Human Resources and Organisational Development – Workforce Update

**Recommendation:**
The Board is asked to note two recent workforce initiatives.

**Purpose of Paper:**
The purpose of the paper is to provide the Board with a Workforce Update in respect of recent activity in relation to the newly qualified nurses recruitment campaign for 2018 across NHS Greater Glasgow and Clyde (NHSGGC) and implementation of the Lead Employer Programme for Doctors and Dentists in Training (DDiT).

**Key Issues to be considered:**
Implementation of NHS Greater Glasgow and Clyde as the Lead Employer for Doctors and Dentists in Training for the West of Scotland and the successful recruitment of newly qualified nurses.

**Any Patient Safety /Patient Experience Issues:**
No

**Any Financial Implications from this Paper:**
No

**Any Staffing Implications from this Paper:**
No.

**Any Equality Implications from this Paper:**
No.

**Any Health Inequalities Implications from this Paper:**
No.

**Has a Risk Assessment been carried out for this issue? If yes, please detail the outcome:**
N/A

**Highlight the Corporate Plan priorities to which your paper relates:**
Better Workplace – single employer for Doctors and Dentists in Training, reducing administration, duplication and a single contract of employment. Improved engagement and consistency of support. Supports the delivery of the Workforce Plan and ensuring staff are recruited and deployed appropriately across NHSGGC.

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1. Purpose

1.1 The purpose of this report is to provide the Board with a Workforce Update in relation to the newly qualified nurses recruitment campaign for 2018 across NHS Greater Glasgow and Clyde (NHSGGC) and implementation of the Lead Employer Programme for Doctors and Dentists in Training (DDiT).

2. Newly Qualified Nurse Campaign

2.1 The main aim of this project was to recruit and promote NHSGGC to the newly qualified nurses for the 2018 campaign, ensuring a high number of new staff for the Board, across all sectors.

2.2 In order to address demand for Registered Nurses within NHSGGC the Staff Bank team within Human Resources and Organisational Development, in partnership with senior nursing colleagues and the Practice Development Team reviewed the existing recruitment process and developed a refreshed campaign to ensure maximum intake for 2018. Nursing vacancy gaps were identified across sectors and consideration was given to demand for each Sector.

2.3 Our aim was to be proactive in securing qualified staff at an early juncture and as a result our team met with graduates at the stage prior to exams when they were starting to plan a nursing career after University. The NHSGGC recruitment team met with students on campus and outlined the strengths of NHSGGC as an employer and as a positive environment to start their nursing career. Supported by colleagues who provided more technical support and experiences this was received well by graduates.

2.4 The interview process was changed to an interactive One-Stop-Shop approach. Throughout May and June 2018 all graduates were invited to an overview session, speak to senior nursing staff, participate in ‘chat stations’ and then invited to sign up. This allowed a more relaxed approach and enabled graduates to ask questions about ongoing support and development offered and gain a full and realistic understanding of what was ahead of them in the first phase of their career, allowing them to be more prepared and therefore commit to NHSGGC as their future employer.

2.5 As a result of this campaign we have recruited 458 newly qualified nurse graduates from Scottish and English universities. The vast majority of the newly qualified graduates are joining the Board from West of Scotland based universities with the remainder coming from other Scottish universities and England. This campaign has seen a significant increase in numbers, for 2017 = 195 and 2016 = 134.

2.6 The 458 new recruits will join the board’s existing 12,300 qualified nurses to deliver patient centred care to more than a million people both in hospitals and in the
community. More than 80 of the new recruits will specialise in mental health services. This will address most of the current nursing vacancy gaps across NHSGGC.

2.7 The newly refreshed induction programme for the nurses commenced on Tuesday 2nd October 2018 and focused on key elements of nursing practice which enable Safe, Effective and Person Centred care. This is now a focused 10 day programme, where all nurses are being inducted prior to receipt of their formal registration. They are all being paid appropriately at Band 2 and will have completed all of their statutory and mandatory training and other induction prior to starting on wards, this also includes 2 days of the NHS Scotland flying start program mandatory for all newly qualified nurses.

2.8 In addition we are working with Universities to promote and secure current student nurses on to our Nurse Bank to allow them to contribute as Healthcare Support Workers. As well as providing much needed skills and support during periods of high demand, it also allows them to build experience and insight to NHSGGC. This is part of our ongoing engagement programme to develop and promote careers in GGC and build a sustainable workforce.

2.9 The actions as a result of this initiative will reduce the reliance on Bank and supplementary nursing staff and this will be reviewed through ongoing monitoring.

3. Doctors and Dentists in Training (DDiT)

3.1 In August 2018 NHSGGC welcomed 246 new graduate doctors and dentists. In addition, we also became the West of Scotland Regional Lead Employer with employment arrangements for a further 2612 DDiT . NHS Greater Glasgow and Clyde is also the placement board for a further 154 General Practitioner trainees and 81 trainees on National programmes.

3.2 The move to a ‘single lead employer’ model means that all Doctors and Dentists in training will be employed by one of four health boards, determined by their region or national training programme. Doctors and Dentists in training move post regularly throughout their training and this currently results in unnecessary duplication of paperwork and administration. It previously made it more difficult for Doctors and Dentists in training to apply for mortgages, or establish and maintain adaptations based on health needs. Having a single lead employer throughout a Doctor/Dentist’s training will simplify this process, provide longer contracts of employment and ensure that their information is carried with the doctor from post to post.

3.3 Training programmes have been allocated across the Lead Employers and NHS Greater Glasgow and Clyde, as the Lead Employer for the West Region will employ foundation, core and specialty junior doctors (excluding GPs) in the West of Scotland (NHS Ayrshire and Arran, NHS Dumfries and Galloway, NHS Forth Valley, NHS Lanarkshire, National Waiting Times Centre, State Hospital and NHS Greater Glasgow and Clyde) and for the following areas:

- Clinical Neurophysiology (All Scotland)
- Paediatric and Perinatal Pathology
- Paediatric Cardiology Neurosurgery – National
- Neurology
- Medical Virology
- Paediatric Surgery
- Oral and Maxillo-facial Surgery
- Palliative Medicine – West
- Chemical Pathology (All Scotland)
- Infectious Diseases (All Scotland)
3.4 A Once for Scotland approach has been taken in relation to pre-employment checks and reasonable adjustments to ensure that clearance is given for the duration of a programme of training and for DDiTs to benefit from a more holistic approach to their training programme and employment experience. There are ongoing discussions regarding how occupational health records will be shared between employing and placement Boards.

3.5 Employing Board policies (for example the grievance and conduct policies) will form part of the contract of employment. Once for Scotland guidance on the application of policies is being developed in partnership with the BMA for ratification by the Core Steering Group to assist in consistency across the employing Boards and to ensure a common experience for DDiTs regardless of their programme or employer. This should also facilitate application of policy for placement Boards who may be acting on behalf of multiple employing Boards and payroll ran in August 2018 with minimal issues reported.

3.6 Overall the implementation has been successful as a result of positive collaboration across Human Resources, Finance and Chiefs of Medicine. The partnership work across the Regional Boards has also been instrumental in the success of the initiative.

4 Recommendation

4.1 The Board is asked to note two recent workforce initiatives.