



WORKFORCE REPORT

Argyll & Bute
March 2023

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INTRODUCTION

The Workforce Report considers the workforce position as of 31st March 2023 (although some sections are at a different timeline depending on the available data), providing high level information. Trend lines represents date range 1st April 2022 to 31st March 2023.

The report is in development and aims to shows the current position, trends and highlights where there have been changes and progress from previous periods as well as actions that are being taken to address some of the areas of concern.

Workforce dashboards are available at operational levels and are work in progress with SLTs (via our People Partners).

NHS HEADCOUNT AND WTE

Key points:

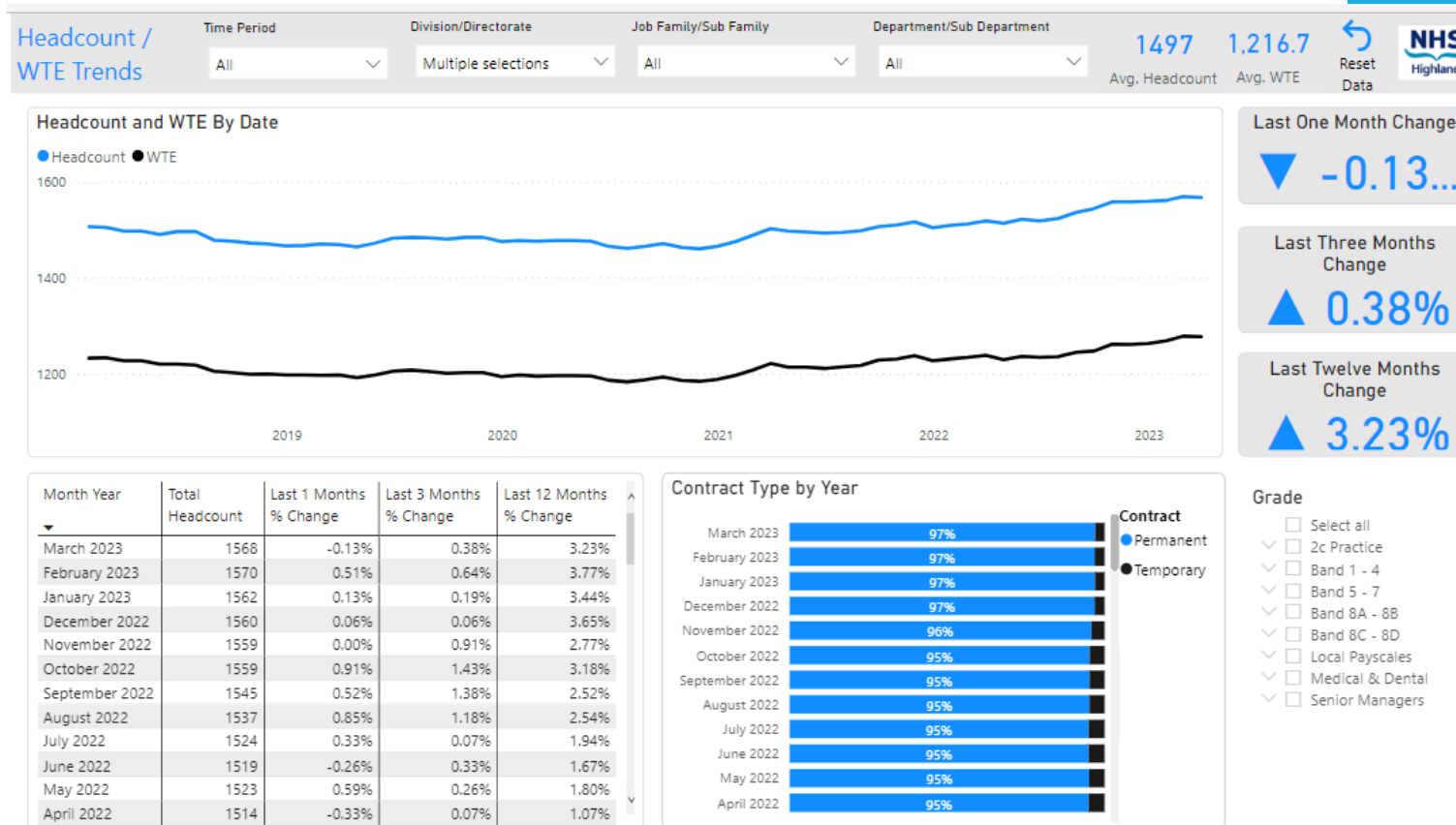
3.23% increase of workforce from March 2022

March 2023 in post figure of 1,568 (headcount) of Substantive Staff an increase of 54 overall since April 22.

97% of our contacts are permanent

Still working on an integrated data set (breakdown in next slides)

Dashboard are accessible to managers and training being rolled out



NHS WORKFORCE PROFILE

Key points:

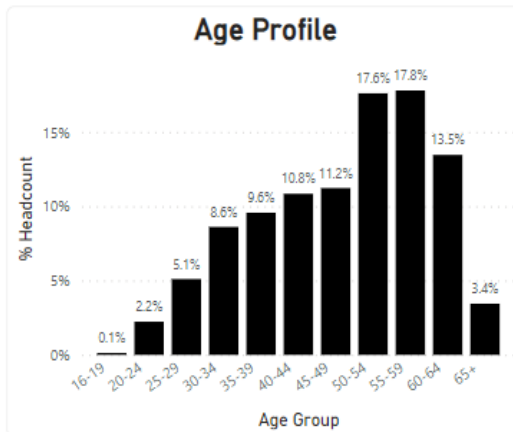
820 employees (52.3%) are over 50, with 265 over 60 years old (17 % of the workforce)

84.6% of our workforce is female

50.9% of our workforce are part-time

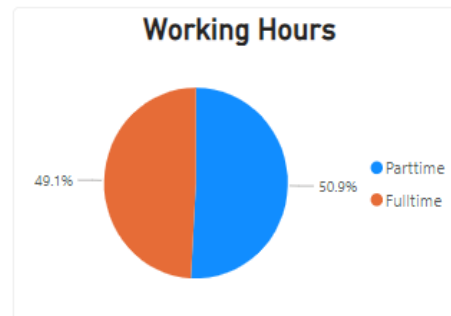
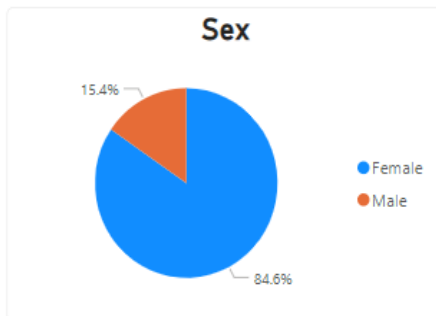
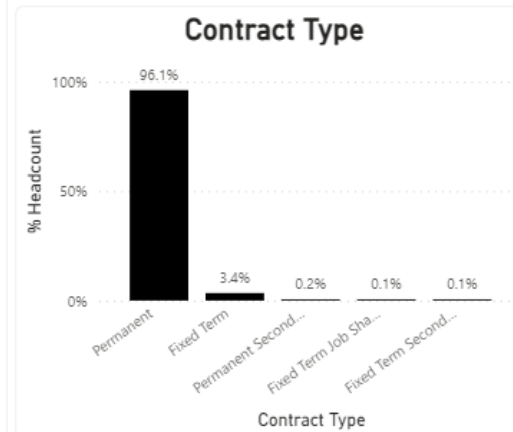
3.4% of our workforce are temporary (56 fixed term)

37 employees are under 25 which has remained the same since December 2022



Headcount/WTE by Job Family

Job Family	Headcount	WTE
ADMINISTRATIVE SERVICES	298	237.9
ALLIED HEALTH PROFESSION	183	150.4
DENTAL SUPPORT	35	27.6
HEALTHCARE SCIENCES	29	26.0
MEDICAL AND DENTAL	51	30.8
MEDICAL SUPPORT	2	1.4
NURSING/MIDWIFERY	678	568.1
OTHER THERAPEUTIC	50	43.7
PERSONAL AND SOCIAL CARE	56	44.9
SENIOR MANAGERS	1	1.0
SUPPORT SERVICES	200	146.1
Total	1568	1,277.8



60
Fixed Term Contracts

Grade

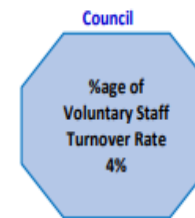
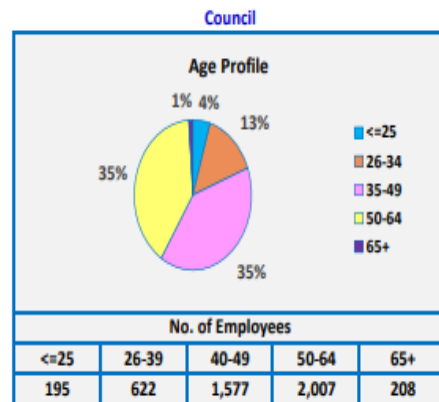
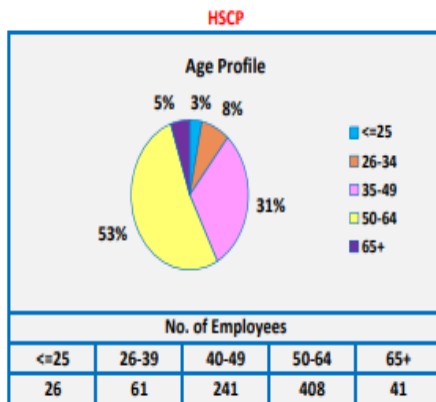
- Select all
- 2c Practice
- Band 1 - 4
- Band 5 - 7
- Band 8A - 8B
- Band 8C - 8D
- Local Payscales
- Medical & Dental
- Senior Managers

COUNCIL WORKFORCE PROFILE

	HSCP				Council			
	Female		Male		Female		Male	
	Full-time	Part-time	Full-time	Part-time	Full-time	Part-time	Full-time	Part-time
Permanent	318	328	82	25	1,339	1,873	855	267
Temporary	19	20	4	0	162	477	53	48
	337	348	86	25	1,501	2,350	908	315
Total Emps	796				5,074			
Casuals Paid	277				989			

	HSCP	Council
Wage Bill	£7,578,407	£41,250,572
Cost of Temporary Employees	£353,765	£3,648,275
%age of Wage Bill Spend on Temp Employees	4.7%	8.8%
Cost of Casual Workers	£464,964	£1,343,939
%age of Wage Bill Spend on Casual Workers	6.1%	3.3%
Cost of Agency Workers	£539,928	£621,848
Cost of Non-contractual Overtime	£107,272	£556,276
Cost of Contractual Overtime	£0	£57,337
Cost of Responsibility Allowance	£23,470	£34,985
No. of Responsibility Hours	12,283	22,065

MODERN APPRENTICES	HSCP	Council
New Starts	20	73
Completed	17	53
Secured Job	82%	74%
	<i>(cumulative)</i>	



Key points:

57% of the workforce are over 50 with 5% over 65

86% of our workforce is female.

47% of our workforce are part time

5% of our workforce are temporary (43) a lower proportion to that evident in the wider council (15%)

Voluntary staff turnover reflects that of the wider council at 4%

82% of Modern apprenticeships have secured jobs within the HSCP.

It should be noted that some of the staff are dual employees (holds more than one role) which accounts for any discrepancy in figures

Key points:

NHS Employee data relating to protected characteristics is held in the electronic Employee Support System (e:ESS). For Council it is their workforce management system.

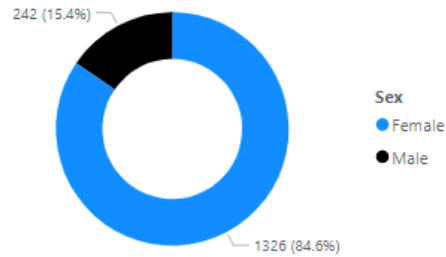
This tables is the NHS information and we are working on an integrated data set

For most protected characteristics (notable exceptions being age and gender), somewhere in the region of 40% of the information is unknown because it has not been provided, either by declining to provide it or because they have not been asked.

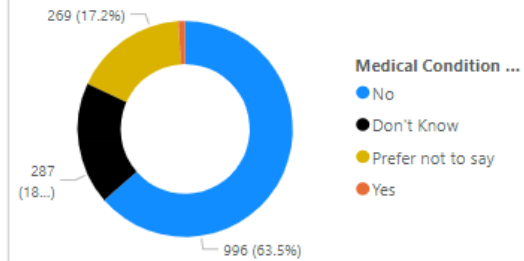
This figure has remained consistent over the last 3 years. The key action, therefore, in relation to our Equalities Duties in respect of employees, is to improve the quality of the employee equalities data we hold. Employee Self Service will allows staff to update their Equalities information.

EQUALITY AND DIVERSITY

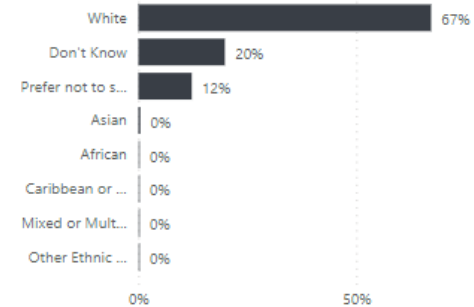
Headcount by Sex



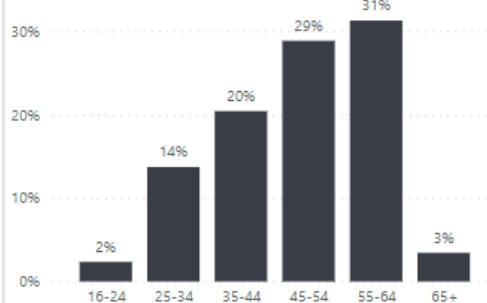
% Headcount by Disability



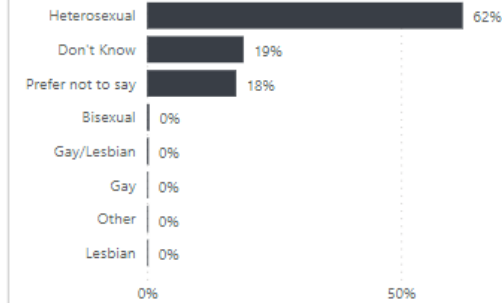
Headcount by Ethnicity



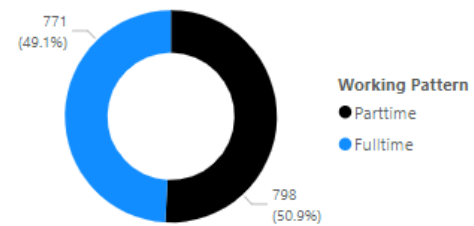
% Headcount by Age Group



% Headcount by Sexual Orientation



Working Pattern



COUNCIL VACANCIES

POSTS	HSCP	Council
No. Advertised	122	460
No. Unfilled	28	92
Average No. of Days to Fill Post	97	94

	Jan 23		Feb 23		Mar 23	
	Internal/RF	External	Internal/RF	External	Internal/RF	External
Adult Services – Health & Community Care	4	9	13	6	5	17
Adult Services – Acute & Complex	1	4		11		8
Children, Families and Justice	4	9	5	4	7	12
Strategy P&P	1					1
HSCP PL3 DIRECTORATE		1				
	10	23	18	21	12	38
Totals	33 (Temp 15) (Perm 18)		39 (Temp 13) (Perm 26)		50 (Temp 14) (Perm 36)	
Overall Total	122					

The Partnerships Workforce planning team have been working together in the production of workforce Planning Output report; which was presented to the various DMTs.

This provides a snapshot of the current risk ratings and updates on existing action plans.

Recruitment is a key strand to this work and will be covered in more detail in the workforce planning reports.

NHS VACANCIES

Vacancies by Division & Job Family

Division	A&B Children Families & Justice	Job Family	Allied Health Professions	Number of Vacancies	
				Count	Sum
				1	1
		Total		1	1
	A&B Older Adults & Hospital Services	Job Family	Administrative Services	8	8
			Allied Health Professions	3	3
			Healthcare Sciences	1	1
			Medical and Dental	2	4
			Nursing and Midwifery	15	17
			Other Therapeutic	5	5
			Personal and Social Care	1	3
			Support Services	7	7
		Total		42	48
	A&B Primary Care	Job Family	Medical and Dental	1	1
			Total	1	1
	Argyll & Bute Central	Job Family	Administrative Services	3	3
			Nursing and Midwifery	1	1
			Total	4	4
	Total	Job Family	Administrative Services	11	11
			Allied Health Professions	4	4
			Healthcare Sciences	1	1
			Medical and Dental	3	5
			Nursing and Midwifery	16	18
			Other Therapeutic	5	5
			Personal and Social Care	1	3
			Support Services	7	7
		Total		48	54

Count is the number of job adverts; sum is the total number of vacancies across those adverts

Developments – Time to Fill

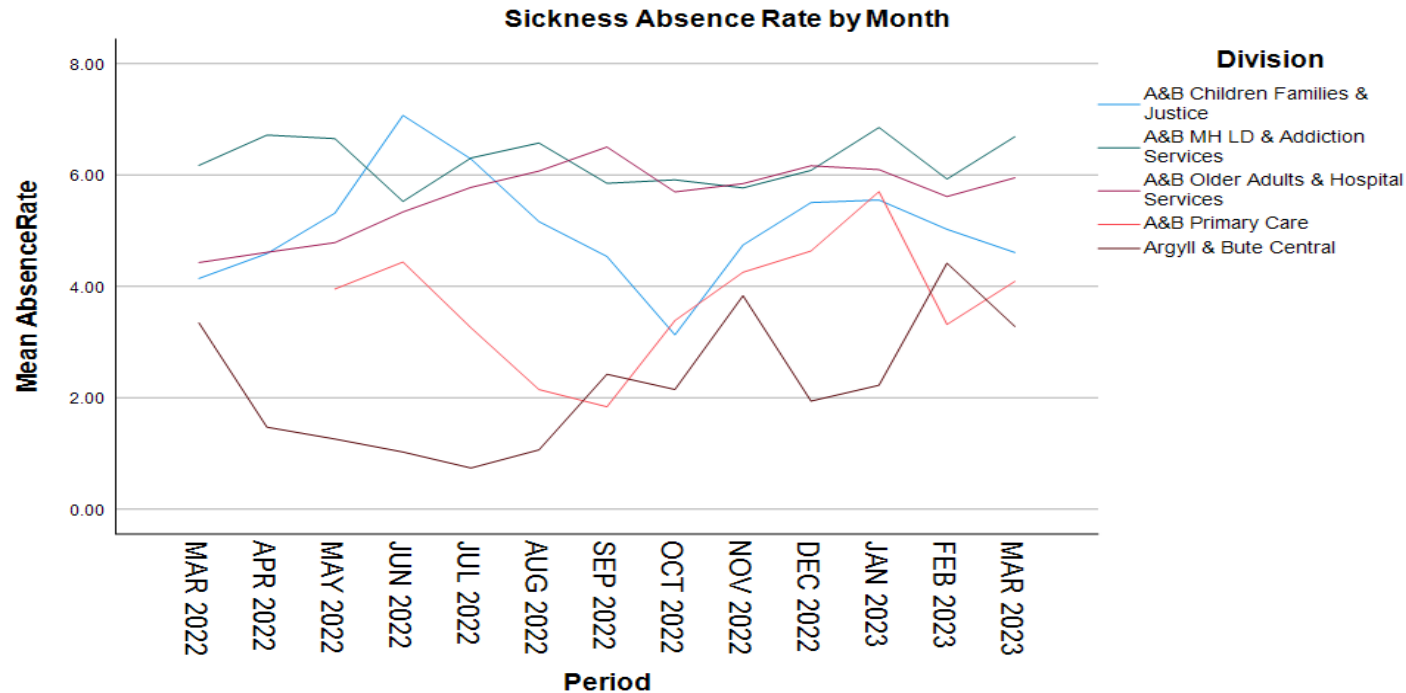
We are currently gathering time to fill data, calculating the days based on job live date and candidate start date.

This time frame is impacted by contractual notice and there is still some work to be done to account for always open adverts

Future reports will include breakdown recruitment by stage and allow for more targeted focus and improvement across the recruitment process.

Action – Initial reporting appears to suggest that the overall total time to fill is greater than that experienced in NHS Highland as a whole and this requires further investigation before more detailed reporting.

NHS SICKNESS ABSENCE



The graph and table below show A&B HSCP Sickness absence across the year. With a slight peak in December and January which was also evident across the wider Board.

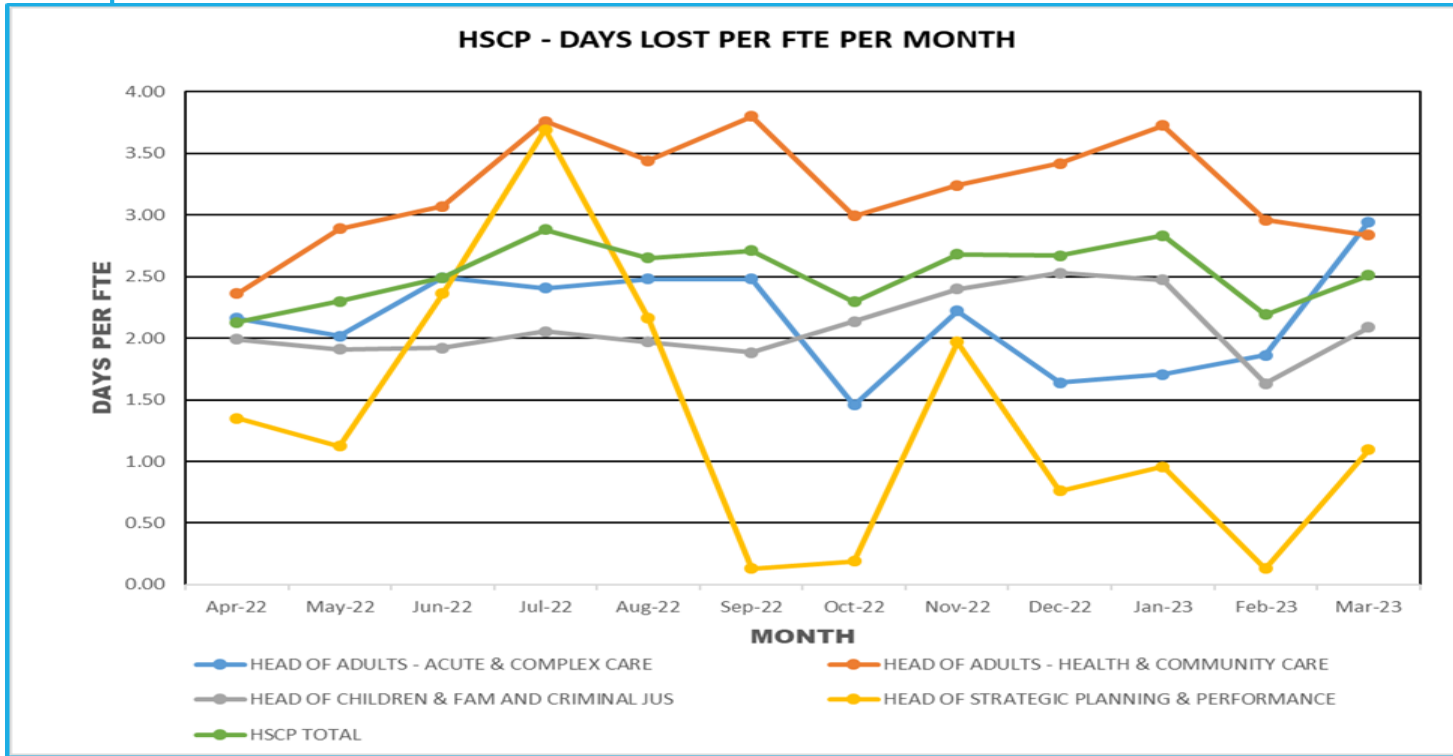
For comparison purposes the HSCP is consistently lower than wider NHS Highland Board. We are still awaiting end of year national figures to compare nationally.

When analysing absence reasons presented from 1st April 22 to 31st March 2023, The most common reason for NHS absence is unknown / not specified even in long term cases. This is not a mandatory field on the system. This is an area of focus going forward to improve data, trend analysis and enable the most appropriate support.

This is being picked up with managers and SLT's.

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Argyll and Bute HSCP												
Argyll and Bute HSCP STS	1.57%	1.50%	1.40%	1.15%	1.16%	1.61%	2.13%	1.61%	1.95%	1.87%	1.63%	1.91%
Argyll and Bute HSCP LTS	2.95%	3.15%	3.56%	4.01%	4.06%	3.71%	3.03%	3.57%	3.68%	4.05%	3.74%	3.19%
Argyll and Bute HSCP Total	4.51%	4.65%	4.96%	5.16%	5.22%	5.31%	5.16%	5.18%	5.63%	5.92%	5.38%	5.11%
NHS Highland Total	4.76%	4.80%	4.90%	4.84%	4.80%	5.70%	5.94%	5.83%	6.45%	6.25%	5.52%	5.90%

COUNCIL SICKNESS ABSENCE



FQ4 displays a relevantly stable picture of absence, similar to FQ3 with an average of 2.55 across the quarter. The Yearly comparison is shown and shows slightly increased absence compared to the same period last year.

Teams are being supported to manage employee health and wellbeing, ensuring leave and breaks are being utilised and return to work are managed effectively.

The recording of RTW discussions is improving and currently has 52% compliance (councils is 45%). However there is still focused attention required to improve this and achieve the HSCP target of all RTW discussions taking place and being recorded on the system.

The work recently undertaken to support completion, and make the process easier for managers appears to be improving the completion rate.

	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23
HSCP TOTAL	2.27	2.13	2.30	2.49	2.88	2.65	2.71	2.30	2.68	2.67	2.83	2.19	2.51

RTW	2022/23 3 FQ1	2022/23 F2	2022/23 FQ3	2022/23 F4
Completed	70	102	95	174
Not completed	94	175	144	158
Total	164	277	239	332
Percentage	42.68%	36.82%	39.75%	52.41%

EMPLOYEE RELATIONS

Summary of activity between 01/04/2022 and 31/03/2023 and comparative end of quarter totals

There is a similar number of ER cases compared to the same period last year and for council staff particularly numbers remain consistently low.

NHS

	Mar-22	Jun-22	Sep-22	Dec-22	Mar-23
B&H	3	4	1	2	1
Disciplinary	1	4	1	2	2
Grievance	2	3	3	4	3
Capability	0	0	0	0	0
Total	6	11	5	8	6

Since the last quarterly report there has been an over all reduction in ER cases. There has been one B&H closed, 1 Disciplinary opened and one closed. There have been 2 grievances closed and one commenced in the period.

Council

	Mar 22	June 22	Sept 22	Dec 22	Mar 23
B&H	0	0	0	0	0
Discipline	2	1	1	1	1
Grievance	1	2	3	2	3
Capability	0	0	0	0	0
Total	3	3	4	3	4

HSCP Council Disciplinary and Grievance cases are consistently low. In Q4 only one disciplinary case is ongoing. There are currently three grievances ongoing. One concluded in February 2023 and a further 2 were received in the Q4 period.

STATUTORY MANDATORY TRAINING

Month	EQUALITY	FIRE_SAFETY	HAND_HYGIENE	INFORMATION_GOVERNANCE	MOVING_HANDLING_MODULE_A	PUBLIC_PROTECTION	VIOLENCE_AGGRESSION	WHY_INFECTION_PREVENTION
April 2022	64%	45%	79%	57%	59%	32%	30%	77%
May 2022	65%	45%	80%	58%	60%	34%	31%	77%
June 2022	65%	46%	80%	58%	60%	36%	32%	77%
July 2022	63%	47%	79%	57%	59%	37%	31%	77%
August 2022	64%	48%	79%	58%	60%	39%	30%	77%
September 2022	64%	48%	79%	58%	60%	39%	30%	77%
October 2022	65%	49%	80%	59%	61%	41%	30%	77%
November 2022	66%	54%	82%	61%	64%	45%	30%	79%
December 2022	66%	54%	82%	62%	64%	46%	33%	80%
January 2023	66%	55%	82%	62%	65%	47%	33%	80%
February 2023	66%	55%	82%	62%	65%	47%	33%	80%
March 2023	68%	58%	83%	65%	64%	52%	34%	80%

Over the course of the year there has been focused attention on statutory mandatory training and while the improvement has only been incremental, there has been improvement across all stat man training.

There is now an established task and finish group discussing Statutory Mandatory training across the board, with a clear commission agreed by EDG for the group composition, scope and outcomes required, to take forward this along with the remaining audit actions.