

Workforce Report

January 2025

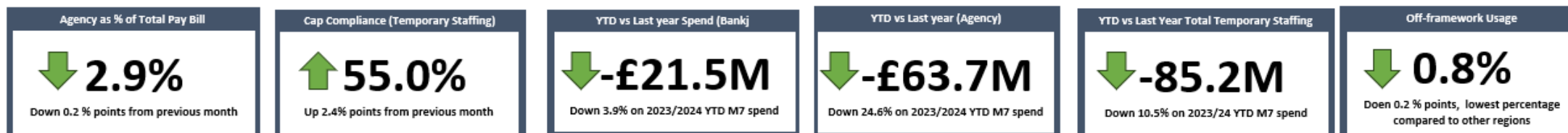
(Data from M07, 2024)

Headlines

Against 24/25 Operational plans (M07)		FHFT	BHFT	SABP
	All workforce (wte)	0.4% under plan	1.1% under plan	1.5% over plan
	Substantive	1.1% over plan	0.6% over plan	1.0% over plan
	Bank	11.8% under plan	18.9% under plan	1.8% over plan
	Agency	24.8% under plan	0.5% over plan	0.6% over plan

Workforce Metrics (M07)	Metric	Regional	FHFT	BHFT	SABP
	Absence	4.9%	3.4%	4.7%	4.0%
	Vacancy	7.3%	8.8%	-0.4%	11.3%
	Turnover	10.0%	9.9%	11.0%	16.5%

Temporary Staffing



Agency as a % of total paybill
 The agency cost as a percentage of the pay bill has slightly decreased by 0.2 % points from the previous month. **Agency as a percentage of total pay bill for the latest Month (M7) is below the NHSE national ceiling (3.2%) at 2.3% but this figure will be lower because of backdated AfC pay award payments. YTD agency as a % of pay bill is 2.9%.** This improvement is largely due to the provider's strong commitment to the programme, including utilisation of rate frameworks plus BI tools, local- / system- level controls and their collaborative efforts to reduce costs in the temporary staffing arena.

Cap Compliance
 Cap compliance percentage has shown a wide amount of variation between the ICBs in the programme with K&M being the only ICB consistently outperforming the regional average. Overall, the cap compliance in M7 is higher than in M6 (+2.4% points). As regional rate cards are rolled out and used more widely in the region's providers, the region's cap compliance trends will provide insight into their performance. AFC Cap compliance shows a percentage of 66.2% (Tab 14.2) which demonstrates the progress and highlights the current focus in the medical space (Tab 14.4).

YTD vs Last year Spend (Bank)
 The year-to-date expenditure for Bank decreased compared to last year by £21.5M and this is a positive trend as 2023/24 saw a significant increase. The Programme has prioritised utilising the Bank as the primary option, and the current focus of the AfC Bank and Medical TS projects has seen the rollout of collaborative bank rate frameworks. Medical rates have greater saving opportunities due to rate variations. Bank spend YTD M7 compared to the same period last year showed a 3.9% reduction with this being driven by increased controls across providers.

YTD vs Last year (Agency)
 The year-to-date spend for Agency decreased by -24.6% compared to the same period last year (i.e. -£63.7M). The programme is committed to a target of a £55 million reduction in spend in 2024/25 compared to the previous year, with this building on the £125M in savings delivered in 2023/24. This reduction is being driven by usage reductions and the AfC collaborative agency rate card currently in place in the region. The medical agency rate framework has just been launched and will see reductions into the next financial year.

YTD vs Last Year Total Temporary
 The year-to-date total temporary staffing spending vs last year's spending has registered a reduction with a percentage of -10.5% (-£85.1M). The implementation of a collaborative approach has been pivotal to the reduction of the total temporary staffing spend, with providers facilitated to work together with enhanced intelligence sharing and targeted central support / interventions. The core focus of this year will be supporting trusts with variables like lead time, retro booking, vacancy and sickness ratios that will be soon available in the new iteration of the Power BI dashboard.

Off-framework Usage
 Off-framework usage offers a varied picture across the ICBs over time. Off-framework usage increases can be attributed to a variety of factors including better/more consistent reporting, staff shortages in some geographical areas and commonalities between providers in struggling to source, hard-to-find, staff groups on-framework. Reported hard-to-find staff groups on framework have included (but are not limited to) RMNs, Dental, GPs and Nursery staff. The current off-framework picture shows scattered usage across providers with a YTD month-by-month reduction of 0.2 % points and a regional percentage of 0.8% , which keeps the South East as the region with the lowest off-framework usage nationally.



Primary Care ARRS (M07)

FOT based on the latest claim received				
PCN	ARR Allocation	FOT	Variance	Last claim submission
SHAPE	£600,235	£490,742	£109,493	Oct-24
SPINE	£920,466	£941,362	-£20,896	Oct-24
Central Slough Network	£1,232,449	£1,302,491	-£70,042	Oct-24
LOCC	£1,062,048	£1,162,006	-£99,959	Oct-24
Bracknell (Including Binfield)	£832,015	£685,129	£146,886	Sep-24
Braccan	£668,349	£682,879	-£14,530	Oct-24
The Health Triangle	£1,194,293	£1,460,542	-£266,249	Oct-24
Ascot	£741,849	£715,525	£26,323	Sep-24
Maidenhead Including Symons)	£1,885,607	£1,831,513	£54,093	Sep-24
Windsor	£1,483,666	£1,442,000	£41,667	Oct-24
Aldershot	£1,160,423	£1,140,665	£19,759	Oct-24
Farnborough	£1,317,582	£1,372,912	-£55,330	Oct-24
Farnham	£1,007,346	£929,689	£77,658	Oct-24
Holly Tree Surgery	£140,337		£140,337	Oct-24
Fleet	£1,005,032	£1,130,562	-£125,530	Oct-24
Yateley	£648,308	£705,182	-£56,874	Oct-24
Surrey Heath	£2,288,090	£2,287,624	£466	Oct-24
	£18,188,096	£18,280,823	-£92,727	

- FOT can be inaccurate dependent on when the last portal submission was. Claims can vary month to month.
- PCNs with potential opportunity to recruit: SHAPE, Bracknell, Holly Tree.
- PCNs to keep a watchful eye on: The Health Triangle, LOCC and Fleet
- Mitigations to risks of overspend: each time a PCN's variance enters a negative balance the Heads of Primary Care, discuss the claims with the PCN.
- All PCNs have written confirmation of their budget and the ICB position on overspend in each financial year. Once the budget has been fully utilised the PCN can continue to claim but no further funding is provided, and the continued employment of staff is at the PCNs own risk

SDF Primary care workforce allocation (M07)

24/25 Funding Streams	24/25 Plan £	YTD Actual M1 - M7
PC Transformation SDF - Pay	£ 528,233	£ 308,136
PC Transformation SDF - Non-Pay	£ 333,080	£ 247,728
PCT - Fellowships 24/25	£ 398,000	£ 232,167
NHS CPD Funding (previously HEE)	£ 90,822	£ -
Total 24/25 Funding available:	£ 821,902	£ 479,895

- YTD expenditure is on track.
- There is a known PC Transformation SDF – pay cost pressure.
- PC Transformation SDF – Non-Pay is ahead of schedule as some education provider contracts are paid up front and delivered over the coming months. There is no expected overspend.
- Costs against CPD allocation are currently being mapped.

PC Transformation SDF non-pay breakdown

SDF Workforce Programmes	Description	Supplier	Tracker Category	24/25 Plan
Flexible Staff Pools	Flexible Staff Pools 1 year contract	NASGP	LocumDeck	60,000
Flexible Staff Pools	Surrey Heath Hosting Fee's for FSP	Surrey Heath	Flexible Staff Pools	18,000
Flexible Staff Pools Total:				78,000
Local GP Retention	FTH Website Development and maintenance	SW CSU	Website	19,580
Local GP Retention	GP Appraisal Pilot	Multiple	GP Appraisal Pilot	5,000
Local GP Retention	Training Provider Costs	NB Medical (PLT)	NB Medical	-
Local GP Retention Total:				24,580
Local GP Retention/Training Hub	HEI Modules not included in NHSE commissioned modules	Multiple HEI	CPD	30,000
Local GP Retention/Training Hub	Conference costs Nurse AHP HCA	Multiple	GPN Conference (inc NB Medical)	50,000
Local GP Retention/Training Hub Total:				80,000
Practice Resilience	Further FACT role development	Multiple	Personalisation	25,000
Practice Resilience	Primary /secondary care interface	NB Medical (PLT)	Primary care Interface	30,000
Practice Resilience	Embedding modern general practice access model	NAPC	Primary Care Development	35,000
Practice Resilience Total:				90,000
Training Hub	Allied Health Professionals and GP CPD Costs(not included in NHSE CPD allocation)	Multiple	Upskilling (AHP)	25,000
Training Hub	Admin and non clinical CPD	Multiple	CPD	15,000
Training Hub Total:				40,000
All	Other Costs - Contingency	TBC	Contingency	20,500
All Total:				20,500
Overall Training Hub Non-Pay Total:				333,080

Please note: There are additional Training provider courses in 24/25 worth £75k with NB Medical. These fall within "Local GP Retention". These courses were funded from 23/24 allocations. therefore are not included above.

Background: The Frimley Academy – creating the conditions for collective leadership through an inclusive whole system approach

The Frimley Academy was established in 2018 as part of our long-term commitment as partners to build positive and enduring leadership networks and increase our capacity for system leadership and partnership working across the Frimley system. “With its vision to nurture collective leadership potential and harness the power of people to create healthier communities, the Academy provide unique leadership development opportunities in our 20/20 system leadership and Wavelength digital leadership programmes locally developed for our leaders, partners and people from across a wide range of sectors, to come together, develop their system leadership skills and harness the power of data and digital transformation and collaboration to tackle the complex change challenges we face.

20/20 Programme:

The 20/20 Programme builds upon cross organisational cooperation, representing leadership across the Frimley Health and Care System. The most innovative clinicians and managers across the clinical, social care, military, education, public health system are currently involved. We are now working with Cohorts 11 and 12 to complete 2024/25.

Wavelength Programme:

Wavelength is a 5-month leadership programme to develop the skills, mindset, knowledge and relationships that support effective, joined up digital transformation across the Frimley Health and Care Integrated Care System (ICS). Technology is transforming the world we live in. The leadership of digital transformation and enablement is enhancing the quality and safety of care, reducing inequalities and improving health outcomes for our population. As we move to Q4, we are working with cohorts 10 and 11.

Academy 2025 – 2027 Planning:

Procurement is currently underway for 2025. We have completed the ITT and evaluations of bids was completed on the 20th December. The Contract Award Recommendation Report is currently being drafted and we will shortly announce the successful bidder.