

Workforce Quarterly Report

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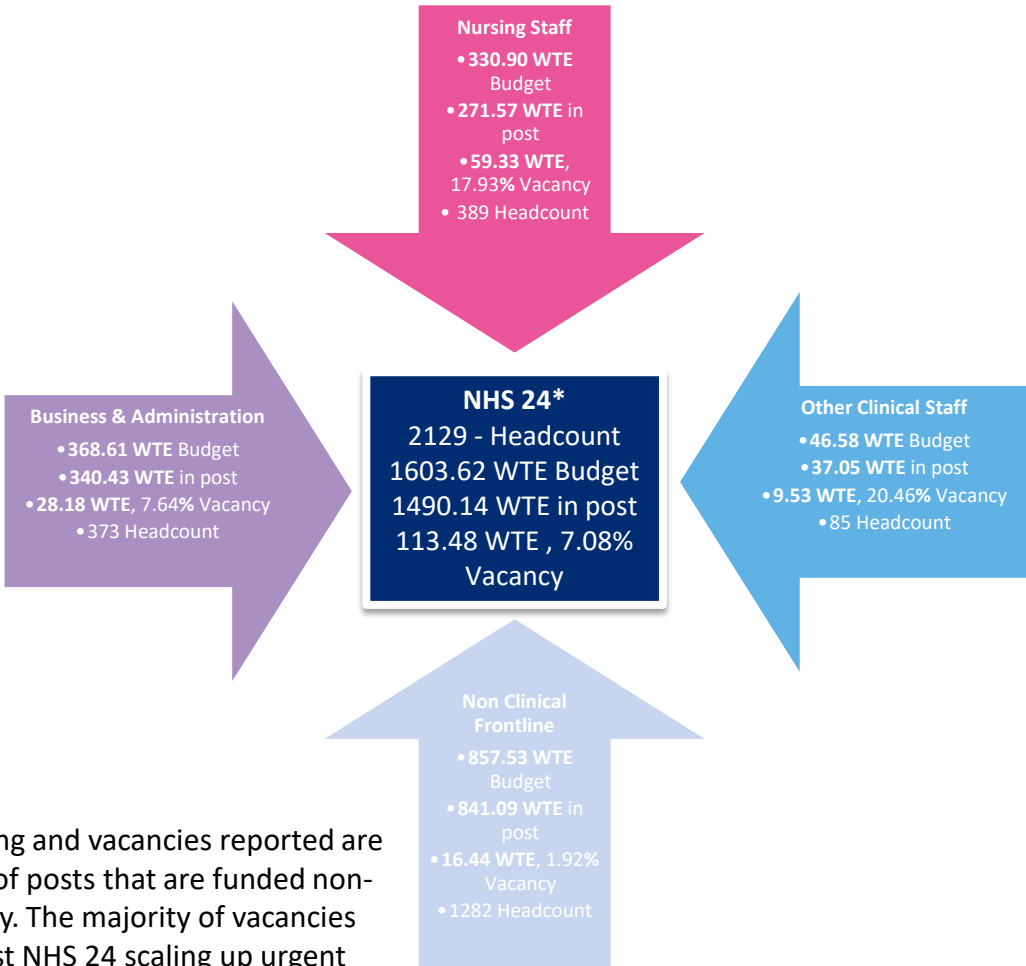
R&P

PS

Quarter 2

July – September 2024





The staffing and vacancies reported are inclusive of posts that are funded non-recurringly. The majority of vacancies are against NHS 24 scaling up urgent care on the basis on non-recurrent funding which is anticipated to be adjusted in year to reflect to actual WTE.

*Headcount and WTE include agency staffing as at 30th September 2024 (3 heads, 3 WTE)

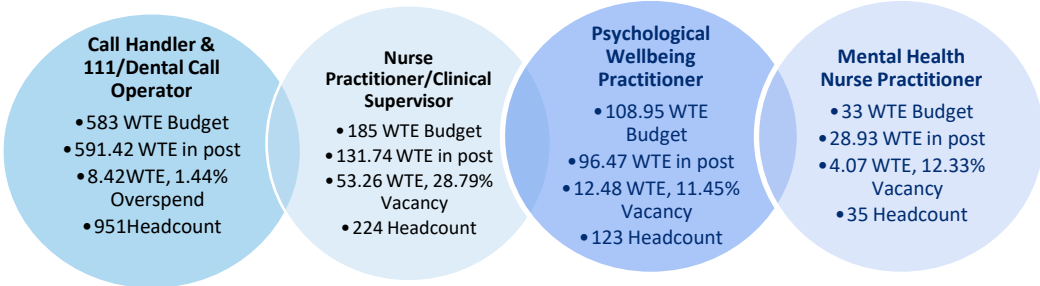
SPOTLIGHT

Vacancy management is scrutinised monthly as part of Scottish Government efficiency requirements. Part of this work is to report on management of headcount in central functions job family to pre pandemic levels. This will be managed through our establishment control processes.

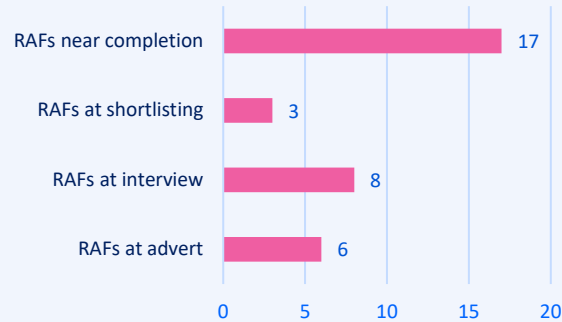
Workforce Plan Year 3 refresh questionnaire meetings took place with all Directors across July/August. The outputs have been reviewed and will be incorporated into the Workforce Strategy Year 3 refresh.

The Establishment Control Panel and the Strategic Workforce Planning Group were merged to form the new Workforce Planning Group. The group meets on a weekly basis for establishment control and once a month to focus on strategic workforce planning and deeper dives into resourcing issues or staffing models. The group exists to provide oversight and scrutiny of vacancy management and changes to posts/teams/structures on behalf of the Executive Management Team.

The Workforce Planning Group will also ensure there is an integrated approach to workforce planning across the Board, scrutinising and identifying the workforce implications of strategic and operational plans and new programmes of work.



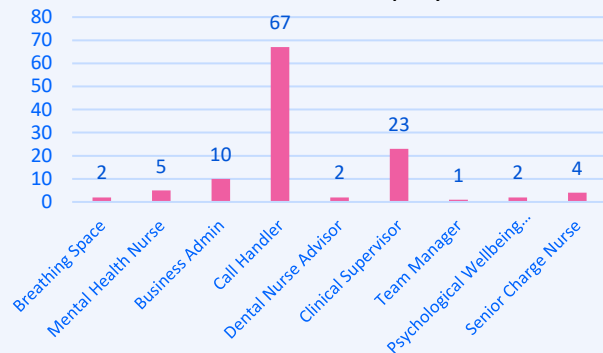
RECRUITMENT:



In Q2 Workforce and the Establishment Control Group received **52** RAFs for consideration. There are currently **34** jobs in the recruitment process at varying stages. These jobs are a mix of Corporate and High-Volume Recruitment for Frontline.

STARTERS:

NHS 24 recruited 116 new employees in Quarter 2.



September Turnover

1.46%, 31 heads

+0.27%, +6 heads

Voluntary Turnover

1.32%, 28 heads

Quarter 2 Turnover

1.40%, 89 heads

-0.15%, 9 heads

Voluntary Turnover

1.29%, 82 heads

Rolling year Turnover

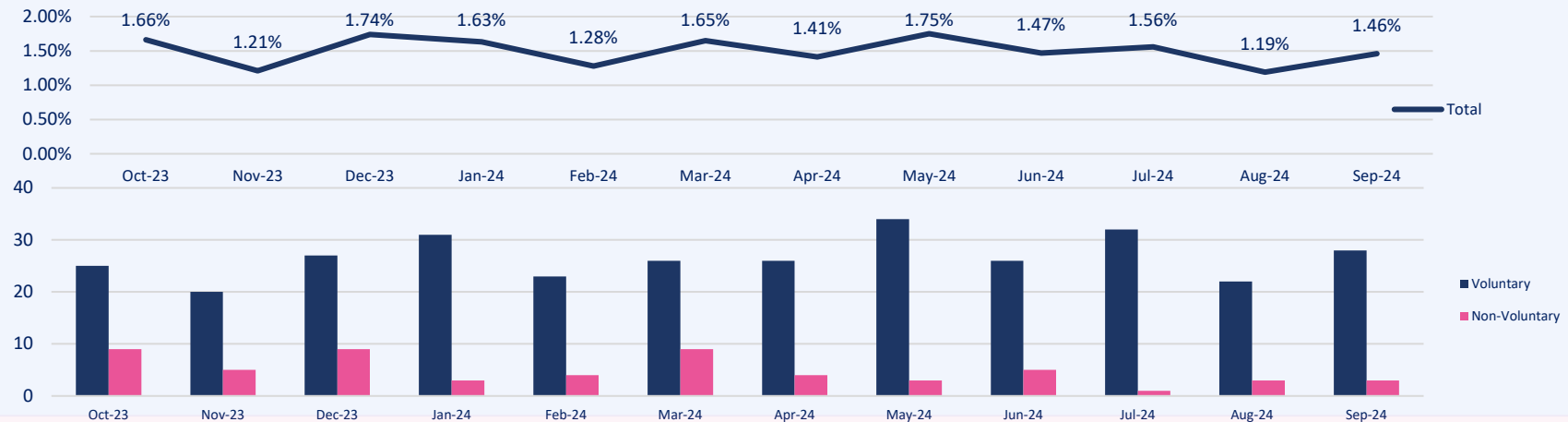
18.00%, 378 heads

-1.09%, -26 heads

Voluntary Turnover

15.24%, 320 heads

TURNOVER



INSIGHTS:

This quarter turnover has been broken down, providing not only the total figure but also a Voluntary Turnover figure which refers to those staff who have chosen to leave NHS 24 (so not including those who have either retired, finished a FTC or been dismissed).

As with previous quarters the most common leaving reason is **new employment** (47%, 42 heads), this is an increase of 16% from the previous quarter. Of those 45% went to another NHS board (60% last quarter). Q2 saw 5 staff retiring, this was over a range of skillsets including 2 Clinical Supervisors, 1 Business and Admin staff and 2 Breathing Space Advisors. Of those that retired within Q2, 2 of those returned to work with NHS 24. 7.98% (13 headcount) of leavers in Q2 left within 3 months of joining NHS 24 (compared to 11.9% the previous quarter).

SPOTLIGHT:

In Q2, exit interviews had a completion rate of 25.84% (23) for the quarter which is up from Q1's completion rate of 24.74% (24).

Quarterly Highlights

- Rolling turnover continues to decline and is now **18%**, exceeding the Workforce Strategy KPI of 20%.
- The **Call handler establishment** remained above target at 591.42 WTE as at September 2024.
- The focus has now shifted to increase the **Clinical Supervisor workforce**. A joint **Recruitment Action Plan** has been agreed in collaboration with Service Delivery for the Clinical Supervisor skill set focused on meeting establishment target by March 2025. Workforce continue to engage with Practice Education on a regular basis to monitor and adapt the training plan as appropriate.
- Completion rates for **H&S elearning** for Q2 were **97%**.
- Year 1 of the **Data and Digital plan** was **91%** complete with 22 tasks being delivered, 4 tasks that remain in progress will be carried into year 2 of the plan. In Q2 the Director Dashboards were implemented, offering Directors streamlined access to **essential metrics** for monitoring and acting on workforce trends and analyses. Additionally, advancements in automation have been implemented for the Induction intake, eliminating the need for manual reporting adjustments.

Quarterly Activity

- Following the launch of the new '**Living the Values**' **Assessment** platform for Call Handler and Clinical Supervisor skill sets our Quarterly candidate experience rating survey shows that 8.06/10 are likely to speak positively about their assessment experience.
- Successfully completed the recruitment of **Associate Director of Workforce, Associate Director of Nursing and Care and Associate Medical Director** in line with the new Executive Recruitment Model.
- The **Clinical Supervisor Recruitment Action Plan** is progressing with Service Delivery which covers attraction, shortlisting, interviewing and onboarding.
- In collaboration with **Cemvo Scotland** we have had 3 consultancy sessions funded by the Race for Human rights project, the discussions and learning will feed into the Anti-Racism Action plan.
- **Health and Safety Committee** met in July and work is progressing on the digitisation of the Stress Risk Assessment. Next committee is on Monday 21st October with work also underway on reviewing the policy calendar and updating the relevant policies.
- The **Copilot test of change** has also been initiated across the **Workforce Directorate**.
- **Digital advancements:** Progress for year 2 of the Workforce Data and Digital Plan is ongoing, 11 tasks are now in progress including facilities recording and reporting, flexible working and reasonable adjustment process automation which will be taken forward in Q3.



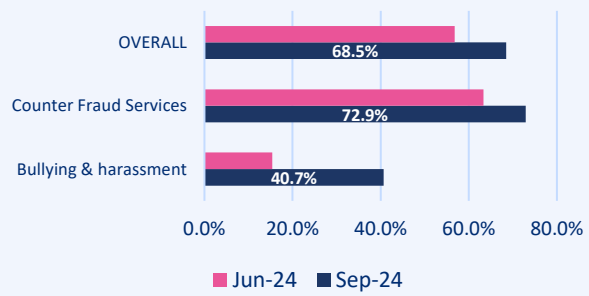
Enhanced Learning and Development and Effective Leadership and Management

Statistics related to learning and development within NHS 24



TURAS | Learn

TRANSITIONAL MODULES



A national benchmarking exercise to align NHS 24 more with other NHS Boards saw a **reduction** in the number of transitional modules. Reporting on these 2 modules began in April 2024.

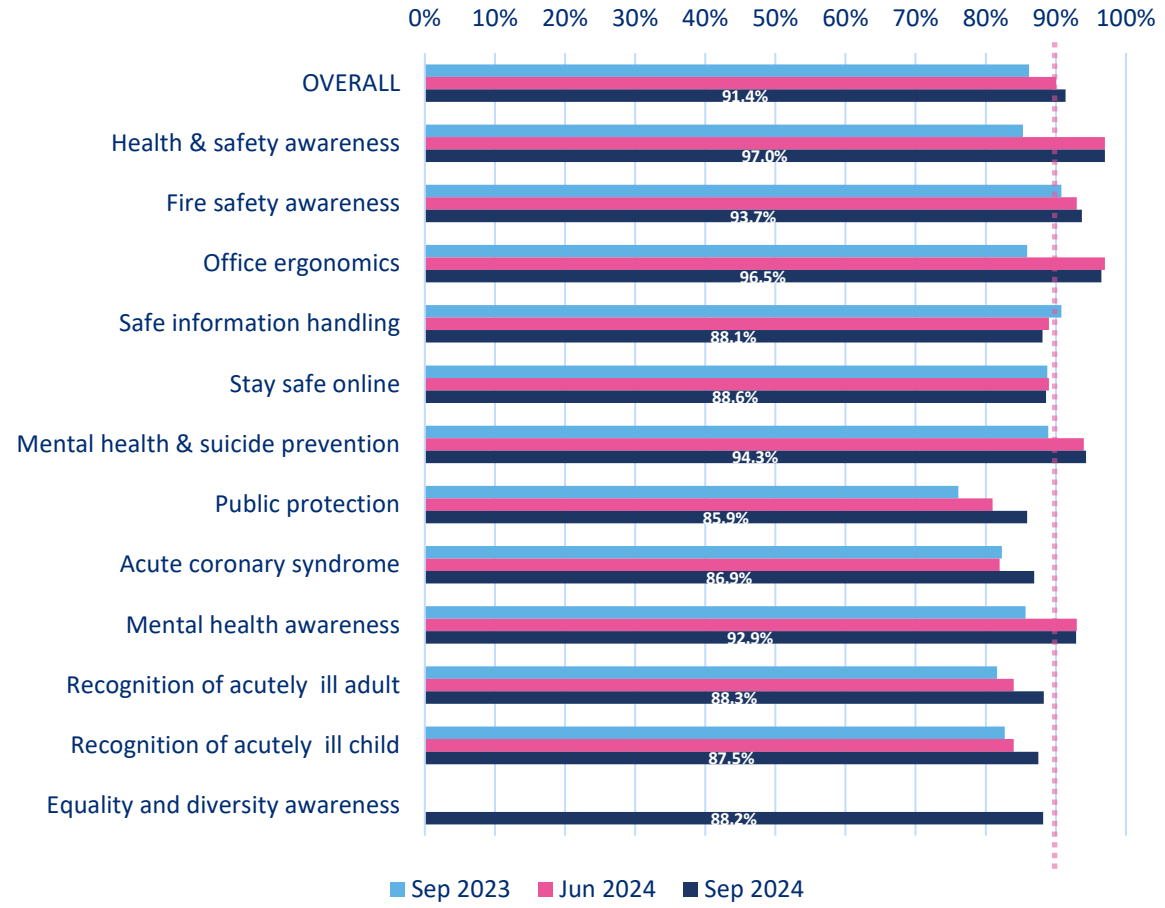
CORE TRAINING PROGRAMME

Details of sessions run by the Practice Education team. Q2 saw a shift in focus to Clinical Supervisor inductions.

19 training groups
Call Handler's (11), Clinical Supervisors (6) and Psychological Wellbeing Practitioners (2)

73.08% completed training
76 of 104 staff completed the initial training process, 14 staff are still in induction at the end of Q2.

TURAS | Learn



ESSENTIAL LEARNING (% complete and current)

This suite of modules are to be completed (and recompleted) either every year or every 2 years. Some modules are role-specific.

The **overall compliance level for Essential Learning** is sitting at **91.4%**. This is **1.4%** above the target of **90%**.

All directorates now meet or exceed the **90% compliance level target**.

The suite of transitional modules has been **reduced** from 9 to 2. The compliance level for these modules is **68.5%**.

SPOTLIGHT

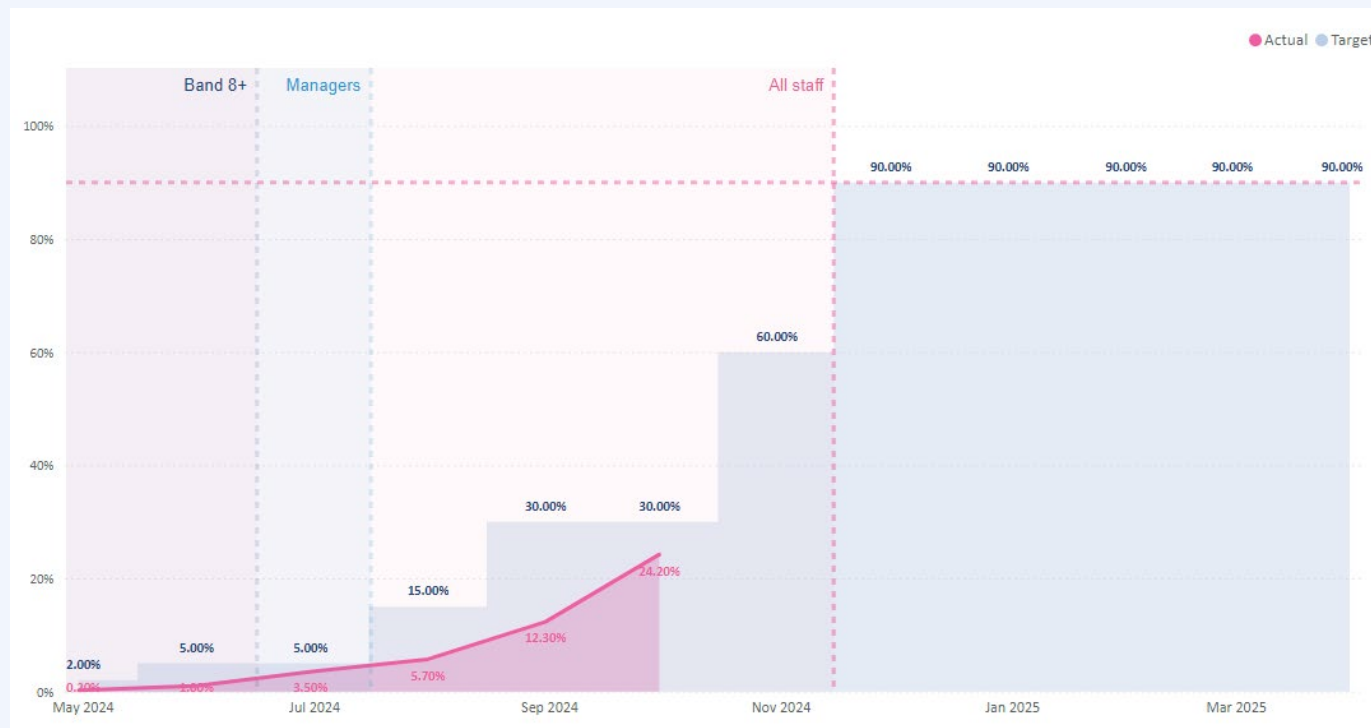
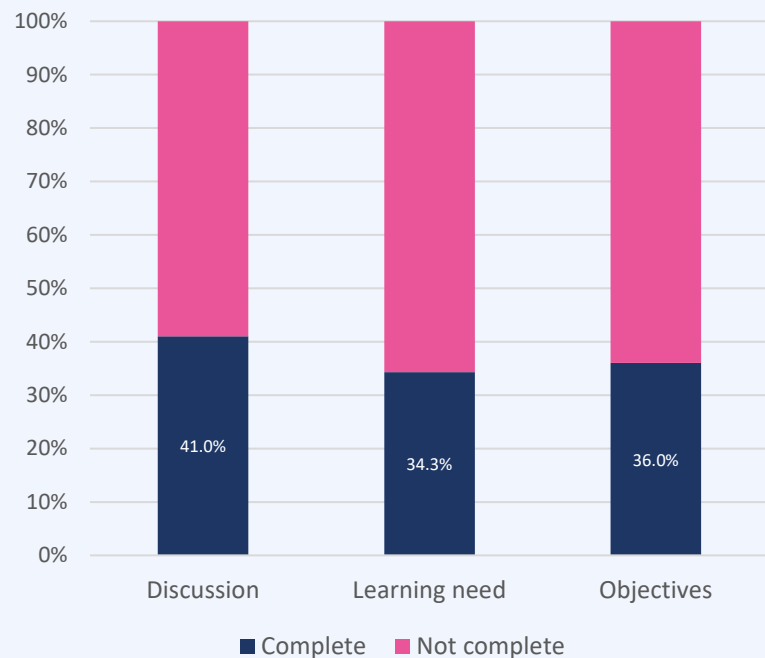
This section shares details of key learning and development currently in focus.

LEADERSHIP DEVELOPMENT PROGRAMME

61% of Leading with Courage delegates have **commenced** their programme, **20%** of delegates have already **completed** the programme.

100% of Leading for Impact delegates have **commenced** their programme, **50%** of delegates have already **completed** the programme.

TURAS | Appraisal



APPRAISAL COMPONENTS

In the 2024/25 appraisal window (April to March), all 3 components are required for a complete appraisal: A discussion, setting objectives and completing a PDP.

The above chart reflects the percentage of staff that have completed the individual components of the appraisal process.

APPRAISAL COMPLIANCE

At the end of quarter 2, **24.2% of staff** had completed all 3 of the required appraisal elements. This is **5.8% lower** than the target of **30%**.

New staff (< 1 year service) and those currently on extended absence (LTS/Mat leave etc) are automatically filtered out of Appraisal reporting.

Quarterly Highlights

- **Essential Learning:** All directorates have met or **exceeded the 90% target** in Q2, which has contributed to NHS 24 maintaining the target for three consecutive months.
- **Leadership Development Programme:** Programme delivery continues with 25% of the combined total of middle and senior leaders now complete. Self-assessment scores of 30 leadership competencies taken before and after the programme show positive increases across the board; this is mirrored in before and after scores for 360-degree feedback.
- **Appraisal:** The 2023/24 Appraisal window closed at the end of Q2 for all directorates other than Service Delivery, with 7 directorates meeting the 90% target. The Appraisal window is extended to 30th November for Service Delivery colleagues, 32.6% have completed their end year discussion, 26% with objectives set and 24% with a Personal Development Plan for the year ahead.
- **Culture and Wellbeing:** Format for future reporting agreed and Q1 report on directorate progress on Culture and Wellbeing Action Plans complete. Several directorates have established their own Culture and Wellbeing working groups, mainstreaming culture and wellbeing activities in NHS 24. Staff recognition has been well demonstrated in Q2 with over 500 nominations received in the Spotlight Awards.
- **iMatter 2024:** response rates and action planning hit an **NHS 24 high of 76%** and 92% respectively, with efforts noted by Scottish Government and insights sought on NHS 24's approach.

Quarterly Activity

- **Essential Learning** – The annual review will commence in Q3 and will focus on module content reviews and quality assurance.
- **Leadership Development Programme** – An 'End of Year 1' update paper will be presented to EMT in October and Staff Governance Committee in November.
- **Appraisal** – Targeted support to Service Delivery continues with Appraisal Champions trained across centres, drop-in sessions offered for troubleshooting and support and regular communications provided across multiple channels.
- **iMatter 2024** – National iMatter results report will be received from Scottish Government in Q3 and a paper detailing NHS 24 results compared to all other NHS boards will be submitted to EMT and Staff Governance in Q4.
- **Culture and Wellbeing: Directorate Culture and Wellbeing Action Plans** - Q2 updates are in progress and a 6-month update paper on progress will be provided to EMT in November.
- **Equality, Diversity and Inclusion** – following the Directors Letter on Anti-Racism Plans received from Scottish Government in Q2, work will progress to ensure workforce implications, opportunities and requirements are captured and advanced via the Workforce E,D&I action plan



Inclusive Culture

Statistics related to absence and case management within NHS 24



SICKNESS ABSENCE

8.44%
Rolling
+0.06%

8.13%
Quarter
+0.11%

8.63%
September
+0.03%

SICKNESS ABSENCE:

Attendance continues to be a focus for Service Delivery. Long Term absence has **increased** since the previous quarter (+0.50%) however, Short Term absence has seen minimal change (+0.02%).

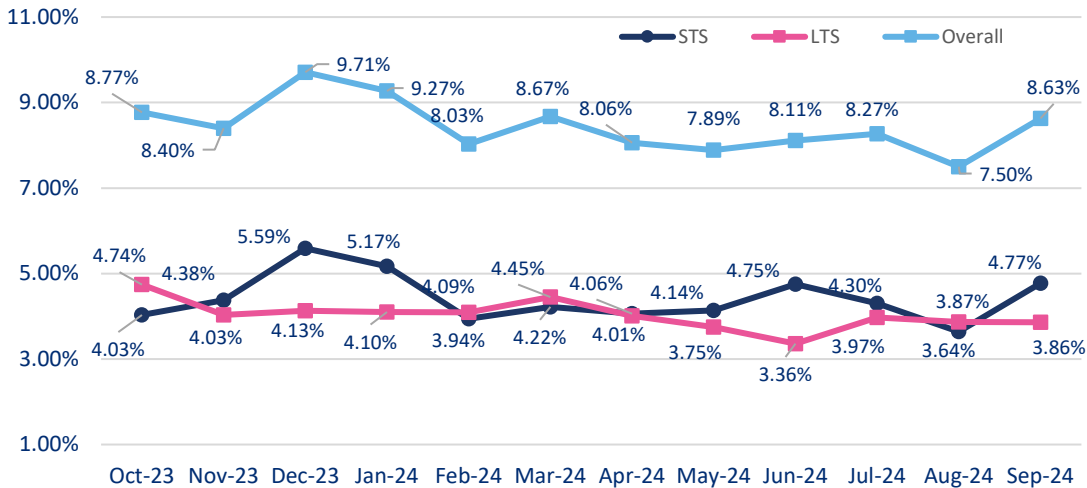
This quarter has seen an **increase** in absence since the previous quarter (+0.11%).

INSIGHTS:

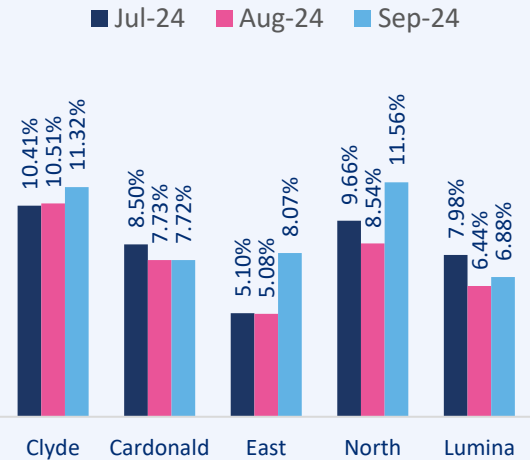
North Contact Centre has seen the highest absence **increase** from last quarter (+1.07%). East Contact Centre seen a **decrease** in absence from last quarter (-0.66%). **Clyde Contact Centre** continues to see the highest levels of sickness absence for the quarter (10.75%) which has increased from Q1 (+0.42%).

Anxiety/stress/depression/other psychiatric illnesses has continued to be the **top reason** for absence in the past quarter followed by **Gastro-Intestinal Problems** and **Cold, cough, flu – influenza**.

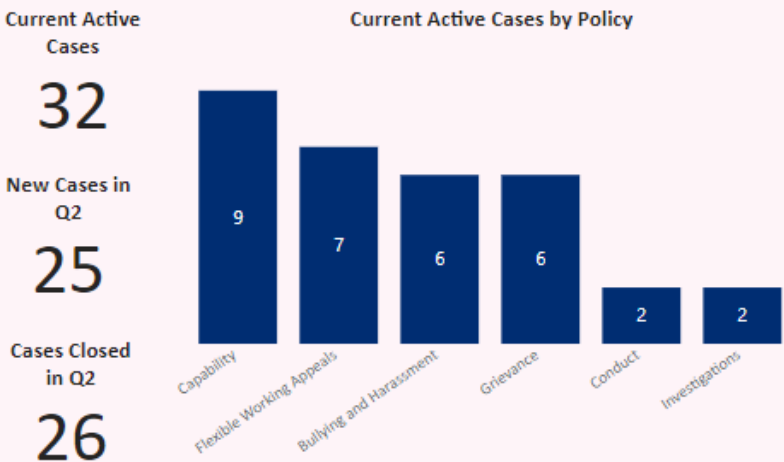
SICKNESS ABSENCE BY MONTH



SICKNESS ABSENCE BY LOCATION



CASE MANAGEMENT:



HIGHLIGHT:

The team are currently supporting a number of complex employee relations cases across the full suite of Once for Scotland policies.

The team have a new system for managing ER case management and providing data on current and closed cases. The bar chart to the left shows the number of current cases on going at this time and under which policy.

A significant number of cases were closed in Q2 with a similar number of new cases received in the quarter.

Quarterly Highlights

- NHS 24 continues to be represented on the **Once for Scotland Policy Development Group**. Weekly participation and creation of the next phase of Once for Scotland policies and supporting documents has been developed and signed off at programme board. The next phase will go to soft launch Oct 2024, with official launch early 2025.
- A Director dashboard for **Case Management** has been developed to monitor timescale compliance, highlighting potential hotspots or cultural trends ensuring management accountability is a focus. This is underpinned by a new **Case Management tracker**. The dashboard provides insight to delays allowing remedial action to take place quickly.
- **Attendance Management** continues to be a focus for all NHS 24 cohorts of staff. Absence continues to be above 8% at the end of September 2024. As a result, the team continue to support managers in applying the **Once for Scotland Attendance Policy** and implementing reasonable adjustments to support staff in their endeavour to return to work. Absence reasons and associated activity, for example, return to work interviews and fit note compliance continue to be monitored weekly and monthly through dashboard reporting.
- **Reduced Working Week** – the 37-hour reduced working week was implemented for all staff across the organisation by the 30th of September 2024 following significant engagement with staff. Scottish Government have been informed of this ensuring NHS 24's compliance with the agreed backstop date of 30th November 2024. Evaluation of the implementation has also been submitted to NES to ensure lessons learned are captured for next phase of implementation.
- **Organisational Change Consultation** exercises have commenced in both the Nursing and ICT Directorates following sign off by the Executive Management Team. People Services and Partnership colleagues have been supporting staff involved.

Quarterly Activity

- Work has commenced with ICT to move **'People First'** to a new system provider **Sysaid**. A group has been established to represent all teams within workforce, and work is underway to agree the design and build of the system. This is an opportunity for review and improvement. The group are reviewing learnings and user experience over the past 12 months as part of this work.
- A short-life working group was established to review **our Stress Management and Wellbeing policy** and the **Individual Stress Risk Assessment (ISRA)** process. Both documents were reviewed and refreshed. The ISRA form is now user-friendly, making it easier for staff and managers to pinpoint stressors and agree support measures. Work is also underway to digitalise the ISRA form for greater efficiency. The updated policy and ISRA process are set for approval at the October H&S Committee meeting, with a full launch planned by the end of October, accompanied by engagement and communication activities.
- People Services have **delivered a variety** of management **training sessions** during the last quarter on Bullying and Harassment, Attendance, Special Leave, Grievance, Capability and Commissioning Manager Training.
- The team continue to support **complex case management** and **mediation services** from early resolution up to and including **ACAS early conciliation** and **Employment Tribunal** level, ensuring effective resolution and positive outcomes. Additionally, the lessons approach has now become an established practice, and a range of guidance created as a result to support managers. This includes a new end to end process around **Right to Work, ill health capability and redeployment**.
- People Service Team continue to work with Service Delivery to improve the process for **Flexible Working applications**. Due to some recent challenges in the application of flexible working policies, particularly around timescales and quality of decision rationale, a cross Directorate working group met to review the process. Consequently, we have proposed changes to enhance the process and ensure legal compliance. We now seek approval for these changes and the allocation of necessary resources to implement them.