

## Oxford University Hospitals Foundation Trust - update on recruitment and retention

### Overall approach to staff recruitment and retention

1. At the last HOSC meeting, Committee members were interested in hearing more about our overall approach to staff retention and engagement. The Trust strongly agrees with the Committee that this is vital. We recently launched a **3-year people strategy** with the ambition to make Oxford University Hospitals a place where people are proud and excited to work, where teams and individuals are trusted with responsibility and accountable for what they do, and where development and care of our people is recognised as being as important as the care of our patients. (Please see attached copy.)
2. Our people strategy has 6 themes:
  - a. Strategic workforce planning to enable us to stay ahead and make best use of our people and skills.
  - b. Compassionate, inclusive and effective leaders and managers at all levels, who exemplify our values.
  - c. A great place to work, with good morale, where people are proud to work and feel valued and supported. A place where people feel free to speak up and enjoy coming to work.
  - d. Delivering great performance, with clear and fair expectations of our staff and with quality data that informs decision making and aids delivery.
  - e. Building skills and capability amongst a more diverse workforce, with professional and personal development for all staff to build on their potential.
  - f. Responsive and collaborative HR services, with simple policies and procedures applied consistently.
3. We have seen **steady increases in our substantive staff**, with a rise of 1.2% year to date, although we have a remaining recruitment gap of c1,100 WTE, almost all of which we manage through temporary staffing. Our international recruitment efforts have paid off with around 20 nurses arriving from abroad each month and we have streamlined our recruitment processes – we are currently 4th fastest out of 93 benchmarked trusts. **Our staff turnover has improved** by 1.3% to 13.5% over the last 12 months, with Band 5 nurse turnover reduced by 2% to 19.6%, both in line with the targets we set ourselves.
4. OUH offers a **range of incentives to support our staff** who wish to take on additional hours, which helps the Trust deliver care for our patients and enables staff to earn more money towards the cost of living in and around Oxford. We operate a ‘bank first’ model – 75% of our temporary staffing is through OUH’s bank, most of whom are existing staff choosing to work additional hours. Over the winter months, we are operating additional incentive schemes to reward nursing and other clinical support staff who are volunteering to take on extra shifts at our most pressurised time of the year.
5. We participated in the **NHS-wide staff engagement survey** in November and our response rate increased from 39% last year to 48% this year. The results of the survey will be published at the end of February and we will be holding a series of staff listening events to discuss the main themes with people across all four of our hospital sites and our administrative base at Cowley.

Recruitment and retention in maternity

6. **External context.** As the Committee is aware, there has been a national shortage of obstetricians over the past few years. According to the RCOG Update on Workforce Recommendations (2018):
  - a. 9 out of 10 obstetric units report a gap in their middle-grade rota, which can affect job satisfaction, postgraduate training, quality of care and staff wellbeing.
  - b. A 30% attrition rate from the O&G training programme is typical, further compounded by a loss at transition from training to consultant grade posts.
  - c. 54% of those on the O&G Specialist Register are international medical graduates with 14% from the EEA.
  
7. **Current workforce requirements.** In order to provide the 24/7 cover, inpatient and antenatal services required to safely re-open the Horton Obstetrics Unit, there is a minimum requirement for 8 middle-grade obstetricians (plus appropriate consultants, midwives and neo-natal nurses). However, after consultation with the Royal College of Obstetrics & Gynaecology (RCOG), OUH designed the current workforce model and job description based on a rota of 9 middle-grade obstetricians to allow clinical time to be allocated for the doctors to spend time at the John Radcliffe. RCOG advises this should make the Horton posts more attractive by offering successful candidates the chance to gain experience in areas of special interest. Since the Unit was last open the rules on junior doctor working hours have changed and we have had to respond to the new arrangements in the design of our workforce model.
  
8. **Recruitment update.** OUH currently has two middle-grade obstetricians in post who were recruited to transfer into the Horton Obstetrics Unit, if re-opened. We continue to run a rolling recruitment process to fill the other 7 vacancies. In our December round, we had 7 shortlisted candidates due to be interviewed, 2 candidates showed up on the day and offers were made to both of them. 1 declined and the other accepted, subject to pre-employment checks. From our January and February rounds, we shortlisted c10 candidates for interview and these processes are ongoing. Whilst the Horton Obstetrics Unit is closed, the current middle-grade obstetricians and any new recruits will continue to work at the John Radcliffe and undertake antenatal care at the Horton.
  
9. **Shortlisting processes.** Committee members asked why, when the number of applications increased since April 2016, the number of people shortlisted stayed roughly the same. The Trust is confident in the fairness and scrupulousness of our processes. OUH shortlist only on the basis of candidates being able to demonstrate they have the key experience and skills in the job description - and we have not changed our approach during this time period. Whilst actions such as changing the way we advertised the higher salary may have increased applications, the number of applications from people with the right skills and experience did not change. We are happy to be flexible in our approach where possible but the Committee will understand the Trust is not prepared to reduce the standards required to provide a safe and quality service for patients. As these clinicians will be working without supervision they have to have considerable experience to be able to safely operate at the Horton.
  
10. **Midwives.** As reported previously to the HOSC, in Spring 2018 the Trust was successful in recruiting 40 additional midwives. However, we do still have a shortfall against the number of midwives required and we start our next recruitment drive in Spring 2019. OUH remain committed to sharing the outcome of our Birthplace plus review, which identifies our overall required establishment, with the HOSC when it has been approved by the Board.

11. **Neonatal services.** At the last Committee, members asked about neonatal capacity at the Horton before the obstetrics unit was temporarily closed. The unit had a staffing establishment of 12 WTE neonatal nurses to manage eight neonatal beds but used only four or five beds on average. The ward was co-located with maternity in the year before the closure to improve provision of transitional care (care with mother present) and support safe staffing of the service during breaks and to provide an equality of treatment with the John Radcliffe Hospitals.

#### *Incentives*

12. **Existing incentives.** Feedback from staff who have moved on, or from candidates to whom positions have been offered but turned down, suggests that career considerations and family/personal circumstances were the main two reasons, rather than housing or travel. That said, OUH is committed to actions that will increase the attractiveness of our obstetrician posts. The Trust already:

- a. Offers an enhanced salary with an extra £5000 annual allowance. Following advice from a previous HOSC, we have added this to the base salary and advertise at a higher pay rate. We believe this has helped increase the number of applications – although not always from candidates with the right level of experience.
- b. Pays for the costs of a visa, provides support with the application and issues a 3 year certificate of sponsorship.
- c. Has built in time for obstetricians to work at the John Radcliffe and advertises the positions jointly – as described above.

13. **Additional OUH incentives.** From the next recruitment round, the Trust has also agreed that these posts will be eligible for a relocation allowance of up to £8,000, depending on circumstances, which should also increase attractiveness.

14. **Support from Cherwell District Council.** The last Committee session discussed ideas from Cherwell District Council and the wider community for additional incentives. Cherwell have offered access to their choice-based affordable lettings; a bespoke guide to the local housing market; and an expert advisor to attend recruitment fairs. The Trust is very happy to accept these offers and is actively working with Cherwell to implement the ideas. We are planning to run a recruitment/job fair across all professions at the Horton in late Spring/Summer and look forward to working with Cherwell District Council and other stakeholders to make the most of this opportunity.

15. **Support from the community.** In the past, various offers were made from local companies to provide incentives to obstetricians taking up posts at the Horton. The Trust is grateful for the engagement and is aware of other examples around the country, for example, where housing developers give a discount on new homes for employees of the local Trust - although the only schemes that we are aware of are available to all staff working at that hospital, not restricted to certain grades or professions. OUH is only able to support any incentive schemes that comply with our legal and contractual obligations (e.g. the national agenda for change pay framework; policies on the Declaration of Interests/Declaration of Gifts, Hospitality and Sponsorship; the DHSC code of conduct for NHS employees; and the competition and markets regime), plus our duty of fairness to staff (in which incentives offered to one group of staff members and not others must have clear justification). We would also need to be very clear on the legal terms and

conditions of any offers in order to protect our staff. OUH is very happy to work with the community on any potential ideas for incentives that comply with these conditions.

**16. International recruitment** The Trust is open to the suggestions made by the HOSC for increasing focus on international recruitment. OUH is in touch with a new international recruitment agency that is currently sourcing CVs to test the available market. If this testing is successful, OUH will consider taking this arrangement forward as a core part of our rolling recruitment approach. It is worth noting that the vast majority of applications received so far are from overseas applicants so our recruitment so far has been seen internationally already.

**17. Revamping recruitment materials.** Finally, for the release of our next rolling recruitment round, OUH has revamped the format of the job description (but not content, with the exception of adding the new relocation allowance) which is attached as annex 1; and is also drafting additional recruitment materials for Horton obstetricians, using our new 'Care to Join Us' branding. The Trust is keen to engage with stakeholders on the best timing for the launch of the next rolling recruitment round to take advantage of any additional ideas on incentives; and how the community might positively support the campaign e.g. on social media.