

# Harrogate Integrated Facilities Integrated Board Report

**Presented to:** HIF Board of Directors  
HIF Senior Manager Team (SMT)  
HIF Governance & Compliance Committee

**August 2023**

Harrogate Integrated Facilities is a trading name of Harrogate Healthcare Facilities Management Limited, company number 11048040, registered office address Harrogate and District NHS Foundation Trust, Third Floor, Strayside Wing, Lancaster Park Road, Harrogate HG2 7SX  
Registered in England and Wales

# Company Highlights For Quarter 2

## What's happening and achievements for Quarter 2...

- Contract of 66 sanitary bins implemented and added to Men's/Accessible unisex toilets in Harrogate District Hospital (HDH), resulting in all toilets within HDH having a sanitary bin function
- Project SEARCH graduation – all 4 recruits held work experience within HIF services with 3 out of the 4 graduates now with jobs within HIF services. All HIF service managers have received 'Making a Difference Award' for their support
- HIF colleague welcome pack content now completed and with design agency, due to be finalised and shared during quarter 2
- HIF dedicated recruitment day due to take place at Cedar Court Hotel on 6<sup>th</sup> September 2023
- HIF attended Job fair at Harrogate Job Centre and met with Andrew Jones MP to discuss the local recruitment to HIF roles
- New HIF workforce monthly report implemented
- Sustainability projects relating to Nitrous Oxide Project and Entonox Project progressing
- Teamwork Inpulse staff survey completed and 'you said, we did' sessions with teams to commence
- HIF People Plan in development
- Issue 8 of the HIF Newsletter due to be published
- Business Plan finalised and promoted with HIF

# Service Performance Update

## Q2 KPIs 2023-24

Service Area	KPI No	KPI Descriptor	Green	Amber	Red		May-23	Jun-23	Jul-23
General	1	Staff Turnover (Headcount)	10%	10-15%	>15%		22.02%	27.80%	19.29%
	2	Appraisal (YTD)	>75%	>74-50%	<49%		86.99%	85.60%	87.90%
	3	Core Skill (YTD)	>90%	89-60%	<60%		91%	90%	92%
	4	Absenteeism	<4.5%	4.5-7%	>7%		4.12%	5.32%	5.87%
Estates Management		Authorised Engineer (AE) Audits conducted at least annually as per schedule							
	1	Water	<12m	>12m <13m	>13m		Audit carried out 10/1/2023 Waiting for final audit to be provided by AE	Scheduled for 24/07/23	Audit carried out 24/07/2023 Waiting for final audit to be provided by AE
	2	Electrical	<12m	>12m <13m	>13m		22-Jul	Jun-23	Jun-23
	3	Vent	<12m	>12m <13m	>13m		Audit carried out 10/1/2023 Waiting for final audit to be provided by AE	Jan-23	Jan-23
	4	Medical Gas	<12m	>12m <13m	>13m		22-Aug	22-Aug	22-Aug
	5	Decontamination	<12m	>12m <13m	>13m		22-Jul	22-Jul	22-Jul
	6	Fire Safety	<12m	>12m <13m	>13m		Expected in April 2024	Expected in April 2024	Expected in April 2024
	7	Lifts	<12m	>12m <13m	>13m		Aug-22	Aug-22	Aug-22
	8	STATUTORY PPM Schedule achieved (in month)	>=95%	90-94%	<90%		91%	Reporting from Micad from September 2023	Reporting from Micad from September 2023
	9	MANDATORY PPM Schedule achieved (in month)	>=90%	89-86%	<86%		88%	Reporting from Micad from September 2023	Reporting from Micad from September 2023
	10	GENERAL PPM Schedule achieved (in month)	>=85%	84-80%	>80%		To Review	Reporting from Micad from September 2023	Reporting from Micad from September 2023

Please note that a KPI Remedial Action Plan has

# Service Performance Update

## Q2 KPIs 2023-24

Service Area	KPI No	KPI Descriptor	Green	Amber	Red		May-23	Jun-23	Jul-23
Waste Management	1	Pre Acceptance Audit Annual	100				New KPIs to be reported from July 2023	Yes	Yes
	2	DGSA Audit Annual	100				New KPIs to be reported from July 2023	Yes	Yes
	3	Continuous Auditing of Clinical Areas	100				New KPIs to be reported from July 2023	TBC with Mitie, review to be carried out on current process. Meeting with Mitie scheduled 26/07/23	TBC with Mitie, review to be carried out on current process. Meeting with Mitie scheduled 26/07/23
	4	Fully completed and compliant Clinical Waste Consignment and Transfer Notes	>=90%	90-80%	<80%		TBC with Mitie, review to be carried out on current process	TBC with Mitie, review to be carried out on current process. Meeting with Mitie scheduled 26/07/23	TBC with Mitie, review to be carried out on current process. Meeting with Mitie scheduled 26/07/23
General Office	1	Provision of a General Office service from 9.00am-4.30pm Monday to Thursday. 9.00am to 4pm on Friday	PASS	N/A	FAIL		PASS	PASS	PASS
Helpdesk	1	Provision of help desk service from 8am-4pm Monday to Friday	PASS	N/A	FAIL		PASS	PASS	PASS
Energy Management	1	Provision of monthly energy consumption report	PASS	N/A	FAIL		PASS	PASS	PASS
	2	Carbon Target (measured annually against previous year)	0%	1-5% increase	>5%		Pass, on CEF Portal, update provided for next meet.	PASS	PASS
Grounds Maintenance	1	STATUTORY PPM for external areas Schedule achieved (in month)	>=95%	90-94%	<90%		New reporting structure will be in place with the introduction of Micad	New reporting structure will be in place with the introduction of Micad	New reporting structure will be in place with the introduction of Micad
	2	MANDATORY PPM for external areas Schedule achieved (in month)	>=90%	89-86%	<86%		New reporting structure will be in place with the introduction of Micad	New reporting structure will be in place with the introduction of Micad	New reporting structure will be in place with the introduction of Micad
	3	GENERAL PPM for external areas Schedule achieved (in month)	>=85%	84-80%	>80%		New reporting structure will be in place with the introduction of Micad	New reporting structure will be in place with the introduction of Micad	New reporting structure will be in place with the introduction of Micad
Linen Service	1	Average stock levels delivered (aggregate monthly)	<=92%	91>=85	<85		95%	92%	91%
	2	Laundry Quality (based on checking 700 pieces per week)					94.89%	93.79%	94.07%
	3	Linen Rejects	<=4%	>4<=9%	>9%		0.22%	0.13%	0.20%

**\*\*Please note that a KPI Remedial Action Plan has been completed for any KPIs with one red KPI or two amber KPIs consecutively\*\***

# Service Performance Update

## Q2 KPIs 2023-24

Service Area	KPI No	KPI Descriptor	Green	Amber	Red	May-23	Jun-23	Jul-23
Catering Services	1	Achievement of EHO 5 star food safety rating (annual)	5 Star	4 star	<4 star	5 star	5 star	5 star
	2	Achievement of food wastage target	<=10%	11-14%	>=15%+	7.69%	7.66%	8.44%
Portering and courier service	1	Routine patient movement - average completion times completed within 35-50mins	85-100%	65-84%	>65%	94%	90%	93%
	2	Items moves and routine task completion time - average completed within 120 mins	85-100%	65-84%	>65%	94%	94%	94%
Domestic services	1	Achieve National Specification of Cleanliness (NSC) score (FR2)	>=95%	94-90%	<90%	97.28%	96.82%	96.92%
	2	Total number of deep clean requests (activity based target)	500-750	751-900	901+	376	463	391
	3	Average response time to deep clean requests (24/7)	<=60 mins	>60min-90min	>90mins	46	47	41
Car park and traffic management	1	Car parking permits issued within 15 working days (WD) (subject to waiting lists and over subscription)	<=15 WD	15-18 WD	>=19WD	PASS	PASS	PASS
	2	Proximity cards issued within 15 working days (subject to waiting lists and over subscription)	<=15 WD	15-18 WD	>=19WD	PASS	PASS	PASS

**\*\*Please note that a KPI Remedial Action Plan has been completed for any KPIs with one red KPI or two amber KPIs consecutively\*\***

# Service Performance Update

## Q2 KPIs 2023-24

Service Area	KPI No	KPI Descriptor	Green	Amber	Red		May-23	Jun-23	Jul-23
Sterile services	1	Surgical instruments will be available for re-use: Theatres, DSU and on site clinics (non-critical)	24 hours	24-28 hours	>28 hours		PASS	PASS	PASS
	2	Surgical instruments will be available for re-use: Theatres critical (acute and trauma)	12 working hours	12-14 working hours	>14 working hours		PASS	PASS	PASS
	3	Surgical instruments will be available for re-use: Community clinics	7 days	>7 <9 days	> 9 days		PASS	PASS	PASS
	4	Surgical instruments will be available for re-use: Flexible endoscopes	2 working hours	>2 -2.5	>2.5 working hours		PASS	PASS	PASS
	5	Surgical instruments will be available for re-use: Fast track	4.5 working hours	>4.5 working hours	>5 working hours		PASS	1	PASS
	6	The conformity compliance rate remains the same as or above the compliance	>99.36%	=<99.36%	<99.15%		99.99%	99.93%	99.93%
	7	The inspection and packing room conforms to ISO Class 8	Class 8		Class 9		Class 8	Class 8	Class 8
	8	Devices used on patients are not missed of scanning to the sterilisation process	<3	=>3	>5		0	0	0
	9	No unscheduled sharps are sent to service users	<1	1	>1		0	0	0
Medical devices and equipment library	1	All medical device deliveries not requested as urgent will be delivered within an hour daily	<1 hour	1 hour	>1 hr		00:13	00:11	00:13
	2	All medical device deliveries requested as urgent will be delivered within 20 minutes daily	<20 mins	>20 mins	>30 mins		PASS	PASS	PASS
	3	Wards and departments (16 in total) will be checked and equipment collected twice daily	2	<2	0		PASS	PASS	PASS
Pest Control	1	Call-out response time	72 hours	72-96 hours	>96 hours		Pass	Pass	Pass

**\*\*Please note that a KPI Remedial Action Plan has been completed for any KPIs with one red KPI or two amber KPIs consecutively\*\***

# HIF Risks

All risks scored at a level 12 or above (high risks) are presented on the Datix software and are monitored alongside the Trust's risks.

The level 12 and above risks are tabled in **the next slides**. There are currently **11** high risks identified for August 2023.

From October 2022, all HIF-owned risks have been identified if these are HIF only, or joint HDFT/HIF risks. Please see right column on risk tables.

From November 2022, all HIF risks are reported to HDFT Executive Risk Review Group so both HIF and HDFT colleagues are fully cited on all risks.

From July 2023, all HIF risks detail timeframes for each of the mitigating actions to be completed.

Risks are reviewed at the following HIF and HDFT meetings and committees:

- HIF Board of Directors
- HIF Governance and Compliance Committee
- HIF SMT
- HDFT Executive Risk Review Group
- HDFT Board of Directors
- HDFT/HIF Contract Meeting

	Strategic Theme	Risk	Risk Detail	Responsible Lead	HIF or Joint (HDFT/HIF Risk)	Initial Risk Level	Current Risk Level	Target Risk Level	Mitigating Actions	Date of completion	Datix ID
<b>Estates</b>	<b>Strategic Theme No.2</b> Provision of Safe, Efficient, Compliant, Responsive and Good Quality Services	Failure of Nurse Call System	Nurse call systems are obsolete in most areas (33+ years old) and without a comprehensive maintenance contract in place. It will be "best endeavour's" to resolve any ongoing issues. Funding and replacement required site wide.	<i>Head of Estates</i>	Joint risk	20	16	4	<ul style="list-style-type: none"> <li>Estates team to ensure a suitable service contract is in place to support any repairs in the interim.</li> <li>A comprehensive backlog maintenance survey is to be carried out to develop costs, business case and relevant funding stream for replacement of nurse call systems which are obsolete</li> <li>Specialist contractors to provide maintenance costs for existing systems to include call out arrangements to support the clinical teams</li> </ul>	<ul style="list-style-type: none"> <li>From April 2023</li> <li>Unknown – dependent on Trust funding</li> <li>Unknown – dependent on Trust funding</li> </ul>	241
	<b>Strategic Theme No.2</b> Provision of Safe, Efficient, Compliant, Responsive and Good Quality Services	Fire Alarm System Outage	Fire alarm system obsolete and requiring replacement.	<i>Operational Estates Manager</i>	Joint risk	12	12	8	<ul style="list-style-type: none"> <li>Porters instructed to carry out regular checks of area where necessary (SOP in place)</li> <li>New areas have been upgraded (Briary and Lascelles). When funding becomes available and areas of refurbishment identified, these will be updated</li> <li>Protec (fire contractor) instructed to allocate resource and obtain parts to effect a repair as urgently as possible.</li> </ul>	<ul style="list-style-type: none"> <li>Unknown – dependent on Trust funding and upgrades</li> </ul>	246
	<b>Strategic Theme No.2</b> Provision of Safe, Efficient, Compliant, Responsive and Good Quality Services	Strayside Lifts	Lack of resilience with one lift (out of two) currently being replaced.	<i>Operational Estates Manager – Engineering</i>	Joint risk	16	16	8	<ul style="list-style-type: none"> <li>1 hour call out for trapped passengers</li> <li>Standard is 4 hour call out for breakdowns, they have indicated that they will look to attend in 1 hour however they can't always guarantee that this will be the case.</li> <li>All parts stripped down from the first lift will remain on site and available as replacement spares for additional resilience in resolving if the second lift goes down.</li> </ul>	<ul style="list-style-type: none"> <li>April – November 2023</li> </ul>	269



# Estates

	Strategic Theme	Risk	Risk Detail	Responsible Lead	HIF or Joint (HDFT/HIF Risk)	Initial Risk Level	Current Risk Level	Target Risk Level	Mitigating Actions	Date of completion	Data ID
Estates	<b>Strategic Theme No.2</b> Provision of Safe, Efficient, Compliant, Responsive and Good Quality Services	Compliance & Service Delivery including Backlog maintenance programme	Following an internal review, there are various compliance areas such as fire, water quality and health and safety that need urgent improvement to minimise safety and quality risks and ensure we align with our statutory / mandatory maintenance obligations. Current PPM not adequate.  Add backlog	<i>Head of Estates</i>	Joint risk	20	16	8	<ul style="list-style-type: none"> <li>A detailed audit is underway to review key compliance areas and statutory / HTM alignment with respect to Health and Safety, Fire Safety, Water Quality, and other HTM aligned services that are essential to support the delivery of safer care.</li> <li>Recruitment is a major contributory factor, all vacant posts are being reviewed and job descriptions / adverts are to be posted asap.</li> <li>Staff workloads are to be prioritised in terms of risk where possible</li> <li>Constant review and update of this risk based on audit findings</li> <li>Workloads are reviewed by the management team based on site risk</li> <li>An improved PPM schedule for water quality and other key compliance areas is to be developed and implemented with a range of supporting documents. This is to be part of an improved Estates CAFM system and the integration of SFG 20</li> </ul>	<ul style="list-style-type: none"> <li>Ongoing</li> <li>June/July 2023</li> <li>Ongoing</li> <li>Ongoing</li> <li>Ongoing</li> <li>April 2024</li> </ul>	227
	<b>Strategic Theme No.2</b> Provision of Safe, Efficient, Compliant, Responsive and Good Quality Services	Hot Water	Hot Water circulation temperatures are below the minimum required in HTM 04 "Safe Water in Healthcare Premises"	<i>Head of Estates</i>	Joint risk	16	12	4	<ul style="list-style-type: none"> <li>The Authorising Engineer (Water Quality) has advised twice weekly flushing for all outlets on site until the source of the issue can be found or an alternative engineering solution can be implemented</li> <li>Legionella sampling is to be arranged for HDFT Main Building as an urgent</li> <li>IPC / WSG have been advised of the issue and the need to carry out regular twice weekly flushing</li> </ul>	<ul style="list-style-type: none"> <li>Ongoing</li> <li>Implemented and ongoing</li> <li>Implemented and ongoing</li> </ul>	228

# Facilities



Facilities	Strategic Theme	Risk	Risk Detail	Responsible Lead	HIF or Joint (HDFT /HIF Risk)	Initial Risk Level	Current Risk Level	Target Risk Level	Mitigating Actions	Date of completion	Datix ID
	<b>Strategic Theme No.2</b> Provision of Safe, Efficient, Compliant, Responsive and Good Quality Services	Courier fleet vehicles	Courier fleet are 4 years out of contract and vehicles failing. Currently using five hire vehicles. Exceeding allocated budget.	Portering & Logistics Manager	Joint	15	12	4	<ul style="list-style-type: none"> <li>Hiring replacement vehicles and regular maintenance</li> <li>Reviewing current contract and looking at new contract</li> <li>Looking for a new contract to replace all vehicles</li> </ul>	<ul style="list-style-type: none"> <li>Ongoing</li> <li>August 2023</li> <li>September 2023</li> </ul>	266
	<b>Strategic Theme No.2</b> Provision of Safe, Efficient, Compliant, Responsive and Good Quality Services	Traffic Management - HDH Visitor Car Park	Current queues and traffic concerns (Lancaster Park Road) due to lack of available spaces within the visitor car park. Barrier failure resulting in loss of income.	Security and Car Park Manager	Joint	15	12	4	<ul style="list-style-type: none"> <li>Staff to pay for parking permits</li> <li>xxxxxxxxxxxxx to commence contract</li> <li>Car Park attendants to patrol the car park to support parking and back log of cars</li> </ul>	<ul style="list-style-type: none"> <li>September 2023</li> <li>October 2023</li> <li>Ongoing</li> </ul>	264
	<b>Strategic Theme No.2</b> Provision of Safe, Efficient, Compliant, Responsive and Good Quality Services	Security, Violence & Aggression	Security, Violence & Aggression risk to HDFT/HIF colleagues from patients/visitors.	Security and Car Park Manager	Joint	20	15	6	<ul style="list-style-type: none"> <li>xxxxxx security guards in place in A&amp;E and Goods Yard</li> <li>Car Park attendants in place in all car parks on HDH site</li> <li>ACS accreditation for security industry authority</li> <li>Xxxxxxxxxx to be introduced as security support (7 nights a week)</li> <li>Recruitment of staff following consultation</li> <li>xxxxxxxxx to commence on site</li> <li>Developing and implementing a V&amp;A training package</li> </ul>	<ul style="list-style-type: none"> <li>Ongoing</li> <li>Ongoing</li> <li>Ongoing</li> <li>August 2023</li> <li>September 2023</li> <li>October 2023</li> <li>December 2023</li> </ul>	263

## Sterile Services Department (SSD)

	Strategic Theme	Risk	Risk Detail	Responsible Lead	HIF or Joint (HDFT/HIF Risk)	Initial Risk Level	Current Risk Level	Target Risk Level	Mitigating Actions	Datix ID	
SSD	Strategic Theme No.2 Provision of Safe, Efficient, Compliant, Responsive and Good Quality Services	Failure of aging Washer Disinfectors	Risk of failing to meet statutory legislation (HTM Series) resulting in the insufficient availability of sterile medical devices because of inadequate WDs	Head of Medical Devices and Sterile Services	Joint risk	20	12	4	<ul style="list-style-type: none"> <li>Washers purchased</li> <li>Project team established</li> <li>Consultation with staff completed and meetings with B Braun established</li> <li>CP support from ex-Steris team working well, many issues been dealt with that would have otherwise impacted on uptime.</li> <li>Upgrade and refurbishment of SSD to be completed</li> </ul>	<ul style="list-style-type: none"> <li>April 2023</li> <li>Ongoing</li> <li>April 2023 ongoing</li> <li>Ongoing</li> <li>September 2023</li> </ul>	229

## Risks – Corporate

	Strategic Theme	Risk	Risk Detail	Responsible Lead	HIF or Joint (HDFT/HIF Risk)	Initial Risk Level	Current Risk Level	Target Risk Level	Mitigating Actions	Date of completion	Datix ID
Corporate	<b>Strategic Theme No. 1</b> Being Well managed and Financially Sound	HDFT Corporate Support (Company Secretary) to HIF	Limited corporate and Company Secretary support provided from HDFT to HIF. This is due to the current post (Deputy Company Secretary) being vacant. The service provided in the Corporate SLA between HDFT and HIF is being unfulfilled.	<i>Quality &amp; Governance Lead</i>	HIF	12	12	4	<ul style="list-style-type: none"> <li>HIF Quality and Governance Lead currently supporting with the Corporate functionality where possible.</li> <li>HDFT Executive Assistant supporting with Board of Directors and Committee meetings (papers and minute-taking)</li> <li>Reviewing current position with external advise to next steps and Company Secretary requirements</li> </ul>	<ul style="list-style-type: none"> <li>Ongoing</li> <li>From January 2023 (ongoing)</li> <li>August/September 2023</li> </ul>	261
	<b>Strategic Theme No. 1</b> Being Well managed and Financially Sound	Company Financial Position	Risk to Company financial sustainability and Inability to meet budget	<i>Quality &amp; Governance Lead</i>	HIF	15	12	9	<ul style="list-style-type: none"> <li>Regular review with divisional accountant</li> <li>Budget planning process</li> <li>Dedicated CIP Planning sessions</li> <li>Business Planning sessions for 2024/25</li> <li>Ensure all budget holders have financial training</li> <li>Reduce agency spend</li> </ul>	<ul style="list-style-type: none"> <li>Ongoing</li> <li>Ongoing</li> <li>Ongoing</li> <li>From August 2023</li> <li>Ongoing</li> <li>Ongoing</li> </ul>	273

# Quality, Performance and Standards

## Internal Audit Actions and Plan for 2023-24

The HIF Internal Audit Programme for 2023-24 is as follows:

1. **Cash Handling Procedures**
2. **Contract Management/xxxxxxxxxx**
3. **Catering**
4. **Porters**
5. **Company wide Timeclocks**
6. **Car parking**
7. **Governance and Risk**

The 'Cash Handling Procedures' and 'Contract Management/xxxxxxxxxxxxxxxx' internal audits have now been completed, with the initial outcomes as:

- Contract Management/xxxxxxxxxxxx - Opinion of Limited Assurance
- Cash Handling Procedures - Opinion of Significant assurance

There has been an additional follow-up audit on Clinical Waste Management with has an outcome opinion of 'Significant Assurance'

**The Portering and Governance & Risk audits have commenced in August 2023.**

# Quality, Performance and Standards

## HIF Policies and Standard Operating Procedures (SOP's)

A review of all the Company's policies (HIF-authored policies) has now taken place and the Policy Register has been developed detailing the current position. The register details the owner, review dates and identified the HIF and HDFT meetings/committees for ratification at.

Work is ongoing with HDFT/HIF HR colleagues to review the current 21 HIF HR Policies, these will align with the potential change in pension options and to reflect the different terms and conditions of HIF colleagues.

It has been identified that a requirement of a new policy – 'Dress, appearance and uniform' policy to align with the new uniforms introduced in some HIF teams. This will be ratified in August 2023.

There is one policy identified for August 2023 as past review date - Water Safety Policy. This policy is undergoing a major revision with the water safety group, external consultants and IPC. This review will be completed in 3 months and policy updated accordingly.

The Policy Register continues to be reviewed as part of the HIF SMT, Policy Group and as part of the PolicyStat Project Group with Trust and HIF membership.

# Quality, Performance and Standards

## Internal Audit Actions and Plan for 2023-24

The new PolicyStat and Datix Cloud IQ (DCIQ) systems are being developed. The projects are progressing well with representation and input from HIF colleagues.

With regards to timescales, it is anticipated that Policystat will be available and live to colleagues from October 2023.

DCIQ including Events, Claims, Feedback, Safety Learning & Mortality Review modules are currently being re-baselined and forecast for going 'live' date has been delayed from July to October 2023.

Our 'HIF Datix Champions' are now established and attending project team meetings in time for the introduction of DCIQ.

Our Datix Champions are identified on the right



# Quality, Performance and Standards

## Freedom of Information (FOI) and Patient Experience Team Feedback

A HIF FOI log was developed in February 2022 to ensure the process and timely response of all FOI's was actioned. In addition the approval process was developed to ensure any responses were reviewed and approved by both the Deputy Director Estates and Facilities and Managing Director.

The FOI process has been working successfully and having one point of contact has ensured that the FOI's are actioned and replied to within the required timeframes. There were a total of 6 FOIs in Quarter 1. So far for Quarter 2 of 2023 there has been 4.

## Patient Experience Team (PET) queries

The process and protocol to replying to comments, concerns and feedback via the Patient Experience Team (PET) to HIF has now been formalised. All feedback is shared to the Quality & Governance Lead who manages and responds (if required). Common themes for feedback within HIF are parking/traffic control, building/maintenance queries and security comments. There have been 3 formal complaints to respond to in Quarter 2.

*Work is ongoing to compile a frequently asked questions database for HIF to streamline this process and support FOI and PET colleagues with responses going forward.*



## Business Modernisation

Achievements in Last Month	Focus for Next Month
Horizon scanning on-going	Domestic Department SOPs Booklet with Domestic Colleagues for final amendments
HIF Newsletter Issue 8 due to be launched 21 August 2023. xxxxxxxxxxxx is providing the audio introduction and overview	Porters SOP Booklet to be in final draft for Porter's Colleague approval
E-Learning sessions to continue. A revised approach to encourage increased levels of uptake is now in situ	Finalisation of the Business Modernisation Group ProjectPlace workspace
The social media templates have been updated, to provide a more professional appearance	Plan for the external coffee hut agreed, and work completed
A thorough review of the HIF portals has been completed	Agreed and implemented structure for the HIF Hero award moving forwards
The HIF Freedom of Information – Publication scheme is now available to view on the HIF website	
Follow up Porter's sessions held	

# Business Development

## Key updates:

- 📌 Social Media platforms are growing and engagement is increasing
- 📌 Continuous Horizon Scanning for potential new business opportunities
- 📌 Volume 8 of the HIF Newsletter finalised
- 📌 A thorough review of the HIF portals has been completed
- 📌 The HIF Freedom of Information – Publication scheme is now available to view of the HIF website
- 📌 Business Modernisation Group ProjectPlace workspace is currently being created
- 📌 Domestic SOP Booklet is receiving final amendments by Domestic Colleagues
- 📌 Porters SOP booklet currently being collated and initial draft has commenced
- 📌 Follow up Porter sessions held
- 📌 Scoping of an external coffee hut is being explored, with an options appraisal provided.

# Workforce Performance Report

## August 2023

Based on July 2023 data

**Looking after**  
our people

**Belonging**  
in the NHS

**Growing** for  
the future

**New ways** of  
working and  
delivering care

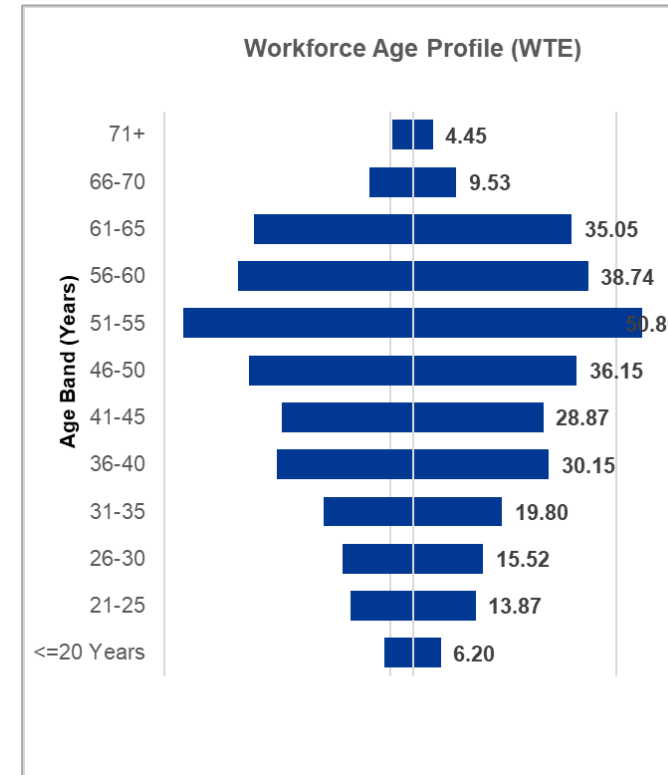
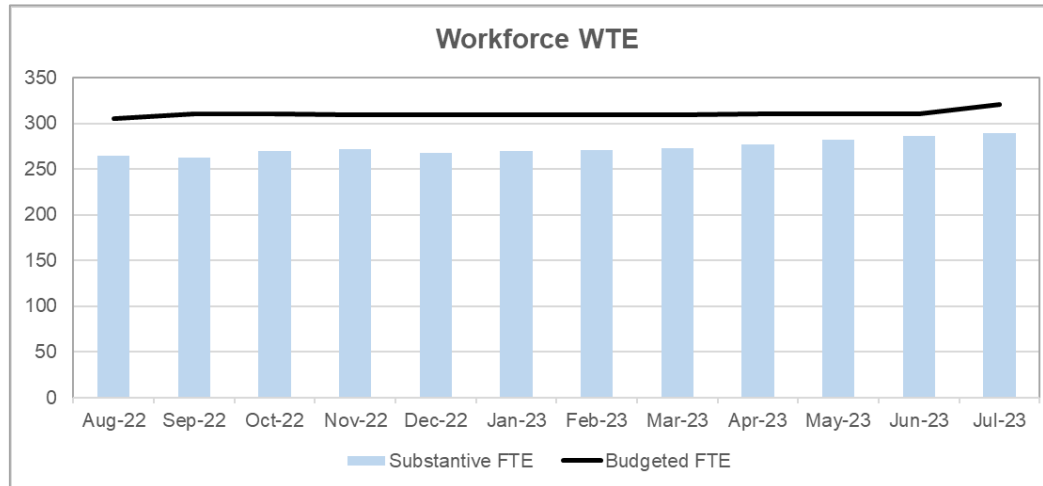
## Workforce Performance Indicators

KPI	Jul 21	Jul 22	Jun 23	Jul 23	Target	Performance against Target	Difference to Last Month	Difference to Last Year
Staff Turnover Rate (Rolling 12 months)	11.29%	20.90%	21.87%	<b>19.29%</b>	10%	● 9.29%	● -2.58%	● -1.62%
% staff leaving within the first year (excl fixed term contracts)	14.04%	40.03%	29.62%	<b>24.28%</b>	10%	● 14.28%	● -5.34%	● -15.75%
Sickness Rate (monthly)	7.41%	7.83%	5.32%	<b>5.87%</b>	4.5%	● 1.37%	● 0.55%	● -1.97%
Appraisal Rate (Rolling 12 months)	23.47%	16.00%	85.60%	<b>87.90%</b>	75%	● 12.90%	● 2.31%	● 71.90%
Mandatory Training (Rolling 12 months)	90.00%	85.00%	91.00%	<b>91.50%</b>	60%	● 31.50%	● 0.50%	● 6.50%
Vacancy Rate	9.33%	15.55%	7.71%	<b>9.90%</b>	13.1%	● -3.20%	● 2.19%	● -5.65%

### Executive Summary

- Turnover has decreased in July from 21.87% to 19.29%. (This incorporates voluntary and involuntary turnover).
- Staff leaving within the first year of employment is 24.28% and is a key area of concern and focus.
- Sickness has increased in July from 5.32% to 5.87%.
- The appraisal rate in July is 87.90%, which is a small increase of June's rate of 85.60%.
- The training data shown is for the Mandatory training compliance for the end of July. The overall compliance rate for substantive staff in the Directorate is 91.5% and is compliant against the target of 60%.
- The vacancy rate in July is 9.90%, which is an increase compared to last month's vacancy rate of 7.71%. This equates to 31.75wte vacancies.

## 1. Total Workforce

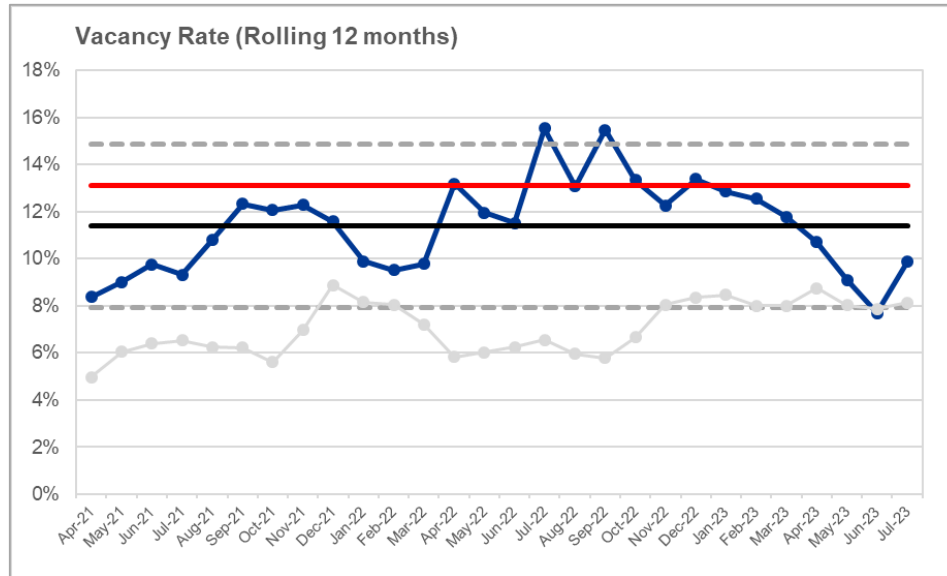


Workforce Indicator	Budget WTE	Substantive WTE	Difference WTE
<b>Workforce Total</b>	320.88	289.13	31.75
AfC Contract		100.91	
HIF Contract		188.22	

### Commentary

- The graph displays that HIF has generally seen small growth since September and has a substantive workforce of 289.13wte as at July 2023. This is an increase of 22.38wte compared to July 2022.
- 65% of the substantive workforce are on a HIF contract.
- 30.4% of the workforce are aged 56 and over.

## 2. Vacancies

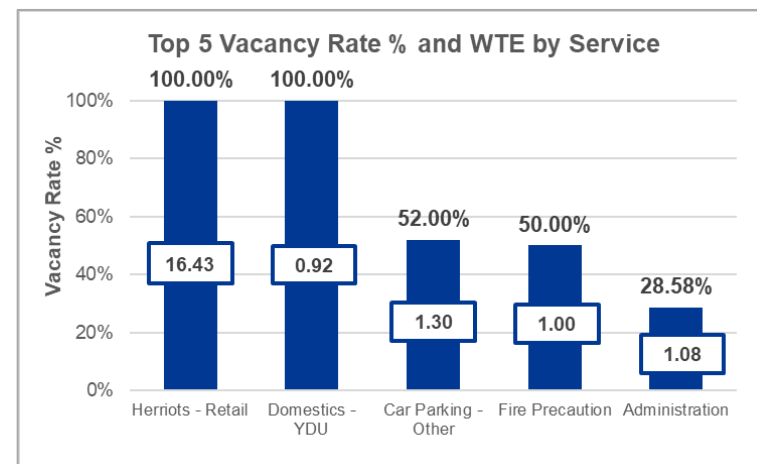


Workforce Indicator	Vacancy Rate	Vacancies WTE	Pipeline WTE
<b>Vacancies</b>	9.90%	31.75	TBC

### Commentary

- HIF's vacancy rate in July is 9.90%, which is an increase to last month which was 7.71%. This equates to 31.75wte vacancies. The increase in vacancies is due to an increase in budgeted establishment of 10.70wte.
- A negative vacancy position denotes an over-establishment.

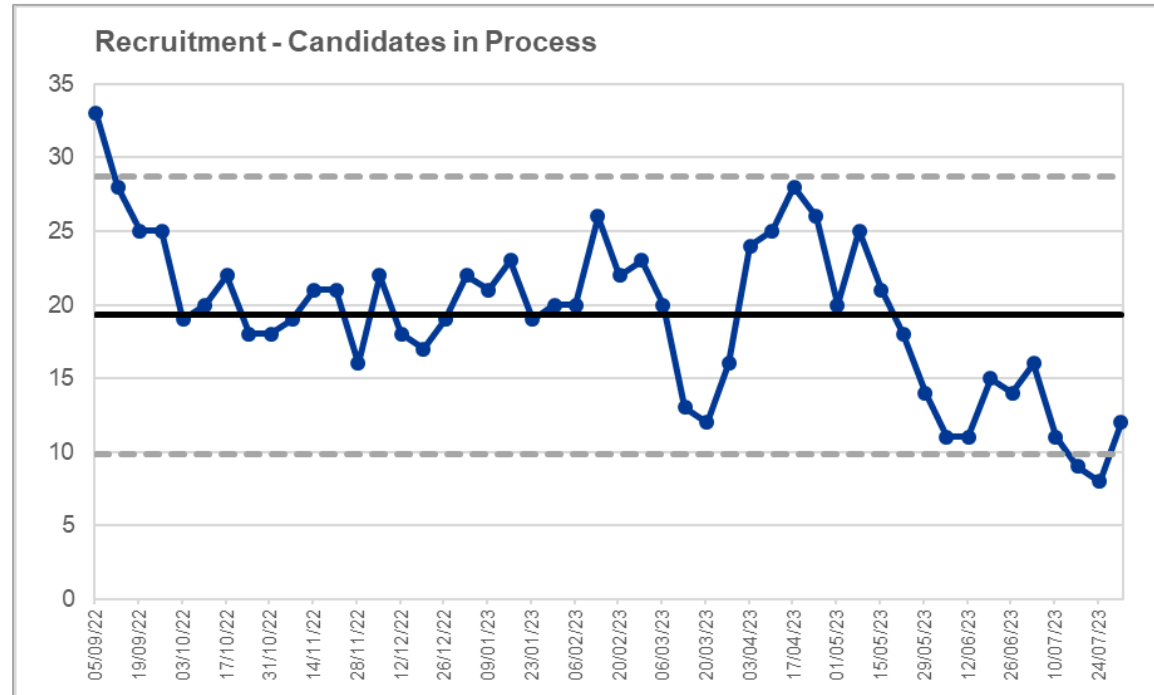
Pay Grade (AfC and HIF combined)	Vacancy WTE	Vacancy %
Band 2	14.92	7.53%
Band 3	8.23	13.89%
Band 4	1.75	9.40%
Band 5	7.00	33.33%
Band 6	0.40	8.00%
Band 7	3.20	36.36%
Band 8a	0.00	0.00%
Band 8b	0.00	0.00%
Band 8c	-1.00	0.00%
Band 8d	0.00	0.00%
Band 9	0.00	0.37%
Non Executive Directors	-1.00	-33.33%



### 3. Recruitment Activity

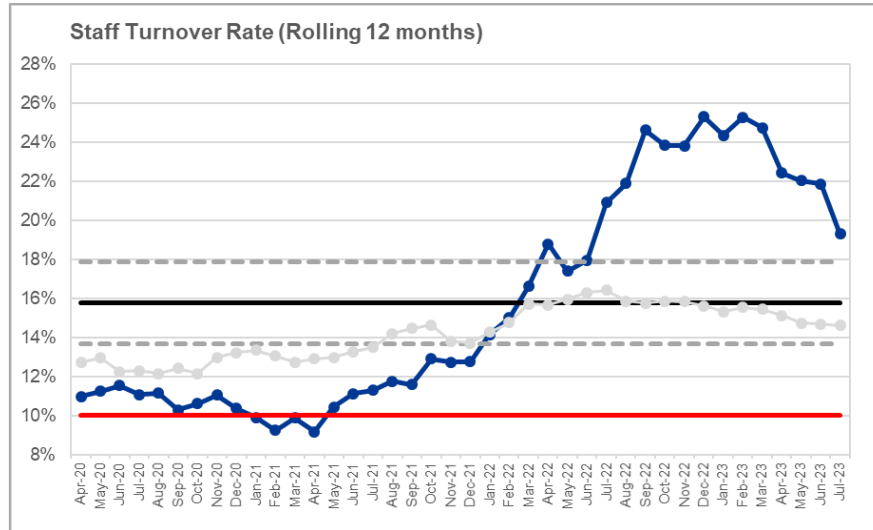
#### Commentary

- The table relates to the number of candidates and live adverts as at 28<sup>th</sup> July 2023.
- ‘Candidates in Process’ are candidates undergoing pre-employment checks and waiting for a start date, this is in addition to those with a confirmed start date.
- Further data regarding the pipeline will be available in this report from next month.



Workforce Indicator	Candidates in Process	Candidates with Start Date	Number of Live Adverts
<b>Recruitment</b>	14	9	5

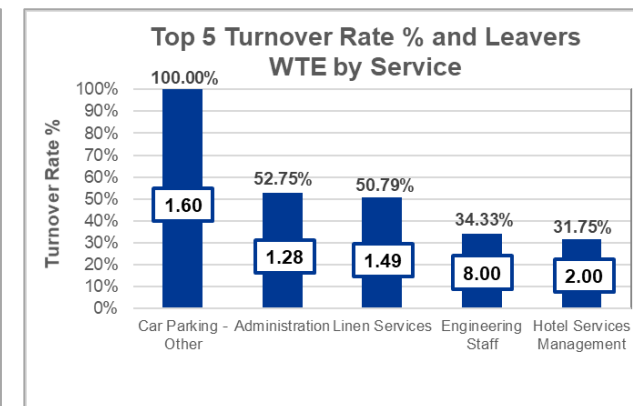
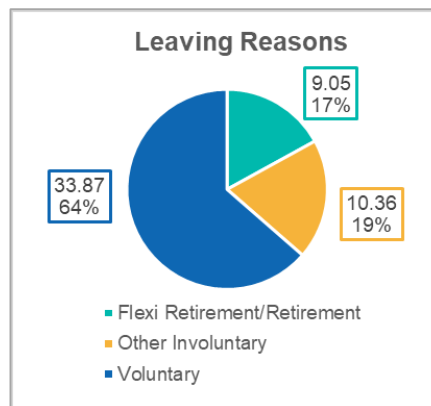
## 4a. Turnover



### Commentary

- Turnover has seen a decrease to 19.29% in July 2023 from 21.87% last month, however remains at a very high rate.
- 17% of leavers over the last 12 months are due to retirements, which includes those who intend on flexi-retiring and returning to HIF.
- 19% of leavers over the last 12 months are due to other involuntary resignations, these include dismissal and death in service.
- The most known common theme cited as the reason for voluntary resignation is 'Work Life Balance' which accounts for 22% of the overall number of leavers within the voluntary resignation category and 14% of all leavers.

Workforce Indicator	Target %	Actual %	Difference %
Turnover	10.00%	19.29%	+9.29%

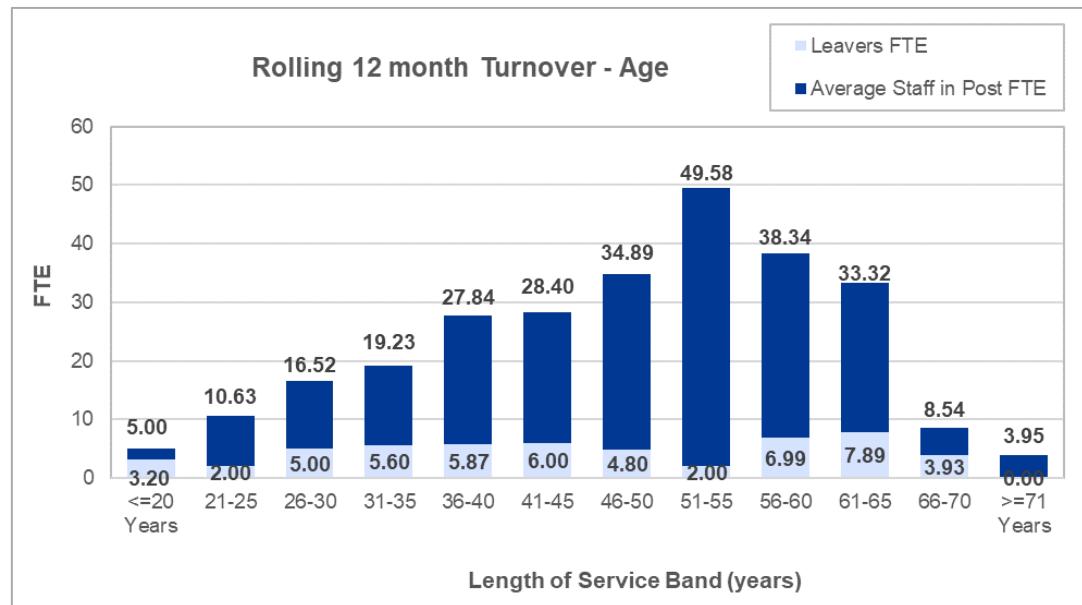
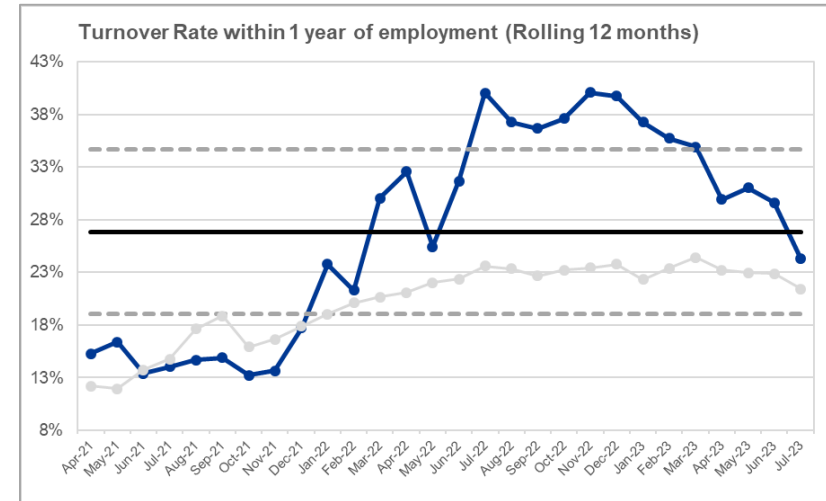




## 4b. Turnover – Less than one year’s service and Age

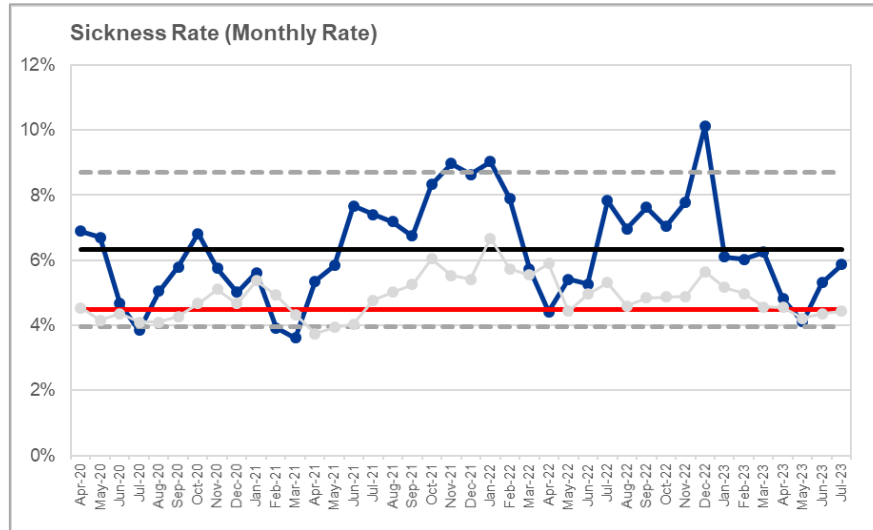
### Commentary

- The turnover rate of those within the first year of service is 24.28% in July, which is a decrease from 29.62% last month.
- 37% of leavers over the last 12 months have less than 2 years’ service with HIF.
- Turnover rates are higher for those who are on a HIF contract, with the turnover rate being 20.38% compared to a turnover rate of 17.66% of those on an Agenda for Change contract.



Age Band (Years)	Leavers WTE	Turnover %
20 Years and under	3.20	64.00%
21-25	2.00	18.81%
26-30	5.00	30.27%
31-35	5.60	29.12%
36-40	5.87	21.07%
41-45	6.00	21.13%
46-50	4.80	13.76%
51-55	2.00	4.03%
56-60	6.99	18.22%
61-65	7.89	23.69%
66-70	3.93	46.06%
71 Years and over	0.00	0.00%

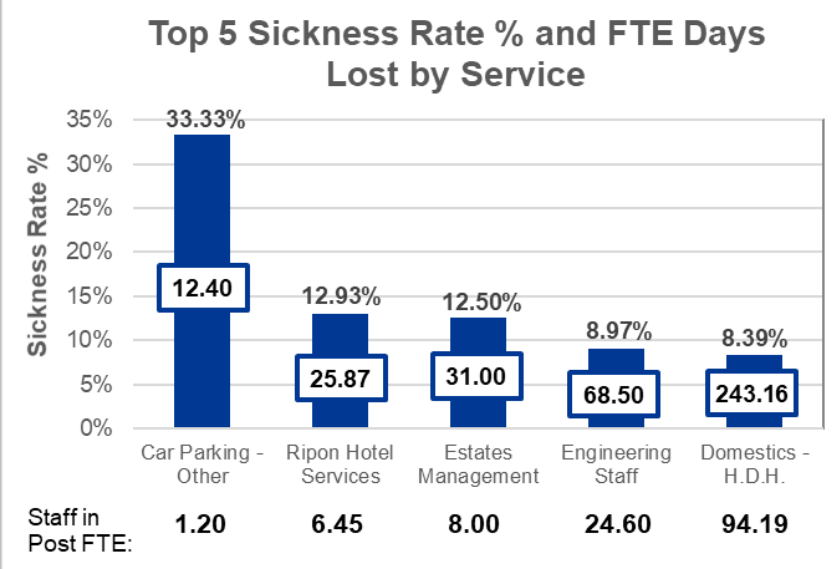
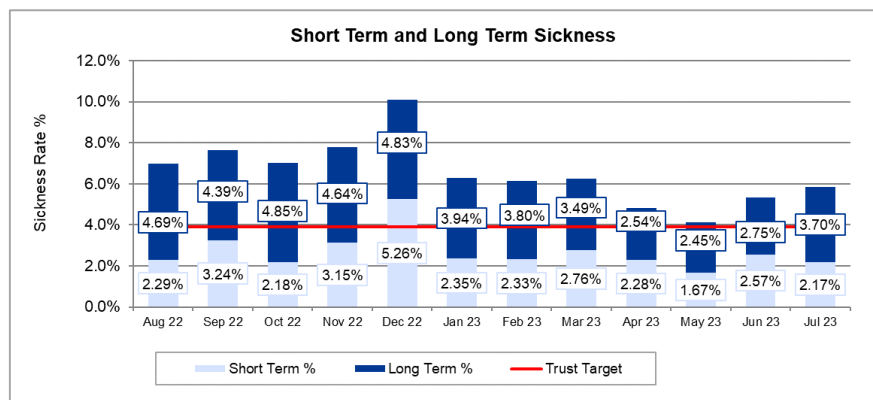
## 5a. Sickness



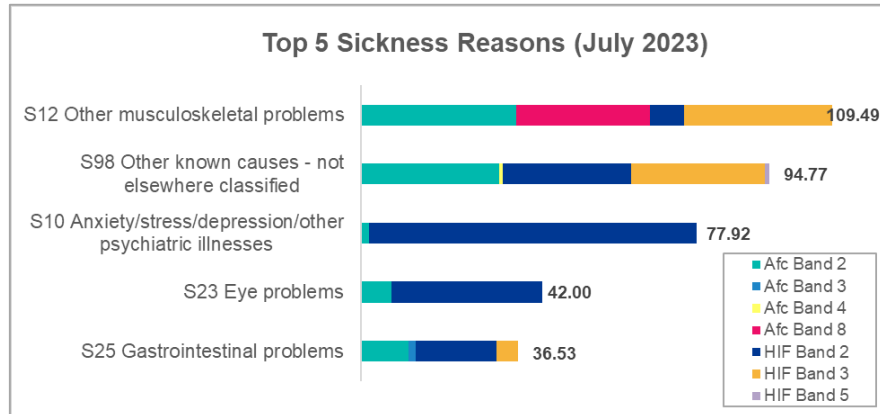
### Commentary

- Sickness rates have seen an increasing trend since May 2023 and is currently at 5.87% in July.
- Short term sickness has decreased from 2.57% to 2.17%, however long term sickness has seen increased this month from 2.75% to 3.70%.
- The greatest contributing factor to the increase in sickness in HIF this month is due to an increase in sickness within Domestics and Sterile Services.

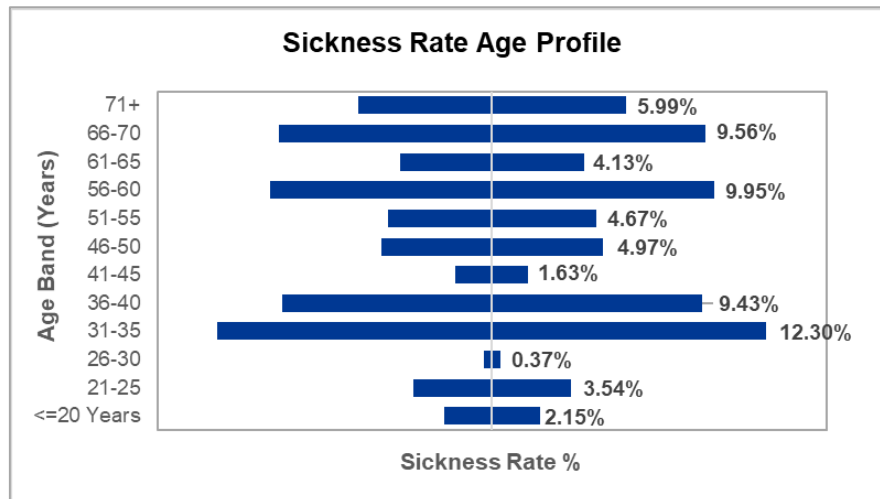
Workforce Indicator	Target %	Actual %	Difference %
<b>Sickness</b>	4.50%	5.87%	+1.37%



## 5b. Sickness – Sickness Reasons

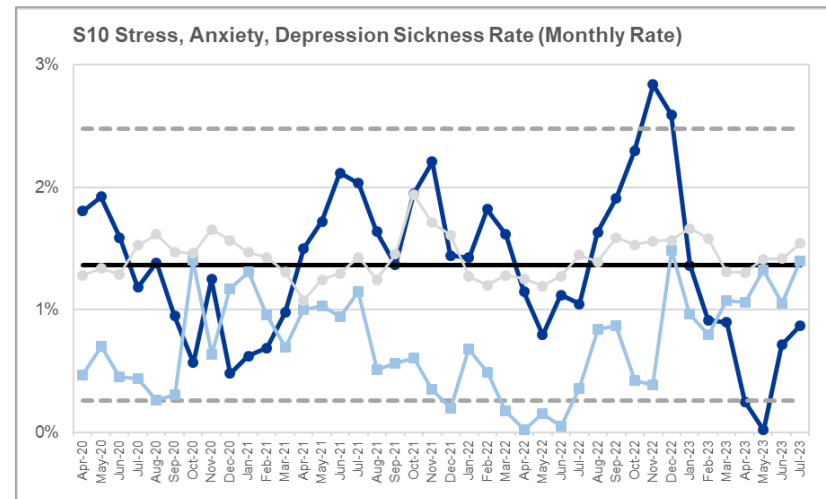


Sickness by Contract (June 2023)	Sickness %
Agenda for Change	6.00%
HIF	5.79%

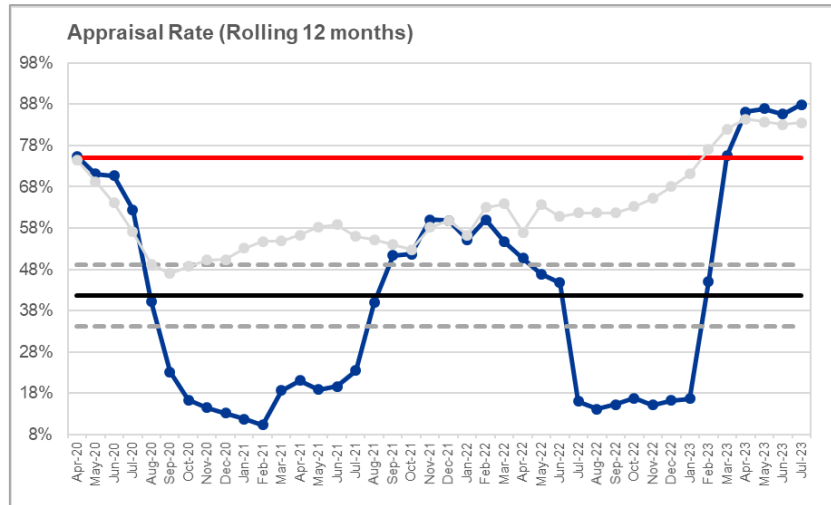


## Commentary

- Sickness due to 'S12 Other musculoskeletal problems' has increased in July from 0.93% to 1.23% and is now the top reason for sickness.
- The sickness rate of those on an AfC contract (6.00%) is higher than those on a HIF contract (5.79%).
- Sickness rates in July are highest within the 31-35 years bracket.



## 6. Appraisals



Workforce Indicator	Target %	Actual %	Difference %
<b>Appraisals</b>	75.00%	87.90%	+12.90%

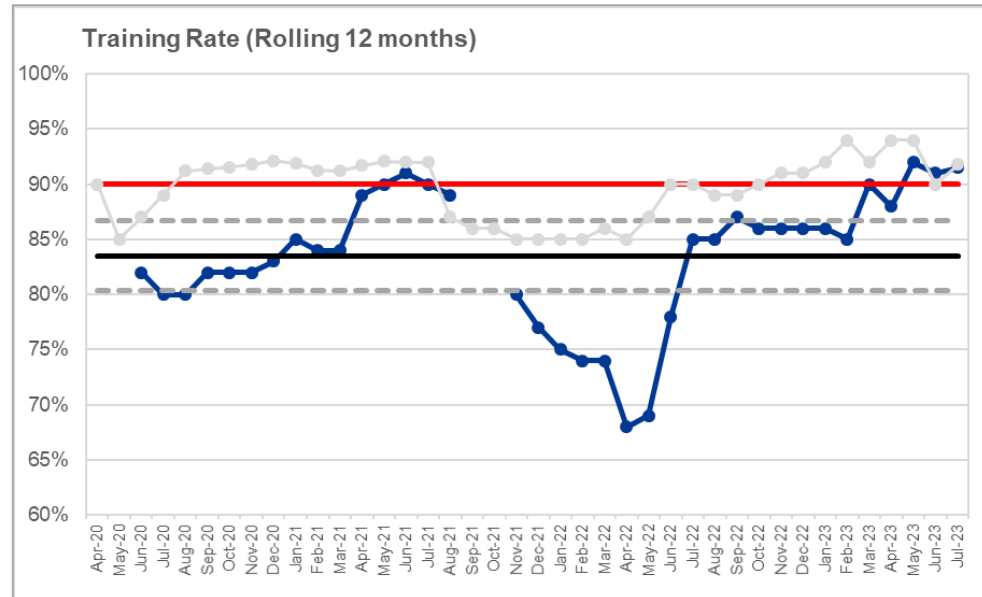
### Commentary

- The appraisal rate in July is 87.90%, which is a small increase in comparison to June, which saw an appraisal rate of 85.60%.
- 30 appraisals are still outstanding as at 31<sup>st</sup> July 2023.

Service	Appraisals Overdue	Appraisal %
HIF Administration	0	100.0%
HIF Board of Directors	2	50.0%
HIF Car Parking – Other	0	100.0%
HIF Catering H.D.H.	1	97.4%
HIF Coffee Shop	0	100.0%
HIF Domestics - H.D.H.	2	97.7%
HIF Engineering Staff	16	5.9%
HIF Estates Management	2	75.0%
HIF Fire Precaution	1	0.0%
HIF Healthcare Waste Management	0	100.0%
HIF Hotel Services Management	1	80.0%
HIF Linen Services	2	0.0%
HIF Management Team	0	100.0%
HIF Portering Services	1	96.4%
HIF Ripon Hotel Services	0	100.0%
HIF Staff Accommodation	0	100.0%
HIF Sterile Services	1	96.6%
HIF Transport Exs.	1	80.0%

## 7. Mandatory Training

Service	% Compliance
HIF Administration	92.6%
HIF Bank	78.7%
HIF Board of Directors	75.7%
HIF Car Parking – Other	94.4%
HIF Catering H.D.H.	90.6%
HIF Coffee Shop	91.1%
HIF Domestics - H.D.H.	96.6%
HIF Engineering Staff	96.8%
HIF Estates Management	86.5%
HIF Fire Precaution	66.7%
HIF Healthcare Waste Management	82.5%
HIF Hotel Services Management	95.7%
HIF Linen Services	97.2%
HIF Management Team	92.3%
HIF Portering Services	75.9%
HIF Ripon Hotel Services	98.4%
HIF Staff Accommodation	100.0%
HIF Sterile Services	98.9%
HIF Sterile Services Bank	91.8%
HIF Transport Exs.	69.8%

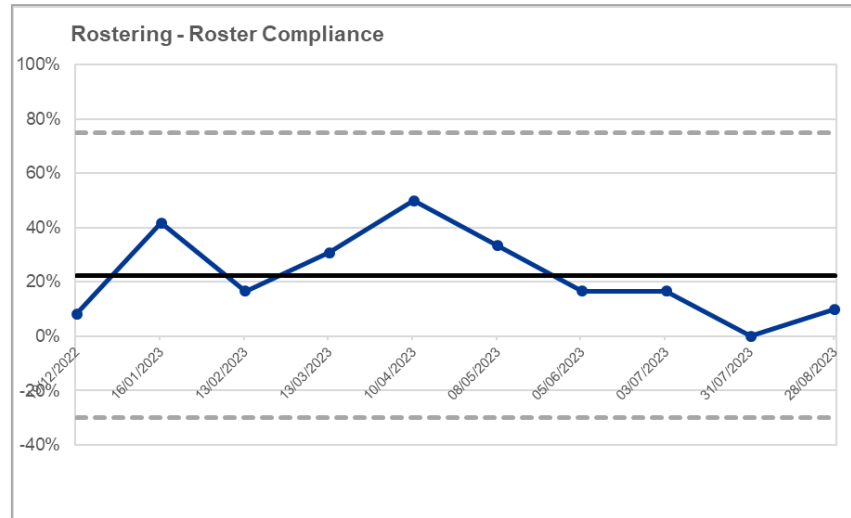


Workforce Indicator	Target %	Actual %	Difference %
<b>Training</b>	60.0%	91.5%	+31.5%

### Commentary

- The data shown is for the Mandatory training compliance for the end of July.
- The Directorate's Role Specific Training compliance is 91% in July.
- The data for September 2021 and October 2021 is not available, this is due to the migration of training from ESR to Learning Lab.

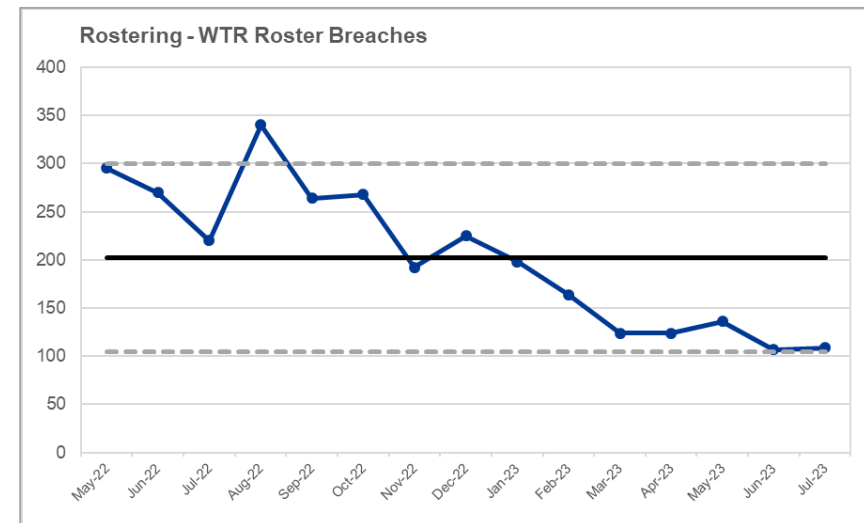
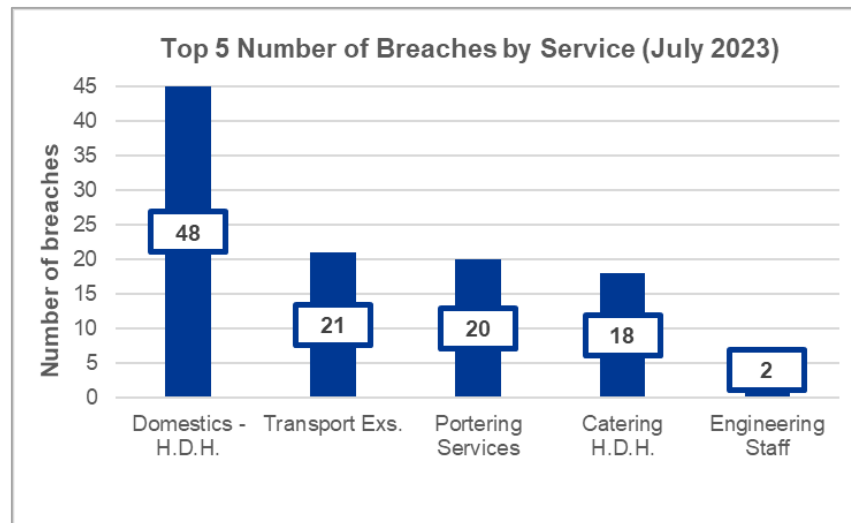
## 8. Rostering



Workforce Indicator	Roster Publication Compliance	Number of Breaches
<b>Rostering</b>	10.0%	109

### Commentary

- 37% of the breaches in July were due to employees exceeding an average of 48 hours over a 17 week reference period.





teamHDF  
At our best



# Financial Information

## HIF Board Report July 2023



Author: xxxxxxxxxxxxxx  
Date: 2nd August 2023



Slides redacted –  
Summary Position  
Forecast Position – Full Year Effect (FYE)  
Financial position – workforce  
Non Pay Expenditure  
HIF Efficiency programme – 23/24  
Balance sheet