



# Workforce Monitoring Report

1 October 2014 – 31 March 2015

	Executive Summary	3
SECTION 1	CURRENT WORKFORCE	5
SECTION 2	RECRUITMENT	8
SECTION 3	SICKNESS ABSENCE	10
SECTION 4	WORK-LIFE BALANCE	13
<b>SECTION 5</b> 5.1 5.2 5.3 5.4 5.5 5.6 5.7 5.8 5.9	PROTECTED CHARACTERISTS Gender Age Race Faith & Religion Disability Sexual Orientation Gender Reassignment Pregnancy & Maternity Marriage and Civil Partnership	16 18 20 22 23 24 26 27 28

#### **EXECUTIVE SUMMARY**

#### Introduction

This six monthly Workforce Monitoring Report covers the period 1<sup>st</sup> October 2014 to 31<sup>st</sup> March 2015.

The table below illustrates the key workforce information over the past six months. The Board headcount has increased by 35 to 1,688. The increase is a result of the continued expansion programme across a number of different areas within the Board. Our employee's average age remains in the 40-49 age bracket although the gap is closing with staff aged 30-39. The summary below highlights that the Boards percentage of staff with a disability has increased slightly and the percentage of staff from an ethnic minority has decreased.

Summary of Key Employee Information				
	Sep 13	Mar 14	Sep 14	Mar 15
Headcount	1492	1583	1653	1688
Male/Female ratio	1 in 3	1 in 3	1 in 3	1 in 3
Percentage of staff with a disability	0.93%	0.95%	1.15%	1.18%
Age bracket containing highest number of staff	40-49	40-49	40-49	40-49
Percentage of staff in an ethnic minority group	4.15%	5.5%	6.72%	6.3%

## **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 1<sup>st</sup> October 2014 to 31<sup>st</sup> March 2015.

# **Recruitment Activity**

Recruitment activity has reduced from 192 to 155 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 35, which equates to a 2.18% increase of our total workforce.

#### Sickness Absence

The overall sickness absence figure for the last 12 months is 4.51%. This is an increase of 0.34% 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 and 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.

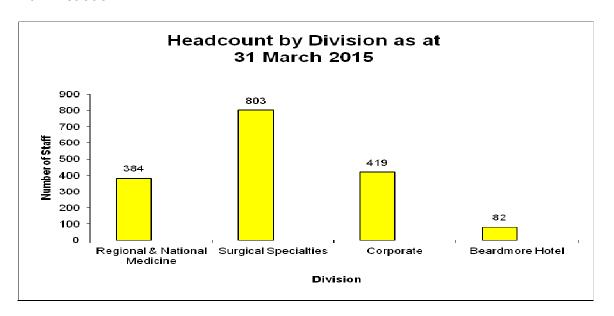
#### **Performance Management**

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. 80% of agenda for change staff has undertaken a current KSF PDR by the 31<sup>st</sup> March 2015 which achieved the HEAT standard. Senior Managers performance is reviewed annually and continues with 100% compliance rates.

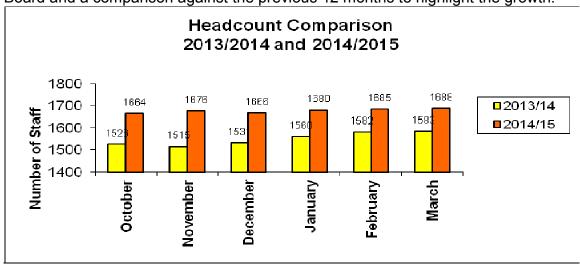
Laura Liddle
Acting Head of Human Resources
March 2015

## 1. CURRENT WORKFORCE

The number of substantive staff employed by the Board at the 31 March 2015 is shown below by Division. Headcount has increased within the past 6 months by 35 (WTE) to a total of 1,688. The roles recruited to have been across all job families but the majority continue to be within Nursing, Medical and Administration.

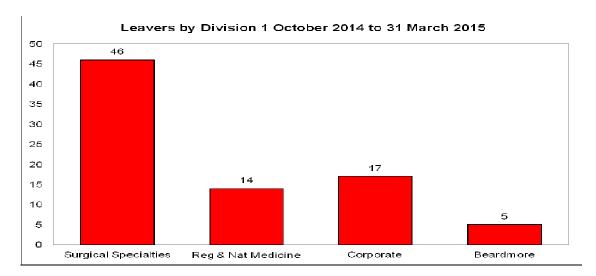


The graph below illustrates a month on month increase in headcount within the Board and a comparison against the previous 12 months to highlight the growth.

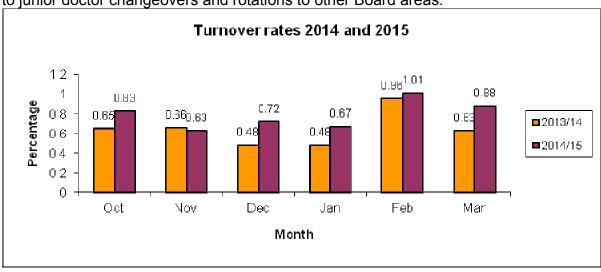


## **Employee Turnover**

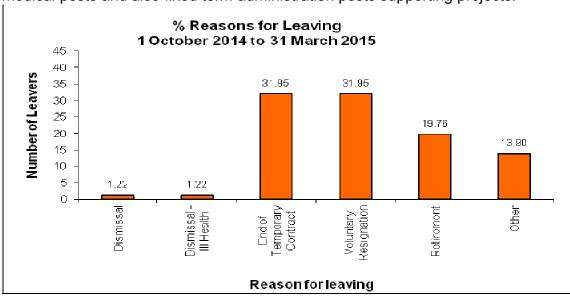
Employee turnover remains low, with a total number of leavers for the six-month reporting period at 82. The total number of staff leaving in this period has decreased slightly from 97 to 82 for the previous six-month period. Exit Interviews continue to be carried out with all leavers, with these being 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% apart over the past 6 months. The turnover percentage for the past 12 months is 10.98%, which is a slight increase 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 reason end of temporary contract is made up mainly from fixed term medical posts and also fixed term administration posts supporting projects.



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.

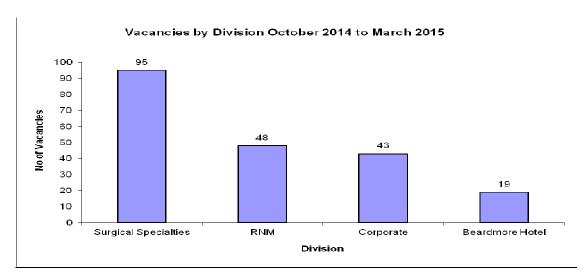


No particular trends have been identified from the exit interview data over the past six months. Exit interview feedback forms are shared with the appropriate line manager and the relevant Senior Manager. They are also taken into consideration in relation to any departmental investigations to ensure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

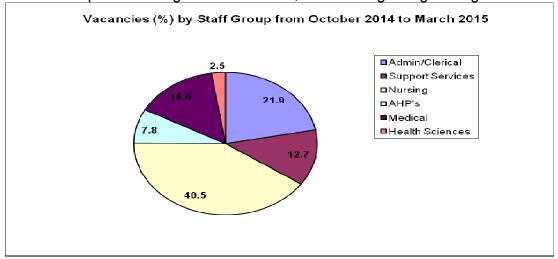
#### 2. RECRUITMENT

Recruitment activity has reduced since the last six-month monitoring period. The figures show a reduction in vacancies across all divisions, with a total of 155 vacancies against 192 vacancies in the previous reporting period. The volume of recruitment continues to be 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.

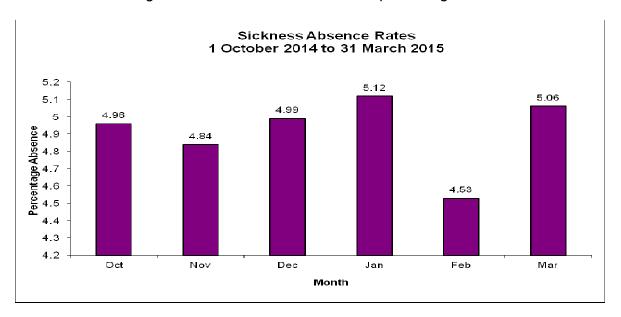


Over the past six months, the recruitment team has processed 1,533 application forms. Out of these, 576 were shortlisted for interview and 117 new employees appointed to posts.

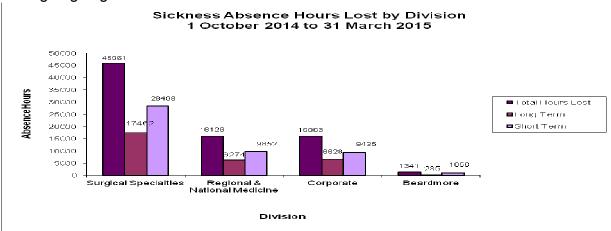
Significant work has taken place over the last six month period to standardise and improve the processes within the Recruitment function in order to reduce the timescales to recruit. As a result of this work a number of Key Performance Indicators were agreed and feedback to date has indicated that performance 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 12 months is 4.51% which is higher than the Heat Standard of 4% and Managers and Human Resources continue to work together to address this increase in percentage.

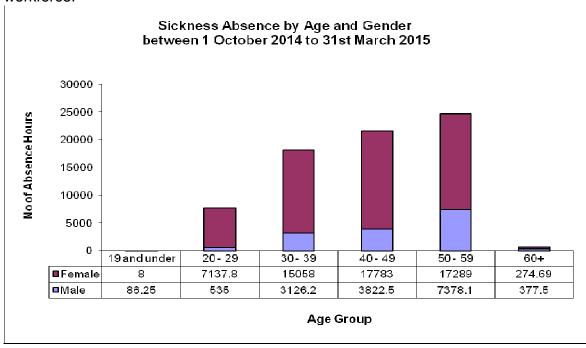


Long term absence has increased by 8921 hours and short term absence increased by 4532 hours over the past six months. This meant that total hours lost to sickness absence has increased by 13,454 hours over the past six months which equates to an estimated cost pressure of £174,054 over that period due to increased long and short term absence in the Board. Measures continue to be in place to monitor and manage all types of absence to ensure this is appropriately managed going forward.

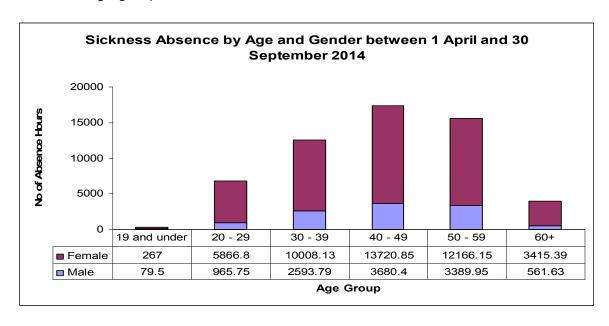


The graph below has split the sickness absence hours lost over the past six months by age and gender to examine if any underlying trends are present.

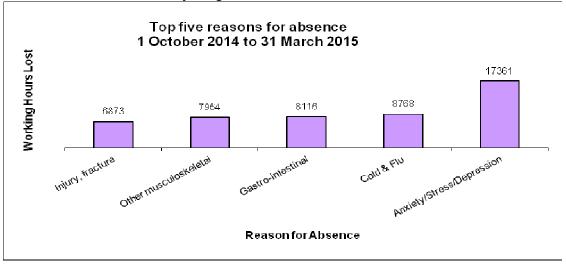
However the data does illustrate that our highest sickness is by females in the 40-49 age range. This is in line with the average age and gender of our workforce.



Below is the data from the previous 6 month period where the highest sickness was also by females within the 40-49 age range. There has also been an increase overall in the 50-59 staff group and a reduction in sickness by females in the 60+ age group.



The top five reasons for absence remain unchanged. Anxiety remains the most significant and accounts for 35% of the total hours lost for the period. This figure has increased since the last reporting period. Cold and Flu is the second highest reason for sickness absence in the reporting period, accounting for 17.8% 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.

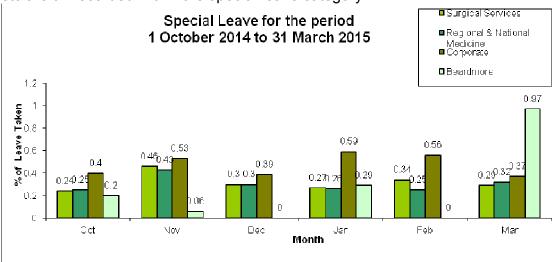


The Board reports sickness absence rates and sickness related to stress / anxiety through its Values Dashboard. This is then further analysed in conjunction with the stress risk assessment and Occupational Health to define what is work-related stress. The current percentage as at 31<sup>st</sup> March 2015 for staff absent with work related stress is at 0.46% of the overall stress related absence figure.

#### 4. WORK LIFE BALANCE

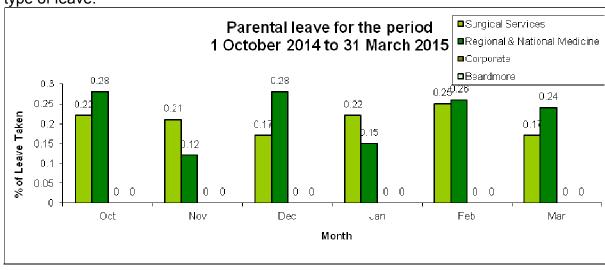
## **Special Leave**

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 48 hours over the past six months, which still remains low for the Board. It should be noted that hospital appointments, bereavement leave, etc are all recorded within the special leave category.



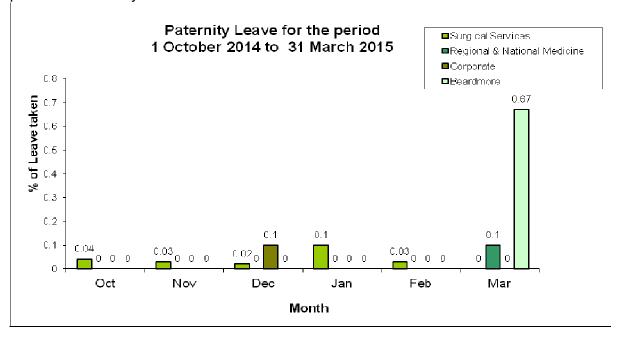
# **Parental Leave**

The uptake of Parental Leave has decreased 845 hours during this period. Parental leave is generally applied for over the summer months when child care difficulties arise, hence the previous 6 month period indicating 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 also decreased slightly over the past six months by 43 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:

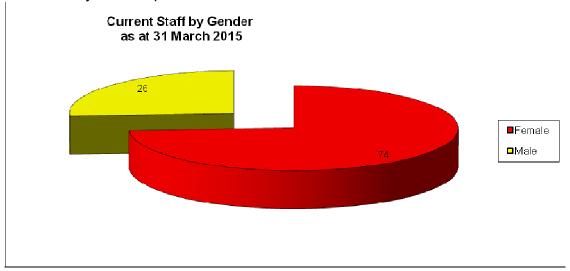
- 1 Gender
- 2 Age
- 3 Race
- 4 Faith and Belief
- 5 Disability
- 6 Sexual Orientation
- 7 Gender Reassignment
- 8 Pregnancy and Maternity
- 9 Marriage and Civil Partnerships

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.

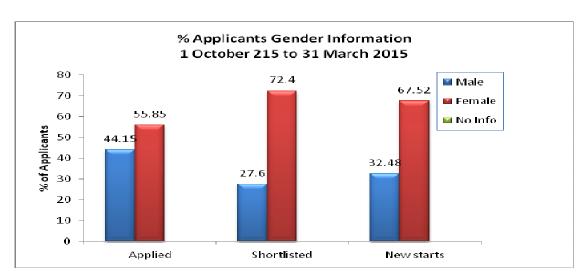
The Board has now trained 30 members of staff to be diversity champions in the Board and also is in its fourth year of holding an annual equalities week every October.

#### 5.1 Gender

73% 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 15 over past six months and 20 females.



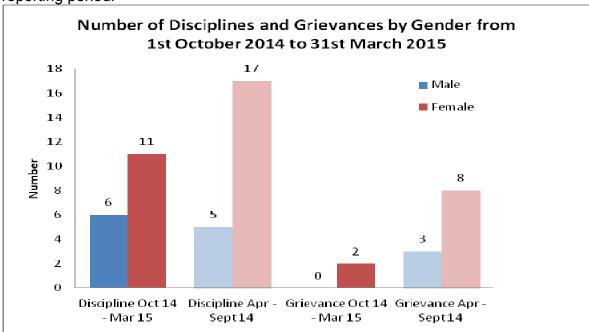
### **Gender and Recruitment**



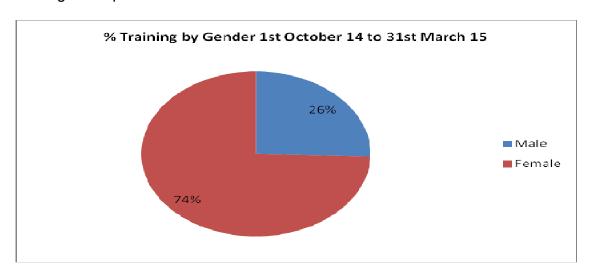
A total of 44.15% of applicants for our vacancies were male. Of this 33%, 27.6% were shortlisted, translating into 32.48% of new starts. This still left 67.52% of new starters being female, which is in line with our current gender demographic in the Board. This figure is in line with our staffing complement. This is a slight

increase from the previous six-monthly report which highlighted that 31.3% 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.

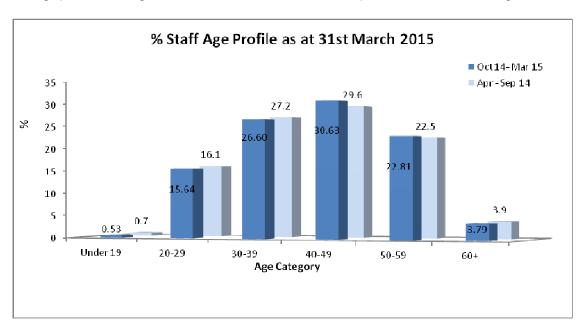


The graph below highlights the number of staff split by gender who have been on training in the past six months.



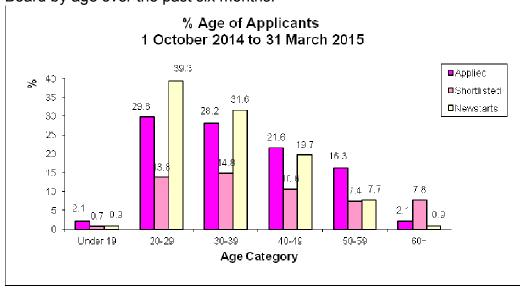
# 5.2 Age

The following chart illustrates the age profile of the Boards current workforce. Since the last reporting period there has been a decrease in most categories with the exception of staff aged 40-49 which has increased by 1.03% and there has also been an increase of 0.31% 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.

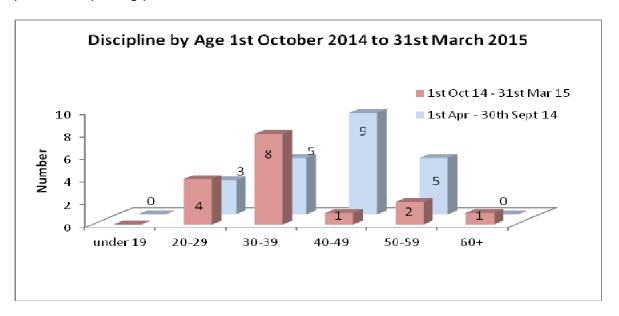


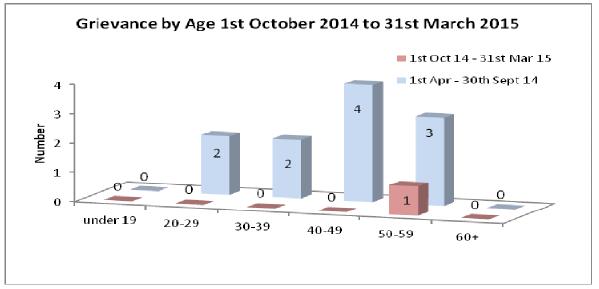
# Age and Recruitment

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

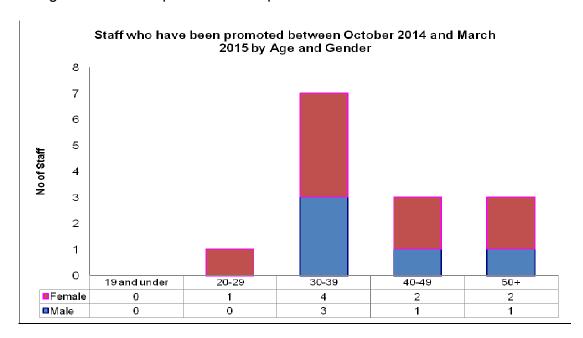


Over the past six months by percentage the most successful age range for appointments was the 20-29 category. We will continue to monitor this trend over the next six months. The following graphs highlight the number of disciplines and grievances by age range and also feature numbers from the previous reporting period.





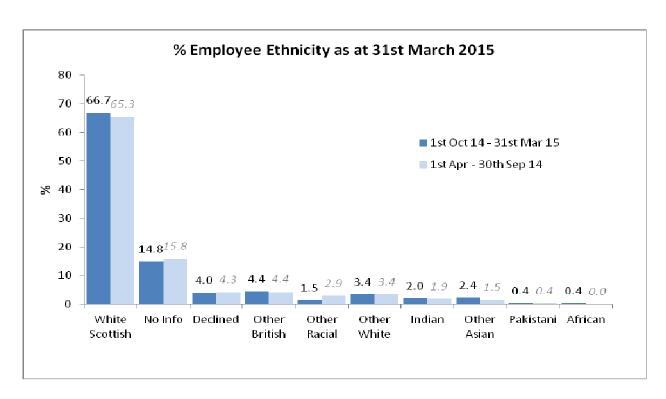
The following graph below highlights the staff who have been promoted by age and gender over the past six month period.



Compared to the previous 6 month reporting period, there has been no change for the gender split for the 19 and under and 30-39 age groups. There has been a decrease in the proportion of males who have been promoted within the 20-29. Within the 40-49 age group the number of males who have been promoted has increased from 14% to 33% and for the over 50 age group this proportion has increased by 33%.

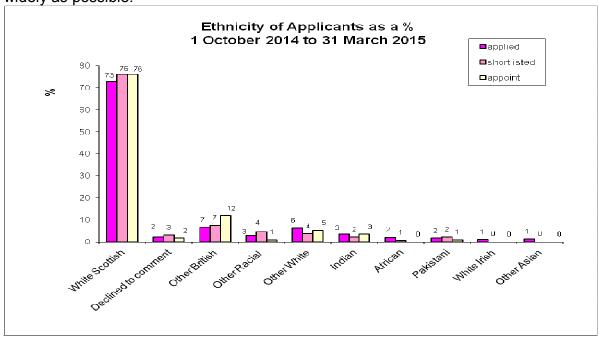
## 5.3 Race

The current racial split of our substantive staff is shown below; 6.3% 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 0.42% decrease from 30<sup>th</sup> September 2014.



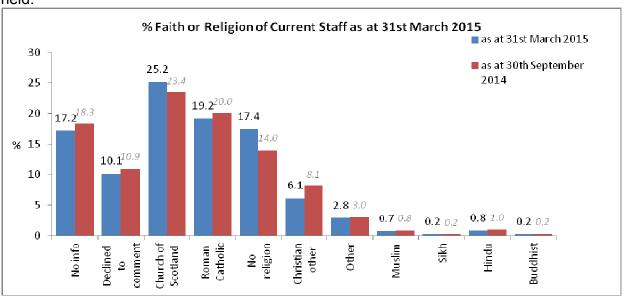
# **Ethnicity and Recruitment**

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 recording in respect of 82% 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.

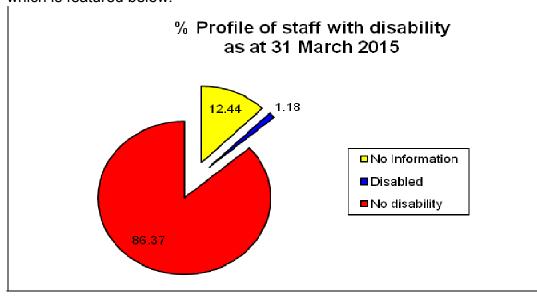
	Applied	Shortlisted	New starts	as a %
Buddhist	4	1	0	0
Christian – other	102	57	17	16.67
Church of Scotland	243	131	25	10.29
Declined to comment	128	68	12	9.38
Hindu	20	8	0	0
Muslim	22	8	1	4.54
No religion	266	152	35	13.16
Other	39	26	6	15.38
Jewish	1	1	0	0
Roman Catholic	241	128	20	8.3
Sikh	3	2	1	33.33

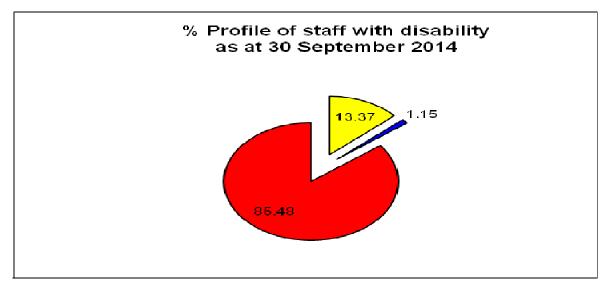
The table highlights that the majority of our applicants are Roman Catholic, Church of Scotland or of no religion. On closer examination, the no religion

category has 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 12.44%. Of our current workforce, 1.18% reported that they have a disability. This is a very slight increase from the previous reporting period, the chart for which is featured below.



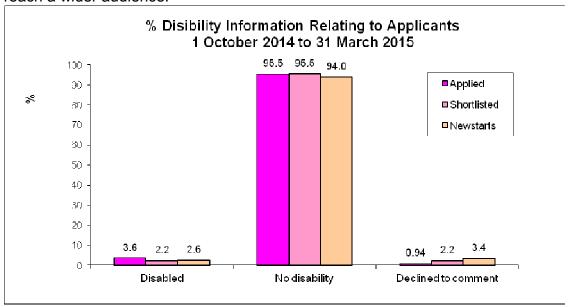


The number of applicants declaring any type of disability continues to increase for the Board. Of the 38 applicants who stated that they had a disability, 3 were shortlisted and 3 were appointed. This continues to be monitored, however, it

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.

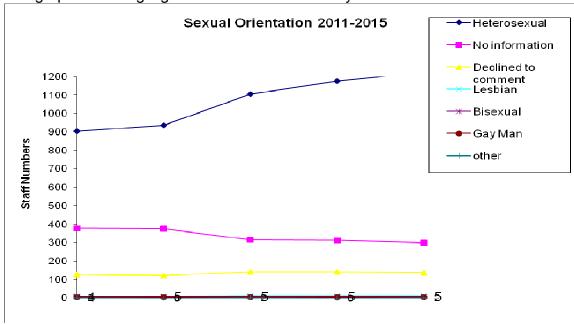
We continue to advertise vacancies on the SHOW website for financial reasons and also because of the number of applicants we currently receive. Vacancies listed on SHOW are automatically listed with Job Centre Plus in an attempt to reach a wider audience.



## 5.6 Sexual Orientation

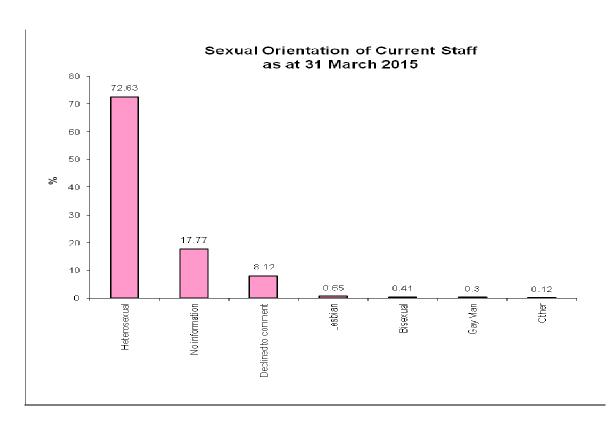
Working with the Board Lead for Sexual Orientation, we have been able to undertake some trend analysis of the data held on sexual orientation over the past four years. The graph below illustrates that heterosexual staff have continued to increase year on year. Looking back over past 12 months, we can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

The graph below highlights the numbers of staff by sexual orientation.



The actual numbers are detailed in the table below.

The detail numbers are detailed in the table below.					
	2011	2012	2013	2014	2015
Heterosexual	905	937	1104	1177	1226
No information	378	375	316	312	300
Declined to comment	128	123	140	141	137
Lesbian	7	6	9	10	11
Bisexual	6	7	7	8	7
Gay Man	4	5	5	5	5
other	2	0	2	0	2



The table below highlights the appointments by sexual orientation over the past six months. Further work will be undertaken to try and reduce the 'declined to comments' but this is down to personal choice of the applicant whether they wish to declare sexual orientation.

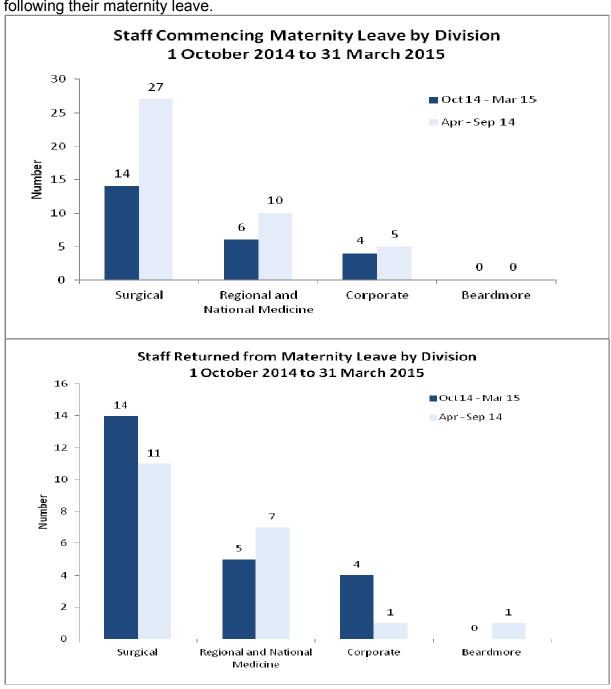
	Applied	Shortlisted	Newstarts	as a %
Heterosexual	993	542	112	92.9
Declined to comment	52	28	2	4.9
No Info	10	3	1	0.93
Lesbian	2	2	1	0.19
Bisexual	3	1	0	0.28
Gay man	8	6	1	0.7
Other	1	0	0	0.09

# 5.7 Gender Reassignment

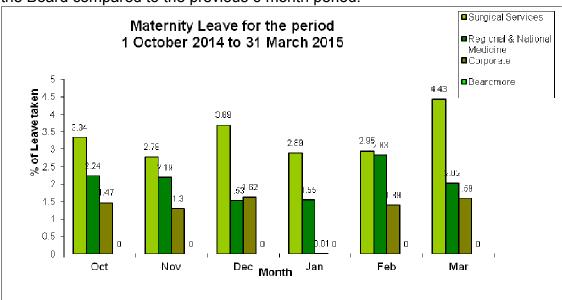
We currently have no staff recorded in this category. The Board continues to update its Board policies and raise awareness for staff and managers about gender re-assignment with patients and with colleagues.

# 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.

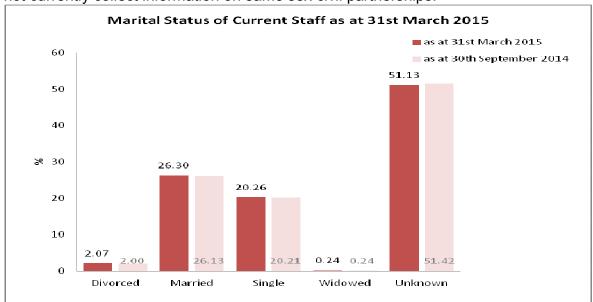


The number of staff taking Maternity Leave has decreased by 32,944 hours to 34,030 hours in the past six months. This is a large decrease, almost 43%, for the Board compared to the previous 6 month period.



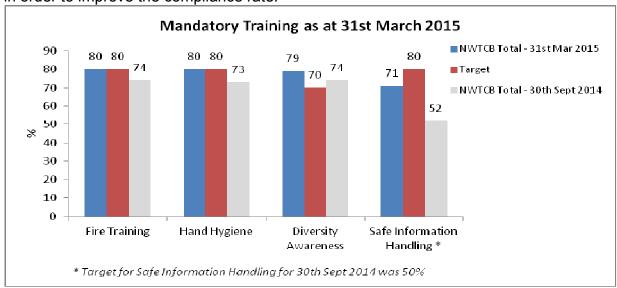
# 5.9 Marriage and Civil Partnership

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 same sex civil partnership. Within our current staff, only 26.3% are listed as married which is significantly lower than the national profile. It should also be noted that we do not currently collect information on same sex civil partnerships.



#### 6. DEVELOPMENT

The percentage of staff that have completed the mandatory training across the organisation by the 31<sup>st</sup> March 2015 can be viewed below. The Board has met three of the targets with the exception of Safe Information Handling. The Board is currently considering the development of an in-house module in the next year in order to improve the compliance rate.



## **Personal Development Reviews**

The percentage of staff with a current PDR by Directorate is highlighted below as at 31<sup>st</sup> March 2015. The overall Board percentage was 80% which results in the Board meeting the Heat Standard of 80% by 31<sup>st</sup> March 2015.

