

**WRITTEN QUESTION TO THE MINISTER FOR HEALTH AND SOCIAL SERVICES
BY DEPUTY G.P. SOUTHERN OF ST. HELIER CENTRAL
QUESTION SUBMITTED ON MONDAY 17th OCTOBER 2022
ANSWER TO BE TABLED ON MONDAY 24th OCTOBER 2022**

Question

“Further to her response to [Written Question 198/2022](#), will the Minister advise –

- (a) why the schedule for advising of vacancies (published in the second week following the end of quarter) will not be in place until January 2023;
- (b) what the vacancy figures are for September 2022 or, if this is not possible to provide, why she is unable to do so;
- (c) whether it is her assessment that the current vacancy rate of approximately 15% is acceptable and, if not, what options, if any, she has discussed with the Chief Minister and the States Employment Board to address the challenges of recruitment and retention; and
- (d) whether she will publish the number of Full Time Equivalent roles required by each of the 14 General Hospital staffing groups in order that vacancy numbers can be readily understood?”

Answer

- a) Currently, the high-level vacancy figures are produced on a monthly basis using data from the finance systems. To produce the schedule referenced in the question, further analysis and work is needed, including manual collation from various systems, to ensure the data is reliable and accurate, hence the start date of January 2023. I will investigate to see if this work can be brought forward and would like to offer the questioner the opportunity to meet with me and my officers to discuss this further.
- b) The vacancy figures for September have just been published and the vacancy factor remains at 15% across HCS. Out of an establishment of 2591 posts, there are 400 WTE vacancies.
- c) The vacancy rate is unacceptable; however, given the current market for health and social care staff globally, it is understandable and will be challenging to reduce.

The Chief Minister and SEB are aware of the vacancy situation and the challenges HCS face, especially as part of discussions on the turnaround plan for HCS. Officers have commissioned several different approaches and channels to recruit to HCS, these include:

- Recruiting several clinical fellows (medics) from overseas and working with a specialist overseas medical staffing recruiter (Remedium) to fill hard to fill speciality consultant posts.
- Commissioning NHS Professional to undertake international recruitment in India to fill theatre nurse vacancies. Four candidates are lined up to start, and work will continue to increase the intake on a regular basis.
- Working with Penna to create a social media campaign aimed at Radiographers in the UK and coastal universities. The campaign is aligned to the EVP model and will target people who have shown an interest in radiography.

- Greater attendance at job fairs in the UK, recently resulting in officers identifying 6 candidates for interview.
- Commissioning a specialist head-hunter on midwifery recruitment.
- Working with Andium homes on key worker accommodation, most recently resulting in the Government securing half of one of their newly refurbished tower blocks, with an option to take on the whole of the final tower block next Spring. This key worker accommodation is to be shared between HCS and CYPES.
- Reviewing recruitment and retention processes.
- As part of the Mental Health Community redesign work, there is a focus on introducing new roles which will be more attractive to candidates.
- Continuing the work of an internal HCS recruitment and retention group who are reviewing internal processes and their efficacy.

d) The funded establishment WTE, WTE in post and vacant WTE numbers for each care group at the end of September are shown below

Budget area	Total WTE	WTE in post	Vacant WTE
Chief Nurse	74	68	10
Medical Director	121	113	14
Associate Managing Director	75	72	3
Change Delivery	26	24	4
Clinical Support Services	125	106	19
Digital Delivery (this budget area is no longer in use)	0	0	0
Group Managing Director	15	15	0
Medical Services	515	446	69
Surgical Services	512	412	99
Mental Health	321	250	71
Social Care	206	179	27
Women's and Children's	167	137	30
Non-Clinical Support Services	406	358	48
Primary Care and Prevention	28	127	6