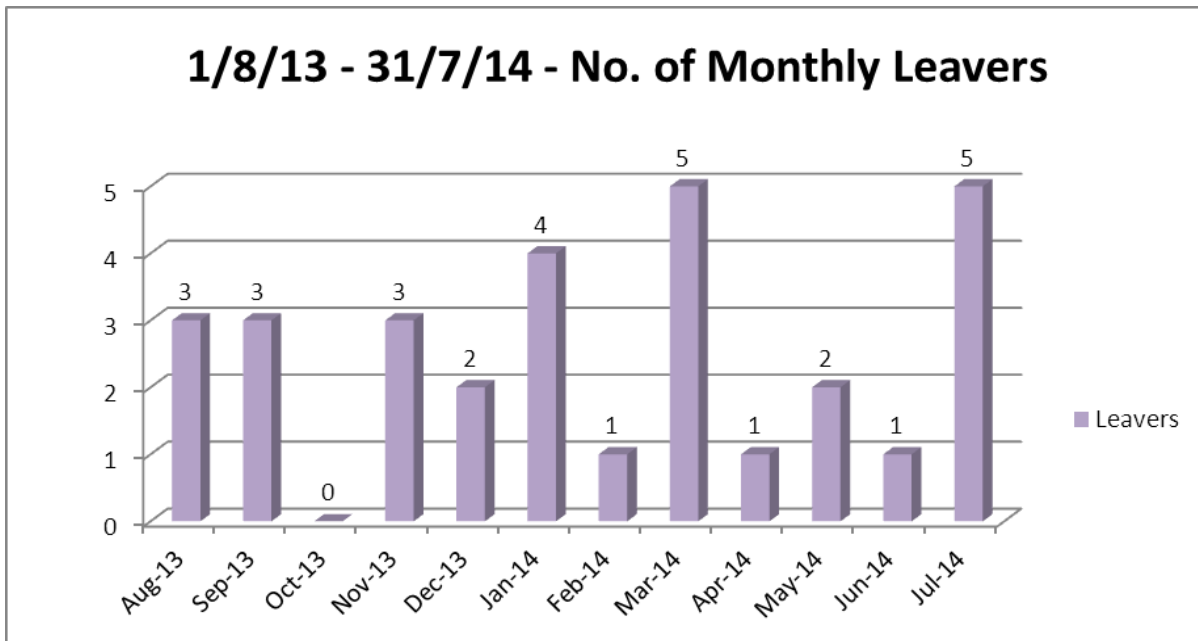
Note - this data does not include casual staff. We had a peak of 5 leavers in March and July. The month of October 2014 saw just 2 leavers. Total leavers for the year was 30, either fixed term or substantive.

5.2   Monthly staff turnover – Year on Year

|	Q1	Q2	Q3	Q4
2011	0.95%	1.55%	0.74%	0.69%
2012	0.00%	0.00%	1.03%	0.00%
2013	1.68%	1.09%	2.40%	2.46%
2014	1.18%	2.24%	1.83%	0.72%

Note - this data does not include casual staff.

There is nothing of note or concern in this data. Consideration should be given to proposing a monthly turnover target which could be used to trigger a company-wide action plan.
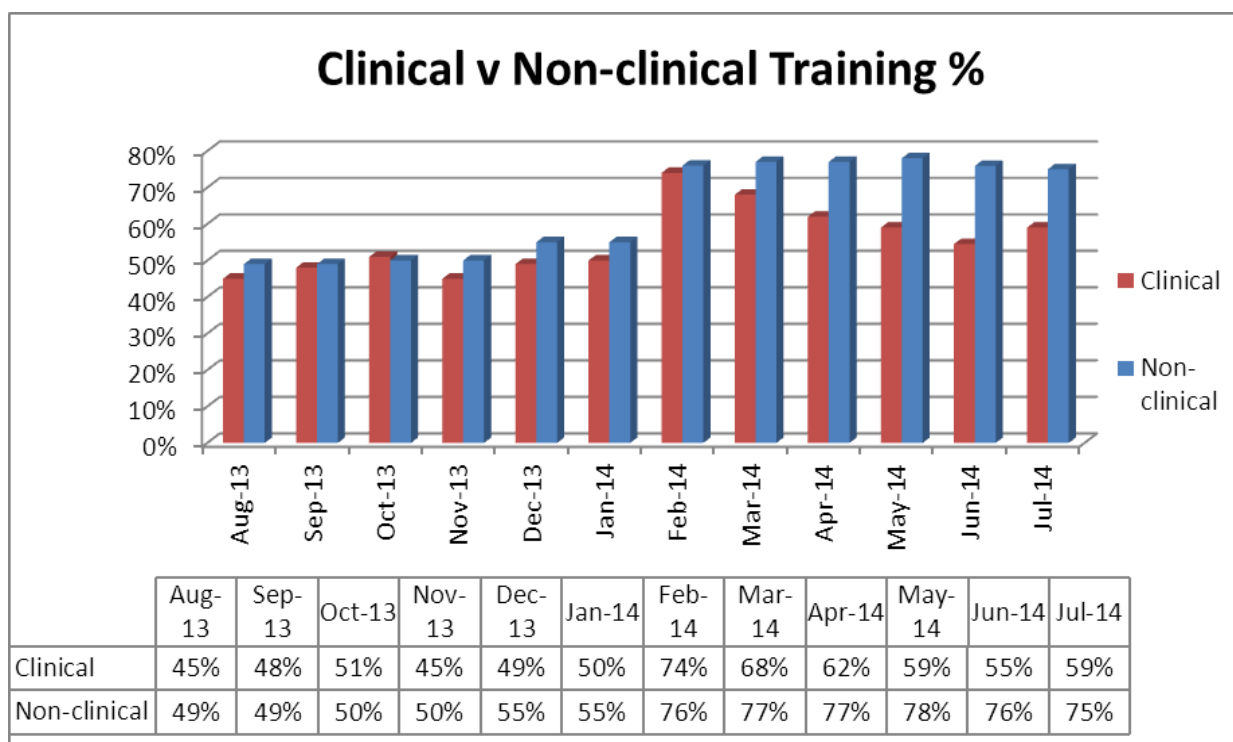
6   Learning and Development

6.1   Overall % of staff compliant with training
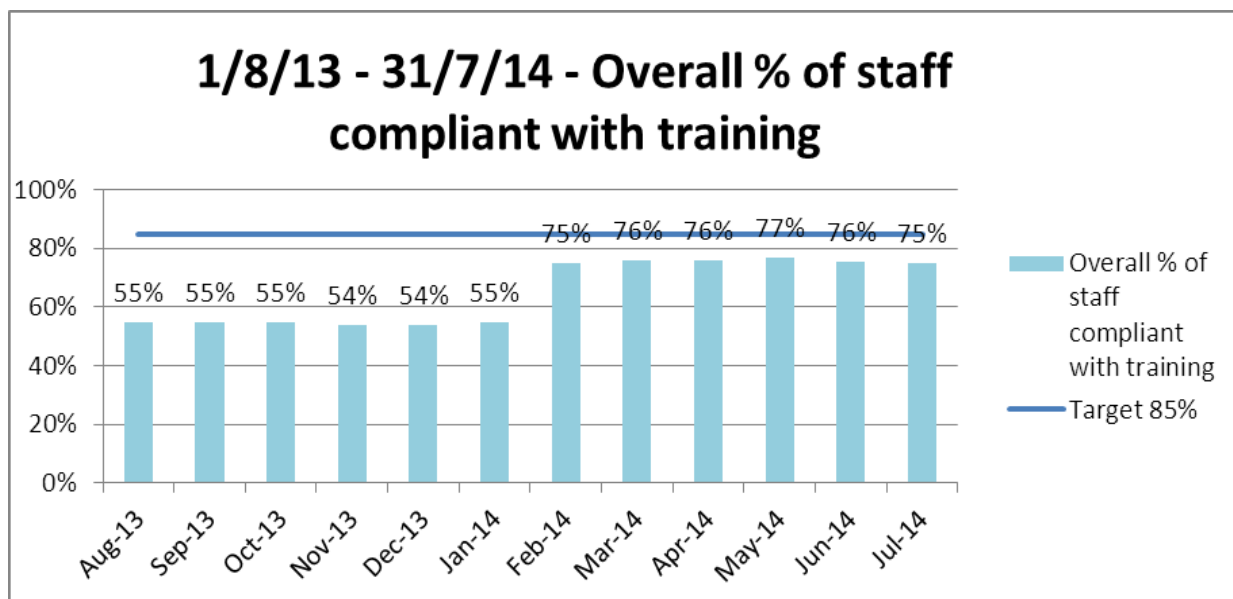
Our target is 85% at all times. We had a focused push in February which had great results.

6.2   Clinical v Non-clinical training %

	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14
Clinical	45%	48%	51%	45%	49%	50%	74%	68%	62%	59%	55%	59%
Non-clinical	49%	49%	50%	50%	55%	55%	76%	77%	77%	78%	76%	75%

The above chart shows the variation between clinical and non-clinical staff training levels. This varies between clinical staff being more compliant (1% in October 2013) and non-clinical staff (between 1% - 21% every other month) being more compliant. It is proposed a focused action plan should be implemented to clinician training levels.

6.3   % of staff having completed Annual Personal Development Plan (Pirate Dave)
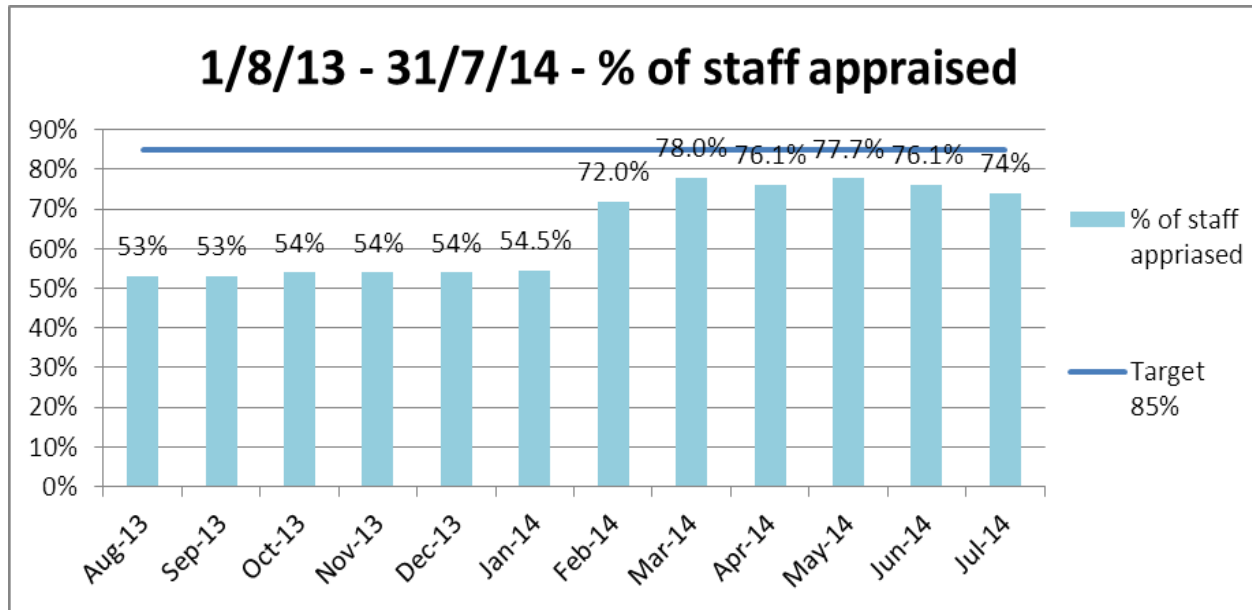
It is believed annual appraisals are not being completed as we have many new line managers whom have not been trained or are not confident to carry out these reviews. Middles therefore recently proposed a brief survey is sent to all Line Managers establishing if 1:2:1s and annual Personal Development Plans are actually being completed with a view to rolling out training to those who are identified as needing it.

7   Sickness

7.1   Monthly staff sickness - %
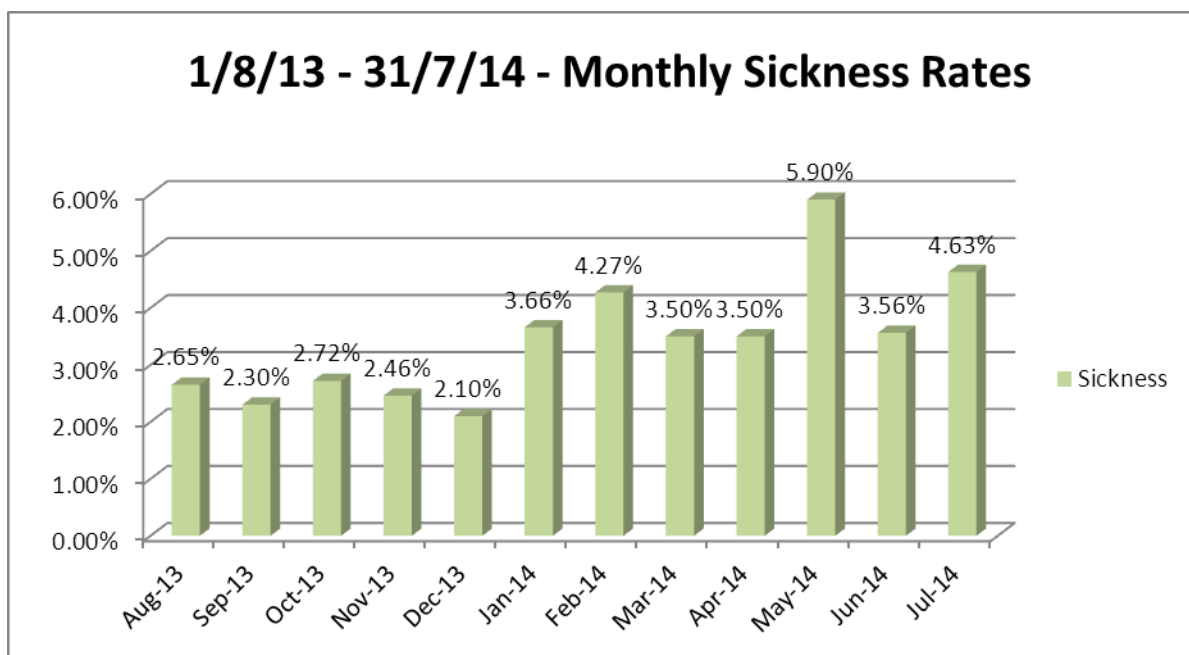
For the period 2012-2013 overall NHS staff sickness absence was 4.24%, this is an increase from the previous period which was of 4.12%. The majority of the time we are

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below this range, but we have had three months where our figures have been higher. The month of October 2014 saw a percentage of 1.53%. Consideration should be given to proposing a sickness target which could be used to trigger a company-wide action plan.

8   Job Evaluations

Currently we have only 2 staff members trained to carry out Job Evaluations. It has agreed this is a risk that should be addressed. To address this risk we have arranged 2 planning meetings to design in-house training as we believe we have the skill-set to cross train staff internally. The two workshops are arranged for November and we envisage the cross training to other staff will be undertaken in January 2015.

9   Summary of Proposed Plans

- **Equality** - It is proposed that information related to all other equality protected characteristics will be collected and will be included in future reports - see section 2.3 above.

- **Recruitment** - It is proposed we always ensure when recruiting staff that interviewing is completed by two individuals, one of each gender whenever possible - see section 2.4 above

- **Leavers** – Consideration should be given to proposing a leavers target which could be used to trigger a company-wide action plan – see section 5.2

- **Training** – It is proposed a focused action plan should be implemented to address clinician training levels - see section 6.2 above

- **Annual Personal Development Plan (Pirate Dave)** - see section 6.3 above

- **Sickness target** - Consideration should be given to proposing a sickness target which could be used to trigger a company-wide action plan – see section 7.1

- **Job Evaluations** – we have a plan underway to address this risk – see section 8 above.

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10 Appendix i

Brighton and Hove Integrated Care Service
MONITORING INFORMATION

This section of the application form will be detached from your application form and will be used for monitoring purposes only.

NHS Organisations recognise and actively promote the benefits of a diverse workforce and are committed to treating all employees with dignity and respect regardless of race, gender, disability, age, sexual orientation, religion or belief. We therefore welcome applications from all sections of the community.

| 1. | Age | ☐ 17–24 ☐ 25-34 ☐ 35-44 ☐ 45-54 ☐ 55-64 ☐ 65-74 ☐ 75-84 ☐ 85-94 ☐ > 94
☐ I do not wish to disclose this information |
| 2. | Gender | ☐ Male   ☐ Female   ☐ Transgender   ☐ I do not wish to disclose this information |

Race Relations (Amendment) Act 2000

3.   I would describe my ethnic origin as:

Asian or Asian British	Mixed	Other Ethnic Group
☐ Bangladeshi ☐ Indian ☐ Pakistani ☐ Any other Asian background	☐ White & Asian ☐ White & Black African ☐ White & Black Caribbean ☐ Any other mixed background	☐ Chinese ☐ Any other ethnic group ☐ I do not wish to disclose this information
Black or Black British ☐ African ☐ Caribbean ☐ Any other Black background	**White** ☐ British ☐ Irish ☐ Any other White background	

Employment Equality Regulations 2003

4.   Please select the option which best describes your sexuality

☐ Lesbian ☐ Gay ☐ Bisexual	☐ Heterosexual ☐ Other ☐ I do not wish to disclose this information

5.   Please indicate your religion or belief

☐ Atheism ☐ Buddhism ☐ Christianity ☐ Muslim	☐ Sikhism ☐ Hinduism ☐ Judaism	☐ Other ☐ I do not wish to disclose this information

Disability Discrimination Act 1995
The Disability Discrimination Act protects disabled people. This includes people with long-term health conditions. If you tell us that you have a disability we can make reasonable adjustments to where you work and your work arrangements and at interview.

6. Do you consider yourself to have a disability?	☐ Yes ☐ No ☐ I do not wish to disclose this information

Please state the type of impairment which applies to you. People may experience more than one type of impairment, in which case please tick as many as are applicable. If none of the categories apply, please mark 'other' and specify.

☐ Dyslexia/learning disability ☐ Blind/partially sighted/Sensory impairment ☐ Physical impairment ☐ Mobility difficulties ☐ Mental health condition	☐ Deaf/hearing impairment ☐ Unseen disability (eg. diabetes, epilepsy, asthma) ☐ Autistic Spectrum Disorder (inc. Asperger's Syndrome) ☐ Personal Care ☐ Other, please specify [ ]

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