



# Item No. 18

Meeting Date: Wednesday 4<sup>th</sup> September 2019

## Glasgow City Integration Joint Board Finance, Audit and Scrutiny Committee

**Report By:** Christina Heuston, Assistant Chief Officer, HR

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### HSCP VACANCY POSITION

<b>Purpose of Report:</b>	To advise of the current vacancy position across Glasgow City Health and Social Care Partnership
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<b>Background/Engagement:</b>	High vacancy levels exist in a number of key areas. The levels require to be monitored for service delivery, budgetary and workforce planning reasons.
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<b>Recommendations:</b>	The IJB Finance, Audit and Scrutiny Committee is asked to: a) note the content of this report
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#### Relevance to Integration Joint Board Strategic Plan:

As detailed in page 25 of the plan  
The Glasgow City Integration Joint Board is committed to ensuring that the people of Glasgow will get the health and social care services they need at the right time, the right place and from the right person

#### Implications for Health and Social Care Partnership:

<b>Reference to National Health &amp; Wellbeing Outcome:</b>	Outcome 9 – Resources are used effectively and efficiently in the provision of health and social care services
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<b>Personnel:</b>	Requirement to maintain appropriate and safe staffing levels.
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<b>Carers:</b>	None
<b>Provider Organisations:</b>	None
<b>Equalities:</b>	None
<b>Fairer Scotland Compliance:</b>	None
<b>Financial:</b>	Impact on the employee expenditure budgets.
<b>Legal:</b>	None
<b>Economic Impact:</b>	None
<b>Sustainability:</b>	None
<b>Sustainable Procurement and Article 19:</b>	None
<b>Risk Implications:</b>	Reduced staffing levels may impact on ability to provide required service
<b>Implications for Glasgow City Council:</b>	As stated above
<b>Implications for NHS Greater Glasgow &amp; Clyde:</b>	As stated above

**1. Introduction**

- 1.1 The purpose of this report is to update the committee on the current vacancy position within the HSCP and highlight key areas that are challenging, either because of a high number of vacancies or there are difficulties in recruiting to the posts.
- 1.2 The information presented is based on requests and approvals that have occurred since April 2019. Current recording systems do not allow us to detail all posts that are vacant and in addition to the post numbers detailed below there will be posts that are vacant where the recruitment process commenced prior to April 2019 and are not yet appointed to. The pre April 2019 posts will be at various stages, with some filled but others either in the appointment

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stages or remain vacant as we have been unable to fill them. Work is ongoing to establish a means to record all of this information to allow better monitoring of the position and to assist forward planning in areas that posts cannot be filled.

- 1.3 The information presented includes posts that have been created within the last 4 months due to additional funds being allocated. For the purpose of this report it has not been possible to separate those posts from the 'normal' vacancy position.
- 1.4 The high level of vacancies is resulting in an underspend of employee cost budgets, although some posts are filled in the interim period by utilising overtime, bank staff and agency workers.
- 1.5 The data is presented to show a comparison with the total number of people in-post.

## 2. Vacancy Position

- 2.1 Number of wte vacancies by Care Group compared to staff in-post

	<b>NHS</b>	<b>NHS</b>	<b>Social Care</b>	<b>Social Care</b>
<b>Care Group</b>	<b>In-Post</b>	<b>Vacant</b>	<b>In-Post</b>	<b>Vacant</b>
Adult	2160	261	979	62
Children's	384	47	900	96
Older People	920	68	981	51
PC / PCIP	7	59	n/a	n/a
Resources	302	49	688	116
Care	n/a	n/a	2327	61
<b>Total</b>	<b>3773</b>	<b>484</b>	<b>5875</b>	<b>386</b>

- 2.1.1 The overall vacancy level is approx. 8% with NHS at 11% and Social Care at 6%.
- 2.1.2 We expect to see continued high levels of turnover particularly in relation to areas such as Clinical Psychology, District Nursing, Mental Health Nursing, Psychiatry and some clinical areas such as Prison Healthcare. This is on the basis of the age of the workforce, national shortages, a national job market with significant recruitment and promotional opportunities for individuals out-with Glasgow or areas where the working environment is seen to present specific challenges in terms of either the client group or levels of deprivation in relation to specific caseloads.
- 2.1.3 This level of vacancies could lead to an underspend in 2019/20 of employee cost budgets of £7M.

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2.2 Breaking down the vacancies into sub categories within the Care Groups gives more detail on what fields the vacancies are in.

**Table A NHS**

<b>Sub Group / Care Group</b>	<b>Adult</b>	<b>Children</b>	<b>Older People</b>	<b>PC / PCIP</b>	<b>Resources</b>	<b>Total</b>
<b>Admin</b>			<b>1</b>	<b>1</b>	<b>49</b>	<b>51</b>
Allied Health Professions	13		11			24
Business Development	3	1		1		5
Counselling	1					1
Health Improvement	1			8		9
Medicine	5					5
<b>Nursing</b>	<b>184</b>	<b>45</b>	<b>56</b>	<b>21</b>		<b>306</b>
Pharmacy				28		28
Planning and Strategy	1	1				2
<b>Psychology</b>	<b>53</b>					<b>53</b>
<b>Grand Total</b>	<b>261</b>	<b>47</b>	<b>68</b>	<b>59</b>	<b>49</b>	<b>484</b>

**Table B Social Care**

<b>Sub Group / Care Group</b>	<b>Adult</b>	<b>Children</b>	<b>Older People</b>	<b>Resources</b>	<b>Care</b>	<b>Total</b>
Social Workers	27	44	10			<b>81</b>
Admin				73		<b>73</b>
Home Care					61	<b>61</b>
Fieldwork	30	16	9			<b>55</b>
Residential / Day Care	4	36	32			<b>72</b>
Other	1			43		<b>44</b>
<b>Total</b>	<b>62</b>	<b>96</b>	<b>51</b>	<b>116</b>	<b>61</b>	<b>386</b>

2.2.1 Adult Services on NHS side has the highest number of vacancies. The services within this group with vacancies are Mental Health, Homeless, Sexual Health, Prisons and Alcohol and Drugs with Nursing and Psychology posts the main staff groups with vacancies and the highest levels of employee cost underspends.

2.2.2 There are a range of roles and service areas where we have seen high turnover and do not always manage to fill roles. These include Prison Healthcare, Health Visiting and also District Nursing. On this basis we have had a robust training programme in place for a number of years for some specialties to seek to offset this, but also have had on-going discussion where we see the need to try to re-design to either attract, retain or provide services in a different way with a different skill mix

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- 2.2.3 There is higher than normal turnover across Adult Services due to the option allowing staff with MHO status to retire early at age 55 ending in 18 months time.
- 2.2.4 Within the Social Care posts there is a higher than normal vacancy level for Social Workers, Residential and Home Care. This is due to additional posts being created for Social Workers in Adult and Children's Services, the creation of an internal bank of staff for both Older People and Children's Residential and a slightly higher turnover in Home Care.
- 2.2.5 Administrative posts also have a consistently high turnover and proposals are being discussed to improve the recruitment process for this group.
- 2.2.6 Use of overtime, bank staff and agency staff reduces the impact of the vacancies in nursing and residential services, however the use of this for long periods is detrimental to the quality of service.
- 2.2.7 Timescales for recruitment from start and finish can be up to 6 months due to internal processes of authorisation and scrutiny, there can be an 8 week period in lead up to an advert due to this. There are also posts where the HSCP is seeking to recruit however the NHS scrutiny process has not approved the recruitment and the processes becomes longer. An example of this is Psychology.
- 2.2.8 There is a requirement for service efficiency and budget reasons to reduce the length of time recruitment takes in particular the approval process.

### **3. Action Required**

- 3.1 Review the approval processes to reduce timescales.
- 3.2 Review the recording systems for vacant posts in order that better information is available.

### **4. Recommendations**

- 4.1 The IJB Finance, Audit and Scrutiny Committee is asked to:
  - a) note the content of this report.