

		Item No	117-18
Name of meeting	Trust Board		
Date	25 October		
Name of paper	Staff Retention		
Executive sponsor	Ed Griffin, Director of HR		
Author name and role	Ian Jeffreys, Head of HR Business Partners and Employee Relations		
Synopsis	After an update at last Board this paper highlights the retention issues and positions the next steps to improve this.		
Recommendations, decisions or actions sought	Information		
Does this paper, or the subject of this paper, require an equality analysis ('EA')? (EAs are required for all strategies, policies, procedures, guidelines, plans and business cases).	<p>No If yes and approval or ratification is required, a completed EA Record must be attached.</p>		

South East Coast Ambulance Service NHS Foundation Trust

Trust Board Meeting

Retention

October 2018

1. Introduction

- 1.1 The biggest and most important retention initiative is the Culture Change Programme, which is well underway, and continues to be highly engaging.
- 1.2 We have implemented a number of local retention initiatives, most notable being the diamond pods in 111 and EOC.
 - 1.2.1 Diamond pods were an initiative to ensure that new call handlers were provided with effective support and development in their first six weeks of starting in the role
 - 1.2.2 Diamond pods also provided opportunities for career progression to mentors, trainers, supervisors and team leaders
- 1.3 We also introduced a change to the call handler pay band so that it had just two pay points, providing for quicker progression to the top of the pay band.
- 1.4 The intermediate People Strategy has been developed and will be launch in the coming weeks.

2. Retention in SECAMB

- 2.1 Since the Workforce Planning work began back in 2017 it has escalated the importance of retention, and the need for a clear plan to address it.
 - 2.1.1 A decreasing turnover rate has been built into the workforce plan.
- 2.2 Recruiting 750 additional frontline staff would 'on its own' not be enough without a clear focus on retention as well.
- 2.3 The retention of staff is a key issue for the NHS and for SECAMB. As we focus on workforce planning and recruiting the additional frontline staff, it is important that both new and existing staff are supported, and encouraged to remain with us.
- 2.4 Timing has been perfect as we now have a permanent Director of Human Resources and Organisational Development, and work is firmly underway on the largest part of any retention plan, Culture.

3. Retention 2018

- 3.1 We have a good understanding of labour turnover across the organisation because we track it through the Monthly HR Dashboard. The dashboard also helps us understand what is happening at a local level (Operating Unit/Department), but this does not appear to be on Operating Unit Managers agenda's at Teams A, B, C etc. This is a real opportunity for identifying issues and providing targeted support for the future, particularly as there is a strong correlation between sickness absence and labour turnover (those departments with high sickness also have high labour turnover), and there is already a clear focus on sickness absence management.
- 3.2 August 2018 saw the lowest turnover in the last 13 months at 14.97% and marks the third successive month where turnover has decreased. It is still too early to draw conclusions from this, but it highly likely the launch of the values and behaviours, the mandatory training for managers, and the Wellbeing Hub has had a significant impact.
- 3.3 At its peak turnover was 17.85% (January 2018).
- 3.4 Emergency Medical Advisor (Band 3) remains the role with the highest turnover.
- 3.5 2018 also saw improvements to the Exit Interview Process with an easier to complete survey that provides for more meaningful information. That said, the Exit Interview process needs a complete overhaul for 2019, as completion rates are still not where we want them to be, and we could use the data more effectively.
- 3.6 A copy of the Exit Interview Summary Report for September 2018 is included in the Appendix.
- 3.7 Finding from the Exit Interview Summary Report include:
- 3.7.1 65% of leavers would consider returning to SECamb if things changed
 - 3.7.2 The things referred to include: work/life balance, morale, health and wellbeing, work environment, and hours of work
 - 3.7.3 The change to Paramedic banding from band 5 to band 6, whilst extremely positive, has generated challenge from Paramedic Practitioners, Critical Care Paramedics (CCP), and HART Team Operatives over their bandings (CCP and HART has typically been one band above Paramedics)

4. Retention 2019

- 4.1 By January 2019 we will have launched the intermediate People Strategy with the development of the long term People Strategy being under way (informed, in part, by the 2018/19 staff survey results).
- 4.2 By March 2019 we will have the results of the staff survey that will both inform us of our progress to date and provide important information for future consideration. It is imperative that we drive participation rates up for the

remaining seven weeks of the survey to ensure that it represents the views of the many, not just the few. As of 1st October (week one) we have had 10% participation rate which is both ahead of target and up on the previous year.

4.3 Supporting this will be a number of other strategies that will underpin the wider People Strategy and provide more focus on areas such as retention and talent management.

4.4 We need to link our Exit Interview process to ACTUS (our appraisal system) so that 121's, appraisals, 360 degree feedback, talent management, succession planning, and exit interviews can all be in one place.

4.5 Retention will be on everyone's agenda.

5. Retention Strategy

5.1 Our retention strategy will need to consider:

5.1.1 Embedding our organisational values and culture

5.1.2 Looking at our data in depth

5.1.2.1 We have data in many different places including the dashboards, exit interview reports, staff survey, ESR, Actus, snap shot surveys...

5.1.2.2 The data analytics is led by different people, in different areas, all reporting it in their own way

5.1.2.3 We need to find a way to bring all this data together and understand whether or not it is the right data for Directorate and Organisational decision making, and use it effectively

5.1.3 Supporting new starters

5.1.3.1 Our recruitment processes are effective at attracting and selecting good candidates, and we have gotten off to a great start with delivering the workforce plan for this year

5.1.3.2 We need however to consider if we are doing Values Based Recruitment (attracting people whose personal values and behaviours align to ours) as well as those that have the prerequisite skills and experience

5.1.3.3 Providing support through a good induction process is also key, as well as having meaningful objectives and development plans for their probation periods

5.1.4 Supporting flexible working

5.1.4.1 We have an excellent suite of Flexible Working initiatives, but we need to ensure that these are being applied properly and consistently

5.1.5 Development and career planning

5.1.5.1 We have excellent tools to support front line staff but we need to ensure they are applied fairly and consistently

5.1.5.2 We need to ensure that robust development conversations are taking place as part of the 121 and appraisal process, and that we are using this information to inform Learning and Development and Clinical Education of future training needs

5.1.5.3 We also need to develop Talent Management and Succession Planning which we are currently looking at

5.1.6 Flexible retirement options

5.1.6.1 We could look at the introduction of a suite of programmes such as Step Down, Wind Down, Retire and Return, Draw Down, Later Retirement Enhancement, and Early Retirement Reduction Buy Out, all of which exist in other NHS organisations

5.1.7 Building line manager capability

5.1.7.1 This is critical to our success. We have some excellent managers, but we also have a number of managers who were excellent at their previous role, and so were promoted, but have not had much in the way of investment in the management skills development

5.1.8 Rotational paramedics

6. Conclusion

6.1 There is a lot of great work underway that has a significant impact on retention, not least of which is the Culture Change programme and the Workforce Planning project

6.2 There is the need for a Retention Strategy and this work is underway.

6.3 Labour turnover is coming down.

Appendix

Exit Interview Summary Report September 2018

The following is a summary of the exit interview data reviewed 1st October 2018.

The report refers to all leavers since the Exit Interview V.2 via Survey Monkey was established earlier this year.

49% of leavers were female, and 48% were male, with 3% preferring not to say.

71% of leavers held full time roles, with 20% being part time, 1% being fixed term contract, 5% being annualised hours, and 3% being bank staff.

Leavers by age range

18-25	22% up 5 points
26-35	34% up 6 points
36-45	21% dn 3 points
46-55	12% dn 8 points
56-65	12% up 2 points
65+	0% dn 2 points

85% of leavers resigned. 65% would consider returning to SECAMB if things changed.
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Top leavers by department

Coxheath EOC	33.33% up 26 points
Crawley EOC	27.78% ←→
Brighton OU	14.81% ←→
Ashford Hart	9.26% ←→
Support Functions	
HR	3.66% ←→
Medical	3.66% ←→

42% state that we could have prevented them from leaving.

Leavers by pay band

Band 1	0.00%
Band 2	10.27% up 4 points
Band 3	17.12% dn 4 points
Band 4	19.18% up 6 points
Band 5	4.79% dn 11 points
Band 6	44.52% up 11 points
Band 7	3.42% dn 3 points
Band 8+	0.68% dn 2 points

Top reasons for leaving*

Work/Life Balance	43.07% up 5 points
Morale	42.34% up 12 points
Health and Wellbeing	36.50% up 8 points
Work Environment	36.50%
Hours of Work	33.60% up 11 points
Bullying and Harassment	9.49% up 3 points

*leavers allowed to choose more than 1 reason for leaving

Action Plan:

Task	Owner	By When
Clear survey of all data so that we are working on the most accurate and up to date information going forwards.	Ian Jeffreys	1 February 2018 Completed
Research and develop methodology for pre-exit interview process with a focus on the 49% that we could prevent leaving.	Ian Jeffreys	28 th February 2018 Deferred
Drive appraisal completion, with a focus on quality.	Mel Adasa	31 st March 2018 Completed
Review Flexible Working Policy (including communication, and training managers)	Karen Lavender	31 st March 2018 Completed
Succession Planning and Career Pathways (raise awareness and celebrate success)	Steve Singer	31 st March 2018 Deferred

What could we have done to prevent people from leaving? – Free Text

More opportunities to train as a paramedic practitioner.

PP should be band 7

Create effective learning and development systems for older learners

Better rotas

Lack of career opportunities

Listen to us

Take flexible working requests more seriously. Managers taking too long to make decisions.

More training

Treat staff with more respect. Managers are too focused on the stats and not the people.