



Workforce Monitoring Report

1 April 2015 – 30 September 2015

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EXECUTIVE SUMMARY

Introduction

This six monthly Workforce Monitoring Report covers the period 1st April 2015 to 30th September 2015.

The table below illustrates the key workforce information over the past six months. The Board headcount has increased by 55 to 1,743. The increase is a result of the continued expansion programme across a number of different areas within the Board. Our employee average age remains in the 40-49 age bracket although the gap continues to close with staff aged 30-39. The summary below highlights that the Boards percentage of staff with a disability has decreased slightly. This reflects that our headcount has increased and the number of disabled employees remained the same. It is also noted that the percentage of staff from an ethnic minority has slightly increased.

Summary of Key Employee Information				
	Mar 14	Sep 14	Mar 15	Sep 15
Headcount	1583	1653	1688	1743
Male/Female ratio	1:3	1:3	1:3	1:3
Percentage of staff with a disability	0.95%	1.15%	1.18%	0.97%
Age bracket containing highest number of staff	40-49	40-49	40-49	40-49
Percentage of staff in an ethnic minority group	5.5%	6.72%	6.3%	6.4%

Equality and Diversity

A workforce monitoring report is presented every six months to the Senior Management Team and the Board. This is in line with the Equality Act (Specific Duties) (Scotland) Regulations 2012 and the PIN Policy “Embracing Equality, Diversity & Human Rights in NHS Scotland.” The PIN policy supports monitoring of the protected characteristics of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation as defined in the Equality Act 2010. It also entails an extensive list of areas for monitoring during recruitment, employment and termination of employment.

This report highlights the data that is currently available for equality monitoring with the Board and where gaps in intelligence remain. Data has been sourced from 1st April 2015 to 30th September 2015.

Recruitment Activity

Recruitment activity has increased slightly from 192 to 199 posts in the current reporting period. There continues to be a stringent process for the approval of vacancies through the Workforce Review Group, which meets fortnightly. The continued expansion of our services has led to an increase in headcount of 55, which equates to a 3.3% increase of our total workforce.

Sickness Absence

The overall sickness absence figure for the last 6 months is 4.54%. This is an increase of 0.03% on the previous six-month reporting period. The overall percentage for sickness absence is above the Heat Standard of 4% and Managers and Human Resources continue to work together to address this increase in percentage.

Stress, Anxiety and Depression continue to be the biggest reason for absence within the organisation. All staff who are absent in this category are seen by Occupational Health if they are absent for two or more weeks. Work is currently underway to explore a robust approach to reduce stress amongst the workforce by using a range of interventions and promote wellbeing across the Board. This approach will assist in reducing sickness absence related to stress across the Board.

Occupational Health offers a variety of psychological support mechanisms including, where appropriate, Cognitive Behavioural Therapy (CBT). Further supports can now also be accessed through an SLA with NHS Greater Glasgow & Clyde which allows the Board to provide enhanced mental health support to our employees who most need it.

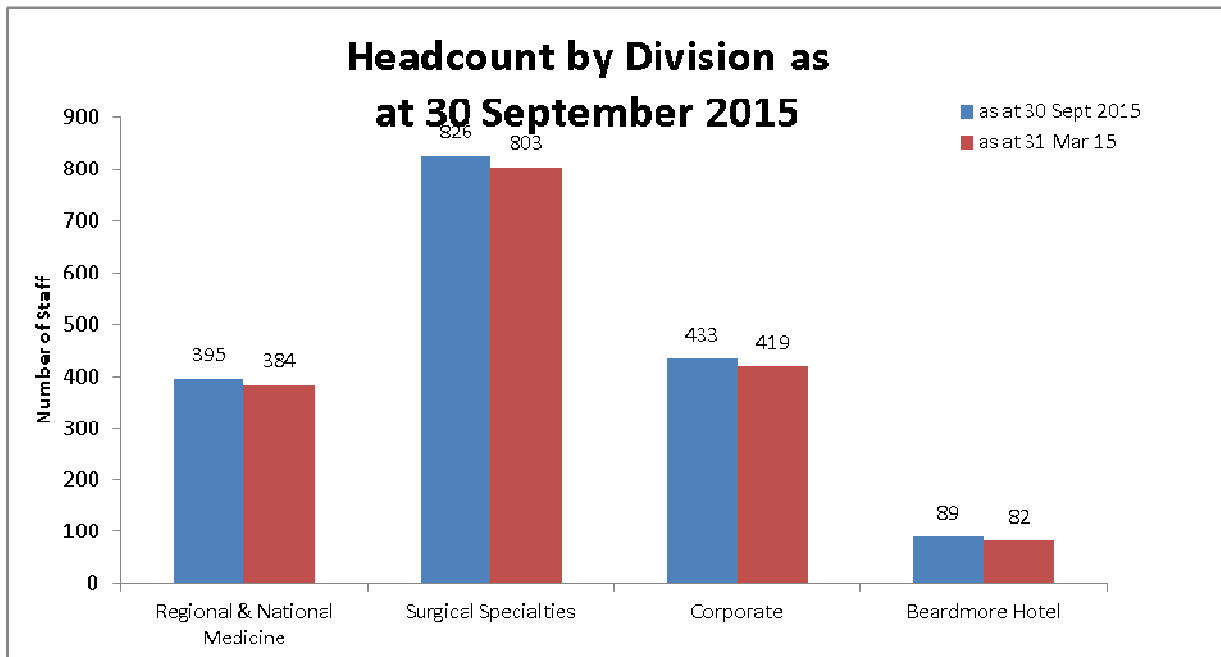
Performance Management

Performance Management systems are now firmly embedded for all staff groups within the Board. Appraisal for Medical Staff ensures that all doctors have a yearly appraisal. 69% of Agenda for Change staff has undertaken a current KSF PDR by the 30th September 2015. Senior Managers performance is reviewed annually and continues with 100% compliance rates.

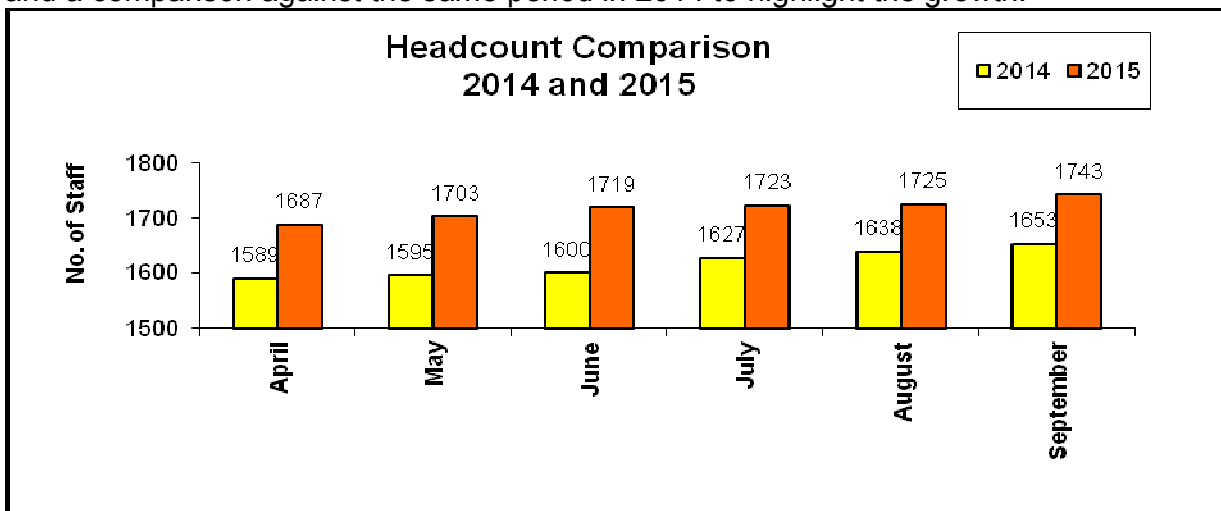
Laura Liddle
Acting Head of Human Resources
September 2015

1. CURRENT WORKFORCE

The number of substantive staff employed by the Board at the 30th September 2015 is shown below by Division. Headcount has increased within the past 6 months by 55 (WTE) to a total of 1,743. The roles recruited to have been across all job families but the majority continue to be within Nursing, Medical and Administration.

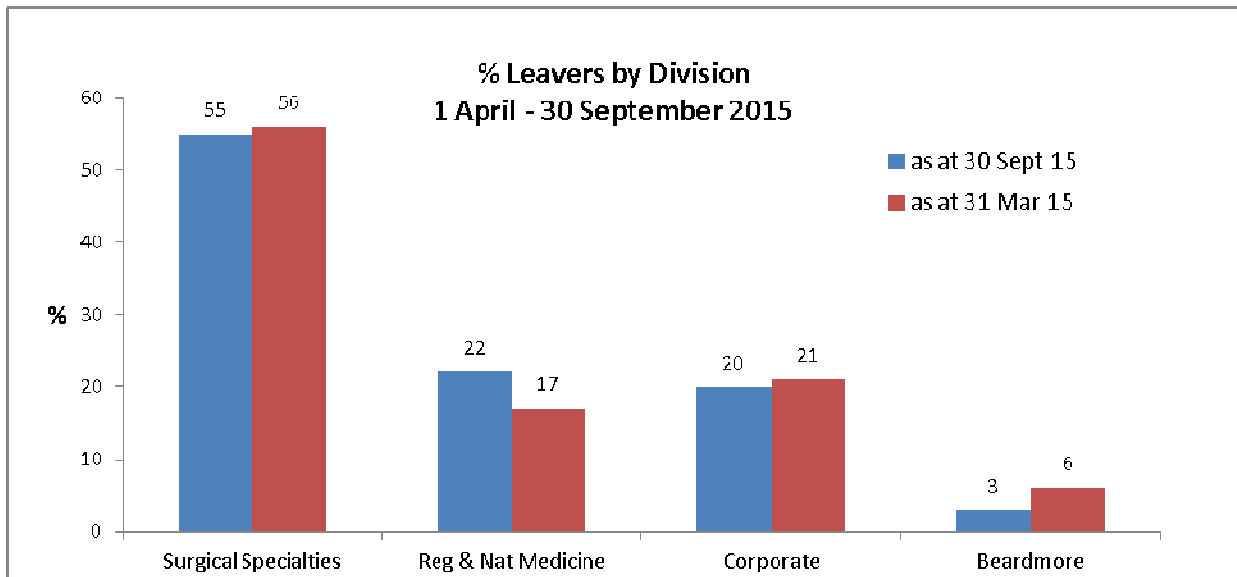


The graph below illustrates a month on month increase in headcount within the Board and a comparison against the same period in 2014 to highlight the growth.

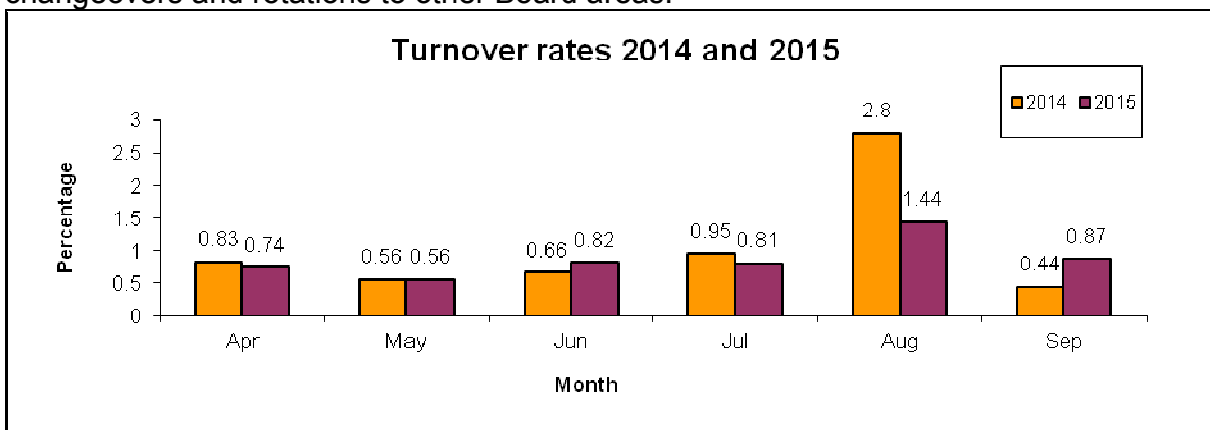


Employee Turnover

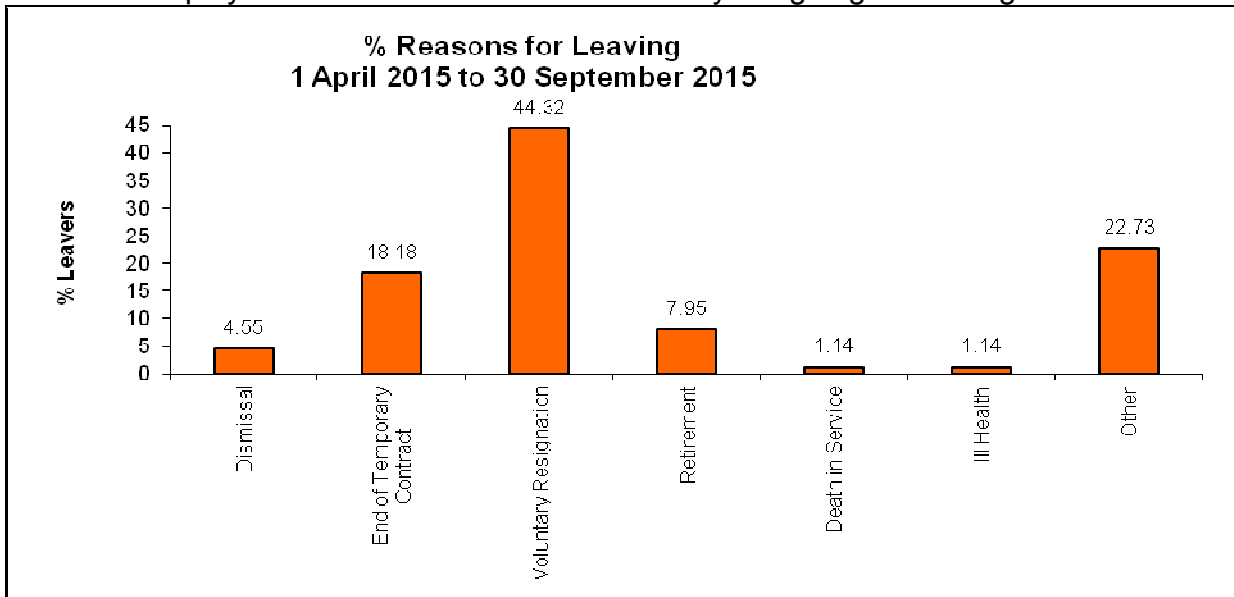
Employee turnover remains low, with a total number of leavers for the six-month reporting period at 88. The total number of staff leaving in this period has increased slightly from 82 to 88 for the previous six-month period. Exit Interviews continue to be carried out with all leavers, with these being undertaken by a member of the HR team. Further work has commenced to ensure any trends identified are highlighted to the correct level of management within the Board.



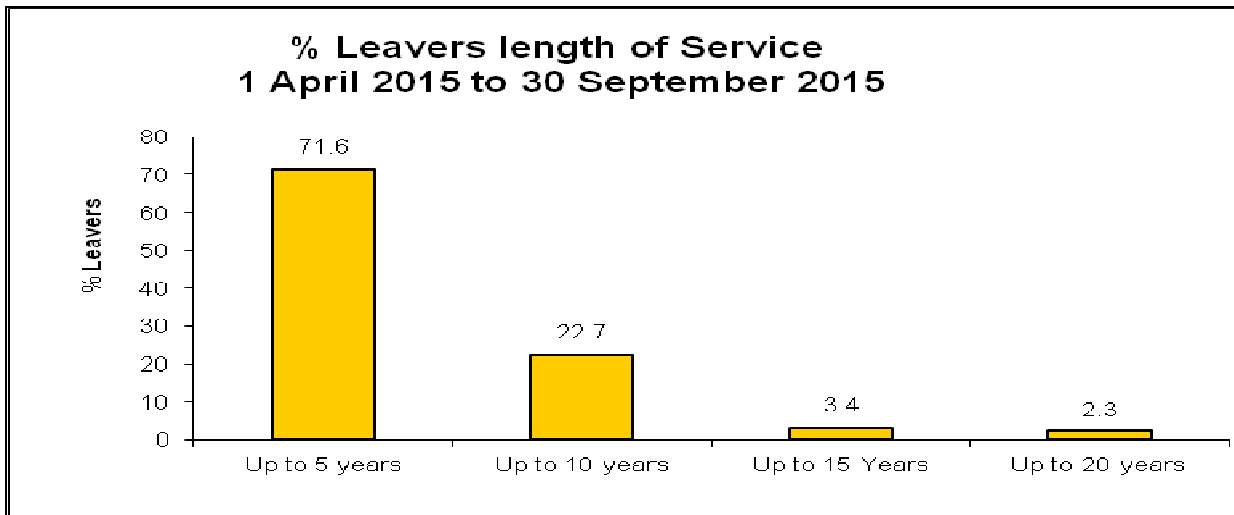
The percentage turnover rates by month are shown in the graph below. The information highlights turnover rates in month below 1% over the past 6 months with the exception of August. The turnover percentage for the past 12 months is 9.98%, which is a slight decrease from the previous reporting period. The Board's turnover has been consistent year on year which an annual peak in August and February due to junior doctor changeovers and rotations to other Board areas.



The reasons for leaving are shown below and include the category “other”. Other is where an employee has refused to detail where they are going on leaving the Board.



The length of service of the leavers who left over the past six months can be viewed below. You will note that the majority of the leavers had less than five years service and most moved for career reasons which is a similar trend reflected in previous reporting periods.

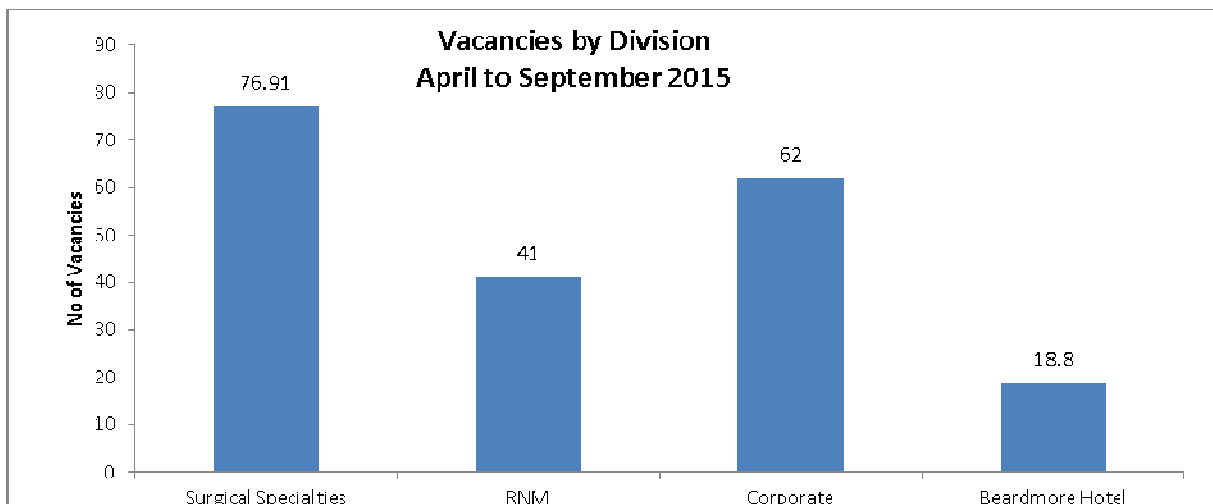


No particular trends have been identified from the exit interview data over the past six months. Exit interview feedback forms are shared with the appropriate line manager and the relevant Senior Manager. They are also taken into consideration in relation to any departmental investigations to ensure any trends can be acted upon and any issues that arise dealt with promptly.

2. RECRUITMENT

Recruitment activity has increased slightly since the last six-month monitoring period. The figures show a reduction in vacancies across all divisions with the exception of Corporate with a total of 199 against 192 vacancies in the previous reporting period. The volume of recruitment remains higher than it has been for several years and remains challenging to manage across the organisation.

The number of applications received for individual posts remains largely unchanged, with specialist posts attracting lower numbers of candidates and posts within the Support Services areas appealing to larger numbers. We continue to advertise the majority of our posts for between seven and nine days to control the number of applications that are received.



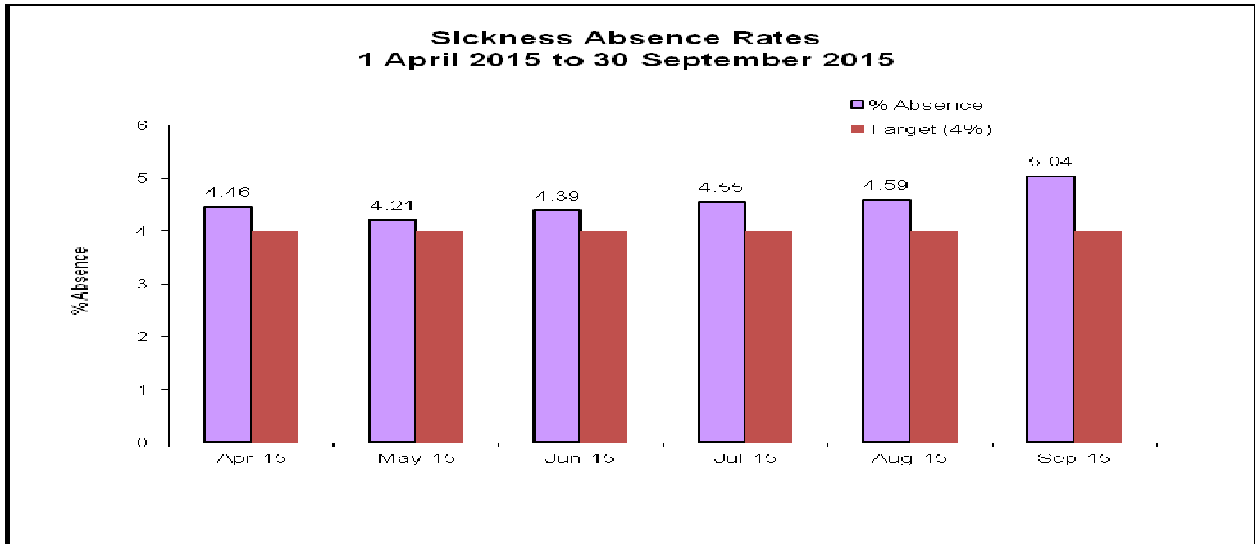
The pie chart below highlights that the majority of our recent appointments have been within patient-facing clinical services, with nursing being the highest.

Over the past six months, the recruitment team has processed 1,673 application forms. Out of these, 732 were shortlisted for interview and 144 new employees appointed to posts.

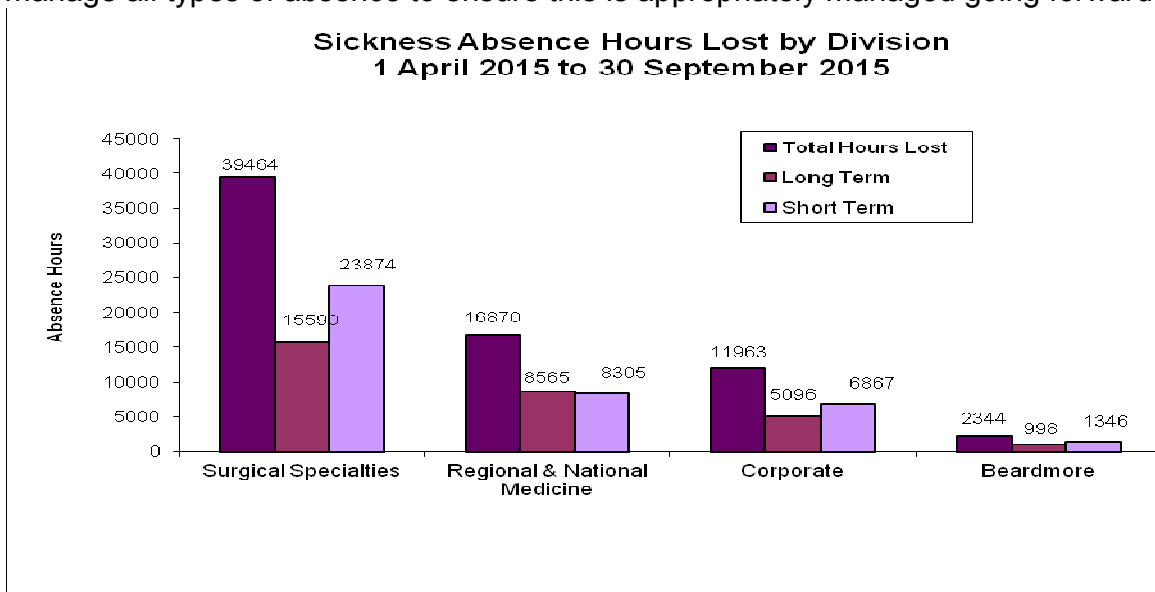
Significant work continues to take place over the last six month period to standardise and improve the processes within the Recruitment function in order to reduce the timescales to recruit. As a result of this work a number of Key Performance Indicators were agreed and feedback to date has indicated that performance has improved and we are maintaining KPIs in relation to timescales for shortlisting, offers of employment being made within eight weeks of the closing date for the advert and candidates being in post pending satisfactory clearances.

3. SICKNESS ABSENCE

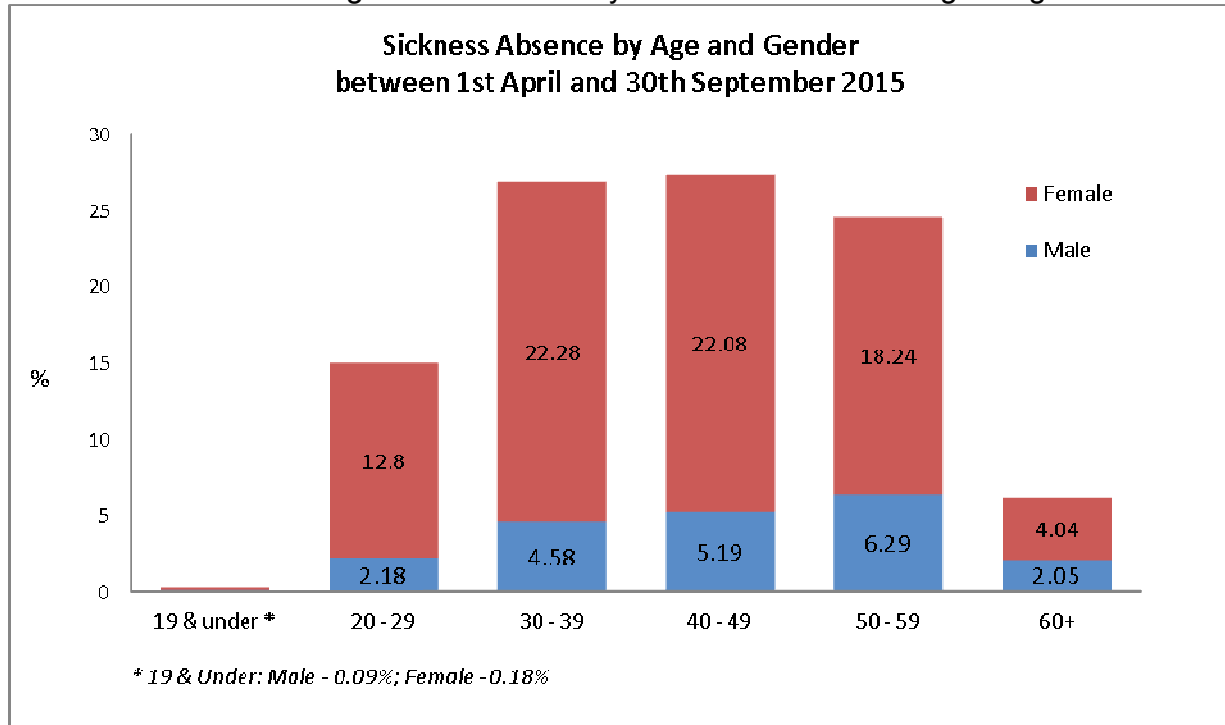
The data from this section is taken from the SWISS national workforce system, which reports sickness absence and workforce planning data on behalf of NHS Scotland. The absence percentage for the last 6 months is 4.54% which is higher than the Heat Standard of 4% and Managers and Human Resources continue to work together to address this increase in percentage.



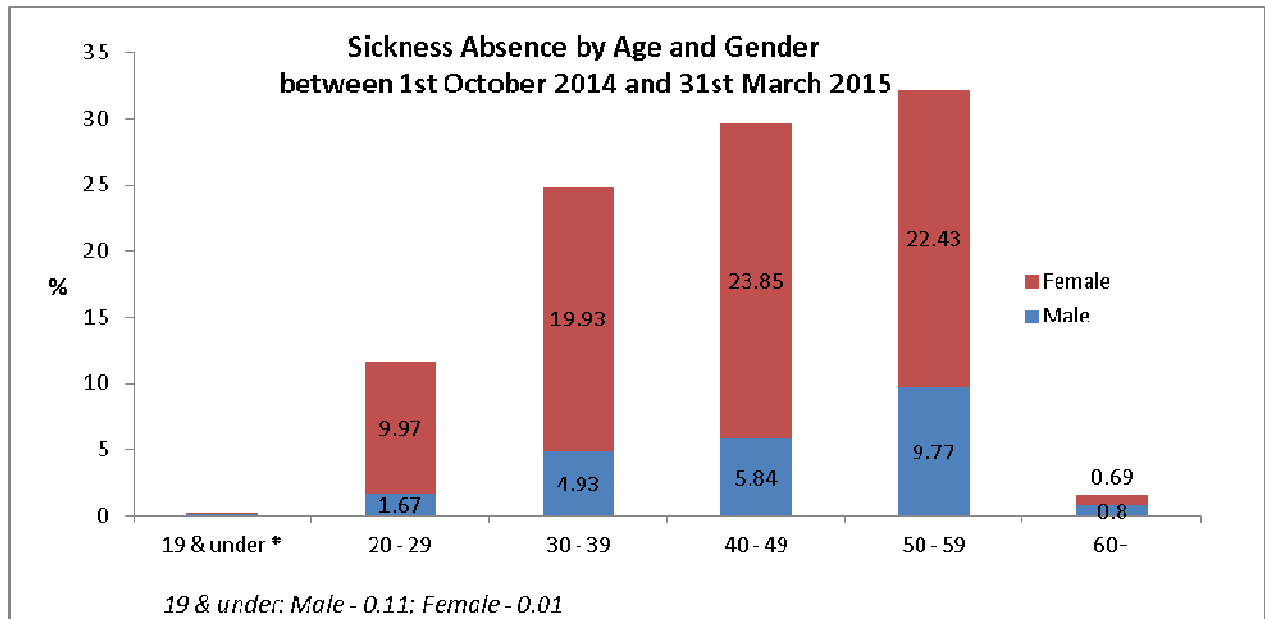
Long term absence has decreased by 400 hours and short term absence has also decreased by 8449 hours over the past six months. This overall reduction in hours lost to sickness absence over the past six months which equates to an estimated reduced cost of £114,152 over that period. Measures continue to be in place to monitor and manage all types of absence to ensure this is appropriately managed going forward.



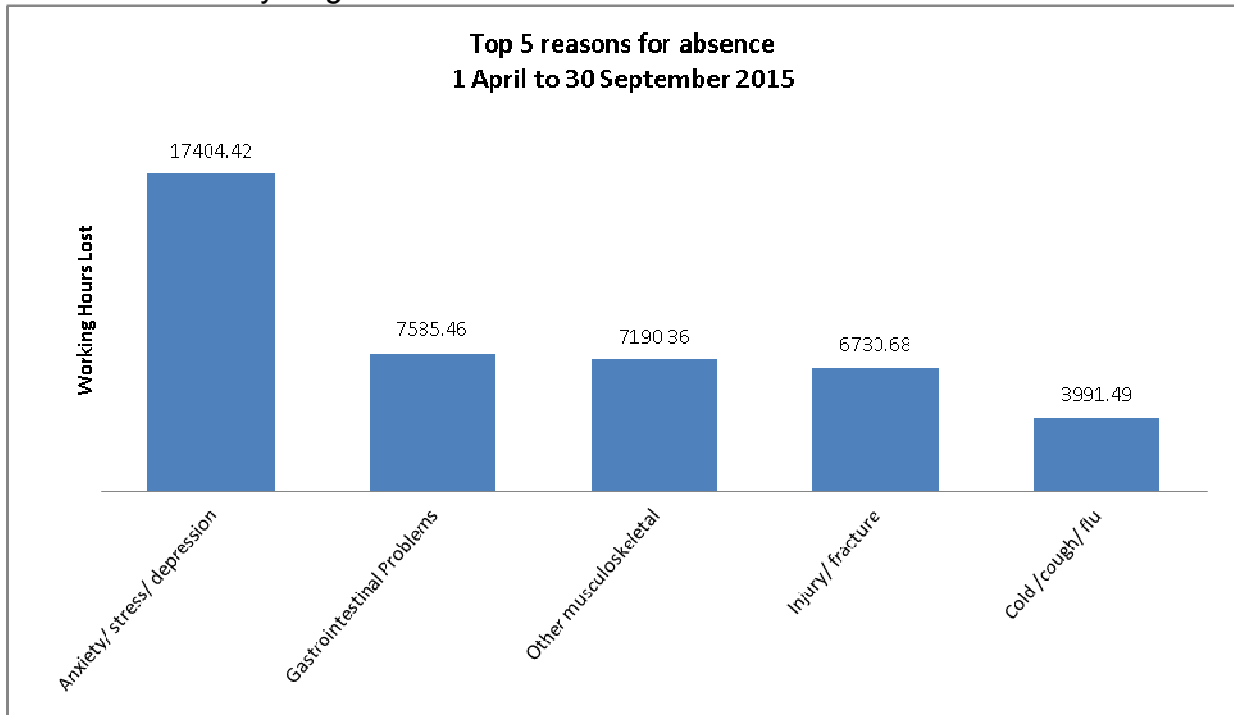
The graph below has split the sickness absence hours lost over the past six months by age and gender to examine if any underlying trends are present. However the data does illustrate that our highest sickness is by females in the 30-39 age range.



Below is the data from the previous 6 month period where the highest sickness was by females within the 40-49 age range. Further work and analysis is planned to explore this area in more detail.



The top five reasons for absence remain unchanged. Anxiety remains the most significant and accounts for 40% of the total hours lost for the period. This figure has increased since the last reporting period. Gastrointestinal problems is the second highest reason for sickness absence in the reporting period, accounting for 18% of the total hours lost for the 6 month period. Both the HR and Occupational Health teams continue to work with individuals and managers to try to resolve any work-related situation at an early stage.

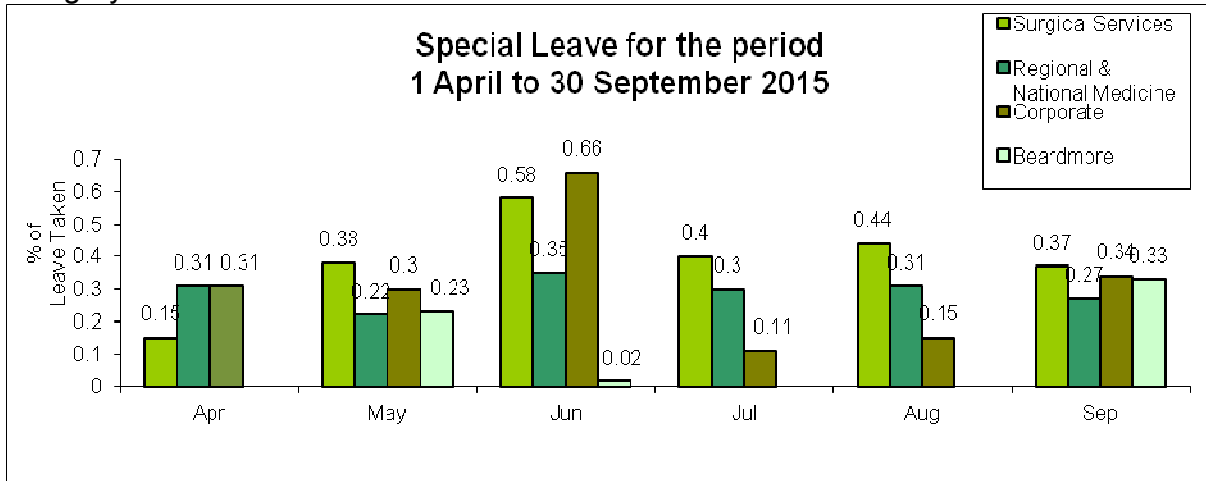


The Board reports sickness absence rates and sickness related to stress / anxiety through its Values Dashboard. This is then further analysed in conjunction with the stress risk assessment and Occupational Health to define what is work-related stress. Anxiety, stress and depression accounted for 40% of the overall absence reasons within the last 6 month reporting period; of this 40%, 18.16% of the sickness hours lost were attributed to work related stress. Managers, HR and Occupational Health continue to support staff who are absent with work related stress and this will normally involve an immediate referral to Occupational Health which will also explore the options to access other services to promote the individual's recovery.

4. WORK LIFE BALANCE

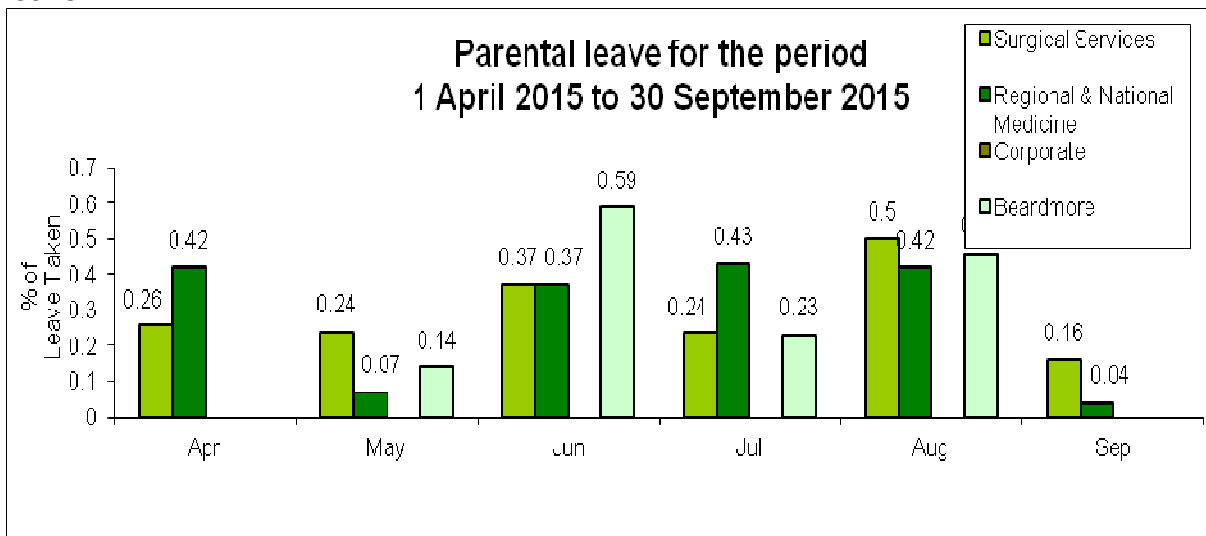
Special Leave

Managers remain fully aware of the reasons for the use of special leave and continue to utilise it appropriately. The number of hours granted for special leave has decreased by 115 hours over the past six months, which still remains low for the Board. It should be noted that carer leave, bereavement leave, etc are all recorded within the special leave category.



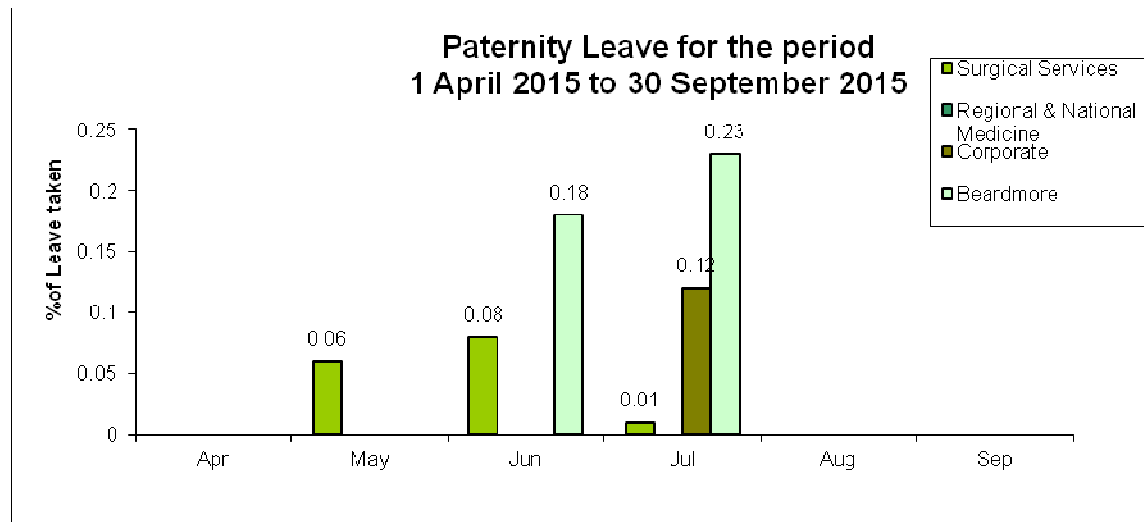
Parental Leave

The uptake of Parental Leave has increased by 922 hours during this period. Parental leave is generally applied for over the summer months when child care difficulties arise, hence the increase during the current 6 month reporting period to reflect a higher volume of parental leave being granted. Reminders are regularly given during meetings with managers to ensure that members of staff understand how to access this type of leave.



Paternity Leave

The number of staff taking Paternity Leave has decreased slightly over the past six months by 224 hours.



5. Equality and Diversity

We are committed to supporting and promoting dignity at work by creating an inclusive working environment. The Board approved a new Embracing Equality, Diversity and Human Rights Policy earlier this year. This policy makes equality, diversity and human rights at the heart of everything the Board does.

The information presented below is based on self-reporting by NWTCB staff. Data is collected via staff engagement forms when people join or change roles within the organisation.

The protected characteristics covered by the Equality Duty are:

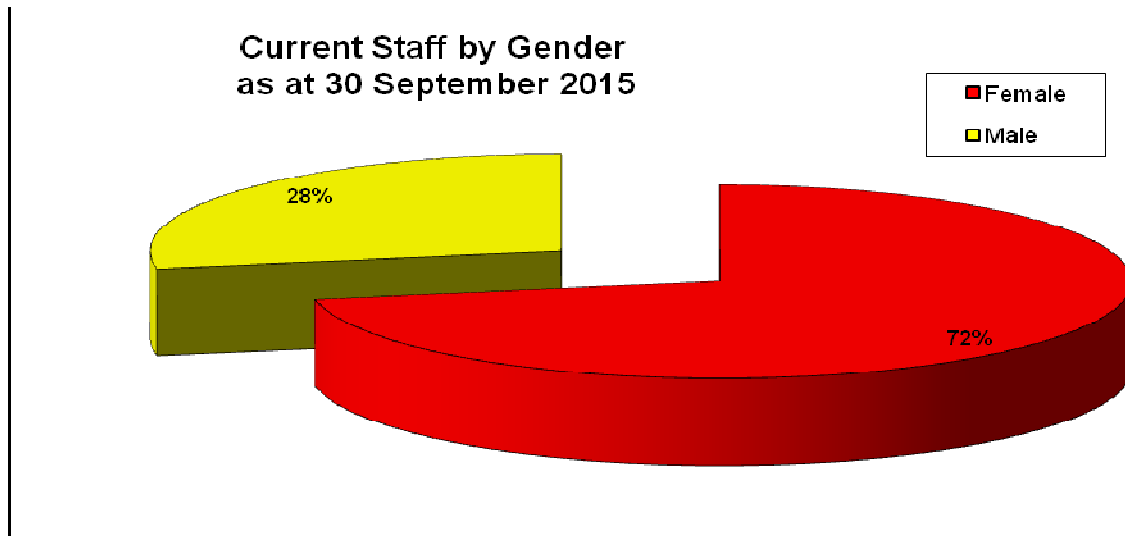
- 1 Gender
- 2 Age
- 3 Race
- 4 Faith and Belief
- 5 Disability
- 6 Sexual Orientation
- 7 Gender Reassignment
- 8 Pregnancy and Maternity
- 9 Marriage and Civil Partnerships

The protected characteristics not reported on in earlier sections are covered within this part of the report. We will continue to capture further data where possible and are using the implementation of our new Workforce system eESS to encourage staff to provide further information.

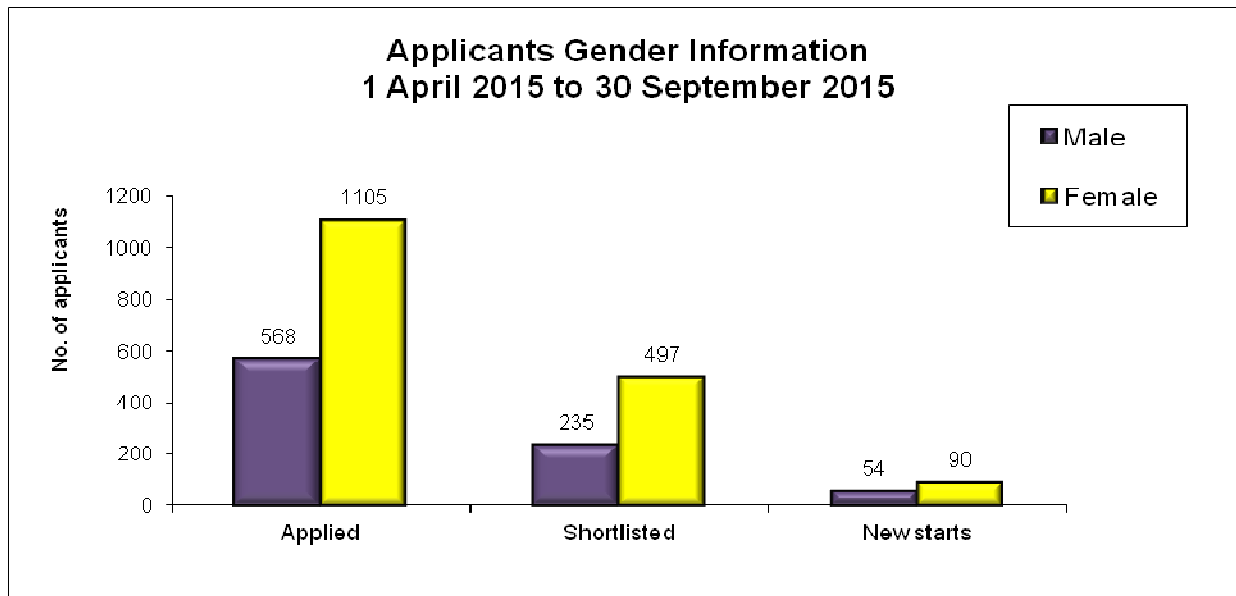
The Board has now trained 29 members of staff to be diversity champions in the Board and also is in its fourth year of holding an annual equalities week, which will be held in February 2016.

5.1 Gender

72% of the NWTC workforce is female. According to the last UK Census, there are roughly equal numbers of males and females in Scotland. Traditionally, however, most members of the Nursing and Allied Health Professions have been female, resulting in a much higher proportion of female to male staff. This is the case across NHS Scotland. We have increased our number of men employed in the Board by 35 over the past six months and 20 females.



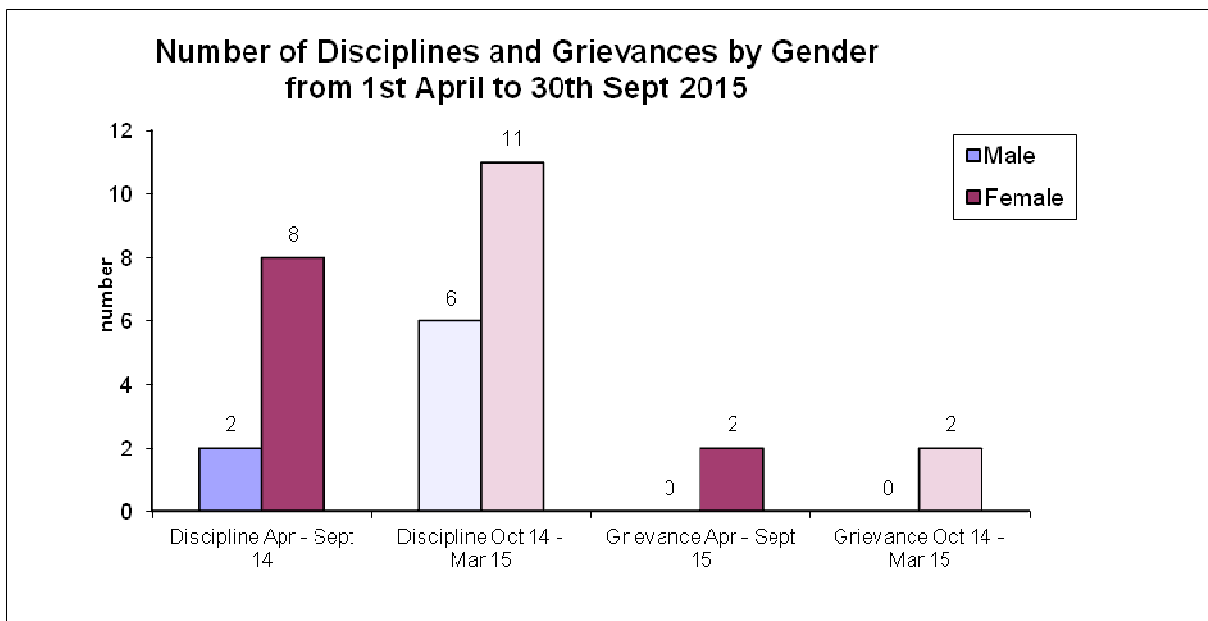
Gender and Recruitment



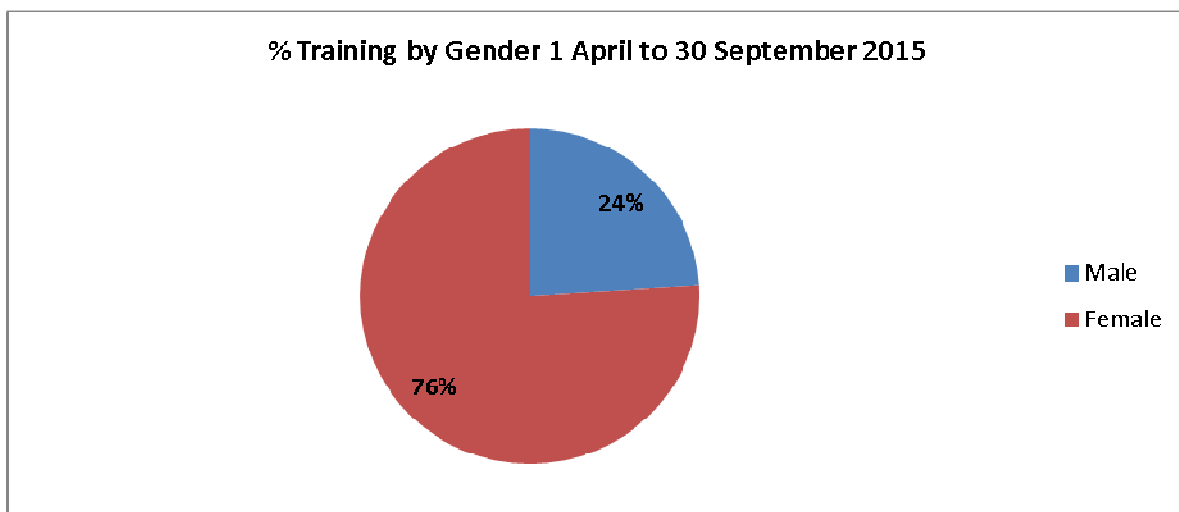
A total of 34% of applicants for our vacancies were male. Of these applicants, 32% were shortlisted, resulting in 37% of new starts. This resulted in 63% of new starts being female, which is in line with our current gender demographic in the Board. This is

an increase from the previous six-monthly report which highlighted that 32.48% of new starts were male.

All applications are shortlisted without information relating to gender and regular checks are carried out by the recruitment team into the quality of shortlisting to ensure fairness. Values based competency recruitment training continues to be delivered throughout the Board, with training for recruiting managers and supervisors. The following graph highlights the number of disciplines and grievances that have been undertaken in the Board over the past six months by gender with additional columns to indicate the numbers in the previous six month reporting period.

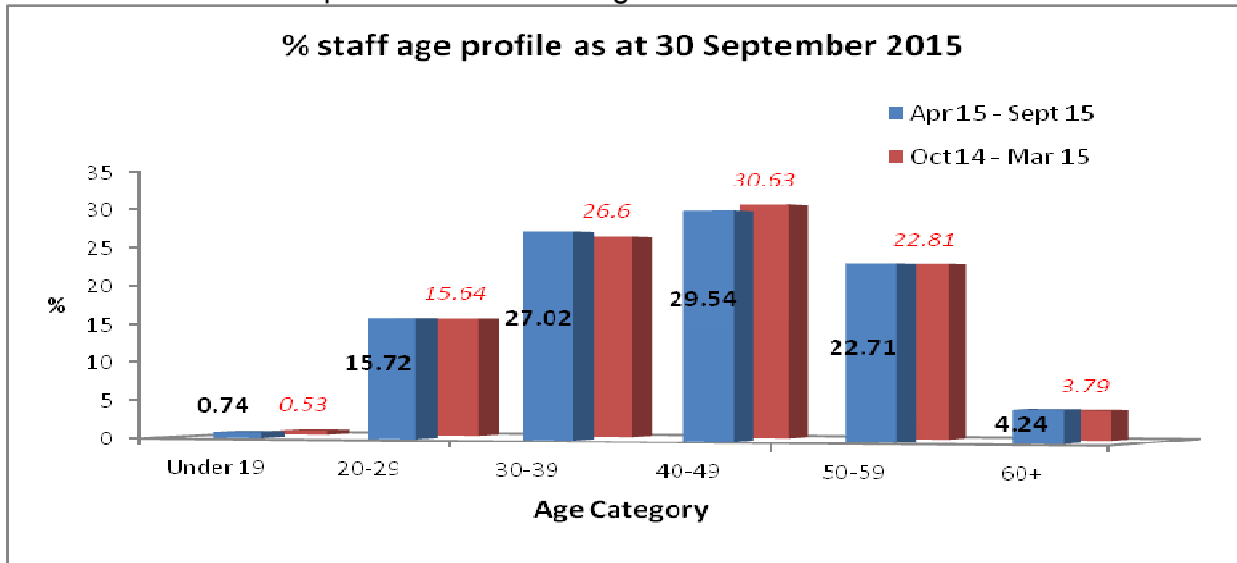


The graph below highlights the number of staff split by gender who have been on training in the past six months.



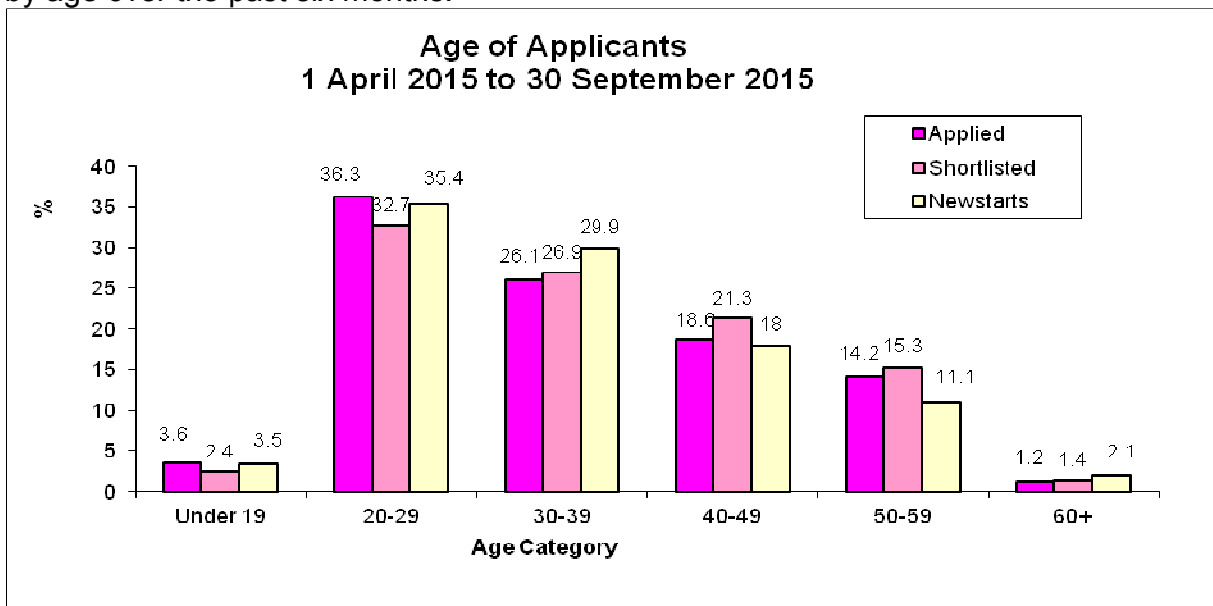
5.2 Age

The following chart illustrates the age profile of the Boards current workforce. Since the last reporting period there has been an increase in most categories with the exception of staff aged 40-49 and which has decreased by 1.093% and there has also been a decrease of 0.1% in staff aged 50-59. The age range of our current staff continues to be monitored to ensure that we are planning for future skill gaps where significant numbers of staff reach possible retirement age.



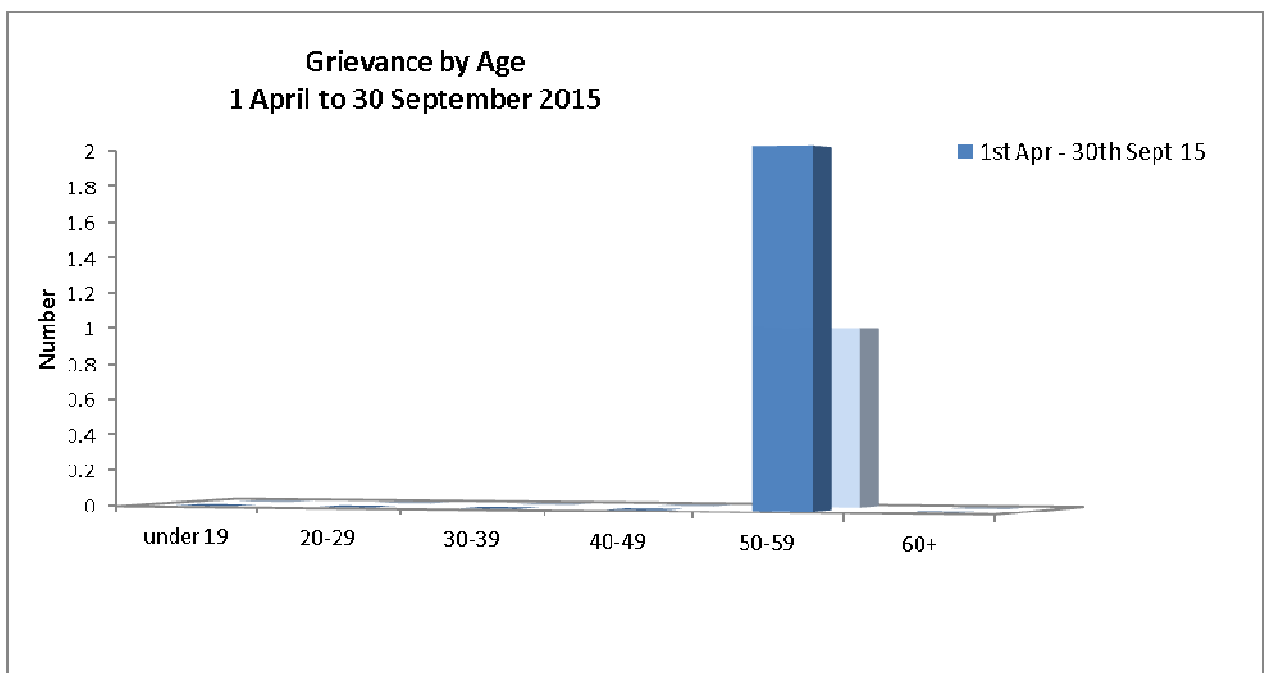
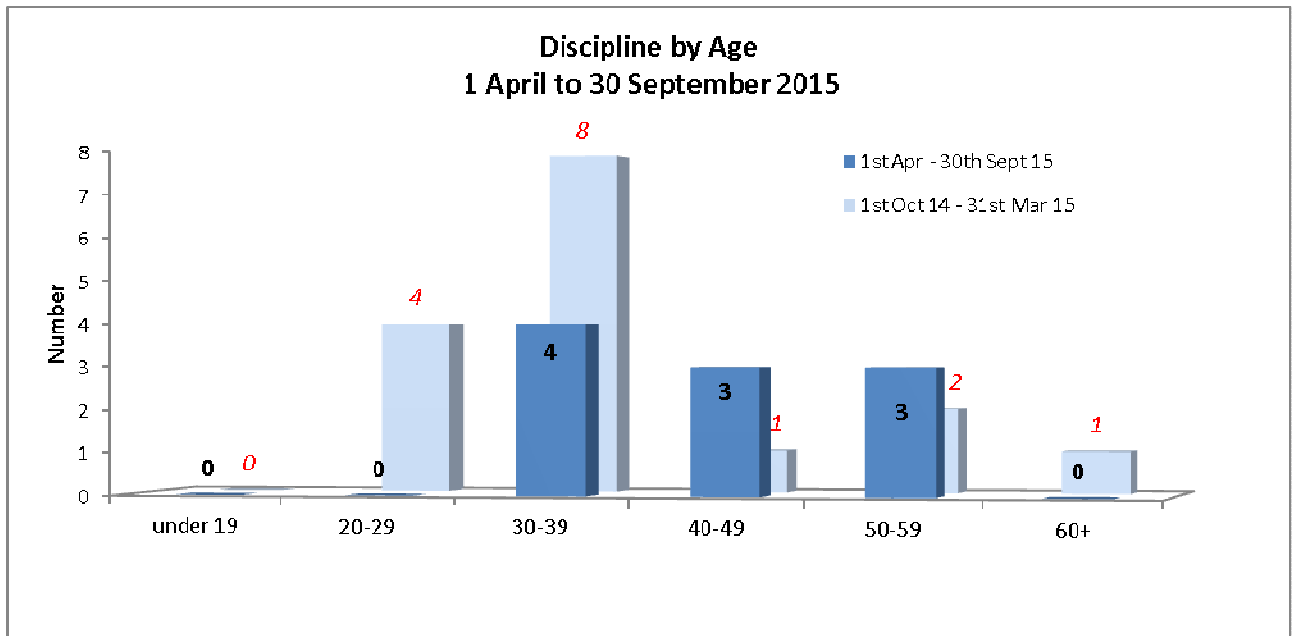
Age and Recruitment

The graph below highlights the numbers of staff who have applied for posts in the Board by age over the past six months.

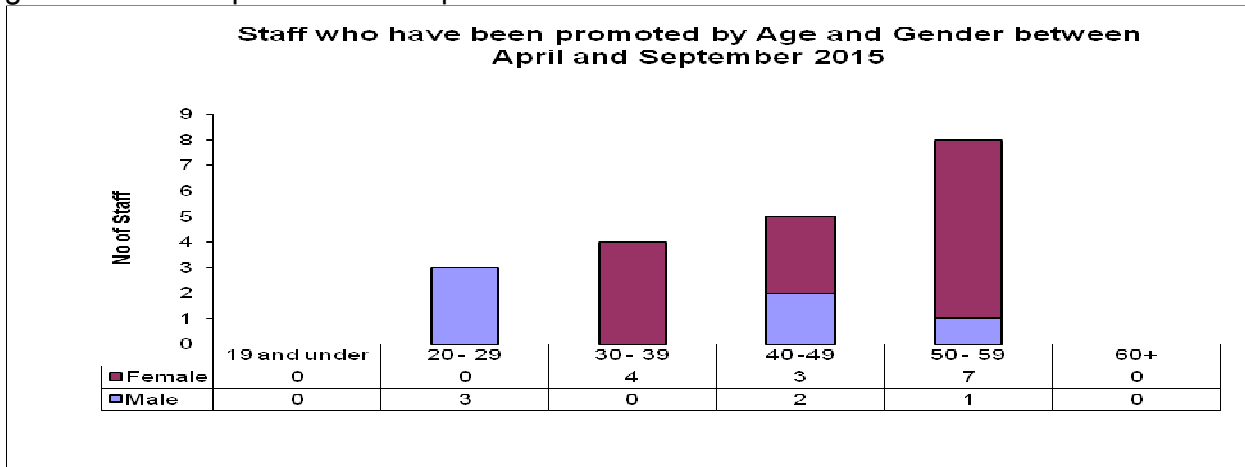


Over the past six months by percentage the most successful age range for appointments was once again within the 20-29 category. We will continue to monitor this trend over the next six months.

The following graphs highlight the number of disciplines and grievances by age range and also feature numbers from the previous reporting period.



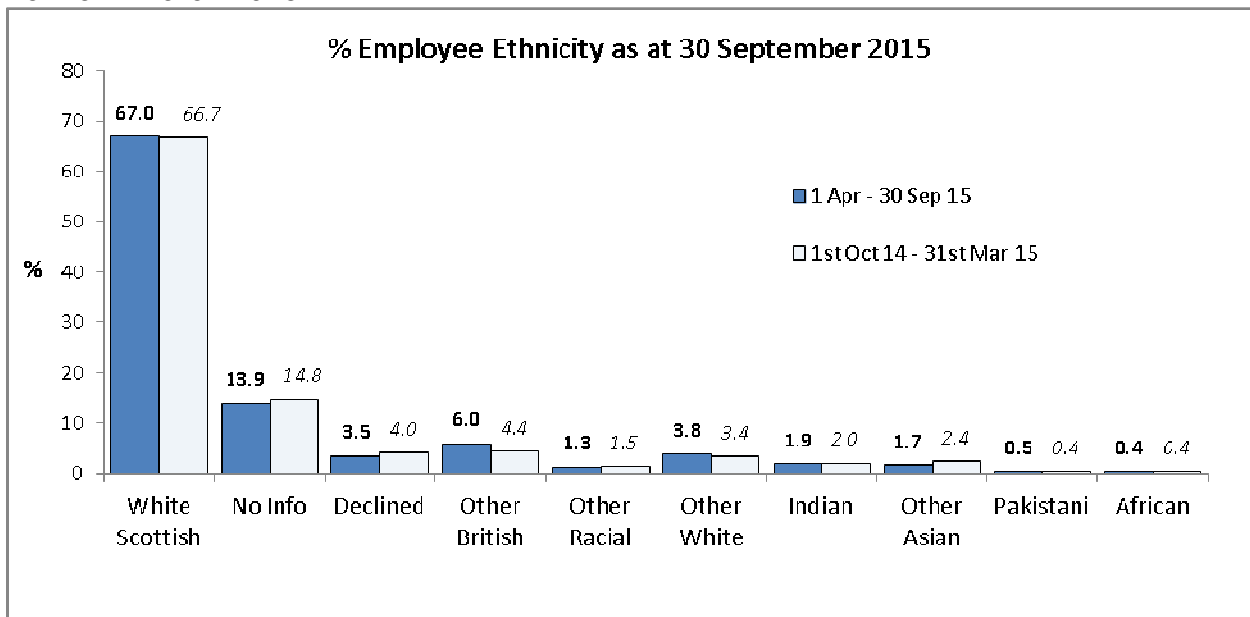
The following graph below highlights the staff who have been promoted by age and gender over the past six month period.



Compared to the previous 6 month reporting period, there has been no change for the gender split for the 19 and under whereby no individuals have been promoted within this age group. There has been an increase in the proportion of males who have been promoted within the 20-29 age group whereby all promotions within this group have been males, which is in contrast to the information contained within the previous six month reporting period.

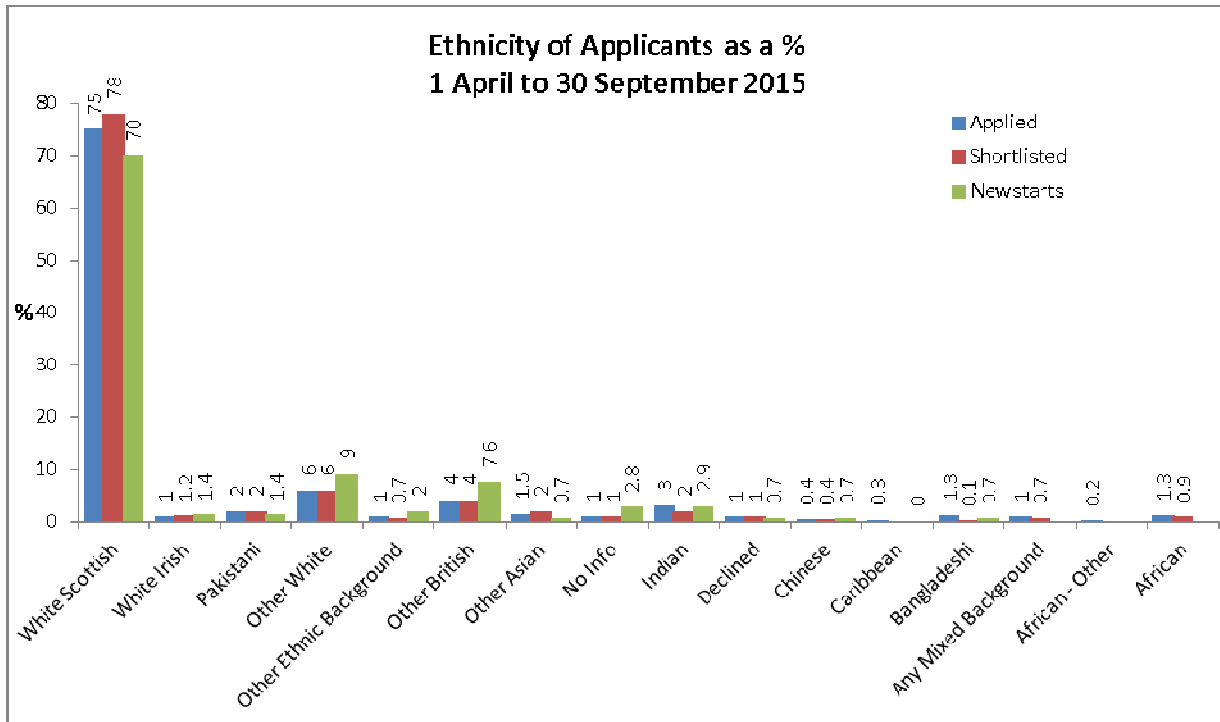
5.3 Race

The current racial split of our substantive staff is shown below; 5.8% of our staff are from minority ethnic groups. This is a slightly higher ratio than the 4% of the population of Scotland shown in the last UK Census. This figure also illustrates a 0.5% decrease from 31st March 2015.



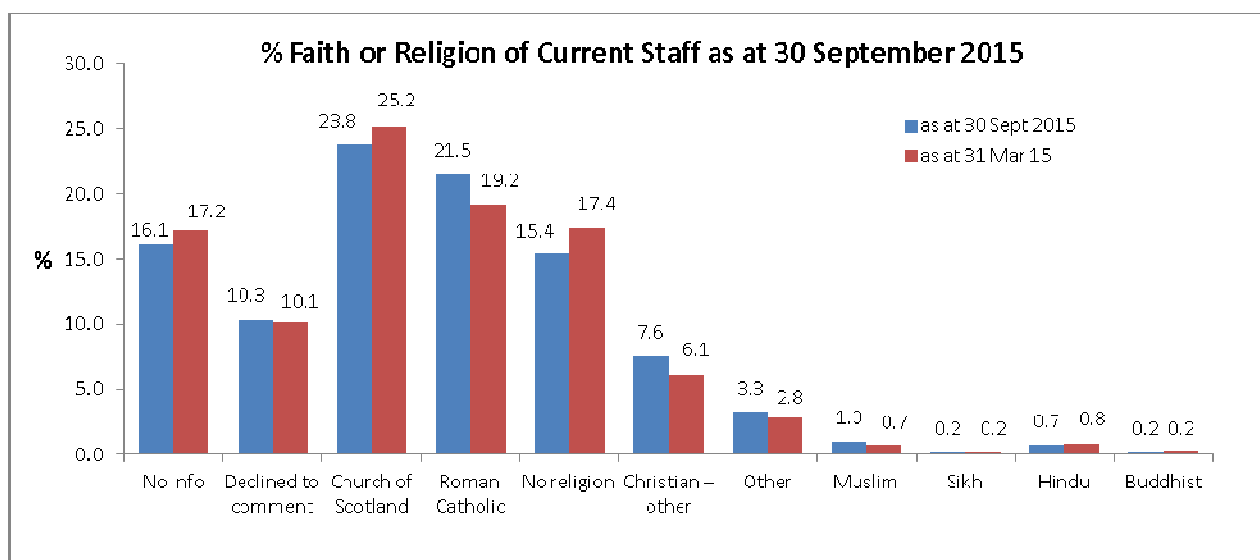
Ethnicity and Recruitment

Applications, interviewees and new starts continue to be predominantly White Scottish, which is in line with the last UK Census outcomes. Whilst we are required to advertise on the SHOW website, we are continually exploring other advertising mechanisms, including social media, to ensure that we advertise as widely as possible.



5.4 Religion, Faith and Belief

The Board continues to gather information in respect of the faith or religious beliefs of our staff. The amount of information recorded remains almost the same as the previous period, with information being recorded in respect of almost 84% of our staff. All faiths for which there are fewer than five members of staff (such as Jewish) are not reported individually and they are captured within the “other” category. The Board has less than 20% of employees where no information is held.



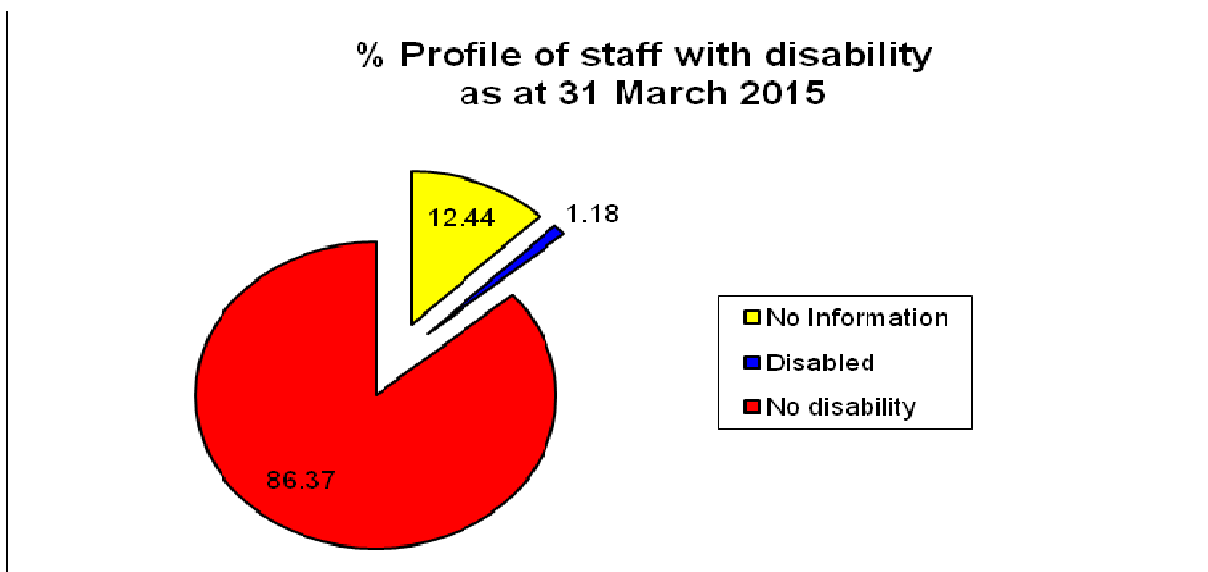
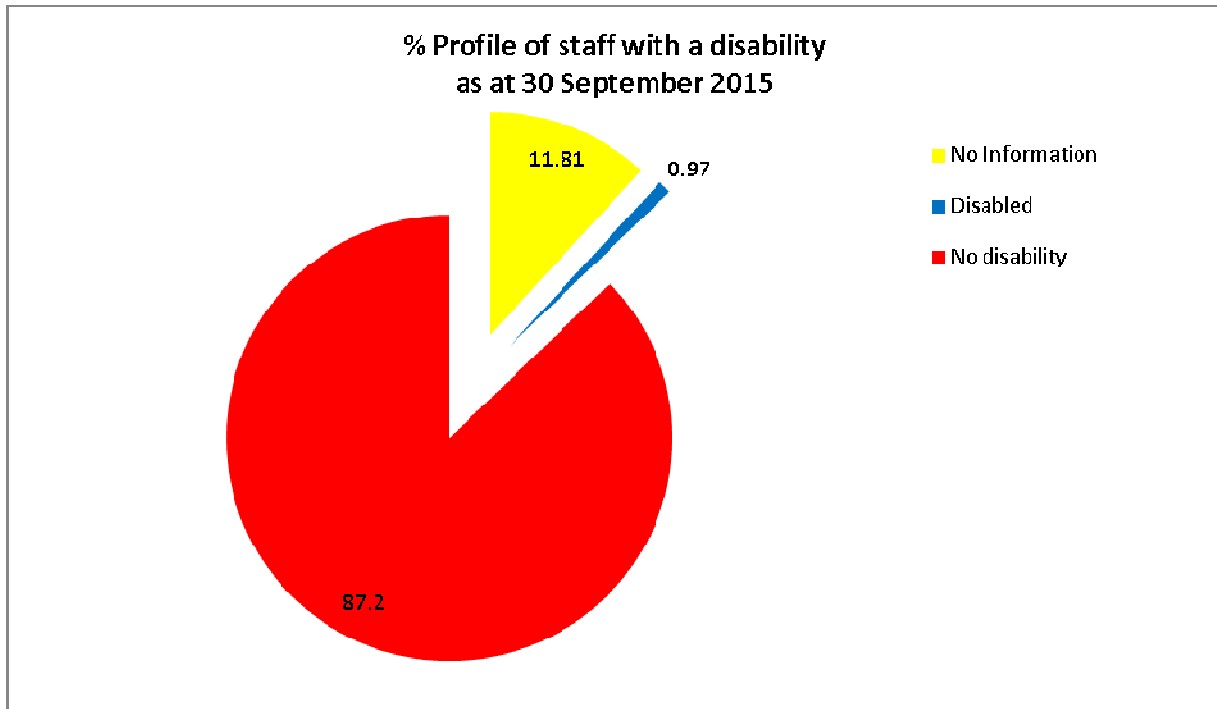
At all stages of the recruitment process, equality and diversity information is held confidentially within the HR Department and is not disclosed to managers. The data held is for monitoring and reporting purposes to ensure, as a Board, we meet our Public Sector Equality Duties and identify areas of concern and development. The table below highlights the applications received, shortlisted and successful applicant by faith or religion.

	Applied	Shortlisted	Newstarts	New Starts As a %
Buddhist	6	1	0	0
Christian – other	157	61	16	11.1
Church of Scotland	373	186	25	17.3
Declined to comment	190	80	19	13.2
Hindu	18	9	2	1.4
Muslim	70	24	5	3.5
No religion	414	155	34	23.6
Other	52	31	8	5.6
Jewish	1	0	0	0
Roman Catholic	387	183	34	23.6
Sikh	5	2	1	0.7

The table highlights that the majority of our applicants are Roman Catholic, Church of Scotland or of no religion. On closer examination, the no religion and Roman Catholic categories have delivered the most new appointments; however, appointments were made across almost all faith groups.

5.5 Disability

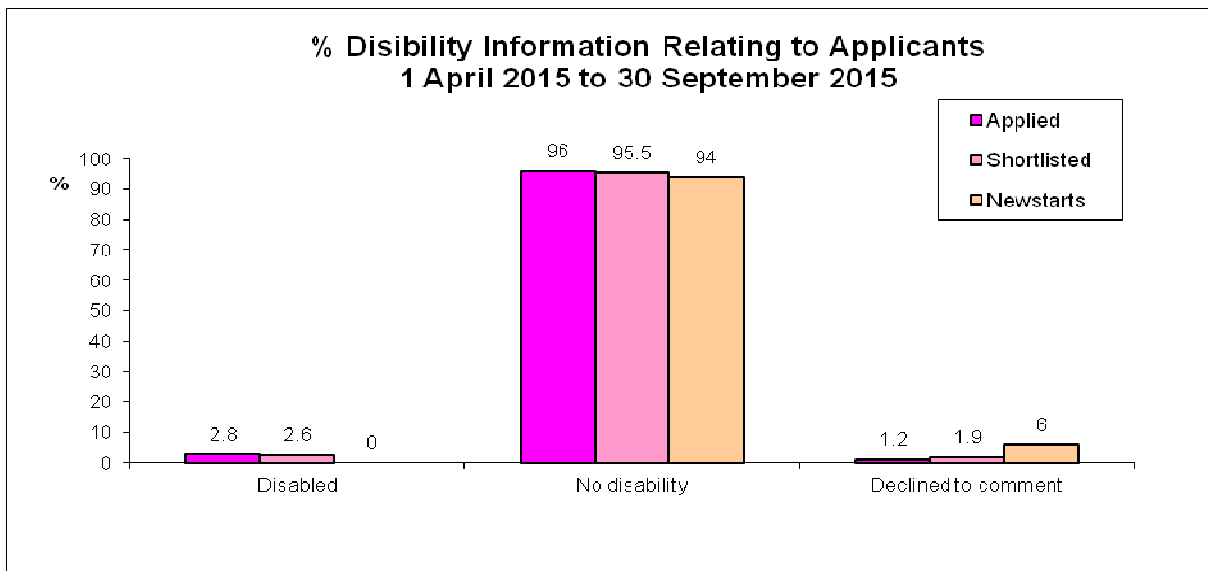
There has been little change to the information held in relation to this protected characteristic, with the number of staff for whom no information was held sitting at 11.81%. Of our current workforce, 0.97% reported that they have a disability. This is a very slight decrease from the previous reporting period, the chart for which is featured below.



The number of applicants declaring any type of disability has increased slightly for the Board. Of the 47 applicants who stated that they had a disability, 19 were shortlisted however, no appointments were made. This continues to be monitored, however, it demonstrates progress since the last six monthly report on applicants received, shortlisted and appointed.

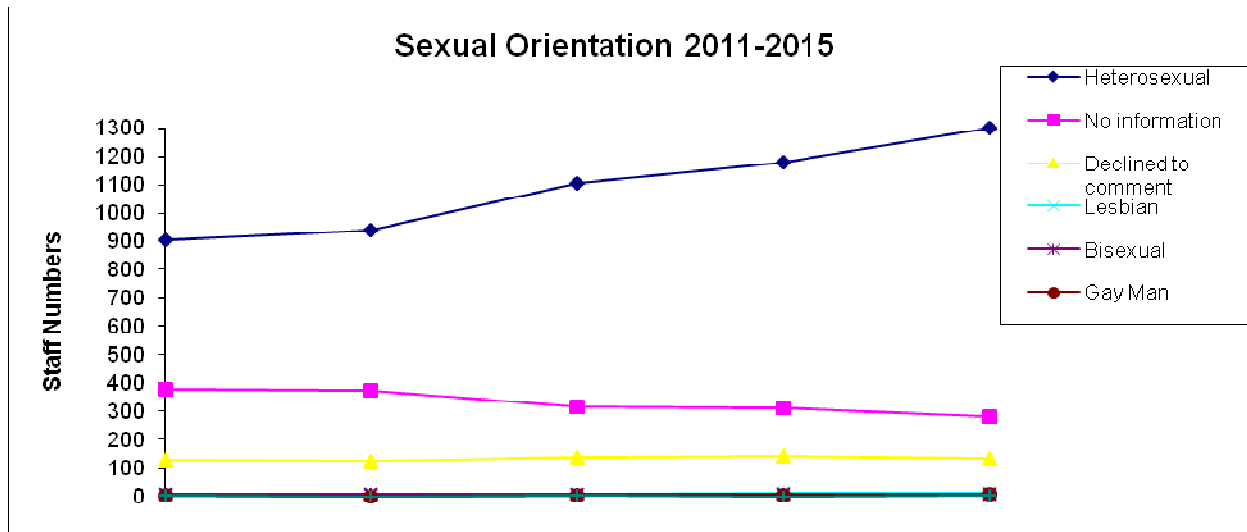
The Disability Symbol Scheme continues to be implemented fairly and consistently and is regularly monitored as part of the normal recruitment process. This ensures that anyone who indicates that they have a disability and meets the essential criteria for the role will be guaranteed an interview.

We continue to advertise vacancies on the SHOW website for financial reasons and also because of the number of applicants we currently receive. Vacancies listed on SHOW are automatically listed with Job Centre Plus in an attempt to reach a wider audience.



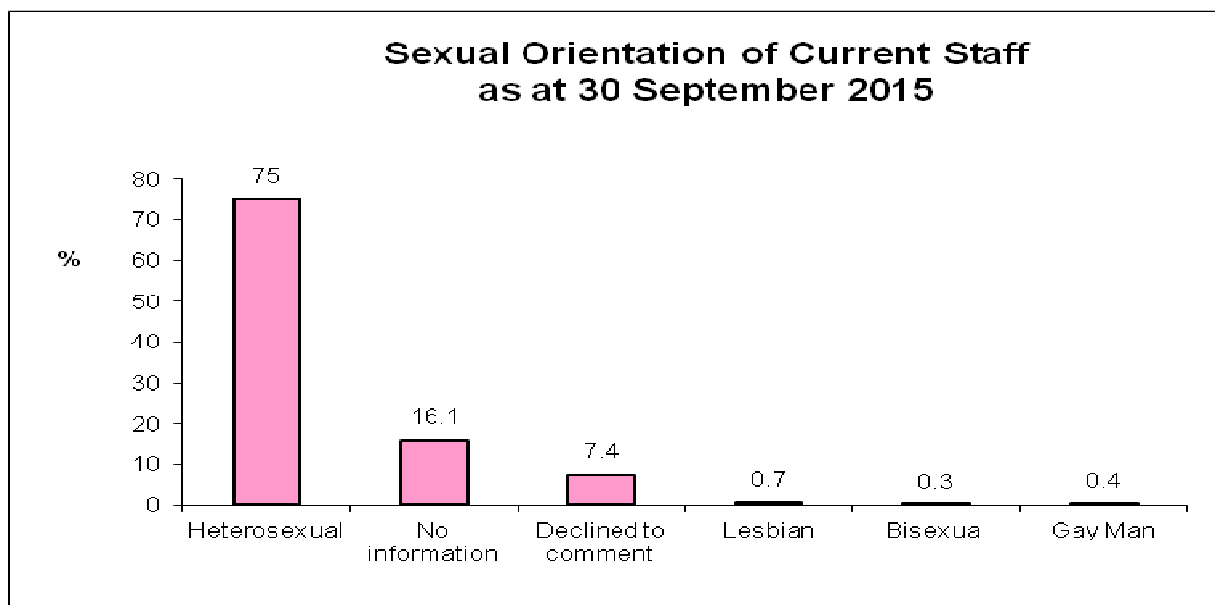
5.6 Sexual Orientation

Working with the Board Lead for Sexual Orientation, we have been able to undertake some trend analysis of the data held on sexual orientation over the past four years. The graph below illustrates that heterosexual staff have continued to increase year on year. Looking back over past 12 months, we can see a continued reduction in the 'no information held' within the Board. The following graph highlights the numbers of staff by sexual orientation.



The actual numbers are detailed in the following table:

	2011	2012	2013	2014	2015
Heterosexual	905	937	1104	1177	1300
No information	378	375	316	312	283
Declined to comment	128	123	140	141	133
Lesbian	7	6	9	10	12
Bisexual	6	7	7	8	6
Gay Man	4	0	5	5	7
other	2	0	2	0	2



The table below highlights the appointments by sexual orientation over the past six months. The number of individuals who have 'declined to comment' has reduced and further work will continue to try and reduce this further, however, this is down to personal choice of the applicant whether they wish to declare sexual orientation.

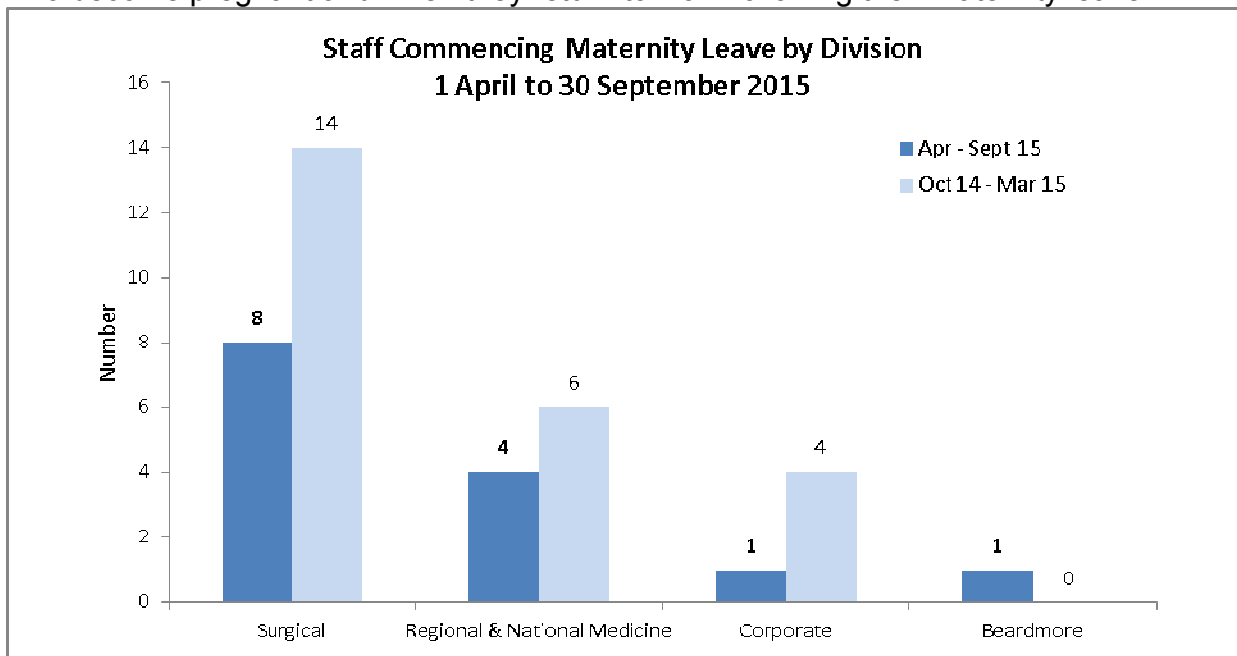
	Applied	Shortlisted	Newstarts	As a %
Heterosexual	1557	686	138	95.8
Declined to comment	51	21	3	2.1
No Info	31	14	1	0.7
Lesbian	5	1	1	0.7
Bisexual	8	2	0	0
Gay man	15	6	1	0.7
Other	6	2	0	0

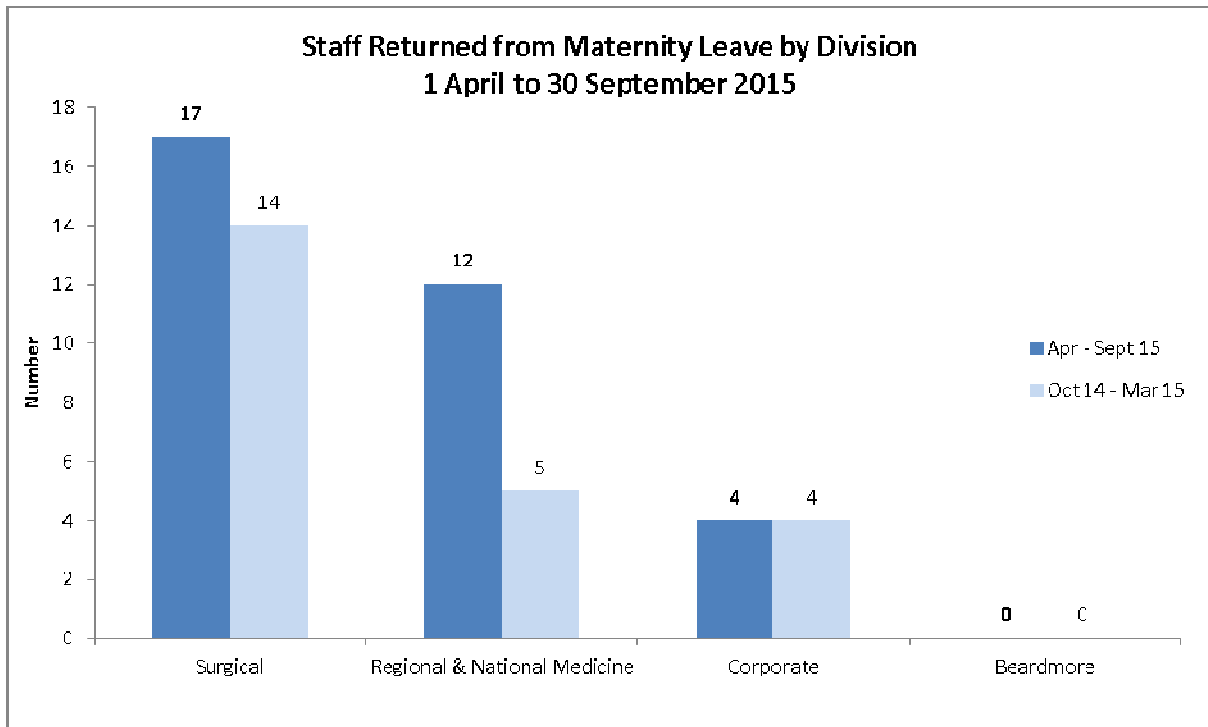
5.7 Gender Reassignment

We currently have no staff recorded in this category. The Board continues to update its Board policies and raise awareness for staff and managers about gender re-assignment with patients and with colleagues.

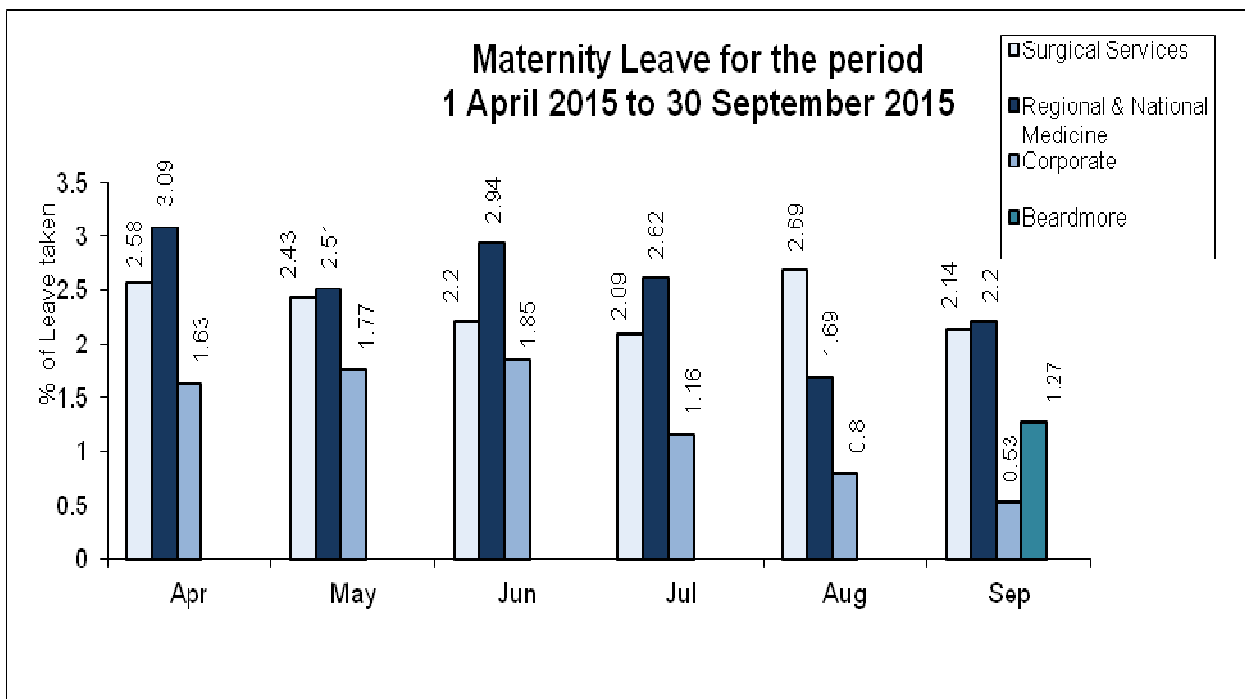
5.8 Pregnancy and Maternity

The Board now reports on the number of staff who have either commenced, or returned from, maternity leave during the last six months. The graphs providing this information by division are shown below. The Board continues to provide support to employees who become pregnant and when they return to work following their maternity leave.



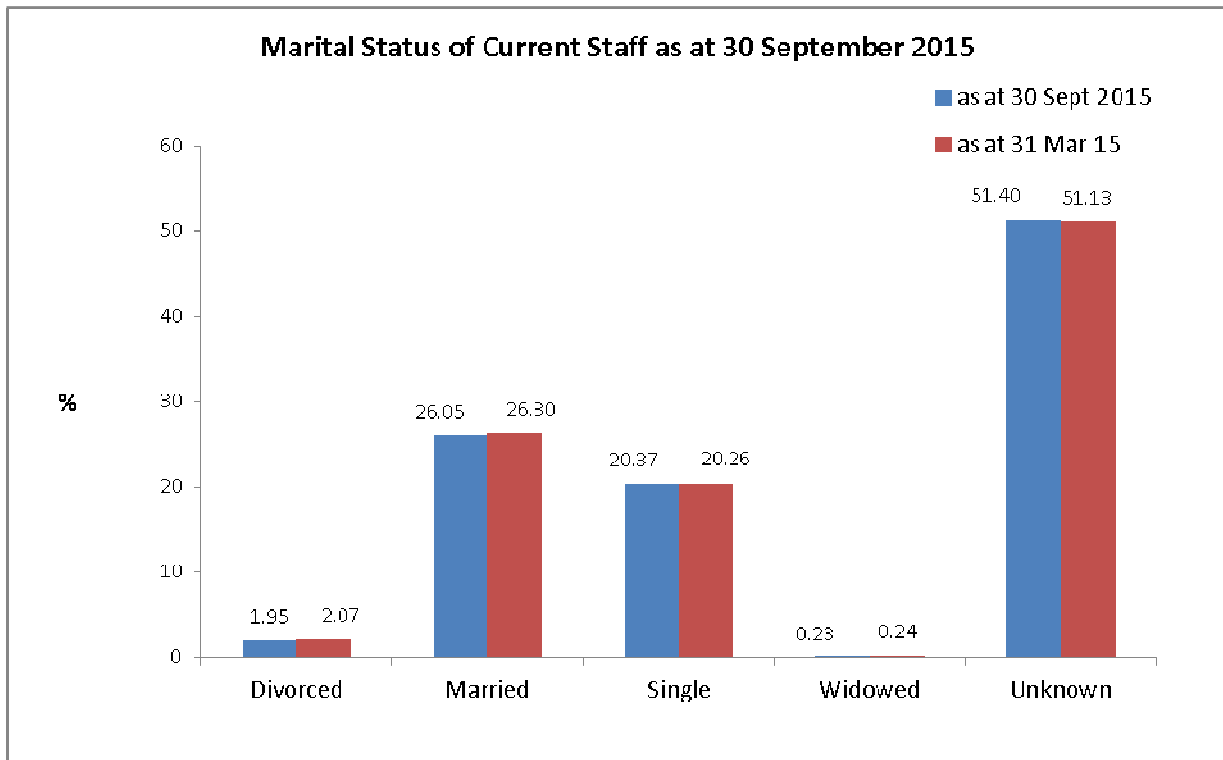


The number of staff taking Maternity Leave has decreased by 4611 hours to 30,419 hours in the past six months.



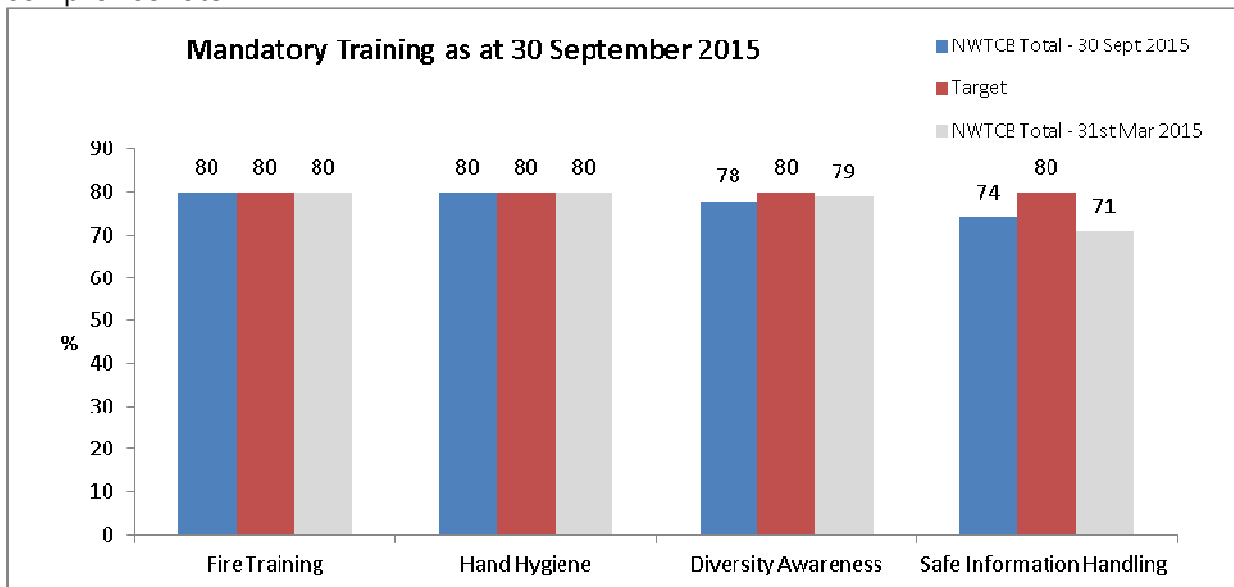
5.9 Marriage and Civil Partnership

According to the last UK Census, 45% of adults are noted as married (or remarried), whilst 35% of adults have never married or registered a civil partnership. Within our current staff, only 26.05% are listed as married which is significantly lower than the national profile.



6. DEVELOPMENT

The percentage of staff that have completed the mandatory training across the organisation by the 30 September 2015 can be viewed below. The Board has met two of the targets for Fire Training and Hand Hygiene. The Board has now developed an in-house e-learning module for Safe Information Handling which will hopefully improve the compliance rate.



Personal Development Reviews

The percentage of staff with a current PDR by Directorate is highlighted below as at 30th September 2015. The overall Board percentage was 69% which indicates an increase compared to 30th September 2014 where the Board was sitting at 59%.

