

BOARD REPORT SUMMARY SHEET

Meeting: Date:	Trust Board Thursday 26 th September 2019
Title:	HROD Trust Board Report
Lead Director:	Vivienne Toal Director of Human Resources & Organisational Development
Purpose:	For Approval
<p><u>Key strategic aims:</u></p> <p>The report provides a high level summary and update on some of the results and key themes coming out of the regional 2019 HSC Staff Survey, which demonstrates how we are meeting the Trust's strategic aim of 'Being a great place to work, valuing and supporting our people'.</p> <p>The report also outlines key productivity information including sickness absence, turnover and skills mix, and also shows detail of staffing levels, flexible workforce costs, posts approved & agency/bank usage.</p>	
<p><u>Key issues/risks for discussion:</u></p> <p>Section 1 – Regional 2019 HSC Staff Survey - Key points to note:</p> <ul style="list-style-type: none"> • As part of the Regional HSC Staff Survey, a survey of all Trust staff members was conducted between March and April 2019. 25% of Trust staff responded, compared with 21% in 2015. • At this stage survey results have not yet been shared or publicised within HSC organisations, as the Department of Health have asked for the opportunity to share regional results first. The Trust Staff Survey report has only recently been issued and therefore further analysis is required on feedback from staff across the different directorates and professional groups. • The Trust overall staff engagement score on a scale of 1-5 (where a higher score is better) was 3.78. Although this is the same score as the HSCNI average it is slightly lower than the 2015 score of 3.81 and the highest Trust scoring of 3.87. 	

- There are a number of positive results to recognise and build on:
 - Support and encouragement staff get from their immediate line manager.
 - Recognition that the organisation take positive action on their health and wellbeing.
 - Positive results regarding the reporting of any errors, near misses and incidents and the organisation encouraging staff to report these. Also 98% of staff recognise their responsibility to raise concerns.
 - Responses relating to training, learning and development and performance appraisals.
- There are also a number of opportunities for workplace improvement:
 - Staff involvement – there has been a decline in the percentage of staff agreeing they are involved in changes that affect them (45%) and in their ability to make improvements happen (48%).
 - Recognising and valuing staff – only 49% of staff are satisfied with the recognition or praise they get and less than half are satisfied that the organisation values their work. 36% of staff often think about leaving the organisation with the highest scoring reason (60%) relating to being valued for their work.
 - Senior managers – a low percentage of staff feel senior managers act on staff feedback and involve them in important decisions. Only 34% feel communication with senior managers is effective.
 - Violence, harassment, bullying and abuse at work - There is an increasing trend in the number of staff experiencing this.
 - Patient / service user experience feedback – while a large percentage of staff (80%) agree this is collated only 57% receive regular updates on this feedback.
- Key themes coming out of the staff survey include:
 - Communication and engagement / staff voice
 - Valuing and recognising our staff
 - Visible leadership
 - Health and wellbeing
- Next steps include:
 - Further analysis of the results broken down by directorate and professional group.
 - Engaging with staff on the results, things going well and opportunities for improvement, and focusing on how together we can bring about improvements across the Trust on a focused number of key areas.

Section 2 – Workforce Information - Key points to note:

- The Trust's cumulative sickness absence rate for 2019/20 year to date is 5.00%, which is slightly lower than the figure of 5.06% for the same period last year (ie April – July), and lower than the 2018/19 cumulative figure of 5.35%.
- The Staff in Post figure as at 31 July 2019 shows an increase of 17.13 WTE since 31 March 2019, and an increase of 192.82 WTE in comparison with the baseline figure for 31 March 2018.
- The flexible costs for 2019/20 have increased by an average of just over £2.1m per month compared to 2017/18 figures, and by over £850K per month when compared with 2018/19.
- The Total Year to Date Flexible Workforce Cost as a % of the Year to Date Total Salary Bill as at 31 July is 13.53%.

Summary of SMT discussion:

SMT agreed a full meeting in October would be dedicated to drilling down into staff survey results and considering the key themes that as a Trust we need to focus on over the next 2 year period in line with the development of the Workforce & OD Strategy development. Whilst there were a number of improvements, there were a number of disappointing results which will require a concentrated focus in collaboration with our staff teams. It was agreed that a number of external factors were also inevitably impacting on how staff were feeling at work e.g. pay, workforce pressures, vacancies etc.

Discussion on AFC pay negotiations and potential for industrial action.

Human Rights/Equality:

N/A

Trust Board Report

Human Resources & Organisational Development (HROD) Directorate

Version	1
Presented to Board of Directors	Thursday 26 th September 2019
Authors of report	<ul style="list-style-type: none">• Maxine Williamson, Deputy HR Director (Workforce and OD)• Karen Anderson, Head of Workforce Information• Iain Gough, Head of Resourcing
Presented by	Vivienne Toal, Director of HROD

INTRODUCTION & PURPOSE

Section 1 this month provides a high level summary and update on some of the results and key themes coming out of the regional 2019 HSC Staff Survey.

Sections 2-3 of the report provides workforce productivity information (turnover, sick leave etc).

SECTION 1 - Regional 2019 HSC Staff Survey Results

1.1. Context

As part of the Regional HSC Staff Survey, a survey of all Trust staff members was conducted between March and April 2019. The survey was designed in partnership with the Department of Health, HSC Organisations and Trade Unions and will be facilitated by the Northern Ireland Statistics & Research Agency (NISRA).

This was our fourth staff survey and was part of our continued efforts to engage with our staff to improve their working lives and in doing so provide better care for our patients and clients. It was administered both online and by paper.

Survey results have not yet been shared or publicised within HSC organisations, as the Department of Health have asked for the opportunity to share regional results first.

1.2 Survey Results

Response Rate

Out of 12,802 staff invited to participate 3,167 or **25%** responded. This is an improvement on our response rate of 21% in 2015.

Key headlines

- 6 out of 10 staff (60%) would recommend the organisation as a place to work (compared to 67% in 2015)
- 68% would be happy with the standard of care provided by the organisation if a friend or relative needed treatment (compared to 71% in 2015)
- 8 out of 10 staff (83%) are satisfied with the quality of care they give to patients / service users (compared to 87% in 2015)
- 65% are able to deliver the care they aspire to (compared to 69% in 2015)
- 68% are able to make suggestions to improve the work of their team/department (compared to 70% in 2015)
- 26% of staff witnessed potentially harmful errors, near misses or incidents within the last month (compared to 21% in 2015)

All these results compare slightly less favourably to the 2015 staff survey results, however are closely aligned to the regional HSC average scores.

Staff Engagement

In both the 2015 and 2019 survey there is a 'Staff Engagement' score. NHS Employers specify that 'engaged staff think and act in a positive way about the work they do, the people they work with and the organisation they work in' (NHS Employers, 2013)

On a scale of 1-5 where the higher score is better, the Trust had an overall engagement score of **3.78**. This score is slightly below the Trust score of 3.81 in 2015. It was the same as the HSCNI average, however was lower than the highest scoring Trust of 3.87. Only 53% recognised HSC as a great place to work, which was a new question for the 2019 survey.

Key strengths to maintain or enhance

Job satisfaction

There has been an increase in the results from the 2015 survey in relation to how satisfied staff are with the support they get from their immediate manager (67% +1%) and from their work colleagues (82% +5%).

The manager

Questions relating to staff immediate managers scored positively across a number of areas.

- 75% agree that their manager encourages them and others to work as a team which has decreased slightly by 1% from 76% in 2015.
- 71% agree their manager can be counted on to help with a difficult task at work and 75% feel their manager is supportive in a personal crisis.
- However, although 64% feel their manager takes a positive interest in their health and wellbeing this has dropped by 17% from 81% in 2015. Although it should be noted that 87% of staff agree the organisation takes positive action on health and well-being, an increase of 4% (83%) from 2015 survey results.

Health and wellbeing

The Trust is committed to maintaining and improving the health and wellbeing of all staff from induction through to retirement and has developed a Health and Wellbeing Strategy to help the Trust achieve this over the next 3 years. Despite the considerable work and progress to date, some figures from the 2019 survey in relation to health and wellbeing have declined. Despite 87% of staff agreeing the organisation takes positive

action on health and wellbeing, results regarding advice on key health and wellbeing issues such as diet, exercise and mental health and wellbeing etc. are slightly less favourable to the 2015 results. However Trust results in these areas are higher than the HSC regional average.

It is positive to note that the percentage of staff working additional paid and unpaid hours per week has significantly decreased; by 12% to 35% regarding additional paid hours and by 21% to 51% for additional unpaid hours. Also 70% of staff now feel the organisation is committed to helping staff balance home and work life, which is a 25% improvement on the 2015 staff survey results.

Teamwork

73% of staff agree their team has a set of shared objectives, with 84% also agreeing they have to communicate closely with each other to achieve these objectives. However, only 59% agree that the team meets often to discuss the team's effectiveness. This is disappointing as evidence (Prof M West) has found that teams that regularly take time out to reflect on their objectives, strategies, processes, ideas for innovation etc., are not only much more productive but also more innovative than teams that don't.

Health and safety / reporting errors, near misses and incidents

Questions related to errors, near misses or incidents have remained fairly static from the 2015 staff survey. It is positive to see that 92% of staff did report any they seen and 84% agree the organisation encourages them to report these. However, disappointingly only 45% feel the organisation treats staff who are involved in an error, near miss or incident fairly and only 54% agree the organisation gives feedback about changes made in response to these.

Although 88% of staff know to report concerns about negligence, unsafe clinical or professional practice and 98% understand their responsibility to raise concerns, only 62% have the confidence to do so and 55% have confidence in the organisation to address their concern. These results are closely in line with HSC regional averages.

Training, learning and development and performance appraisals

Responses relating to training, learning and development received very positive feedback with significant improvements being made since the 2015 staff survey. 74% of staff have had an appraisal or development review in the last 12 months which is 3% higher than the HSC regional average and 7% higher than responses in the 2015 staff survey.

Key opportunities for workplace improvement

Staff involvement

There was a significant decrease in the responses to two questions associated with this section of the survey:

- I am involved in deciding on changes introduced that affect my work area / team / department (45%) dropping by 7% from 52%
- I am able to make improvements happen in my area of work (48%) dropping by 12% from 60%

Job satisfaction

Although there are some good results in this section of the survey only 49% of staff are satisfied with the recognition or praise they get for good work (which has remained the same from 2015 survey results). The results have also decreased slightly since 2015 (by 1%) with only 42% of staff satisfied that the organisation values their work which is also less than the HSC average of 43%.

Staff retention

Disappointingly 36% of staff often think about leaving the Trust which compares slightly less favourably to the regional average of 35% and 29% in 2015. Of those considering leaving the highest scoring reason was 'not being valued for their work' (60%) followed by 'would like more pay' (46%) and 'career development' (33%).

Senior managers

Results on the relationship staff have with senior managers is poor and compares less favourable to 2015 survey results. While the response on effective communication between senior management and staff remains the same at 34%, only 27% of staff who responded to the survey now feel senior managers in their area of work act on their feedback (compared to 43% in 2015). Also only 27% of staff feel senior managers try to involve them in important decisions (compared to 34% in 2015). These results are in line with the HSC regional averages.

Health and wellbeing

Significantly more staff also indicate that they have been injured or felt unwell as a result of musculoskeletal problems (MSK) (31% an increase of 16% from 2015) or work related stress (32% an increase of 14% from 2015).

Violence, harassment, bullying and abuse at work

Unfortunately results show a significant increase (by 11%) in the percentage of staff experiencing harassment, bullying and abuse at work from patients/service users, their relatives or other members of the public (35%). There is also a similar trend in staff experiencing this from managers/team leaders (15%) and other colleagues (19%). This is disappointing despite actions following the 2015 staff survey. Also disappointingly only 55% of staff did report it.

However, positively there has been a significant increase (between 18% - 28% on a range of questions) from the 2015 survey results in the percentage of staff who feel the organisation will take effective action in these circumstances. It is interesting why only 55% reported these cases, if confidence in the organisation to take action has improved.

Patient / service user experience measures

While 80% of staff agree that patient / service user experience feedback is collated within their directorate/department (an increase of 5% since 2015) only 57% receive regular updates on this feedback. This is slightly lower than the 2015 response (by 3%) and 1% less than the regional average. This could be a reason why only 61% agree that this feedback is used to make informed decisions in their service area.

1.3 Key themes

Overall Trust survey results are in general in line with the HSC regional average results. However despite some of the improvements and actions following the 2015 staff survey some of the same themes remain, which therefore need considered further. It should be recognised there have been a number of improvements across a number of areas; some of which include:

- commitment to staff achieving a work life balance;
- action taken by the organisation in relation to attacks on staff and bullying and harassment and
- learning and development.

Some examples of the things we did in response to feedback in 2015 included:

- Delivery of a range of skills development programmes e.g. Dealing with Difficult Situations, Appraisal Skills for Managers, Every Conversation Matters, 5 Fundamentals of Civility Model.
- Formal and informal senior management team leadership visits
- Team Talk/Time out for teams further embedded
- Staff Health & Wellbeing Strategy and 'U-Matter' Staff Health and Wellbeing portal launched.

Although feedback in some areas has improved or remained the same there are a number of key themes coming out from the survey. Some of the broader themes may be attributing factors to some of the disappointing results in key areas.

- **Communication and engagement / staff voice** – lower percentages of staff agreed the organisation gives feedback to them on lessons learned (re errors, near misses, incidents etc.) and on patient/service user feedback. This may be impacting on staff confidence to speak up or have confidence that the organisation would address their concerns. A lower percentage of staff also now feel less involved in changes affecting them and less able to make improvements happen. This may also be impacted by the number of teams taking time out to discuss their team's effectiveness.

Also how we communicate with staff is important to consider as feedback from the survey suggests the main ways staff want to receive information about the organisation is through team meetings, line managers and the Trust intranet.

- **Recognising and valuing our staff** – in general it appears staff do not feel valued which may be impacting on their intention to leave and recommending the organisation as a great place to work. This may also be related to not feeling senior managers involve them in decision making and action on their feedback. There is also less than half of staff satisfied with recognition or praise they get.
- **Visible leadership** – despite the renewed emphasis on leadership visits following the 2015 staff survey, current results regarding communication and engagement with senior managers is poor. This needs to be explored further to understand how this can be improved, with consideration given to a different maybe more informal approach.
- **Health and wellbeing** – feedback regarding health and well-being needs to be given further consideration. Despite the work done to date some results are disappointing and it is worrying there is a 14% increase in work related stress. Also the increasing trend in the harassment, bullying or abuse experienced by staff has increased since the last survey. This behaviour, particularly from managers / team leaders and other colleagues is disappointing in light of the Trust wide programme designed after the last survey to reinforce respectful and civil behaviour based on 'fundamentals of civility' model.

1.4 Next steps

- Further analysis is required on the results broken down by directorate and personnel area, in order to build a better picture of the key themes and opportunities for workplace improvement within specific teams or with specific staff groups. The Trust Staff Survey results are to be shared and discussed with directorates.
- Communicate and engage with staff on the results and how we can improve their working lives, making the Trust a great place to work. 'The Big Conversation' workshops with staff are being planned and will be held across Trust sites. The aim will be to share survey results, get feedback from them on key themes and identify improvements that will positively impact on them. These workshops should provide an opportunity for open dialogue with staff, moving away from a 'you said' 'we did' mentality, to a more collective leadership approach where we all work together to address concerns. We want staff at all levels to be involved and identify where and how they can help and support the Trust to make the changes required.
- Actions going forward need to focus on what on what needs to be different and also encourage focus on what needs to stay the same.

SECTION 2

2. Workforce Productivity Information

2.1 - Workforce Information – Monthly Trend Information

Workforce Information Area	2016/2017 Baseline Information (31 Mar 2017)	2017/2018 Baseline Information (31 Mar 2018)	2018/2019 Baseline Information (31 Mar 2019)	2019/2020 – Monthly Trend Information												
				HRPTS Figures												
				Apr 2019	May 2019	Jun 2019	Jul 2019	Aug 2019	Sep 2019	Oct 2019	Nov 2019	Dec 2019	Jan 2020	Feb 2020	Mar 2020	
Turnover (permanent staff only)	8.3%	7.9%	8.5%	8.5%	8.6%	9.0%	9.0%									
Administrative & Clerical Staffing Levels	17.6%	17.3%	16.8%	16.9%	16.9%	17.0%	16.9%									
Skills Mix – Nursing & Midwifery	79:21	79:21	79.21	-	-	79:21	-									
Skills Mix - Allied Health Professional (AHP)	88:12	88:12	85.15	-	-	85:15	-									
Sickness Absence	4.91%	5.11%	5.35%	4.98%	4.96%	5.13%	4.96%									

The Trust's Internal Sickness Absence Target for 2018/19 was 4.93% - 2019/20 target still to be agreed.
The above absence figures do not include Domiciliary Care Workers.

Key Observations:

- **Turnover (permanent staff only)** – the turnover rate has increased to 9.0% during June and July 2019 which is higher than the baseline position of 8.5% as at 31 March 2019.
- **Administrative & Clerical Staffing Levels** – the % admin & clerical rate is 16.9% and is slightly higher than the March 2019 baseline position of 16.8%.
- **Nursing & Midwifery Skill Mix** – the Nursing & Midwifery skill mix remains consistent at 79:21 as at June 2019 compared to the March 2019 baseline position.
- **AHP Skill Mix** – the AHP skill mix as at June 2019 remains consistent at 85:15 compared to the March 2019 baseline position.
- **Sickness Absence** – the monthly sickness absence rate is 4.96% in July 2019 which is significantly lower than the March 2019 baseline of 5.35%. The cumulative 2019/20 sickness absence as at July 2019 is 5.00% which is slightly lower than 5.06% for the same period last year (ie April – July 2018).

Please note the following in relation to figures from HRPTS:

Some Domiciliary Care workers are reported as zero hours, including those with contracted hours on fortnightly pay. Similarly, some GP Out of Hours Medical Staff who previously had a number of hours recorded are now recorded as zero hours.

2.2 - Regional HSC and CIPD Benchmark Information

- Regional HSC Sickness Absence information for 2019/20 year to date is provided below (with the exception of WHSCT and BHSCT who have not yet submitted their figures). Figures indicate that the Southern Trust has the lowest level of cumulative sickness absence as at July 2019.

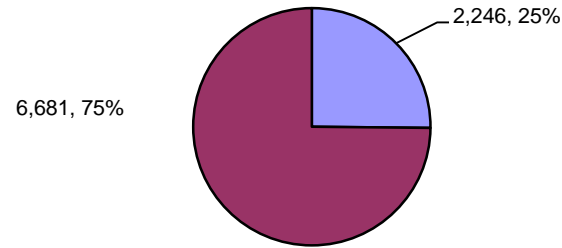
Trust	Cumulative 2019/20 % Hours Lost (YTD July 2019)
Northern Trust	6.67%
South Eastern Trust	5.80%
Southern Trust	5.00%
Belfast	N/A
Western Trust	N/A

- CIPD Health & Wellbeing at Work Survey 2019:
Public Sector (Health) % Working Time Lost – 4.2%, Average Days Lost Per Year – 9.7
SHSCT % Hours Lost (Cumulative 2019/20 YTD as at July 2019) – 5.00%, Average Days Lost Per Year (2018/19) - 13.95
- The CIPD Resourcing & Talent Survey 2017
Overall Turnover Rate – 16.50% (Public Sector Rate - Turnover rates have not been included in the most recent CIPD survey due to a lack of turnover data being provided by respondents, however the 2013 report indicated a rate of 9.40% for Public Sector)
SHSCT Rate (rolling year as at July 2019) – 9.0%

2.3 - Long and Short Term Sickness

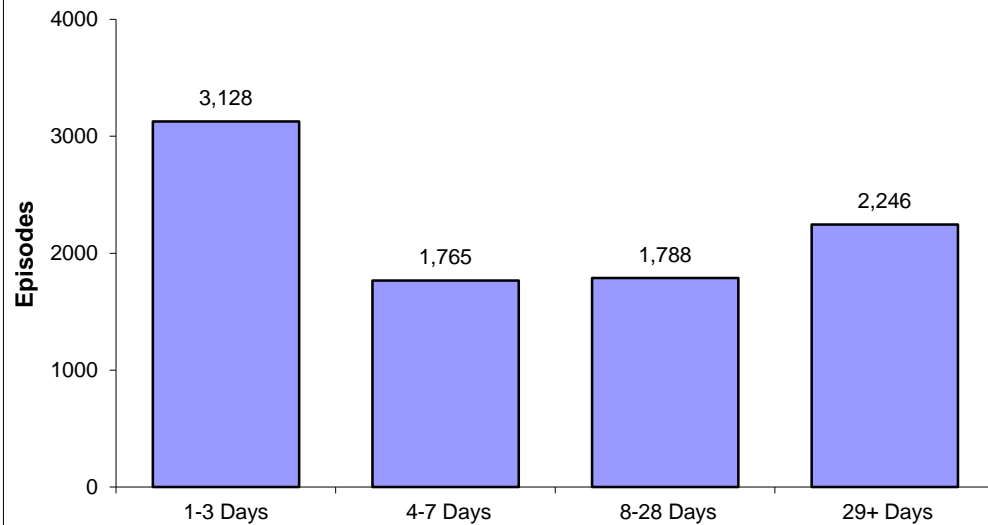
Trust Long and Short Term Sickness Absence Summary – 1 August 2018 – 31 July 2019

Number of Episodes of Long Term/Short Term Sickness
August 2018 - July 2019
 (excluding Domiciliary Care Workers & GP Out of Hours Medical Staff)

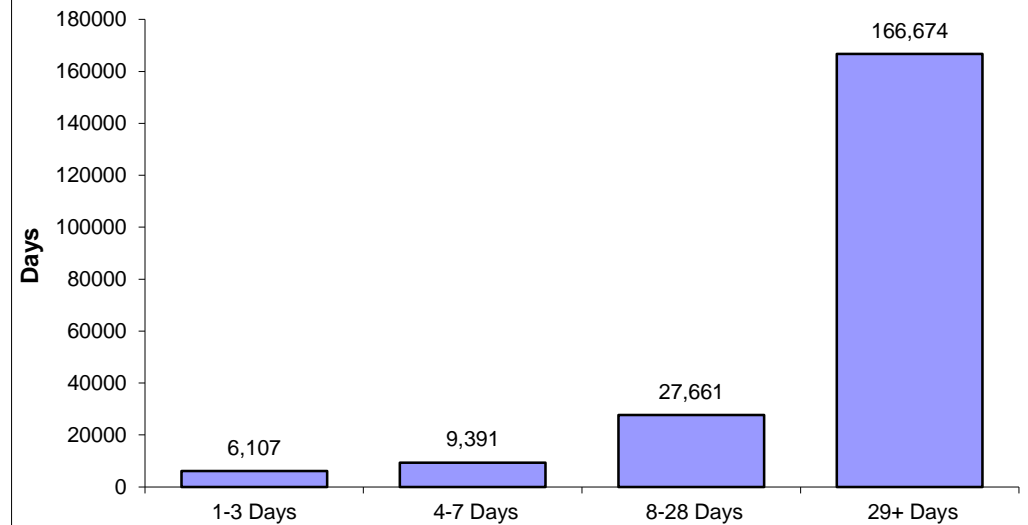


Long Term Sick Leave is defined as 29 calendar days or more

Number of Episodes by Absence Length Category
August 2018 - July 2019



Calendar Days Lost by Absence Length Category
August 2018 - July 2019



2.4 - Number of Episodes and Calendar Days Lost by Short and Long Term Absence Length by Directorate

Number of Episodes, Calendar Days Lost by Short and Long Term Absence Length by Directorate during the period 1 August 2018 – 31 July 2019

Directorate	WTE as at 31 July 2019	Short Term (1-28 days)			Long Term (29+ days)			Total Number of Episodes	Total Calendar Days Lost
		No. of Episodes	Calendar Days Lost	% Calendar Days Lost	No. of Episodes	Calendar Days Lost	% Calendar Days Lost		
Acute Services	3,889.80	3,600	21,065	23.2%	957	69,713	76.8%	4,557	90,778
Older People & Primary Care	1,569.64	1,113	7,544	20.9%	381	28,535	79.1%	1,494	36,079
Mental Health & Disability Services	1,496.99	866	6,747	17.3%	443	32,226	82.7%	1,309	38,973
Children & Young People's Services	1,426.31	803	5,853	17.1%	377	28,410	82.9%	1,180	34,263
Finance & Procurement	248.46	108	829	20.7%	36	3,184	79.3%	144	4,013
Performance & Reform	156.07	85	484	18.0%	24	2,205	82.0%	109	2,689
HR & Organisational Development	131.15	78	466	21.9%	21	1,659	78.1%	99	2,125
Medical	42.71	11	78	11.5%	6	598	88.5%	17	676
Executive Director of Nursing	38.70	13	99	18.9%	7	424	81.1%	20	523
Chief Executive's Office	12.60	6	23	100.0%			0.0%	6	23
Total	9,012.43	6,681	43,159	20.6%	2,246	166,674	79.4%	8,927	209,833

The figures below include all Domiciliary Care Workers and GP Out of Hours Medical Staff

	Short Term (1-28 days)			Long Term (29+ days)			Total Number of Episodes	Total Calendar Days Lost
	No. of Episodes	Calendar Days Lost	% Calendar Days Lost	No. of Episodes	Calendar Days Lost	% Calendar Days Lost		
<i>Domiciliary Care Workers</i>	617	4,299	16.2%	238	22,308	83.8%	855	26,607
<i>GP Out of Hours Medical Staff</i>	19	97	21.2%	2	360	78.8%	21	457
Total	636	4,396	16.2%	240	22,668	83.8%	876	27,064

Note:

- For multiple post holders within one Directorate, episodes of sickness absence which have been recorded against each post held are counted once in the figures above. Episodes recorded for multiple post holders across Directorates have been counted against each Directorate; however these are only counted once in the overall totals
- Excludes Staff with WTE 0.03 or below. Domiciliary Care Workers and GP Out of Hours Medical Staff are reported separately.

SECTION 3

3. Workforce Movement, Flexible Workforce Costs, Posts Approved & Agency/Bank Usage

3.1 – Monthly Staff in Post Comparison & Variance with Baseline Positions

Directorate	Baseline 31 Mar 18	Baseline 31 Mar 19	Apr 19	May 19	Jun 19	Jul 19	Aug 19	Sep 19	Oct 19	Nov 19	Dec 19	Jan 20	Feb 20	Mar 20	Variance between Mar 19 & Current Month
Acute Services	3,858.80	3,908.07	3,895.23	3,887.63	3,874.21	3,889.80									-18.27
Older People & Primary Care	1,472.16	1,565.17	1,578.85	1,569.63	1,579.48	1,569.64									4.47
Mental Health & Disability Services	1,513.39	1,525.86	1,502.31	1,508.59	1,502.78	1,496.99									-28.87
Children & Young People's Services	1,418.67	1,426.61	1,436.28	1,435.71	1,432.18	1,426.31									-0.30
Finance & Procurement	100.38	240.20	244.26	242.86	245.56	248.46									8.26
Performance & Reform	142.97	151.08	152.68	151.48	154.48	156.07									4.99
HR & Organisational Development	263.49	124.19	128.83	129.85	131.75	131.15									6.96
Medical	37.26	40.53	42.07	40.57	44.71	42.71									2.19
Executive Director of Nursing	0.00	1.00	35.09	37.59	36.70	38.70									37.70
Chief Executive's Office	12.49	12.60	12.60	12.60	12.60	12.60									0.00
Total (exc Domiciliary Care Workers & GP OOH Medical Staff):	8,819.61	8,995.30	9,028.20	9,016.52	9,014.46	9,012.43									17.13
*Domiciliary Care Workers	289.93	308.02	309.63	309.70	308.36	317.89									
GP Out of Hours Medical Staff	1.18	0.30	0.30	0.30	0.30	0.30									
Total	291.10	308.32	309.93	310.00	308.66	318.19									

Note: These figures exclude staff with WTE 0.03 or below, staff on career breaks and staff on external secondments

* There is a piece of work ongoing to offer Domiciliary Care Workers minimum hour's contracts.

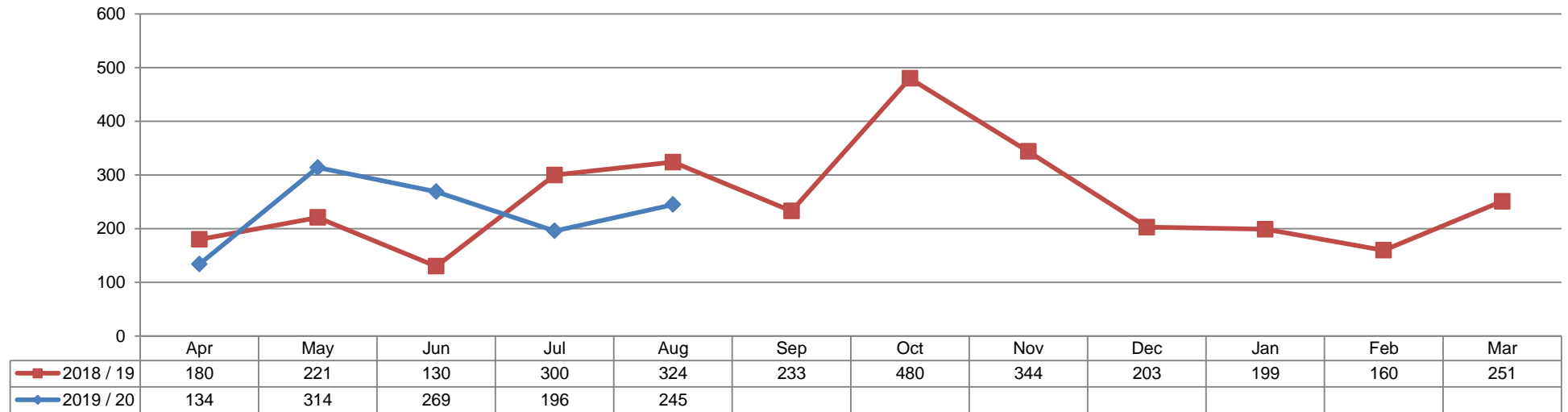
3.2 - 2017/18, 2018/19 and 2019/20 Staff Levels (WTE), Overtime, Bank, Agency and Locum Costs and 2019/20 Costs as % of Total Salary Bill

Staff Levels WTE and Costs (£)	WTE			Variance Staff WTE March 2018 and Current Month	Monthly Average Flexible Workforce Costs				2019/20 Costs as % of Total Salary Bill
	Baseline Position		2019/20 to date as at 31 July 2019		2017/18	2018/19	2019/20	2017/18 Baseline & 2019/20 YTD Variance	
	Mar-18	Mar-19							
Staff Levels WTE	8,819.61	8,995.30	9,012.43	192.82					
Overtime Cost (£)	£2,548,002	£2,999,519	£1,097,099		£212,334	£249,960	£274,274.66	£61,941	0.70%
Bank Cost (£)	£11,573,666	£13,380,686	£4,379,326		£964,472	£1,115,057	£1,094,831	£130,359	2.78%
Agency Cost (£) (including M&D Agency Costs)	£22,547,516	£33,620,899	£14,570,526		£1,878,960	£2,801,742	£3,642,631	£1,763,671	9.23%
Locum Cost (£) (M&D Locum Staff employed by SHSCT)	£2,111,240	£3,696,053	£1,307,496		£175,937	£308,004	£326,874	£150,937	0.83%
Total Costs	£38,780,424	£53,697,157	£21,354,446		£3,231,702	£4,474,763	£5,338,612	£2,106,910	13.53%

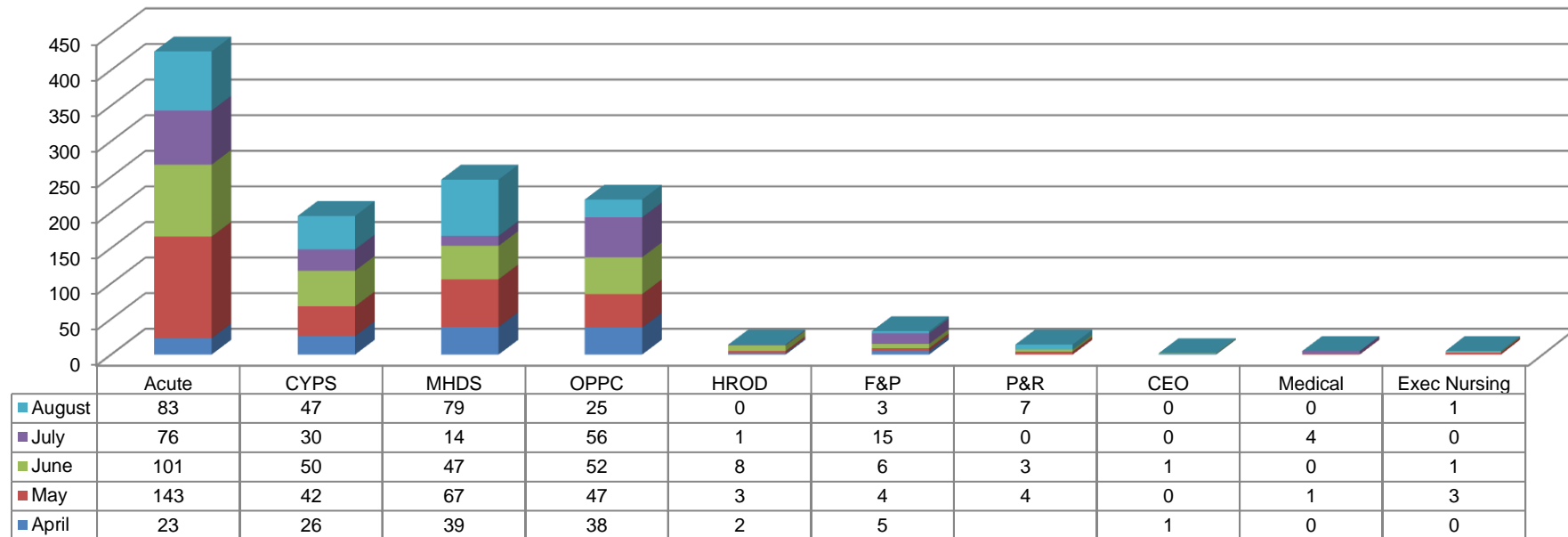
Notes:

- Staff Levels WTE figures above have been taken from HRPTS and exclude staff with WTE <= 0.03, Career Breaks and External Secondments. Flexible workforce WTE is not included in these figures.
- Cost information has been extracted from information provided by Finance & Procurement Directorate

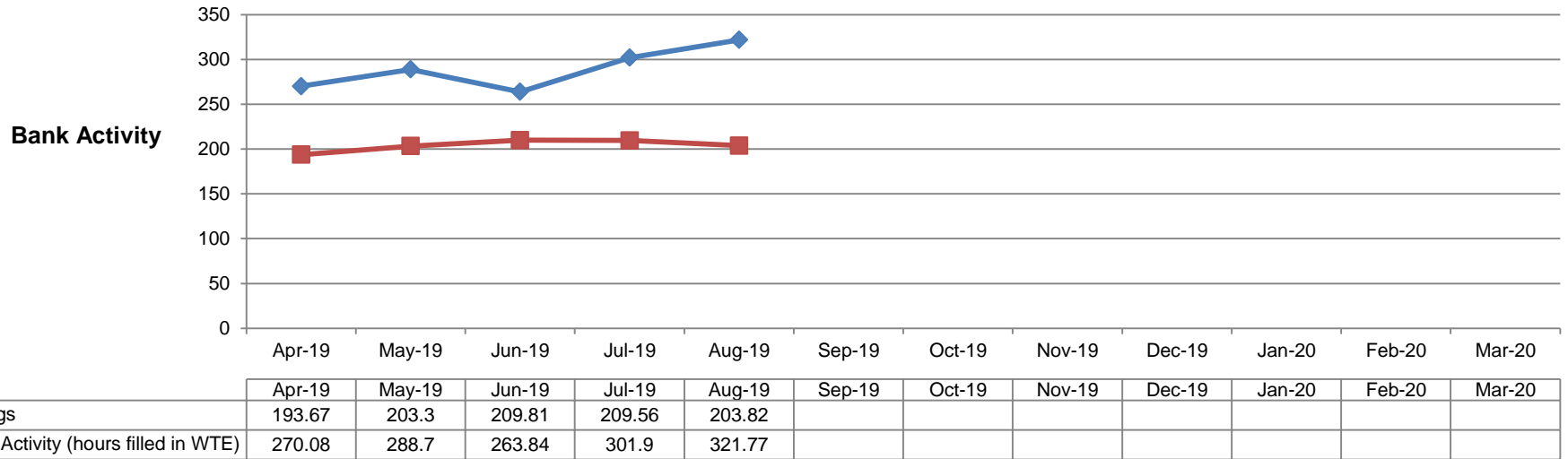
3.3- Trend of Posts Approved in 2019/20 Compared to Previous Financial Year



3.4 - Posts Approved by Directorate by Month 2019/20



3.5 - Trend Charts for 2019/20 Bank Activity



3.6 - Trend Chart for 2019/20 (YTD) Agency Activity Compared to Previous Financial Year – WTE Snap Shot at Month End AND Ad Hoc Usage

NB: updated information is not available for some elements of agency activity, and therefore previous month's data has been 'rolled over'

