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## INTRODUCTION

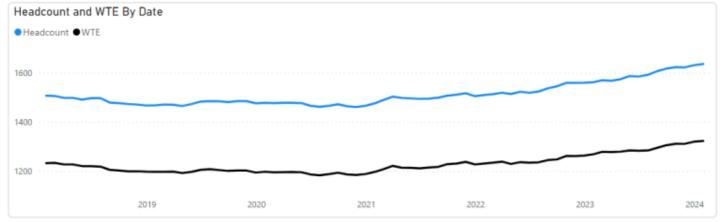
The Workforce Report considers the workforce position as of 31<sup>st</sup> December 2023, providing high level information for A&B HSCP. Some sections may represent an alternative timeline and will be highlighted. Note trend lines represents date range 31<sup>st</sup> January 2018 – 31<sup>st</sup> December 2023.

The report has been developed in partnership with our People Partner 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.

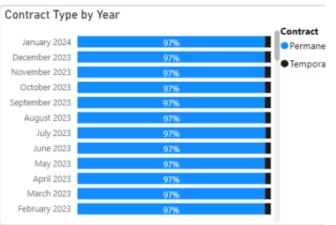
The Workforce Systems Teams proactively assesses data quality based on agreed data quality principles that are part of the data quality framework and addresses data quality issues at source to ensure that our workforce data is of high quality, reliable, and valuable to NHS Highland, and its stakeholders. Work continues on developing integrated (NHS and Council) data sets where possible.

NHS Workforce dashboards are available at Operational levels as well as Job Families and continue to be developed. Council Health of the Organisation (HOO) reports are distributed to each service lead on a quarterly basis and Absence summaries are distributed monthly.

## NHS HEADCOUNT AND WTE



Month Year  ▼	Total Headcount	Last 1 Months % Change	Last 3 Months % Change	Last 12 Months % Change
January 2024	1636	0.31%	0.86%	4.74%
December 2023	1631	0.55%	0.49%	4.55%
November 2023	1622	-0.06%	0.31%	4.04%
October 2023	1623	0.37%	1.00%	4.11%
September 2023	1617	0.62%	1.57%	4.66%
August 2023	1607	0.94%	1.39%	4.55%
July 2023	1592	0.44%	0.32%	4.46%
June 2023	1585	-0.13%	0.70%	4.34%
May 2023	1587	0.83%	1.21%	4.20%
April 2023	1574	0.38%	0.25%	3.96%
March 2023	1568	-0.13%	0.38%	3.23%
February 2023	1570	0.51%	0.64%	3.77%
January 2023	1562	0.13%	0.19%	3.44%



### **Key points:**

4.74% increase of workforce from in the last 12months

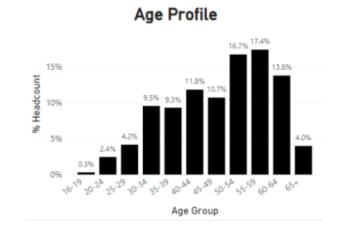
December 2023 in post figure of **1,631** (headcount) of Substantive Staff an increase of 0.86% in the last 3 months

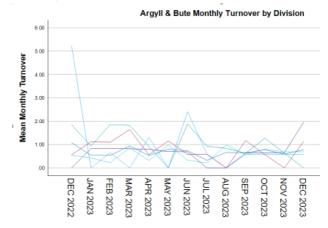
97% of our contacts are permanent and this has been a consistent position since December 2022

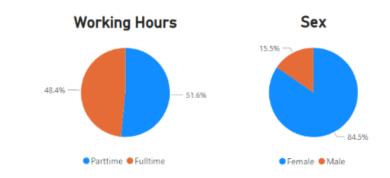
Personal and Social Care
Workforce show an increase of
2% and an increase of 8% in
Nursing since December 2022.

## NHS WORKFORCE PROFILE

Headcount/WTE by	Job Fam	ily 🛭
Job Family	Headcount	WTE
ADMINISTRATIVE SERVICES	297	236.5
ALLIED HEALTH PROFESSION	185	150.5
DENTAL SUPPORT	36	27.5
HEALTHCARE SCIENCES	28	25.1
MEDICAL AND DENTAL	51	29.7
MEDICAL SUPPORT	2	1.2
NURSING/MIDWIFERY	733	611.4
OTHER THERAPEUTIC	57	49.4
PERSONAL AND SOCIAL CARE	51	41.4
SENIOR MANAGERS	1	1.0
SUPPORT SERVICES	206	149.1
Total	1636	1,322.7







### **Key points:**

847 employees are over 50, with 290 over 60 years old (18 % of the workforce) with 65 over 65 (4% of the workforce) an increase in age profile since the last quarter of more than 4%.

84.5% of our workforce is female

51.6% of our workforce are part time a 0.2 decrease since reported in June

59 employees are fixed term an decrease of 1 since last quarter.

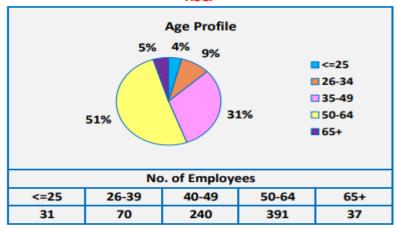
45 employees are under 25 which has increased by 5 since June 2023

**Turnover** remains stable and in line with the Board average. We continue to see leavers relating to retirements.

A&B have had 37 Leavers since September 2023, To date we have only received 4 Exit Feedback Surveys which indicates more awareness and promotion of this process is required

## COUNCIL WORKFORCE PROFILE

HSCP



#### **HSCP**

No. of Employees in Post After 12 Months 555

%age of Temporary Employees Who Left Prior to End of Contract 0%

Voluntary Staff Turnover Rate 2%

	HSCP									
	Fen	nale	M	ale						
	Full-time	Part-time	Full-time	Part-time						
Permanent	317	303	84	32						
Temporary	16	26	2	3						
	333	329	86	35						
Total Emps	783									
Casuals Paid	343									

MODERN APPRENTICES	HSCP	Council
New Starts	20	76
Completed	17	55
Secured Job	82%	73%
	(cumu	lative)

### **Key points:**

- 54% of the workforce are over 50 with
   5% over 65
- 85% of our workforce is female.
- 46% of our workforce are part time
- 5% of our workforce are temporary (47 fixed term)
- Voluntary Turnover rate has reduced from a constant 3% to 2%
- No temporary employees leaving prior to end of contract

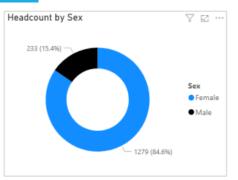
# EQUALITY AND DIVERSITY

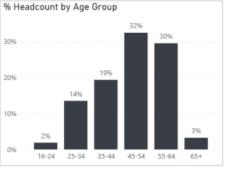
### **Key points:**

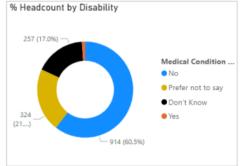
Minor change to the E&D metrics with only an increase of 1 since June extract.

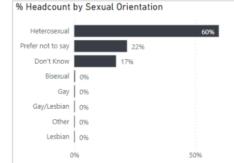
For most protected characteristics (notable exceptions being age and gender), somewhere in the region of 40% of the information is unknown because it has not been provided. This figure has remained consistent over the last 3 years.

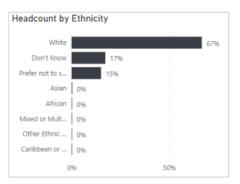
The key action, therefore, in relation to our Equalities Duties in respect of employees, is to improve the quality of the employee equalities data we hold. Employee Self Service will assist this and allows staff to update their Equalities information and a focused exercise is due to commence in quarter 3, encouraging this completion.

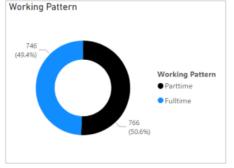












## TIME TO FILL

Time to fill presents a count of days between post added to the recruitment system and the start date of the candidate. The fill period is therefore reliant on timely and accurate data input.

The council posts take an average of 83 days to fill while the NHS average is 210 days. This can be accounted for by a number of factors, or which notice period is just one. There has been incremental improvement over the reporting period with December being the best month on record.

Time to fill is higher in professional positions and high bands which can be attributed to longer notice periods.

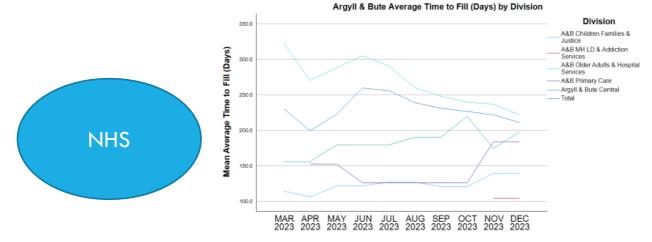
Both recruitment systems have the capability of reporting at each stage of the recruitment process and a Recruitment Metrics is being finalised for future reporting. This will assist in identifying the source of delays.

For comparison the average Board time to fill is 129.18 (as of December 23) days so there is still work to be done to identify and remove barriers to streamline the process. Scotland wide benchmarking is also being sought and will be used for comparison when available.

Council time to fill has also improved this quarter, reducing from 100 – 83 days with an increase in the numbers of vacancies advertised. At the end of December there were 29 positions that remained unfilled



POSTS	HSCP	Council
No. Advertised	115	434
No. Unfilled	29	93
Average No. of Days to Fill Post	83	77



	Average Time to Fill (Days) By Division												
			Division										
		A&B Children Fo	amilies & Justice	A&B MH LD & A	Addiction Services	A&B Older Adults	& Hospital Services	A&B Prin	ary Care	Argyll & B	ute Central	Total	
		Average Time to Fill	Number of Candidates	Average Time to Fill	Number of Candidates	Average Time to Fill	Number of Candidates	Average Time to Fill	Number of Candidates	Average Time to Fill	Number of Candidates	Average Time to Fill	Number of Candidates
		(Days)	Hired										
Period	MAR 2023	114.3	3		0	322.1	7		0	155.8	4	230.1	14
	APR 2023	106.0	4		0	270.3	10	152.5	2	155.8	4	199.2	20
	MAY 2023	121.8	5		0	287.8	14	152.5	2	179.2	5	222.0	26
	JUN 2023	121.8	5		0	304.5	34	126.3	3	179.2	5	259.4	47
	JUL 2023	127.3	4		0	290.8	39	126.3	3	179.2	5	256.0	51
	AUG 2023	127.3	4		0	260.0	48	126.3	3	190.3	4	238.8	59
	SEP 2023	120.7	3		0	248.0	49	126.3	3	190.3	4	230.8	59
	OCT 2023	120.7	3		0	239.4	51	126.3	3	219.7	3	226.4	60
	NOV 2023	139.5	4	104.0	1	236.7	53	183.8	6	174.5	2	221.7	66
	DEC 2023	139.5	4	104.0	1	221.3	61	183.8	6	197.6	5	210.8	77

## HSCP CURRENT VACANCIES

### NHS vacancies

		Total
		Number of Vacancies
	Administrative Services	1
	Allied Health Professions	1
A&B Children Families & Justice	Nursing and Midwifery	7
	Other Therapeutic	1
	Total	10
	Administrative Services	2
	Allied Health Professions	7
A&B MH LD & Addiction Services	Medical and Dental	1
	Nursing and Midwifery	15
	Total	25
	Administrative Services	12
	Allied Health Professions	27
	Healthcare Sciences	2
	Medical and Dental	15
A&B Older Adults & Hospital	Nursing and Midwifery	58
Services	Other Therapeutic	3
	Personal and Social Care	1
	Senior Managers	1
	Support Services	18
	Total	137
	Administrative Services	3
	Dental Support	1
40 D D : C	Medical and Dental	2
A&B Primary Care	Nursing and Midwifery	4
	Other Therapeutic	1
	Total	11
	Administrative Services	3
	Allied Health Professions	1
Argyll & Bute Central	Nursing and Midwifery	2
	Personal and Social Care	7
	Total	13
	Grand Total	196
		1,70

Administrative Services	21
Allied Health Professions	36
Nursing and Midwifery	86
Other Therapeutic	5
Medical and Dental	18
Healthcare Sciences	2
Personal and Social Care	8
Senior Managers	1
Support Services	18
Dental Support	1
Total	196

This slide provides a detailed breakdown of the vacant posts at the end of December.

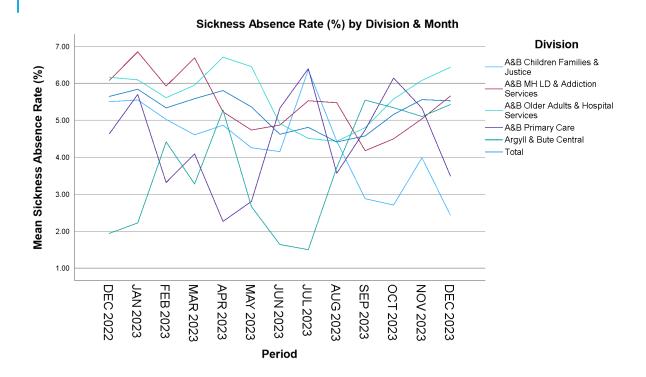
Board wide vacancy monitoring has resumed and there is weekly scrutiny of the posts going out to advert. The HSCP process feeds into this.

Workforce planning meetings also review vacancies and consider skill mix and alternative methods of delivery.

## COUNCIL CURRENT VACANCIES

	Oct-	23	Nov	- <b>23</b>	De	ec-23	
	Internal/RF	External	Internal/RF	External	Internal/RF	External	
Adult Services – Health & Community Care	1	16	1	18	5	5	
Adult Services – Acute & Complex	1	7	1	6		2	
Children, Families and Justice	2	10	1	5		2	
Strategy P&P						1	
HSCP PL3 DIRECTORATE						2	
	4	33	3	29	5	12	
Totals	37		37	2	17		
	(Tem (Perm		(Tem (Pern	np 5) n 27)	(Temp 5) (Perm 12)		
Overall Total				86			

## NHS SICKNESS ABSENCE



	Jan	Feb	Mar	April	May	June	Jul	Aug	Sep	Oct	Nov	Dec
Argyll and Bute HSCP Total	5.8%	5.3%	5.6%	5.8%	5.4%	4.6%	4.8%	4.4%	4.4%	4.9%	5.1%	5.53%
NHS Highland Total	6.6%	5.6%	6.5%	6.1%	6.0%	6.0%	6.2%	5.5%	6.7%	6.7%	6.6%	6.5%
NHS Scotland Average	6.8%	6.9%	5.6%	6.3%	5.9%	5.8%	5.8%	6.3%	5.9%	6.05%	6.45%	ТВС

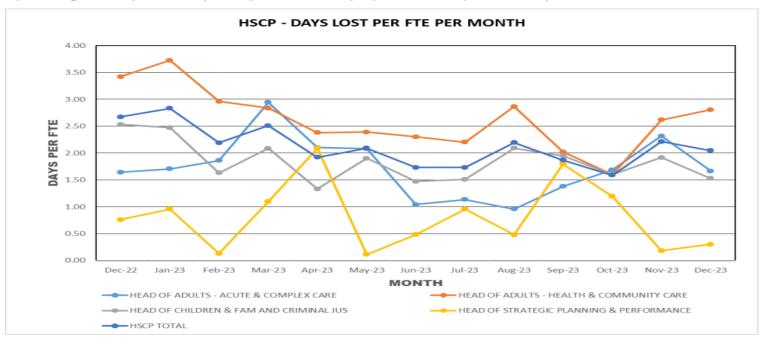
The graph presents absence rates across our AB Divisions.

The table presents the average absence based on the AB Division rates and a comparison against NHSH absence rate overall and the NHS Scotland national average per month.

Absence rates during the winter period October – December are lower than 2022.

A&B is in the main consistently lower than the highland wide and National average. We await national average rates for December 2023.

## COUNCIL SICKNESS ABSENCE



The graph and table below show A&B Council Sickness absence across the year

Q3 has seen similar sickness absence levels when compared to last quarter and an improvement when compared to the same period last year.

June July and October levels are the months with the lowest recorded absence and correspond with the common / school holiday periods

	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23
HEAD OF ADULTS - ACUTE & COMPLEX CARE	1.64	1.70	1.86	2.94	2.10	2.08	1.04	1.13	0.95	1.38	1.68	2.32	1.66
HEAD OF ADULTS - HEALTH & COMMUNITY CARE	3.42	3.73	2.96	2.84	2.38	2.39	2.30	2.20	2.86	2.02	1.60	2.61	2.80
HEAD OF CHILDREN & FAM AND CRIMINAL JUS	2.53	2.47	1.63	2.09	1.33	1.90	1.47	1.51	2.09	1.95	1.60	1.92	1.53
HEAD OF STRATEGIC PLANNING & PERFORMANCE	0.76	0.96	0.13	1.10	2.09	0.11	0.48	0.96	0.48	1.79	1.19	0.18	0.30
HSCP TOTAL	2.67	2.83	2.19	2.51	1.92	2.09	1.73	1.73	2.19	1.87	1.58	2.21	2.04

## NHS SICKNESS ABSENCE REASONS

Absence Reason % for 12-month period up to most recent period shown for absence rates

Absence reasons presented from absence for 12 month period as at 31st December 2023.

Absences with an unknown cause/not specified remaining high (accounting for around 31.83%). Managers continue to be asked to ensure that an appropriate reason is recorded and continuously updated. System solutions and prompts are also being investigated.

Manger attendance remains low on Once for Scotland courses Reports are now distributed to SLTs, via the People Partners to demonstrate attendance at the Once for Scotland courses, both online and eLearning.

For committee purposes absence reason is reported at HSCP level. Heads of Services receive their own divisional information.

The remaining top 3 reasons for absence are:

- 1)gastro-intestinal
- 2)cold, cough, flu
- 3) Anxiety/stress/depression/other

Covid absence is increasing Board wide and spread 5.24% of our absences.

## **COUNCIL SICKNESS REASONS & RTW**

Top 3 reasons for absence	Long Term	Short Term
	Stress/Depression/Mental Health/Fatigue	Stress/Depression/Mental Health/Fatigue
HSCP	Back & Neck Problems	Infections
	Medical Treatment	Stomach, Liver, Kidney & Digestion

Previous Months Total for Comparsion	No of RTWI completed	No of RTWI not completed	RTWI %	Average Time taken to complete (Days)
MAY 2023	38	48	44%	7
JUNE 2023	26	35	43%	3
JULY 2023	30	39	43%	9
AUGUST 2023	25	53	32%	6
SEPTEMBER 2023	33	47	41%	5
OCTOBER 2023	34	38	47%	5
NOVEMBER 2023	44	69	39%	6
DECEMBER 2023	34	57	37%	15
Average since May 2023	33	48	41%	7

### **Absence Reasons**

Similar to the national absence profile Stress /Depression /Mental Health remains the top reasons for absence this quarter in both short and long term categories. Back /neck and medical treatments are the 2nd and 3rd top reason for long term absence.

### RTW

RTW completion is consistently reducing despite monthly reminders and this is replicated across the council. The average for Council staff in HSCP is 41% and there is a 43% completion rate evident across the council.

HR have resumed attendance at service management meetings to promote the completion and resolve any outstanding barriers to completion.

RTW conversations are an extremely important part of the absence management process and there is a commitment for them to take place within 3 days of return.

## EMPLOYEE RELATIONS

Summary of activity between 1<sup>st</sup> October and 31<sup>st</sup> December 2023.

Highlights comparative end of quarter totals.

### NHS

						Jun-		
	Mar-22	Jun-22	Sep-22	Dec-22	Mar-23	23	Sept 23	Dec 23
DAW	3	4	1	2	1	2	8	9
Disciplinary	1	4	1	2	2	2	2	1
Grievance	2	3	3	4	3	4	3	4
Capability	0	0	0	0	0	0	0	0
Total	6	11	5	8	6	8	13	14

Since the last quarterly report there has been 2 cases opened (one Dignity at work and one grievance) with one disciplinary concluded. As detailed in previous reports a few of the DAW cases are group cases which in some way accounts for the higher numbers in this area.

### Council

	Mar-22	Jun-22	Sep-22	Dec-22	Mar-23	Jun-23	Dec 23
B&H	0	0	0	0	0	0	0
Discipline	2	1	1	1	1	0	1
Grievance	1	2	3	2	3	2	0
Capability	0	0	0	0	0	0	0
Total	3	3	4	3	4	2	1

HSCP Council Disciplinary and Grievance cases are consistently low. In Q3 there was only one disciplinary

## REDEPLOYMENT

As of the 31<sup>st</sup> December there were 31 employees on the redeployment register, a reduction of 2 since 30<sup>th</sup> September with 33 employees.

22 of 31 individuals are retained on the register due to their pay protection status. This individuals are in roles but have a protection element.

The protections sit across bands 2 in Support Services and Bands 3 in Nursing.

The 'other' category may include:

- Breakdown in working relationships
- · End of Employment Break
- Injury at Work

All NHS vacancies are considered for redeployment as they arise. Redeployment staff continue to work in partnership with managers, employees and staff side colleagues to secure permanent or fixed term opportunities for staff on the redeployment register.

	Grievance			
JobFamily andBand	outcome	Pay Protection	Other	Grand Total
ADMINISTRATIVE SERVICES		3		3
Band 3.		2		2
Band 4.		1		1
ALLIED HEALTH PROFESSION		1		1
Band 3.		1		1
NURSING/MIDWIFERY	1	8		9
Band 3.	1	7		8
Band 6.		1		1
OTHER THERAPEUTIC		1		1
Band 2.		1		1
SUPPORT SERVICES		9	8	1 <i>7</i>
Band 1.		3		3
Band 2.		4	5	9
Band 4.		1	3	4
Band 6.		1		1
Grand Total	1	22	8	31

## MANDATORY TRAINING

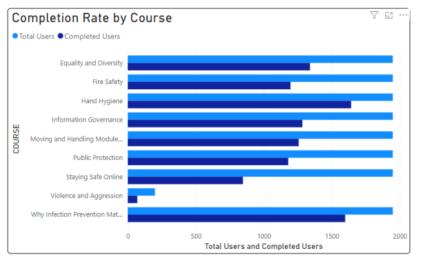
AB report a Mandatory Training completion rate of 66% overall, an increase since August where 63.97% was reported

Over the course of the year there has been focused attention on statutory mandatory training resulting in incremental improvement across all stat man training.

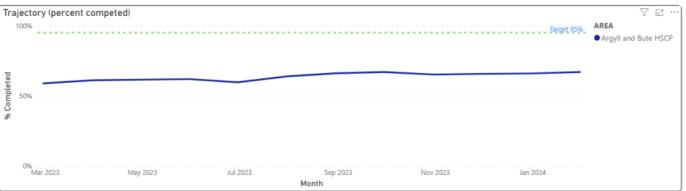
There remains low levels of compliance in Staying Safe Online elearn for Violence and Aggression which is for those who are not in public facing roles. Anyone in a public facing roles receive mandatory practical training on both violence and aggression and moving and handling

There is now an established Statutory Mandatory monitoring and training implementation programs across the board, with focused attention on improvement through chief officers and HOS. This includes a 6-month improvement plan with targets for RAG rating, which require to be met by all services in each month.

With this in place it is anticipated that Board wide the 95% compliance target will be achieved and thereafter maintained.



Completion Rate for all Courses Dec-2023							
Course	Current Completion Rate						
Equality and Diversity	68.8%						
Fire Safety	61.4%						
Hand Hygiene	84.3%						
Information Governance	65.9%						
Moving and Handling Module A	64.5%						
Public Protection	60.5%						
Staying Safe Online	43.5%						
Violence and Aggression	35.0%						
Why Infection Prevention Matters	82.0%						
Total	66.0%						



Month	Equality and Diversity	Fire Safety	Hand Hygiene	Information Governance	Moving and Handling Module A	Public Protection	Staying Safe Online	Violence and Aggression	Why Infection Prevention Matters
February 2023	66%	55%	82%	62%	65%	47%	15%	33%	80%
March 2023	68%	58%	83%	65%	64%	52%	21%	34%	80%
April 2023	67%	58%	83%	65%	63%	53%	25%	34%	81%
May 2023	68%	58%	84%	65%	61%	54%	28%	34%	81%
June 2023	68%	59%		66%	62%	54%	30%	36%	82%
July 2023	68%	60%	85%	66%	62%	57%	33%	39%	82%
August 2023	68%	60%	84%	66%	62%	57%	33%	39%	82%
September 2023	68%	60%	85%	66%	63%	58%	38%	38%	82%
October 2023	68%	60%	85%	65%	64%	59%	40%	36%	82%
November 2023	69%	60%	85%	66%	64%	60%	42%	35%	82%
December 2023	69%	61%	84%	66%	64%	61%	43%	35%	82%

# MANDATORY TRAINING (COUNCIL)

The table attached details the mandatory training carried out this quarter and the overall compliance rate.

Similar to the NHS compliance there is varying degrees of compliance.

The Council have been working on a new process on the training management system LEON to make it easier for employees to stay on top of their mandatory training.

LEON now notifies employees when their training is due and sends them and their managers reminders. This is the first time this has been in place for council employees and it is hoped it will improve the overall compliance rates going forward.

Mandatory course	Number of HSCP employees completed course prior to Q3	As a percentage of the HSCP total workforce	Number completed in FQ 3	As a percentage of the HSCP total workforce who completed in FQ 3	Total Completion rate
E&D	268	35%	0	0%	35%
Data Protection	539	71%	0	0%	71%
Fire Safety Awareness	703	92%	45	6%	98%
Freedom of information	466	61%	38	5%	66%
PREVENT	184	24%	0	0%	24%
Positive Customer Care	440	58%	37	5%	62%
		TOTAL	120	•	

HSCP total workforce end Q3

763