

FINANCIAL IMPROVEMENT MORRISTON HOSPITAL NOVEMBER 2022



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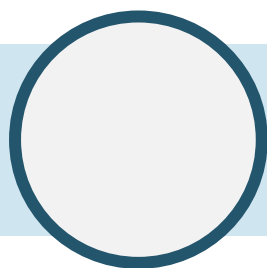
Bwrdd Iechyd Prifysgol
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CONTENTS

❖ Overview of Financial Improvement Requirement 2022/23	Slide 3
❖ Areas of opportunity – Nursing Pay Costs	Slides 4 – 12
❖ Addressing the Medical and Dental staff overspends	Slides 13 – 14
❖ Possible impact of AMSR	Slides 15
❖ Reducing the rate on Non-Pay spend	Slides 16 – 18
❖ Cost Improvement Programme	Slides 19 – 20
❖ Possible financial improvement potential and full-year benefits	Slides 21 – 22
❖ Summary of proposed actions – nursing pay	Slide 23
❖ Summary of proposed actions – medical pay	Slide 24
❖ Summary of proposed actions - non-Pay	Slide 25
❖ Summary of other actions	Slide 26
❖ Conclusions	Slide 27



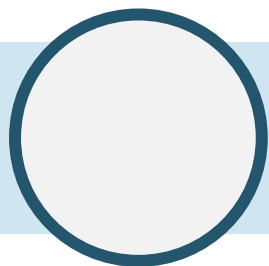
Overview of Financial Improvement Requirement

- With the control total of £9m already blown in October the immediate task is to focus on minimising the current run-rate overspend of £1.7 m a month through grip and control on the main areas of overspend. Essentially, spend in the remainder of the year needs to be reduced by c £6m – 5%, but there is no ‘magic bullet’ – it will rely on concentrating on the basics of strong financial management and control at all levels.

- Main areas of overspend October YTD (£10m):

	£
➤ Medical staff – specialist registrars	1.32 m
➤ Medical – consultants	0.36 m
➤ Medical – other	0.57 m
➤ Band 5/6 including nurse agency	2.30 m
➤ Unqualified nurses	2.47 m
➤ Non-Pay	2.71 m
➤ CIP underperformance	1.84 m

- Any under-budgeting/unfunded developments arguably covered by £9m control total.



Areas of opportunity – Nursing costs

- Every Band 5 agency avoided saves £80k pa on average
- Smoothing out/reducing unavailability rates
- Ensuring impact of recruitment produces a proportionate decrease in agency usage
- Increased use of bank staff
- Intensify management of sickness hotspots and reducing long-term sickness
- Improve speed of recruitment through TRACS

Smoothing unavailability – Band 5 Registered Nurses

MORRISTON - UNAVAILABILITY AND VARIABLE STAFF DEPLOYMENT - BAND 5 REGISTERED NURSES - 30th OCT - 5th NOV

Budget Establish ment	Staff in post (Sept)	Service Group	Ward/Unit	Total Unavailability (see below)	Total Unavailability Over Headroom	Confirmed surge, capacity	Posts vacant	Total cover required to cover vacancy & surge	Agency Staff	Bank Staff	Overtime	Total temporary staff deployed	Variance	October overspend/ (underspend)
WTE	WTE			%	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	£
17.90	12.80	Medicine	Ward D/G Morr (E417)	42.77%	2.03		5.10	5.10	6.19		0.31	6.50	1.40	177,689
28.52	18.33	Medicine	Ward J (G515)	38.37%	2.10	5.45	10.19	15.64	9.59		1.84	11.43	-4.21	189,701
18.70	16.77	Medicine	Ward S Morr (F315)	37.67%	1.81	4.65	1.93	6.58	6.12	0.62	0.45	7.19	0.61	(170,460)
20.62	10.92	Medicine	Ward R Morr (K402)	37.44%	1.15	0.00	9.70	9.70	13.31		0.85	14.16	4.46	(94,520)
20.62	17.20	Medicine	Ward F Morr (N071)	36.87%	1.72	0.00	3.42	3.42	5.03	0.62	0.81	6.46	3.04	147,073
22.52	15.15	Medicine	Gower Ward Morr (F317)	34.76%	1.19		7.37	7.37	7.11		1.07	8.18	0.81	204,709
35.85	27.24	Medicine	AMAU Morr (F206) & AMAU West (N206)	32.83%	1.62		8.61	8.61	9.12		1.12	10.24	1.63	407,880
17.90	12.67	Medicine	Cardigan Ward Morr (F403)	30.83%	0.50		5.23	5.23	1.24		1.69	2.93	-2.30	4,551
13.60	9.60	Medicine	West Renal Unit - Morr (F401)	28.78%	0.18		4.00	4.00	0.31	2.02	1.63	3.96	-0.04	(7,880)
19.30	16.53	Medicine	Liz Baker Morr (F402)	27.03%	0.02		2.77	2.77		0.40	0.64	1.04	-1.73	(11,190)
0.00	0.00	Medicine	Elderly Care/OPAS						6.37			6.37	6.37	96,012
0.00	0.00	Medicine	Tawe											20,536
215.53	157.21			34.73%	12.31	10.10	58.32	68.42	64.39	3.66	10.42	78.47	10.05	964,101
71.72	51.40	ECHO	ED Morr (F210)	36.47%	4.92	31.3	20.32	51.59	47.58	1.24	2.24	51.06	-0.53	886,907
24.32	16.27	CSSG	Theatres - NPTH (A419)	43.80%	2.75		8.05	8.05	2.48		0.00	2.48	-5.57	26,064
133.39	116.33	CSSG	West CCU (A311)	38.68%	13.70		17.06	17.06	21.57	1.01	5.13	27.71	10.65	(55,317)
55.91	49.53	CSSG	Theatres Singleton	32.00%	2.28		6.38	6.38			0.75	0.75	-5.63	(210,970)
99.66	101.31	CSSG	Theatres - Morr (A423)	0.00%	0.00		-1.65	-1.65	0.81		0.00	0.81	2.46	(168,036)
4.65	4.76	CCSG	Radiology Morr (D616)				-0.11	0.11	1.11			1.11	1.00	37,306
317.93	288.20			37.18%	18.73		29.73	29.95	25.97	1.01	5.89	32.87	2.92	(370,953)
25.20	14.40	SSSG	Tempest Ward Morr (K209)	47.91%	3.03		10.80	10.80				0.00	-10.80	(218,168)
26.07	16.07	SSSG	Ward A Morr (G513)	47.08%	3.24		10.00	10.00	6.76		1.23	7.99	-2.01	(81,597)
70.17	47.00	SSSG	Cardiac ITU Morr (C211)	44.61%	8.32		23.17	23.17	2.27	0.31	2.21	4.79	-18.38	(242,724)
10.73	10.88	SSSG	Powys Ward Morr (K204)	40.56%	1.35		-0.15	-0.15	1.45	0.20	0.31	1.96	2.11	33,198
18.90	14.21	SSSG	Ward W Morr (G512)	38.87%	1.70		4.69	4.69	2.06		0.00	2.06	-2.63	98,688
20.62	12.11	SSSG	Ward B Morr (G514)	35.25%	1.01		8.51	8.51	5.94	0.19	0.71	6.84	-1.67	(9,195)
23.29	9.19	SSSG	Ward C Morr (F318)	34.82%	0.73		14.10	14.10	10.07		0.77	10.84	-3.26	213,947
24.18	23.86	SSSG	Anglesey Ward Morriston (F316)	34.18%	1.70		0.32	0.32	3.43	1.07	0.27	4.77	4.45	122,878
18.68	16.32	SSSG	Cardiac Catheter Lab & CSSU Morr (C217)	33.17%	1.02		2.36	2.36	1.89	0.00	0.65	2.54	0.18	58,123
16.26	16.57	SSSG	Coronary Care Unit (C212)	31.05%	0.69	1.9	-0.31	1.54	3.23	1.09	0.03	4.35	2.81	255,975
15.01	11.85	SSSG	DDW (C214)	28.38%	0.18		3.16	3.16			0.35	0.35	-2.81	27,610
22.07	11.01	SSSG	Cyril Evans Ward Morriston (C215)	27.65%	0.08		11.06	11.06	7.38		0.35	7.73	-3.33	61,532
0.00	0.00	SSSG	K212-MN Dyfed Ward			9.4		9.40	6.65	1.95		8.60	-0.80	(1,188)
291.18	203.47			38.23%	23.06	11.3	87.71	98.96	51.13	4.81	6.85	62.79	-36.17	319,079
23.35	14.45	ISSG	Ward H Morr (E416)	40.10%	1.91		8.90	8.90	6.52		0.20	6.72	-2.18	125,783
23.37	19.37	ISSG	Pembroke Morr (K211)	33.20%	1.22		4.00	4.00	4.49	0.31	0.81	5.61	1.61	149,524
23.35	17.56	ISSG	Ward T Morr (E414)	30.61%	0.65		5.79	5.79	6.60		0.00	6.60	0.81	244,871
24.62	13.15	ISSG	Ward V Morr (E418)	30.40%	0.46		11.47	11.47	8.31	0.51	0.00	8.82	-2.65	116,167
38.07	28.52	ISSG	SDMU Morr (incl TAU) (E419)	29.07%	0.62		9.55	9.55	15.50	1.96	0.59	18.05	8.50	27,986
132.76	93.05			32.12%	4.86		39.71	39.71	41.42	2.78	1.60	45.80	6.09	664,331
			Morriston Mgt Unit (6C40)						7.26			7.26	7.26	(152,783)
			P422-Bed Management / Patient Flow						0.16			0.16	0.16	
1,029.12	793.33			36.19%	63.88	52.62	235.79	288.63	244.28	13.50	27.00	278.41	(10.22)	2,310,681
STAFF IN POST OCTOBER														
1,094.89	895.10	(199.79)	AVERAGE EQUIVALENT VALUE PER MONTH		389,649				1,490,108	43,200	122,460			

September Staff in post figures used as many newly recruited nurses still supernumery in October/early November

Target maximum Morriston transitional unavailability of 31% from current 36% average from December.

Equates to £0.8m Dec – March

Full-year benefit £2.4m

Long-term aim to move to 26.9% average per headroom

A refresh of guidance to senior nurses may be required

This report is produced weekly in arrears. Enables weekly tracking of unavailability, sickness and agency use etc.



Smoothing unavailability and tracking sickness hotspots (weekly report) – Registered nurses

MORRISTON - UNAVAILABILITY - BAND 5 REGISTERED NURSES - 30th OCT - 5th NOV

Service Group	Ward/Unit	Total Unavailability	Annual Leave	Other Leave	Parenting	Sickness	Study Day	Working Day
Medicine	Ward G Morr	42.77%	20.19%	0.00%	1.59%	14.67%	0.64%	5.69%
Medicine	Ward J	38.37%	15.26%	0.00%	7.90%	0.00%	15.21%	0.00%
Medicine	Ward S Morr	37.67%	6.90%	0.00%	0.00%	24.60%	0.66%	5.51%
Medicine	Ward R Morr	37.44%	16.92%	0.00%	2.36%	9.44%	8.72%	0.00%
Medicine	Ward F Morr	36.87%	19.43%	0.00%	0.00%	11.10%	6.20%	0.14%
Medicine	Gower Ward Morr	34.76%	15.81%	1.76%	5.73%	0.00%	11.46%	0.00%
Medicine	AMAU Morr	32.83%	11.67%	0.00%	2.19%	8.03%	9.49%	1.46%
Medicine	Cardigan Ward Morr	30.83%	17.69%	4.98%	4.98%	3.18%	0.00%	0.00%
Medicine	West Renal Unit - Mor	28.78%	17.46%	0.00%	0.00%	6.35%	0.00%	4.97%
Medicine	Liz Baker Morr	27.03%	17.71%	0.00%	0.00%	6.91%	0.00%	2.40%
ECHO	ED Morr (F210)	36.47%	15.18%	0.37%	1.12%	9.18%	6.22%	4.39%
CSSG	Theatres - NPTH	43.80%	33.51%	0.69%	2.88%	6.52%	0.00%	0.19%
CSSG	West CCU	38.68%	19.50%	0.43%	2.27%	12.52%	3.20%	0.75%
CSSG	Theatres Singleton	32.00%	18.27%	0.00%	1.53%	11.58%	0.61%	0.00%
CSSG	Theatres - Morr	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
SSSG	Tempest Ward Morr	47.91%	16.11%	0.00%	0.00%	4.13%	16.82%	10.86%
SSSG	Ward A Morr	47.08%	14.82%	0.00%	6.41%	13.44%	3.20%	9.21%
SSSG	Cardiac ITU Morr	44.61%	17.35%	0.00%	1.19%	10.32%	10.80%	4.94%
SSSG	Powys Ward Morr	40.56%	16.41%	0.00%	0.00%	2.37%	13.93%	7.84%
SSSG	Ward W Morr	38.87%	16.69%	1.10%	0.00%	15.08%	0.95%	5.05%
SSSG	Ward B Morr	35.25%	11.20%	0.00%	0.00%	12.70%	5.91%	5.44%
SSSG	Ward C Morr	34.82%	13.12%	0.00%	5.69%	1.24%	14.77%	0.00%
SSSG	Anglesey Ward Morriston	34.18%	11.23%	0.77%	9.12%	5.57%	7.30%	0.19%
SSSG	Cardiac Catheter Lab & CSSU Morr	33.17%	17.33%	0.00%	4.17%	1.67%	1.67%	8.33%
SSSG	Coronary Care Unit	31.05%	11.59%	0.00%	0.00%	4.35%	11.34%	3.78%
SSSG	DDW	28.38%	12.61%	0.00%	4.20%	1.40%	5.60%	4.58%
SSSG	Cyril Evans Ward Morriston	27.65%	13.06%	1.62%	0.00%	12.29%	0.68%	0.00%
ISSG	Ward H Morr	40.10%	14.78%	0.00%	4.76%	4.38%	11.42%	0.00%
ISSG	Pembroke Morr	33.20%	13.64%	0.00%	0.00%	19.56%	0.00%	0.19%
ISSG	Ward T Morr	30.61%	12.81%	0.00%	5.46%	0.00%	12.34%	9.21%
ISSG	Ward V Morr	30.40%	12.52%	1.56%	4.67%	0.00%	11.66%	0.00%
ISSG	SDMU Morr	27.60%	12.34%	0.00%	2.60%	3.32%	9.34%	0.14%



Smoothing unavailability – Band 2 HCAs

MORRISTON - UNAVAILABILITY AND VARIABLE STAFF DEPLOYMENT - BAND 2 UNREGISTERED NURSES - 30th OCT - 5th NOV

Budget Establishment	Staff in post	Service Group	Ward/Unit	Total Unavailability (see below)	Total Unavailability Over Headroom	Confirmed surge, capacity	Posts vacant	Total cover required to cover vacancy & surge	Agency Staff	Bank Staff	Overtime	Total temporary staff deployed	Variance
WTE	WTE			%	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE
19.90	15.52	Medicine	Ward S Morr (F315)	52.78%	4.33	1.90	4.38	5.1	0.88	4.95	0.08	5.91	0.84
17.89	18.35	Medicine	Ward F Morr (N071)	42.92%	3.01	4.18	-0.46	3.3	0.32	4.86	0.20	5.38	2.08
38.13	29.86	Medicine	AMAU Morr (F206) & AMAU West (N206)	41.69%	3.92		8.27	11.7	0.32	5.47	1.73	7.52	-4.13
21.79	23.12	Medicine	Ward R Morr (K402)	39.16%	2.80	5.45	-1.33	4.4		5.47	0.27	5.74	1.37
24.52	20.40	Medicine	Ward J (G515)	36.63%	1.95		4.12	4.4		1.44	2.30	3.74	-0.69
3.72	6.03	Medicine	Liz Baker Morr (F402)	36.10%	0.49		-2.31	-1.6		0.20	0.00	0.20	1.84
25.35	25.05	Medicine	Ward D/G Morr (E417)	34.23%	1.82		0.30	0.6		2.17	1.23	3.40	2.80
2.00	1.15	Medicine	West Renal Unit - Morr (F401)	28.06%	0.01		0.85	1.0		2.37	0.39	2.76	1.76
27.24	19.97	Medicine	Gower Ward Morr (F317)	25.73%			7.27	7.8	0.32	4.03	0.61	4.96	-2.83
18.95	17.42	Medicine	Cardigan Ward Morr (F403)	23.65%			1.53	2.2		1.20	0.91	2.11	-0.08
0.00	0.61	Medicine	Elderly Care/OPAS				-0.61	-0.6	0.31	0.31		0.62	1.23
		Medicine	Tawe				0.00	0.0					
199.49	177.48	Medicine		37.23%	18.33	11.53	22.01	38.15	2.15	32.47	7.71	42.33	4.18
14.20	19.71	ECHO	ED Morr (F210)	49.88%	3.35	22.7	-5.51	22.4		15.56	1.24	16.80	-5.55
4.78	4.44	CSSG	Theatres - NPTH (A419)	58.26%	1.35		0.34	0.5				0.00	-0.46
2.06	3.22	CSSG	Theatres Singleton (A422)	42.18%	0.34		-1.16	-0.1				0.00	0.14
10.12	9.45	CSSG	West CCU (A311)	20.00%			0.67	1.6				0.00	-1.60
17.12	6.37	CSSG	Theatres - Morr (A423)				10.75	11.0				0.00	-11.00
0.00	0.00	CCSG	Radiology Morr (D616)				0.00	0.0		1.27		1.27	1.27
5.25	1.52	CCSG	Pre-Assessment Morr (A406)				3.73	3.7				0.00	-3.73
39.33	25.00	CCSG		38.14%	1.69		14.33	16.65	0.00	1.27	0.00	1.27	-15.38
18.12	18.48	SSSG	Ward W Morr (G512)	55.65%	5.02		-0.36	0.7		6.76	0.39	7.15	6.50
5.84	4.48	SSSG	Cardiac ITU Morr (C211)	55.14%	1.22		1.36	1.5		1.22	0.31	1.53	0.01
12.23	9.18	SSSG	DDW (C214)	48.27%	2.04		3.05	2.7			0.44	0.44	-2.23
22.62	21.69	SSSG	Ward B Morr (G514)	45.91%	4.23		0.93	0.4		3.62	0.38	4.00	3.65
3.55	3.61	SSSG	Powys Ward Morr (K204)	44.40%	0.60		-0.06	0.1		1.84	0.61	2.45	2.35
25.35	24.87	SSSG	Ward A Morr (G513)	34.95%	1.96		0.48	1.0		1.22	0.99	2.21	1.23
16.77	13.25	SSSG	Ward C Morr (F318)	34.83%	0.98	0.4	3.52	4.8		7.66	0.00	7.66	2.88
9.00	9.41	SSSG	Anglesey Ward Morriston (F316)	32.97%	0.52		-0.41	0.5		1.75	0.00	1.75	1.28
15.62	10.34	SSSG	Cyril Evans Ward Morriston (C215)	30.24%	0.33		5.28	5.6	0.54	2.86	0.64	4.04	-1.58
2.86	1.13	SSSG	Cardiac Catheter Lab & CSSU Morr (C217)	20.00%			1.73	1.9		0.60	0.00	0.60	-1.26
3.13	1.55	SSSG	Tempest Ward Morr (K209)	15.79%			1.58	1.6				0.00	-1.60
0.00	4.70	SSSG	K212-MN Dyfed Ward			4.5	-4.70	0.6		4.68		4.68	4.10
135.09	122.69	SSSG		40.69%	16.92	4.9	12.40	21.18	0.54	32.21	3.75	36.50	15.32
18.12	11.11	ISSG	Ward T Morr (E414)	53.40%	3.94		7.01	3.3	0.31	3.81	0.00	4.12	0.87
20.73	18.10	ISSG	Ward V Morr (E418)	52.65%	4.87		2.63	1.8		2.66	0.00	2.66	0.84
19.9	16.82	ISSG	Ward H Morr (E416)	42.64%	2.72		3.08	2.6	0.31	5.65	0.00	5.96	3.35
17.17	14.90	ISSG	Pembroke Morr (K211)	37.36%	1.61		2.27	1.7		2.88	0.00	2.88	1.14
30.79	25.55	ISSG	SDMU Morr (incl TAU) (E419)	28.56%	0.38		5.24	7.6		15.28	1.31	16.59	8.95
106.71	86.48	ISSG		42.54%	13.53		20.23	17.06	0.62	30.28	1.31	32.21	15.15
494.82	431.36	(63.46)		40.00%	53.82	39.17	63.46	115.39	3.31	111.79	14.01	129.11	13.72
AVERAGE EQUIVALENT VALUE PER MONTH					148,011					307,423			

Target maximum Morriston transitional unavailability of 34% from current 40% average from December.

Equates to £240K Dec – March

Full-year benefit £0.75m

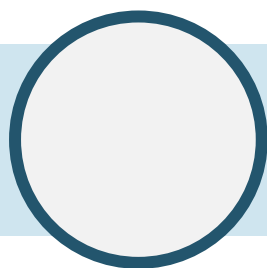
Long-term aim to move to 26.9% average per headroom

This report produced weekly in arrears. Enables weekly tracking of unavailability, sickness and agency use etc.



Smoothing unavailability and tracking sickness hotspots (weekly report) – Band 2 HCAs

MORRISTON - UNAVAILABILITY AND VARIABLE STAFF DEPLOYMENT - BAND 2 HCAs - 30th OCT - 5th NOV								
	Ward/Unit	Total Unavailability	Annual Leave	Other Leave	Parenting	Sickness	Study Day	Working Day
Medicine	Ward S Morr (F315)	52.78%	20.90%	0.00%	8.65%	15.49%	6.02%	1.73%
Medicine	Ward F Morr (N071)	42.92%	21.07%	0.00%	0.00%	10.06%	11.79%	0.00%
Medicine	AMAU Morr (F206) & AMAU West (N206)	41.69%	14.49%	0.00%	0.00%	19.29%	5.67%	2.23%
Medicine	Ward R Morr (K402)	39.16%	14.84%	0.00%	3.42%	13.70%	7.20%	0.00%
Medicine	Ward J (G515)	36.63%	15.39%	0.60%	4.58%	7.63%	8.43%	0.00%
Medicine	Liz Baker Morr (F402)	36.10%	16.46%	0.00%	0.00%	10.49%	9.15%	0.00%
Medicine	Ward D/G Morr (E417)	34.23%	11.09%	2.17%	2.22%	1.88%	16.88%	0.00%
Medicine	West Renal Unit - Mor (F401)	28.06%	25.51%	0.00%	0.00%	0.00%	0.00%	2.55%
Medicine	Gower Ward Morr (F317)	25.73%	12.58%	2.92%	0.00%	6.42%	3.81%	0.00%
Medicine	Cardigan Ward Morr (F403)	23.65%	23.65%	0.00%	0.00%	0.00%	0.00%	0.00%
ECHO	ED Morr (F210)	49.88%	16.84%	1.76%	9.74%	18.75%	2.09%	0.70%
CSSG	Theatres - NPTH	58.26%	43.39%	0.00%	0.00%	0.00%	14.87%	0.00%
CSSG	Theatres Singleton	42.18%	24.98%	0.07%	0.00%	14.10%	3.02%	0.00%
CSSG	West CCU	20.00%	0.00%	0.00%	0.00%	0.00%	20.00%	0.00%
CSSG	Theatres - Morr	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
SSSG	Ward W Morr (G512)	55.65%	24.40%	0.00%	8.08%	19.75%	3.43%	0.00%
SSSG	Cardiac ITU Morr (C211)	55.14%	43.86%	0.00%	0.00%	0.00%	11.28%	0.00%
SSSG	DDW (C214)	48.27%	18.95%	0.00%	0.00%	14.80%	14.52%	0.00%
SSSG	Ward B Morr (G514)	45.91%	15.17%	0.00%	6.88%	12.95%	4.94%	5.97%
SSSG	Powys Ward Morr (K204)	44.40%	17.76%	0.00%	0.00%	0.00%	0.00%	26.64%
SSSG	Ward A Morr (G513)	34.95%	16.72%	0.00%	0.00%	8.13%	6.67%	3.43%
SSSG	Ward C Morr (F318)	34.83%	15.43%	1.69%	0.00%	3.38%	14.33%	0.00%
SSSG	Anglesey Ward Morriston (F316)	32.97%	16.56%	0.00%	0.00%	0.00%	6.88%	9.53%
SSSG	Cyril Evans Ward Morriston (C215)	30.24%	9.13%	3.65%	0.00%	6.67%	10.79%	0.00%
SSSG	Cardiac Catheter Lab & CSSU Morr (C217)	20.00%	0.00%	0.00%	0.00%	0.00%	20.00%	0.00%
SSSG	Tempest Ward Morr (K209)	15.79%	0.00%	0.00%	0.00%	0.00%	15.79%	0.00%
ISSG	Ward T Morr	53.40%	6.46%	4.84%	20.21%	13.47%	8.42%	0.00%
ISSG	Ward V Morr	52.65%	15.22%	4.20%	0.00%	14.06%	19.17%	0.00%
ISSG	Ward H Morr	42.64%	26.73%	0.00%	9.63%	1.05%	5.23%	0.00%
ISSG	Pembroke Morr	37.36%	16.15%	0.00%	5.63%	13.13%	2.45%	0.00%
ISSG	SDMU Morr	28.56%	6.84%	0.00%	0.00%	17.13%	4.59%	0.00%

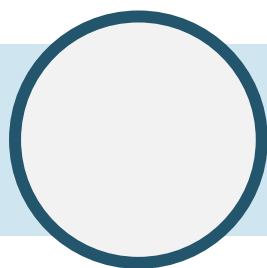


Ensuring recruitment produces a proportionate reduction in agency costs

<u>Impact on Variable Pay - WTE's</u>	<u>Nov</u>	<u>Dec</u>	<u>Jan</u>	<u>Feb</u>	<u>March</u>	<u>Total</u>
Streamliners Inpatient	0	34	24			58
Streamliners Theatres	0	5	7			12
Oversease Nurses Inpatient	0	13	11	17		41
Oversease Nurses Theatres	0	6	1	2		9
	0	58	43	19	0	120
£000's						
<u>Cost benefit ref reduction in Agency</u>	<u>Nov</u>	<u>Dec</u>	<u>Jan</u>	<u>Feb</u>	<u>March</u>	<u>Total</u>
Streamliners Inpatient benefit	0	-233	-400	-400	-400	-1,433
Streamliners Inpatient cost	118	202	202	202	202	926
Streamliners Theatres cost	18	43	43	43	43	190
Oversease Nurses Inpatient benefit	0	-90	-163	-280	-280	-813
Oversease Nurses Inpatient cost	0	0	0	0	0	0
Oversease Nurses Theatres cost	0	0	0	0	0	0
	136	-78	-318	-435	-435	-1,130

Agency WTE should reduce by	0	47	82	99	99
Current Agency usage wte	240	240	240	240	240
Total Forecast Agency usage WTE	240	193	158	141	141



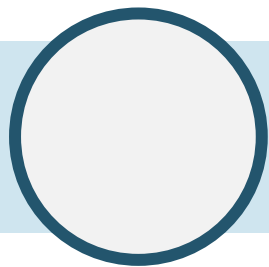


Reducing sickness to help meet unavailability targets

- Weekly unavailability report now enables real-time tracking of sickness absence and trends. Sickness exceeded 10% for Band 5 nurse on 11 wards/depts in week shown and on 13 wards for unqualified, with peaks of 25% and 20% respectively.
- Whilst progress has been made in recent months a continued focus on reducing excessive levels of sickness will substantially reduce the need for expensive agency cover.

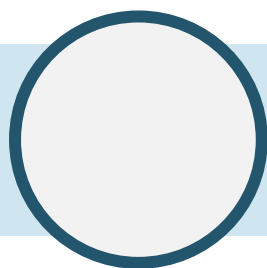
	Absence FTE %	Absence FTE %	Absence FTE %
	Jun-22	Jul-22	Aug-22
Registered Nursing	9.21%	7.35%	7.24%
Un-Registered Nursing	12.00%	9.17%	9.72%
Admin	7.81%	7.21%	7.45%
AHP		5.93%	5.53%
Medical & Dental	2.20%	1.73%	1.81%

Absence Timeline Detail		2022 / 07	2022 / 08	2022 / 09	3 month	12 month
		Absence FTE %	Absence FTE %	Absence FTE %	Absence FTE %	Absence FTE %
130 MN Clinical Services Group - Serv	130 A203 SN HSDU Total	17.57%	10.63%	11.60%	13.26%	11.47%
130 MN Clinical Services Group - Serv	130 A423 MN Theatres Total	15.60%	11.20%	10.04%	12.28%	13.87%
130 MN Clinical Services Group - Serv	130 D616 MN Radiology Total	13.70%	10.73%	7.51%	10.65%	9.34%
130 MN Clinical Services Group - Serv	130 D612 SN Radiology Total	9.80%	12.18%	9.94%	10.64%	7.66%
130 MN Clinical Services Group - Serv	130 A419 NPTH Theatres Total	17.05%	8.38%	4.69%	10.04%	8.04%
130 MN Clinical Services Group - Serv	130 A311 West Critical Care Total	9.90%	9.76%	9.87%	9.84%	9.43%
130 MN Clinical Services Group - Serv	130 A202 MN HSDU Total	11.33%	6.02%	9.87%	9.07%	9.16%
130 MN Clinical Services Group - Serv	130 A422 SN Theatres Total	9.97%	5.45%	7.60%	7.67%	8.42%
130 MN Hospital Operations & Emerg	130 F210 MN Emergency Department - Non Medical Total	9.42%	7.12%	8.01%	8.18%	8.54%
130 MN Integrated Surgical Service	130 K513 MN Head & Neck Outpatients Total	15.59%	11.41%	10.47%	12.49%	13.24%
130 MN Integrated Surgical Service	130 K211 Morriston Pembroke Acute Ward (B&P) Total	10.33%	13.17%	12.17%	11.89%	12.49%
130 MN Integrated Surgical Service	130 E419 MN SDMU / TAU Total	10.29%	9.07%	11.22%	10.19%	9.02%
130 MN Integrated Surgical Service	130 E414 MN Ward T Total	15.66%	7.22%	6.83%	9.90%	11.61%
130 MN Medicine Service Group - Ser	130 F315 Ward S Total	14.20%	9.68%	11.06%	11.65%	9.26%
130 MN Medicine Service Group - Ser	130 N071 MN Ward F Total	11.05%	14.75%	7.84%	11.21%	11.38%
130 MN Medicine Service Group - Ser	130 F206 Acute Medical Assessment Unit (East) Total	11.86%	6.84%	11.94%	10.21%	9.45%
130 MN Medicine Service Group - Ser	130 E417 MN Ward G Total	11.41%	9.36%	8.59%	9.79%	7.97%
130 MN Medicine Service Group - Ser	130 K402 MN Ward R Total	8.69%	11.13%	8.71%	9.51%	8.37%
130 MN Medicine Service Group - Ser	130 F311 MN Gower Ward Total	12.08%	8.93%	6.15%	9.06%	7.29%
130 MN Medicine Service Group - Ser	130 F546 MN Neurology Total	7.60%	6.15%	7.42%	7.06%	7.05%
130 MN Specialist Surg Service Group	130 C212 MN CC Total	18.61%	14.18%	12.15%	14.98%	18.14%
130 MN Specialist Surg Service Group	130 C214 MN Dan Danino Ward Total	13.55%	15.73%	13.22%	14.17%	11.23%
130 MN Specialist Surg Service Group	130 G513 MN Ward A Trauma Admissions Ward Total	14.40%	12.63%	13.49%	13.50%	11.10%
130 MN Specialist Surg Service Group	130 G512 MN Ward W Total	19.94%	8.59%	9.10%	12.54%	15.99%
130 MN Specialist Surg Service Group	130 G105 MN OP Appointment Centre Total	13.28%	8.04%	11.34%	10.88%	10.51%
130 MN Specialist Surg Service Group	130 F318 Morriston Ward C Total	12.52%	10.42%	7.06%	10.00%	11.69%
130 MN Specialist Surg Service Group	130 G514 MN Ward B Total	10.49%	7.81%	6.80%	8.37%	14.22%
130 MN Specialist Surg Service Group	130 C302 Cardiac Directorate Support Total	8.17%	8.69%	6.50%	7.79%	7.74%
130 MN Specialist Surg Service Group	130 C215 MN Cyril Evans Ward Total	8.35%	5.95%	7.50%	7.26%	14.31%



Increasing use of bank staff

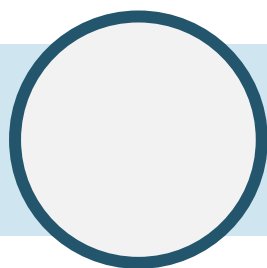
- Qualified nurse bank staff only account for just under 5% of temporary staff hours.
- Increasing the use of bank staff to at least 15% would reduce agency premium costs by £60k per month and save c£1.1m in a full year.
- This is a corporate/national issue and PH has spoken to the corporate HR Director and suggested options to promote and incentivise bank use be urgently explored, including weekly pay.
- PH has also asked for a discussion to be arranged with a selection of senior nurses to explore what would help improve bank usage.
- It is also important to be sure that existing use of bank availability is maximised rather than defaulting to agency.



Speeding up recruitment times for appointments

- Ensuring timely progress through TRACs ensures vacancies are filled and appointees started at the earliest opportunity, potentially reducing variable staff costs, and avoiding losing people through delays.
- A sample report of one currently in use in another Service Group is shown below which clearly demonstrates in that SG scope for improvement – Morriston data is currently being cleansed to enable a similar report to be produced in the future.
- In the meantime, ASGDs should remind their managers at all levels of the need for timely approval within established timescales.

Managers Update Report - Outstanding Actions									
Month: 31st August 2022									
Vacancy stage	Tab	Nursing	AHP	HCSW	Psychology	Other	Administration	Estates	Total
Authorisation	Outstanding Vacancy Approvals	4	2	1	1	1	0	0	9
Longlisting	Open Adverts	4	0	0	0	0	0	0	4
Shortlisting	Outstanding Shortlists	10	0	1	2	0	1	0	14
Interview	Outstanding Interview Outcome	5	0	3	1	0	2	0	11
Offer	Outstanding PEC's	42	0	7	5	0	8	0	62
Offer	Outstanding Start Dates	34	0	13	8	0	7	0	62
Totals		99	2	25	17	1	18	0	162



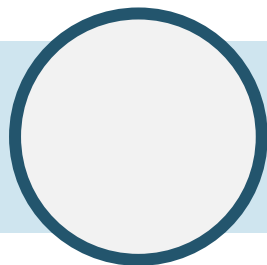
Medical & Dental Staff Major areas of overspend & variable pay levels – October

- Relatively small number of specialties driving medical overspend to focus on.
- Variable pay is not a significant factor in major overspending areas other than in General Medicine.

MEDICAL & DENTAL STAFF MAJOR AREAS OF VARIANCE - OCTOBER 2022 YTD						
COST CENTRE	SERVICE GROUP	CONS / LOCUM/ AGENCY CONS	ASSOC SPEC/ SPECIALTY DR / OTHER CAREER	SPECIALTY REGISTRARS	F2/F1 DRS IN TRG	TOTAL
		£	£	£	£	£
C101-MN Tertiary Cardiology Medical Specialty	SSSG	61,120	47,490	30,210		138,820
G402-West Trauma & Orthopaedics Medical Specialty	SSSG		242,660	122,250	62,875	427,785
K206-MN B&P Medical Specialty	SSSG			265,990		265,990
K302-Spinal Medical Specialty	SSSG	72,030	88,475	(54,880)		105,625
A105-MN Anaesthetics	CSSG	(81,850)	(47,128)	568,580		439,602
A312-Critical Care Medical Staff	CSSG	71,130				71,130
F314-MN General Medicine	MEDICINE	(68,550)		828,150	286,000	1,045,600
F533-MN Gastroenterology	MEDICINE	106,880		110,420	24,335	241,635
F546-MN Neurology	MEDICINE	154,290		47,480		201,770
N076-MN Elderly Care	MEDICINE	160,770	(78,710)	130,860	56,960	269,880
E302-West General Surgery Medical Specialty	ISSG	(14,340)	44,760	46,000	53,680	130,100
		461,480	297,547	2,095,060	483,850	3,337,937
Other cost centres	ALL	(98,818)	(459,176)	(782,398)	253,408	(1,086,984)
NET MEDICAL & DENTAL		362,662	(161,629)	1,312,662	737,258	2,250,953

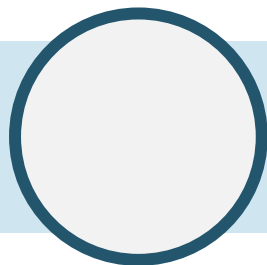
MEDICAL & DENTAL VARIABLE PAY - OCTOBER							
SERVICE GROUP	CONSULTANT	ASS.SPEC	ST HIGHER	ST LOWER	F2	F1	TOTAL
	WTE	WTE	WTE	WTE	WTE	WTE	WTE
MEDICINE	2.11		3.22	4.58	3.12	1.34	14.37
ECHO	0.95		1.43	1.75	0.97	0.46	5.56
CSSG	0.98			0.06			1.04
SSSG	1.05		1.42	0.49	0.30		3.26
ISSG	1.08	0.18	1.70	2.13	0.20		5.30
TOTAL	6.17	0.18	7.78	9.02	4.59	1.80	29.53
AVE COST PER MONTH £	78,878	1,975	79,098	82,955	41,438	15,878	308,933





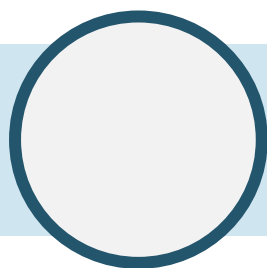
Medical & Dental Staff - addressing the overspend

- It is possible that additional medical staff have been introduced to meet specific demands/pressure over recent years and staffing has grown organically in certain areas.
- Medicine has recently conducted a line-by-line review of its medical staff to identify opportunities to reduce staffing and adjust to their new design model. They are currently incurring double running costs in preparation for AMSR.
- Meetings have been taking place with MEDACs to increase their placement and save VAT
- Propose that all service groups undertake a similar exercise if they haven't already to understand and assess:
 - The underlying causes/drivers of the overspend
 - Whether there is a continuing need for current levels of staffing going forward or whether there are opportunities to reshape staffing to reduce overspends
 - The likely impact of AMSR were appropriate
 - How this may be affected by any additional recruitment in progress over the next 5 months
- A stretch target a reduction of £0.5m in the next 5 months is proposed.



Monitoring the potential to reduce temporary staffing costs associated with surge capacity and double running following implementation of AMSR

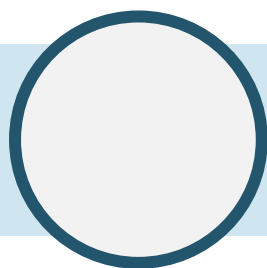
- The impact of AMSR on the ability to reduce surge capacity is uncertain at this point but there may be potential to reduce nursing, medical and administrative staff costs associated with surge capacity if all goes well.
- There are also some double running costs currently being incurred pre-AMSR that should drop out.



Reducing the rate of Non-pay spend

- October YTD overspend of £2.7m (excl CIP underperformance) largely related to clinical activity and therefore more difficult to control:

	£
➤ Drugs	0.36m
➤ MSSE –general/disposable	1.51m
➤ Orthopaedic implants	0.81m
➤ Leases (clinical supplies)	0.23m
➤ Other clinical costs	0.26m
➤ Postage, stationery, travel and training	0.28m
- Areas of opportunity:
 - Procurement savings – estimated benefit in remaining 5 months from existing plans = £0.9m
 - Additional opportunities for standardisation to be adopted asap
 - Reducing spend on medicines – has been reviewed by WG Financial Delivery Unit – outcome awaited.
 - Limiting the rate of spend in the remaining months where feasible, maintaining underspends and stopping/significantly limiting discretionary spend.
 - On current trend non-pay spend for the last 5 months of the year will be c£32m and overall spend will be 120% of the annual budget. A target reduction of 3% - £1m is proposed.

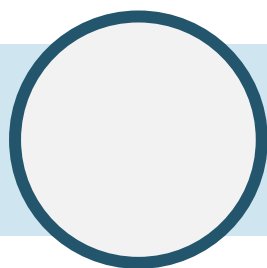


Reducing the rate of Non-pay spend – Further procurement opportunities

- Standardisation – Lisa Pughsley is supporting the Theatres procurement group to identify areas of opportunity. Procurement Dept. has also identified a number of areas where such opportunities exist – see below.
- In certain areas of spend the number of suppliers for similar products is significant thereby limiting cost and volume opportunities. There will no doubt be resistance to proposed changes which ASDGs and clinical leads will need to overcome.

Responsible Officer	Scheme	Savings Type	Current Spend (Pro- Rata) 12m	Saving Value	No Suppliers purchasing from	MORRISTON Spend	SINGLETON Spend	NPTH Spend
PB	T&O Lot 4 - Trauma Scheme 14 - JnJ	Cash Releasing	£614,000	£50,000	13	£575,991	£4,191	£34,253
PB	Haemostatic Fabrics	Cash Releasing	£32,000	£23,000	2	£32,000		
DS	Drapes	Cash Releasing	£224,686	£10,000	24	£151,888	£43,368	£67,786
JRC	Skin & Wound Closure (Mesh)	Cash Releasing	£261,572	£70,000	8	£133,766	£53,000	£74,492
JRC	Diathermy Pencils Electrosurgical	Cash Releasing	£150,000	£35,000	2	£84,000	£36,000	£30,000
PB	Laparoscopic Trocars	Cash Releasing	£113,000	£52,000	4	£70,000	£41,000	£200
PB	Laparoscopic Clip Applicators	Cash Releasing	£168,000	£10,000	5	£152,000	£6,000	£10,000
PB	Laparoscopic Stapling	Cash Releasing	£414,000	TBC	2	£306,000	£107,000	£1,000

PB	Joint analysis Knees
PB	Joint analysis Hips
JRC	Cardiology (Lot 1) CLI-OJEU-46286
JRC	Radiology (Lot2) CLI-OJEU-46286
JRC	Endoscopy (Lot 3) CLI-OJEU-46286
JRC	Surgical Urology (Lot 4) CLI-OJEU-46286



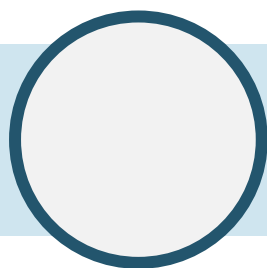
Reducing the rate of Non-pay spend – further opportunities and controls

- Lisa Pughsley is also looking at the effectiveness of Omnicell which does not appear to be generating the anticipated savings.
- HM has requested a deep dive into orthopaedic activity in relation to the increased spend on orthopaedic implants, and the significant overspend on furniture and fittings relating to bed hire/spend, some of which is associated with AMSR. Service groups should similarly examine their major overspending areas with their finance lead to assess the potential for spend/cost reduction.
- Discretionary expenditure may be limited but given the level of overspend, ASDGs and their teams should identify opportunities and introduce internal controls to turn-off or significantly limit any non-essential expenditure:

Review the discretionary cost areas and develop plans to reduce run rate of spend:

- a) bed hire,
- b) books and journals,
- c) fittings, furniture and equipment,
- d) IT and telephony usage - cancel unused mobiles, telephone lines, dongles, software etc.
- e) lectures, conferences, and training (incl. materials),
- f) printing and stationery,
- g) travel and subsistence,
- h) subscriptions and licenses,
- i) hospitality,
- j) advertising and recruitment,
- k) other (including phone, postage etc).





Cost Improvement Programme

- This year's CIP is considerably underperforming and currently stands at £6.7m as green. A number of amber schemes have fallen by the wayside from those originally included in the tracker and apart from procurement schemes only 3 amber schemes now appear viable in the current year.



Summary of Amber schemes on Tracker (In Year £1.054m).

Scheme Name	Scheme Lead/Owner	Current Year Forecast £'000	Month 1 / In Year	Scheme Start Date	Date Scheme Expected to go Green	Scheme RAG Rating
Additional Pancreatic activity through commissioned 3rd weekly list	Mollie Kearns	13	In Year	01/10/2022	01/10/2022	Amber
LOS - Heart Failure Team	Dean Packman	0	Month 1	01/08/2022	01/08/2022	Amber
AP's instead of Band S's	Liz Humphries/Alex Simmonds	0	Month 1	01/08/2022	01/08/2022	Amber
DNA Rate review & reduction plan - text reminders	Liz Humphries/Alex Simmonds	0	Month 1	01/08/2022	01/08/2022	Amber
Banding Allowance	Mark Ramsey	60	In Year	01/10/2022	01/10/2022	Amber
Charitable Funds Strategy	Unit wide	100	Month 1	01/07/2022	01/07/2022	Amber
Associate Specialists into Medical Vacancies	Mark Ramsey	0	Month 1	01/10/2022	01/10/2022	Amber
Procurement Savings	Brett Denning	267	In Year	01/10/2022	01/10/2022	Amber
Procurement Savings	Hannah Rix	33	In Year	01/10/2022	01/10/2022	Amber
Procurement Savings	Fiona Hughes	226	In Year	01/10/2022	01/10/2022	Amber
Procurement Savings	Huma Stone	116	In Year	01/10/2022	01/10/2022	Amber
Theatre Instrument switch	Huma Stone	154	In Year	01/11/2022	01/11/2022	Amber
Band 5/4 ward staff remodelling	All Service Review	85	In Year	01/10/2022	01/10/2022	Amber

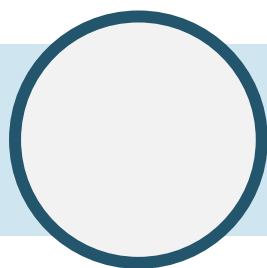
Remaining schemes:

Banding allowance - £60k
 Charitable funds - £50k
 Theatre instrument switch - £150k



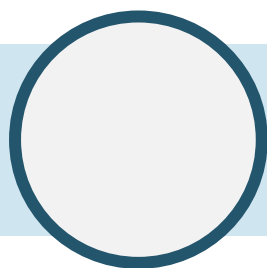
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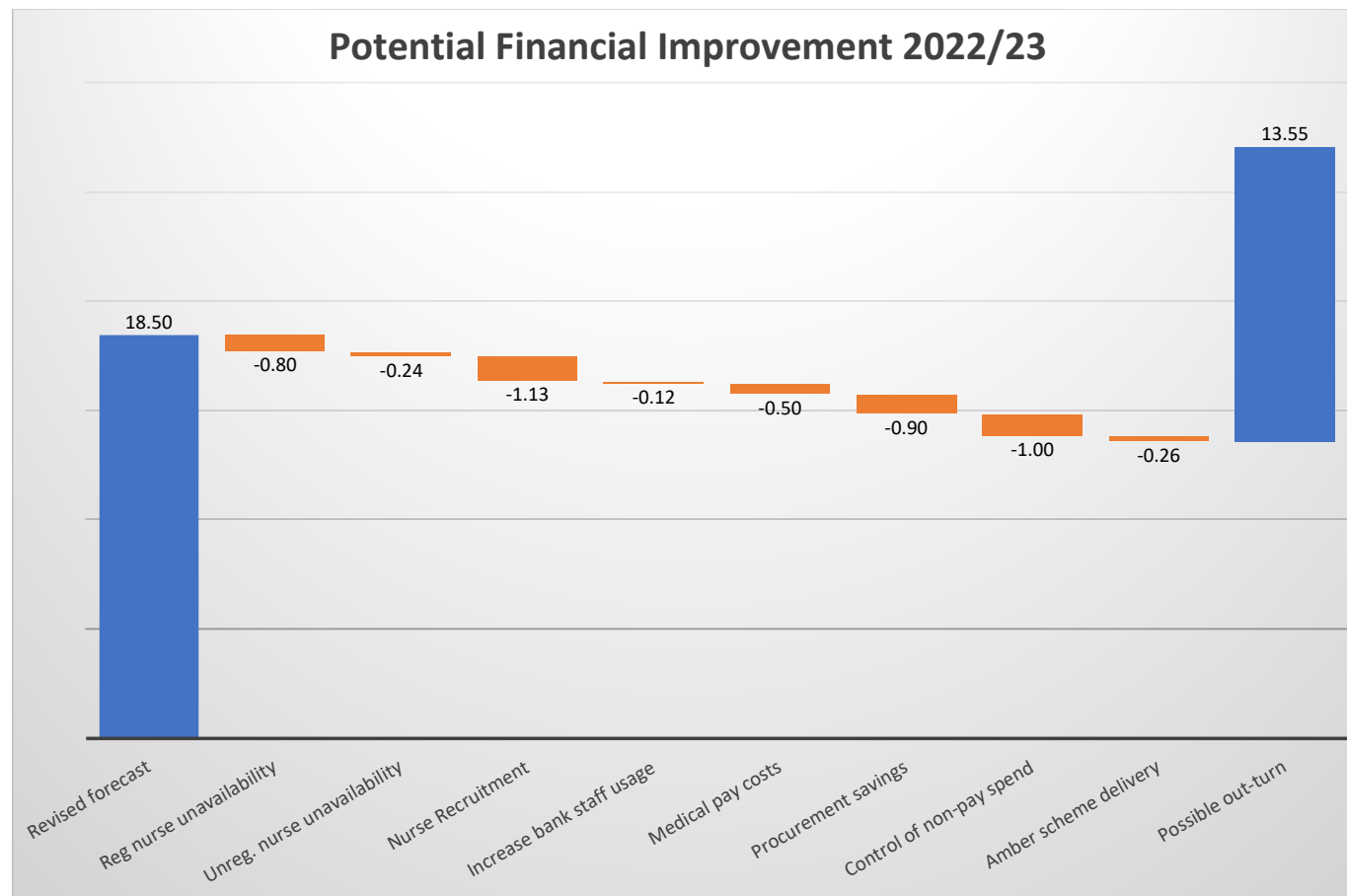


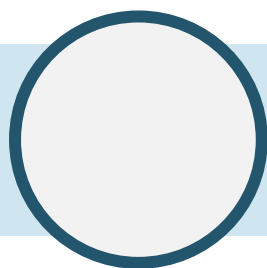
Cost Improvement Programme

- Whilst the benefits of achieving sustained run-rate reductions commenced in this financial year have considerable financial benefits in a full year (slide 22), it is important for service groups to continuously explore ideas and opportunities in order to meet the 2023/24 CIP requirement.
- A bank of ideas and proposals are available from:
 - the workshop held earlier in the year
 - schemes that have not progressed this year but have potential next year
 - existing pipeline proposals
 - new schemes to be developed
- The focus of this meeting is on run-rate reduction and controls, but more detailed attention will be given in the coming months to CIP generation for 2023/24 and the more rigorous governance that will need to be implemented to ensure its delivery.



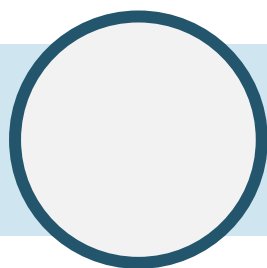
Potential financial improvement bridge (excl. pharmacy/ income)





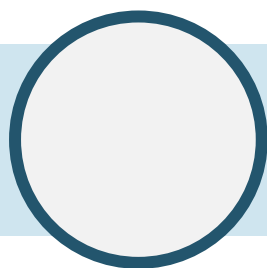
Potential for financial improvement and estimated full-year benefits (excluding pharmacy / income opportunity)

POTENTIAL FOR FINANCIAL IMPROVEMENT 2022/23 & FULL YEAR BENEFIT		
	2022/23	2023/24
Reg nurse unavailability	0.80	2.30
Unreg. nurse unavailability	0.24	0.75
Nurse Recruitment	1.13	4.00
Increase bank staff usage	0.12	1.10
Medical pay costs	0.50	1.50
Procurement savings	0.90	1.60
Control of non-pay spend	1.00	1.00
Amber scheme delivery	0.26	0.31
Savings potential	4.95	12.56
Revised forecast (November)	-18.50	
Revised out-turn assuming savings achieved	-13.55	



Proposed actions – nursing pay

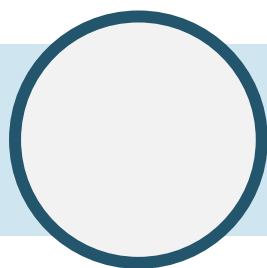
- Weekly unavailability reports to be provided to Director of Nursing, ASDGs, HONs, and senior nurse staff as required. PH/RB
- Guidance & controls for arranging/authorising annual leave, study leave, special leave, working day, and ADHs associated with 1:1s, high acuity, covid, etc. to be urgently reviewed and refreshed. CM
- FIP Board to agree stretch targets for unavailability FIPB
- SGs to identify when new starters are fully qualified nurse to work in wards /departments each month and monitor agency usage to ensure a proportionate reduction in agency usage. HONs
- Monthly monitoring data to track agency and other variable staff usage to be undertaken and shared with senior management by FIP support team. PH/RB
- HONs/HR to continue to drive down LT sickness and frequent ST sickness HONs/SH
- Discussion group with senior nurses to be arranged and proposals for increasing bank use to be developed PH/DE
- Morriston TRACs report to be created SH



Proposed actions – medical pay

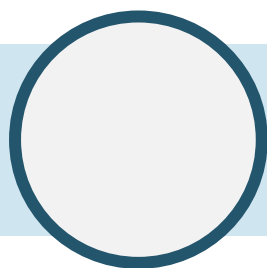
- Service groups conduct a line-by-line review of their medical staff to understand and assess:
 - The underlying causes/drivers of the overspend
 - Whether there is a continuing need for current levels of staffing going forward or whether there are opportunities to reshape staffing to reduce overspends
 - Impact of reducing double running costs associated with AMSR where appropriate
 - How this may be affected by any additional recruitment in progress over the next 5 months
- The MEDACs review outcomes to be shared
- A stretch target a reduction of £0.5m in the next 5 months is proposed.

GC
ASGDs



Proposed actions – Non-pay

- SGs to continue to work with procurement to progress new opportunities, particularly those arising from standardisation & LR work ASDGs
- Complete deep dives on each major area of overspend with aim of limiting the rate of spend where feasible. ASDGs/Finance
- Review of Omnicell to be completed LP
- Maintain current areas of underspend – ensure not spent! ASDGs
- SGs with finance support to identify areas where further spend can be frozen or significantly limited through authorisation to order controls ASDGs/Finance
- A target reduction of 3% - £1m is proposed



Proposed actions – Other

- Obtain results of WG FDUs of medicines and identify areas of potential
- Progress remaining CIP schemes to conclusion and creation of 2023/24 CIP
- Consider any opportunities for additional income
- All non-essential vacancies should be frozen until year-end.
- Additional ideas and areas to explore further?

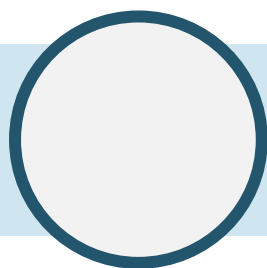
PH

All

ASDGs

All

All



Conclusions

- The level of operational pressures and the added attention being given to AMSR is recognised; however, the Chief Executive rightly gives very high priority to financial management and discipline. Recovering the significant overspend will be a huge challenge but must be given a high priority.
- **It is proposed that each Service Group and action leads**
 - Take steps to progress the various actions immediately
 - Produce an action plan with the Financial Improvement Team's support for the 6th December to take forward appropriate actions in each area and in preparation for a CEO briefing.
- An Executive Director Lead should be agreed to oversee each major area of activity.