

Operational Plan 2022/23

Overview & Update



The Robert Jones and Agnes Hunt
Orthopaedic Hospital
NHS Foundation Trust

People Committee

October 2022



Aspiring to deliver world class patient care

Key highlights overview

- There are more vacancies that planned for the end of September 2022 at Trust and System level.
- Impact of recruitment on H2 forecast has been reported through FPD in September for theatre and OPD is to be reviewed by FPD in October 2022,
- The risk register has been updated to reflect increasing risks associated with workforce
- E-rostering attainment levels at 0 end of September 2022 with plan to achieve level 2 by end of Q3 and level 4 end of Q4
- E-job planning attainment level at 0 end of September 2022 with plan to achieve level 2 by end of Q3 and level 4 by end of Q4

Workforce Plan



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STW Workforce Plan Headlines

WTE

- At a system level the overall WTE is running around 300 WTE behind planned
- SATH are close to planned but are using more agency and less substantive staff
- RJAH are close to planned but are using more agency and bank than planned
- SCHT have a large variance to planned due to a combination of an increasing plan WTE but a decreasing actual WTE

TURNOVER

- Turnover is currently running at 14.7% compared to the planned 13.3%
- SATH turnover rate is steady around 15% which is less than planned
- RJAH and SCHT both have increasing turnover rates (12% and 16.7% respectively).
This will be one driver for the overall WTE gap and increased use of bank and agency

SICKNESS

- At a system level sickness is running close to planned though there was a peak in July. In August the rate was 5.9% compared to a planned 5.7%
- SATH and RJAH have sickness rates of 6.0% and 4.8% in August and generally the actuals are close to the planned rates
- SCHT have a current sickness rate of 6.4% and the rate has been slowly increasing since the start of the year. The rate was planned to fall resulting in the actual rate being 1.9% above planned



RJAH Workforce plan – September 2022 performance against trajectory



The Robert Jones And Agnes Hunt Orthopaedic Hospital NHS Foundation Trust	September 2022							
Workforce (WTE)	WFP 2022/23 Budget	ESR Budget AUGUST	ESR Budget SEPTEMBER	Variance	WFP Position SEPTEMBER	Actual FTE in Post SEPTEMBER	Variance to Plan	Vacancy Rate SEPTEMBER
Substantive WTE	1513.81	1539.10	1552.86	13.76	1466.12	1411.76	-54.36	9.09%
Registered nursing, midwifery and health visiting staff (substantive total)	327.63	329.45	330.45	1	304.01	293.84	-10.17	11.08%
Registered scientific, therapeutic and technical staff (substantive total)	226.45	229.56	230.16	0.6	219.1	208.38	-10.72	9.46%
Support to clinical staff (substantive total)	262.71	275.83	277.83	2	255.18	243.87	-11.31	12.22%
Total NHS infrastructure support (substantive total)	535.8	541.13	550.29	9.16	535.8	516.65	-19.15	6.11%
Medical and dental (substantive total)	154.22	154.13	155.13	1	145.03	140.02	-5.01	9.74%
Any other staff (substantive total)	7	9.00	9.00	0	7.00	9.00	2	0.00%
	September					Sickness by Role	September	
Sickness - Workforce Plan	4.95%					Medical Staff	1.49%	
Sickness - Actual	5.35%					Registered Nursing Staff	5.42%	
Variance	0.40%					Healthcare Assistants	10.53%	
						Physiotherapists	6.68%	
	September					Radiographers	4.26%	
Turnover - Workforce Plan	7.94%					Orthotists	1.91%	
Turnover - Actual	12.47%					Other Staff	4.90%	
Variance	4.53%					Total	5.35%	

Overview of key workforce metrics

- **Workforce Recruitment:**
 - Nursing 10.17 WTE behind plan and HCSW 11.31 WTE behind plan.
 - A Recruitment Workforce Group has now been set up and meets bi-weekly. The initial focus is on nursing and healthcare support worker roles but the group will also focus on other areas as they become appropriate.
 - AHP 10.72 WTE behind plan at the end of July, successful recruitment has taken place with start dates being confirmed with candidates.
 - Therapies has been highlighted as a 'hot spot' area. An internal review has been carried out with the decision to now commence a full service review of the service that assesses workforce and clinical pathways. Report was initially expected by the end of September but the review has been extended so report now expected with MSK Managing Director by the end of October
 - Medical workforce 5 WTE behind plan at the end of September 2022. Consultant recruitment programme to deliver recruitment plan for 2022/23 provides updates to People committee monthly and describes the mitigations required for slippage on recruitment and Impact from October 2022.
- **Elective Recovery** – workforce impact: Impact update provided to FPD for theatres in September 2022, projecting 90% elective spells recovery for H2 against original plan of 107%.
- **Theatre workforce planning programme** : The Trust has commissioned external resource to support the Trust with the development of a medium to long term Theatre workforce plan. A 2 day workshop was held at the beginning of October 2022 with key stakeholders.

Job Planning and E-rostering



What are the levels of attainment (LOA) & what do they mean?



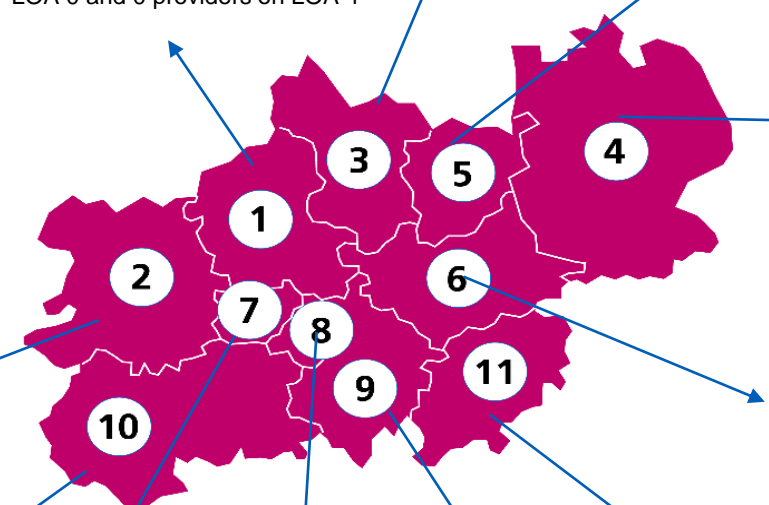
LoA	E-job planning	E-rostering
Level 0	Fewer than 90% of employees accounted for on e-job planning software	Fewer than 90% of employees accounted for on e-rostering software
Level 1	90% of appropriate clinical staff have recorded on e-job plan	All contracted hours recorded on e-roster, for more than 90% of staff
Level 2	The trust allocates time and resources to job planning. Use of full functionality of e job planning	Software captures staff shift preferences with remotely accessible application
Level 3	Teams establish team e-job planning meetings that align team objectives to individual job plans and service needs as defined through team capacity and demand	Teams analyse capacity and demand, using evidence-based tools
Level 4	Board-level accountability, with alignment with budgets and objectives	Board-level accountability, with alignment with budgets and objectives

Executive Summary



Midlands

1. Staffordshire and Stoke on Trent
2. Shropshire and Telford and Wrekin
3. Derbyshire
4. Lincolnshire
5. Nottinghamshire
6. Leicester, Leicestershire and Rutland
7. The Black Country
8. Birmingham and Solihull
9. Coventry and Warwickshire
10. Herefordshire and Worcestershire
11. Northamptonshire



Staffordshire & Stoke on Trent

E-rostering has increased from 0.54 to 0.64 with 3 providers on LOA 0 and 0 providers on LOA 4

E-job planning has increased from 0.08 to 0.14 with 3 providers on LOA 0 and 0 providers on LOA 4

Derbyshire

E-rostering has increased from 0.45 to 0.7 with 3 providers on LOA 0 and 0 providers on LOA 4

E-job planning has decreased from 0.03 to 0.02 with 4 provers on LOA 0 and 0 providers on LOA 4

Nottingham & Nottinghamshire

E-rostering has increased from 0.71 to 1.0 with 2 providers on LOA 0 and 0 providers on LOA 4

E-job planning has decreased from 0.16 to 0.0 with 1 provider on LOA 0 and 0 providers on LOA 4

Lincolnshire

E-rostering has decreased from 1.78 to 1.57 with 1 provider on LOA 0 and 1 provider on LOA 4

E-job planning has increased from 0.0 to 0.26 with 2 providers on LOA 0 and 0 providers on LOA 4

Leicester, Leicestershire & Rutland

E-rostering has increased from 0.07 to 0.29 with 2 providers on LOA 0 and 0 providers on LOA 4

E-job planning has decreased from 1.0 to 0.05 with 2 providers on LOA 0 and 0 providers on LOA 4

Shropshire & Telford & Wrekin

E-rostering has increased from 0.38 to 0.62 with 2 providers on LOA 0 and 0 providers on LOA 4

E-job planning has increased from 0.07 to 0.14 with 2 providers on LOA 0 and 0 providers on LOA 4

Herefordshire & Worcestershire

E-rostering has decreased from 0.16 to 0.04 with 3 providers on LOA 0 and 0 providers on LOA 4.

E-job planning has increased from 0.1 to 0.11 with 3 providers on LOA 0 and 0 providers on LOA 4

The Black Country

E-rostering has increased from 0.59 to 0.71 with 4 providers on LOA 0 and 0 providers on LOA 4

E-job planning has decreased from 0.33 to 0.23 with 5 providers on LOA 0 and 0 providers on LOA 4

Birmingham & Solihull

E-rostering increased from 0.97 to 1.12, with 4 providers on LOA 0 and 1 provider on LOA 4

E-job planning increased from 0.33 to 0.46, with 3 providers on LOA 0 and 1 provider on LOA 4

Coventry & Warwickshire

E-rostering has increased from 0.67 to 1.02, with 3 providers on LOA and 1 provider on LOA 4

E-job planning has increased from 0.06 to 0.11, with 4 providers on LOA 0 and 0 providers on LOA 4

Northamptonshire

E-rostering has decreased from 1.31 to 1.22 with 1 provider on LOA 0 and 0 providers on LOA 4

E-job planning has decreased from 0.11 to 0.09 with 2 providers on LOA 0 and 0 providers on LOA 4

E-job planning level 1 standards

- **Level 1**

Standard 1.1: The Trust has procured e-job planning software

Standard 1.2: Staff have been trained in the e-job planning process

Standard 1.3 Trust-wide policies detail the e-job planning process

Standard 1.4 At least 90% of employees have an active job plan(reviewed and approved in the last year)

Actions underway in order to progress to level 1 are:

- A project group is now established and meeting regularly with action plan in place for all key milestones. Our CMO is the executive officer for this programme.
- The Trust's 'The 5 Year People Plan Make the Difference 2018-2023' has now been updated to include e-Job planning priorities and will be presented to the People Committee for approval in October-22.
- An assessments of relevant job descriptions is underway by the People Services Team to ensure e-Job Planning responsibilities are included by the end of Q3.
- Trajectory and supporting actions in place to achieve 90% job plans approved by the end of Q3.
- Reporting arrangements on compliance will be in place by the end of Q3.

E-job rostering level 1 standards

Level 1

- Standard 1.1: The trust has procured e-rostering software, ensuring paperless payment mechanisms
- Standard 1.2: Staff have been trained in the e-rostering process
- Standard 1.3: All contracted hours are recorded on the system, ensuring safe working hours and appropriate skill-mix
- Standard 1.4: Trust-wide policies detail the e-rostering process ensuring consistent roster rules are applied
- Standard 1.5: At least 90% of employees are registered on an e-roster

Actions underway in order to progress to level 1 are:

- A project group is now established and meeting regularly with action plan in place for all key milestones. Our CNO is the executive officer for the programme.
- Workforce strategy updated via the 'The 5 Year People Plan Make the Difference 2018-2023' to include eRostering priorities
- Existing managers have all had training on commencement to post, or on introduction to the programme, for services where e-Rostering is in place. Reporting arrangements on compliance will be in place by the end of quarter 3.
- An assessment of all managers' job descriptions is underway by the People Services Team with an aim to complete this by the end of quarter 3.
- There is a draft of updated e-Roster policy ready for review with an aim for approval in November.

Risks



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Datix ID	Title	Directorate	Risk Owner	Handler	Hazard, work task, activity	Existing Control Measures	Likelihood	Consequence	Risk (Current)	Risk treatment plan/additional control measures	Progress notes	Risk Management	Date of assessment	Date of review	review	
							2 - Unlikely	4 Major	8				Moderate	16/05/2022	14/09/2022	14/10/2022
2906	FPD - Staff Covid isolation - increased cancellations could impact on delivery	Specialist - UNIT RISK	Forrest, Mrs Dawn	Newton, Lisa	FPD - Staff Covid isolation - increased cancellations could impact on delivery as seen in 2021-22	Ensure ongoing compliance with IPC and testing guidelines to ensure impact is in line with other providers	2 - Unlikely	4 Major	8	Moderate	Ensure ongoing compliance with IPC and testing guidelines to ensure impact is in line with other providers.	[Newton, Lisa 14/09/22 14:56:46] covid prevalence remains low but expected to increase , changed to tolerate until prevalence increases	Tolerate Risk	16/05/2022	14/09/2022	14/10/2022
2954	FPD Non compliance with achievement of Attainment levels for E-job planning in line with national guidance	Corporate Services - PEOPLE SERVICES	Longfellow, Dr Ruth	Jones, Nia	Non compliance with achievement of Attainment levels for E-job planning in line with national guidance. FPD risk on delivery of Operational Plan 2022/23	E-rostering and E-job planning project to be established and implementation programme will they milestones for deliver of each attainment level	4 - Likely	3 Serious	12	Moderate	E-job planning project had been established meeting fortnightly with implementation Programme and key milestones for deliver of each attainment level.	Key milestones for attainment level 1: - People Plan 2018-23 to be updated to include Trust e-job planning - end of September 22 - E-job planning policy for non medical staff to be developed and approved - end of October 22 - service level Job plan activity trajectory to achieve 90% sign off being developed in September to provide a forward look on timescale to achieve 90%. - Training programme - assurance metrics to be developed for e-job plan training - end of December 2022 - Job description to be reviewed to ensure all managers have e-job planning included - end of December 2022.	Treat Risk	20/07/2022	12/09/2022	14/11/2022
2955	FPD Non compliance with achievement of Attainment levels for E-rostering in line with national guidance	Corporate Services - PEOPLE SERVICES	Ellis Anderson, Sara	Jones, Nia	Non compliance with achievement of Attainment levels for E-rostering in line with national guidance. FPD risk impact on delivery of Operational plan 2022/23	E-rostering and E-job planning project to be established and implementation Programme will they milestones for deliver of each attainment level	4 - Likely	3 Serious	12	Moderate	E-rostering and E-job planning project to be established and implementation Programme will they milestones for deliver of each attainment level	The E-job planning project has been established and is meeting fortnightly. An action plan has been developed to move the Trust into each attainment level standard. Key milestones for attainment level 1: - People Plan 2018-23 to be updated to include Trust e-rostering commitment - end of September 22 - E-rostering policy for medical staff to be developed and approved - end of October 22 - Anaesthetics E-rostering system to be brought into monthly Trust combined reporting (thus achieving the 90% of employees on e-roster KPI) - Training programme - assurance metrics to be developed for e-roster training - end of December 2022 - Job description to be reviewed to ensure all managers have e-rostering included - end of December 2022. - confirm and challenge meetings to be extended to all services - end of December 2022.	Treat Risk	20/07/2022	12/09/2022	12/09/2022
2956	FPD - patient deterioration while on waiting list not identified	Specialist - UNIT RISK	Forrest, Mrs Dawn	Newton, Lisa	FPD & Q&S - Patient deterioration on the waiting list not identified due to 3 monthly clinical re-prioritisation for elective patients over 52 weeks not commencing from from 1 July 2022 in line with national guidance. Risk created by Head of Planning 20/07/2022	Meeting taking place last week in July 2022 to agree plan for resourcing this clinically and agreement of standardised processes. Harms review process in place for all patients in prioritised services and reported through Q&S.	3 - Occasionally	4 Major	12	Moderate	Meeting taking place last week in July 2022 to agree plan for resourcing this clinically and agreement of standardised processes. Harms review process in place for all patients in prioritised services and reported through Q&S.	[Newton, Lisa 14/09/22 14:43:16] Decision taken by SU MD to carry out reviews 6 monthly as 3 monthly not currently achevable	Treat Risk	20/07/2022	14/09/2022	14/10/2022

Datix ID	Title	Directorate	Risk Owner	Handler	Hazard, work task, activity	Existing Control Measures	Likelihood (current)	Consequence (current)	Risk Level (current)	Risk treatment plan/additional control measures	Progress notes	Risk Management	Date of assessment	Date of review	reviewer
2916	FPD - Staff Covid isolation - increased cancellations could impact on delivery	MSK - UNIT RISK (Risk Register Only)	Banks, Jo	Humphreys, Yvonne	FPD - Staff Covid isolation - increased cancellations could impact on delivery of the 2022/23 Operational plan as seen in 2021-22	FPD have requested risk scoring and for them to be added to the risk register. MDs have agreed to the risks as described and the associated scoring.	3 - Occasionally	4 Major	12	Moderate	Ensure ongoing compliance with IPC and testing guidelines to ensure impact is in line with other providers.	Treat Risk	16/05/2022	14/09/2022	14/11/2022
2909	FPD - WLIs reliant on uptake and availability of staff from targeted specialties	MSK - UNIT RISK (Risk Register Only)	MacLennan, Ian	Humphreys, Yvonne	FPD - WLIs reliant on uptake and availability of staff from targeted specialties - identified as operational risks to delivery of the 2022/23 Operational plan.	Delivery of the plan is based on 31% OJP rate for Electives and 10% OJP rates for outpatients. 6-4-2 meetings monitoring allocation uptake and monthly LLP meetings to review delivery against this level.	3 - Occasionally	4 Major	12	Moderate	Monitoring reports to be produced for the FPD committee	Treat Risk	16/05/2022	14/09/2022	14/11/2022
2900	FPD - WLIs reliant on uptake and availability of staff from targeted specialties	Specialist - UNIT RISK	Forrest, Mrs Dawn	Groome, Fran	FPD - WLIs reliant on uptake and availability of staff from targeted specialties	Delivery of the plan is based on 31% OJP rate for Electives and 10% OJP rates for outpatients. 6-4-2 meetings monitoring allocation uptake and monthly LLP meetings to review delivery against this level.	3 - Occasionally	4 Major	12	Moderate	Delivery of the plan is based on 31% OJP rate for Electives and 10% OJP rates for outpatients. 6-4-2 meetings monitoring allocation uptake and monthly LLP meetings to review delivery against this level.	Treat Risk	16/05/2022	21/08/2022	21/09/2022
2901	FPD - recruitment dependencies and ongoing reliance on flexible workforce	Specialist - UNIT RISK	Forrest, Mrs Dawn	Newton, Lisa	FPD - recruitment dependencies and ongoing reliance on flexible workforce	continue to recruit and look at how we attract staff	3 - Occasionally	4 Major	12	Moderate	Sustainability plans through consultant recruitment 6.5 WTE consultant recruitment planned in 2022/23.	Treat Risk	16/05/2022	14/09/2022	14/10/2022
2903	FPD - System pressures necessitating future mutual aid support	Specialist - UNIT RISK	Forrest, Mrs Dawn	Newton, Lisa	FPD - System pressures necessitating future mutual aid support	system meetings Escalation criteria in place for use of Sheldon beds	3 - Occasionally	4 Major	12	Moderate	Impact seen in Month 1 with activity reduction through provision of mutual aid. Protected services and delivery of activity for patients over 90 weeks to be maintained during mutual aid support. Proposal submitted for flexible mutual aid model so that RJAH can use bed when not required by system	Treat Risk	16/05/2022	14/09/2022	14/10/2022
2911	FPD - Consultant & Anaesthetist Workforce recruitment dependencies and ongoing reliance on flexible workforce	MSK - UNIT RISK (Risk Register Only)	MacLennan, Ian	Humphreys, Yvonne	FPD - Consultant & Anaesthetist Workforce recruitment dependencies and ongoing reliance on flexible workforce - could impact on delivery of the 2022/23 Operational plan	Consultant recruitment Project Group established and meeting fortnightly	4 - Likely	4 Major	16	High	Sustainability plans through consultant recruitment 6.5 WTE consultant recruitment planned in 2022/23.	Treat Risk	16/05/2022	14/09/2022	14/10/2022
2913	FPD - System pressures necessitating future mutual aid support	MSK - UNIT RISK (Risk Register Only)	Banks, Jo	Humphreys, Yvonne	FPD - System pressures necessitating future mutual aid support could impact on delivery of the 2022/23 Operational plan	System Sliver and Gold call oversight for decision making around system support requirements	4 - Likely	4 Major	16	High	Impact seen in Month 1 with activity reduction through provision of mutual aid. Protected services and delivery of activity for patients over 90 weeks to be maintained during mutual aid support.	Treat Risk	16/05/2022	14/09/2022	14/10/2022