

Medical Locum Engagement Task And Finish Group

Email: MLTFG@gov.scot

Date 09/07/2024

Enquiries to: MLTFG@gov.scot

Dear all

Direct Engagement of Medical Locums

As part of wider efforts to deliver financial sustainability while maximising the quality of patient care, a programme of work has been established to review NHS Scotland's approach to the use of medical locums. This work is being led by the recently convened Medical Locum Engagement Task and Finish Group which we co-chair.

Members of the Task and Finish Group have been considering a range of interventions designed to ensure the appropriate and cost-effective use of medical locums and the group has identified 'direct engagement' as a best practice approach to the engagement of these workers.

Engaging medical locums via a traditional agency recruitment route requires a VAT payment of 20% on the total cost of the engagement (commission and hourly rate). Utilising a direct engagement model, whereby Health Boards set up an employment contract with the agency worker and pay them directly via payroll, removes the requirement to pay VAT in respect of the hourly rate element of any payment. The Group is in agreement that there is merit in encouraging the use of direct engagement across Health Boards, in order to maximise the potential savings associated with this approach. Direct engagement is also included as an action, with potential to support 3% recurring savings, within the annex of the letter issued by Caroline Lamb on 21 June 2024, regarding NHS Scotland's financial position and improvement expectations.

At the most recent meeting of the group, NHS Lothian colleagues presented their medical locum arrangements, which involve using direct engagement for all locum engagements. The Board have utilised this approach since July 2017 and have reported savings of close to £5 million since then. Forth Valley have also reported savings of over £250,000 in the last year as a result of replicating Lothian's direct engagement arrangements locally.

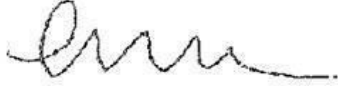
A copy of the presentation shared by Lothian colleagues is attached and [redacted] ([redacted@gov.scot]) Lothian's Supplementary Staffing Manager, is happy to be contacted by any Health Boards who wish to discuss Lothian's approach in further detail. Also attached is a buyer's guide produced by National Procurement.

In order to assess the extent to which Direct Engagement is adopted going forward, the Task and Finish Group agreed that it would be beneficial to introduce reporting on this measure as part of monthly financial performance returns. Over the coming months the group will monitor direct engagement adoption across Boards. In doing so, there is an acknowledgement that there may still be limited situations where a non-direct engagement locum is required in order to avoid a clinical safety breach or suspension of service.

The Scottish Government's Finance Delivery Unit will also be meeting with each Health Board's Director of Finance on a quarterly basis to discuss the financial position and direct engagement compliance will form part of those discussions.

Yours sincerely,

Gillian Russell – Director of Health Workforce, Scottish Government

A handwritten signature in black ink, appearing to read 'Gillian Russell', with a horizontal line extending to the right.

Carol Potter – Chief Executive, NHS Fife

A handwritten signature in black ink, appearing to read 'Carol Potter', written in a cursive style.

Co-chairs of the Medical Locum Engagement Task & Finish Group

From: NSS SSTFG <NSS.SSTFG@nhs.scot>

Sent: 06 August 2024 09:52

To: NSS NHSScotlandBCE <NSS.NHSScotlandBCE@nhs.scot>

Cc: NSS NHSScotlandHRD <NSS.NHSScotlandHRD@nhs.scot>; NSS NHSScotlandSEND <NSS.nhsscotlandSEND@nhs.scot>; NHS DoFs Secretariat <NHSDoFsSecretariat@gov.scot>; [redacted]([redacted]) <[redacted]@aapct.scot.nhs.uk>; [redacted](NHS DUMFRIES AND GALLOWAY) <[redacted]@nhs.scot>; [redacted](NHS DUMFRIES AND GALLOWAY) <[redacted]@nhs.scot>; [redacted](NHS FIFE<[redacted]@nhs.scot>; [redacted] (NHS Forth Valley) <[redacted]@nhs.scot>; [redacted] (NHS Grampian<[redacted]@nhs.scot>; [redacted] <[redacted]@ggc.scot.nhs.uk>; [redacted] (NHSHighland<[redacted]@nhs.scot>; [redacted] <[redacted]@lanarkshire.scot.nhs.uk>; [redacted] - [redacted] <[redacted]@lanarkshire.scot.nhs.uk>; [redacted] <[redacted]@nhs.scot>; [redacted] NHS Orkney) <[redacted]@nhs.scot>; [redacted] (NHSShetland<[redacted]@nhs.scot>; [redacted] <[redacted]@nhs.scot>; [redacted] NHS WESTERN ISLES) <[redacted]@nhs.scot>; [redacted] <[redacted]@gov.scot>; [redacted] <[redacted]@gov.scot>; [redacted] <[redacted]@gov.scot>

Subject: Supplementary Staffing Task and Finish Group – Agency Usage Reduction
Importance: High

Dear all,

Please find attached a letter, sent on behalf of the co-chairs of the Supplementary Staffing Task and Finish Group, in relation to the upcoming nurse agency controls and your Board's readiness to implement these.

With kind regards,
[redacted]

[redacted]
Project Manager
Programme Management Services (PgMS)
Strategy, Performance and Service Transformation

NHS National Services Scotland

E: [redacted@nhs.scot]

Please consider the environment before printing this email.

NHS National Services Scotland is the common name for the Common Services Agency for the Scottish Health Service. www.nhsnss.org

Supplementary Staffing Task and Finish Group

Project Team

Email NSS.SSTFG@nhs.scot

Date 06 August 2024

Enquiries to NSS.SSTFG@nhs.scot

Dear Colleagues

Supplementary Staffing Task and Finish Group – Agency Usage Reduction

The Supplementary Staffing Task & Finish Group (SSTFG) continues to aim to reduce reliance on agency staff for the provision of nursing services. We would like to thank you and your staff for your continued commitment and support in achieving this aim.

Following the SSTFG co-chair letter issued to Health Boards on 23 June 2024, which outlined the final set of enabling measures leading to the cessation of nurse agency use in all but exceptional circumstances by October this year, we are writing to ask about your preparedness to implement these controls.

To clarify, from October, Boards should only access nurse agency staff in instances where it is clear that to not do so would result in either a clinical safety breach or suspension of service.

At the upcoming Board Chief Executive meeting on 20th August, we intend to seek assurance around your readiness to implement these controls and allow Boards the opportunity to raise any potential issues associated with implementing these measures.

We would be grateful if you could engage with the relevant members of your Executive team and undertake the necessary discussions to allow you to contribute to the conversation on behalf of your Board.

Yours sincerely,

Anne Armstrong – Interim Chief Nursing Officer, Scottish Government

Adam Coldwells – Interim Chief Executive, NHS Grampian

Co-chairs of the Supplementary Staffing Task and Finish Group

From: [redacted]<[redacted]@gov.scot> **On Behalf Of** Director of Health Workforce

Sent: 04 September 2024 16:06

To: claire.burden@aapct.scot.nhs.uk; Peter.Moore@nhs.scot;
Julie.White2@nhs.scot; carol.potter@nhs.scot; fv.chief.executive@nhs.scot;
gram.grampianchiefexecutive@nhs.scot; adam.coldwells@nhs.scot;
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Gordon.james2@gjnh.scot.nhs.uk; gordon.jamieson@nhs.scot;
[redacted]@gjnh.scot.nhs.uk; [redacted]@aapct.scot.nhs.uk; [redacted] <
[redacted]@borders.scot.nhs.uk>; [redacted]@nhs.scot; [redacted]@nhs.scot;
[redacted]@nhs.scot; [redacted]< [redacted] @nhs.scot>;
[redacted]@ggc.scot.nhs.uk; [redacted]@nhs.scot;
[redacted]@lanarkshire.scot.nhs.uk; [redacted]@nhslothian.scot.nhs.uk;
[redacted]@nhs.scot; [redacted]@nhs.scot; [redacted]@nhs.scot;
[redacted]@nhs.scot; [redacted]@aapct.scot.nhs.uk;
[redacted]@borders.scot.nhs.uk; [redacted]@nhs.scot; [redacted]@nhs.scot;
[redacted]@nhs.scot; [redacted]@nhs.scot; [redacted]@ggc.scot.nhs.uk;
[redacted]@gjnh.scot.nhs.uk; [redacted]@nhs.scot;
[redacted]@lanarkshire.scot.nhs.uk; [redacted]@nhslothian.scot.nhs.uk;
[redacted]@nhs.scot; [redacted]@nhs.scot; [redacted] (NHS Shetland) <
[redacted]@nhs.scot>; [redacted](NHS WESTERN ISLES) < [redacted]@nhs.scot>

Cc: [redacted] ([redacted])< [redacted] @aapct.scot.nhs.uk>;
[redacted]@borders.scot.nhs.uk; [redacted]@nhs.scot; [redacted]@nhs.scot;
[redacted]@nhs.scot; [redacted]@nhs.scot; [redacted]@ggc.scot.nhs.uk;
[redacted]@nhs.scot; [redacted]@lanarkshire.scot.nhs.uk;
[redacted]@nhslothian.scot.nhs.uk; [redacted]@nhs.scot; [redacted]@nhs.scot;
[redacted]@nhs.scot; [redacted]@nhs.scot; [redacted]@nhs.scot; DG Health &
Social Care <DGHSC@gov.scot>; SSTFG <SSTFG@gov.scot>; Chief Nursing
Officer <CNO@gov.scot>; [redacted]<@gov.scot>; Director of Health Workforce
<Directorofhealthworkforce@gov.scot>

Subject: Director Letter for Issuing - Nurse Agency Controls

Dear Chief Executives, HR Directors & Executive Nursing Directors, (CC'd Finance Directors)

Please see the attached Director's Letter sent on behalf of Gillian Russell, Director of Health Workforce and Anne Armstrong, Interim Chief Nursing Officer, which requests that from 31 October 2024, all nurse agency use be by exception only.

Kind regards,
[redacted]

[redacted][He/him]

**Information Governance Officer
Business Support Division
Directorate of Health Workforce**

Tel: [redacted]

Health & Safety Liaison Officer (HSLO)



Dear Colleague

SUPPLEMENTARY STAFFING – NURSE AGENCY CONTROLS

1. This Directors' Letter (DL) follows [DL \(2024\) 04 dated 12 March 2024](#) which requests that from 1 April 2024 Health Boards no longer use agency workers to fill Healthcare Support Worker (HCSW) / unregistered staff shifts.
2. Building on the above, this DL requests that from 31st October 2024 all agency nursing staff use be by exception only. This includes agency nursing staff accessed via the relevant National Procurement Framework NP51023 or through any other route.
3. Any Nurse agency use thereafter should be approved by the relevant responsible Executive Director within the Board.
4. Similar to DL (2024) 04, these arrangements must be adhered to except where it is clear that not accessing staff via an agency will result in either a clinical safety breach or suspension of a service or, otherwise, a breach of a Board's legal obligations.
5. To support the consistent implementation of the above arrangements, the current reporting mechanism used to monitor Boards' agency use will remain in place. Thank you for continuing to support the operation of these arrangements.

DL (2024) 22

04 September 2024

Addresses

For action

Chief Executives
HR Directors
Executive Nurse Directors

For information

Finance Directors

Enquiries to:

Tel: 0131 244 3323

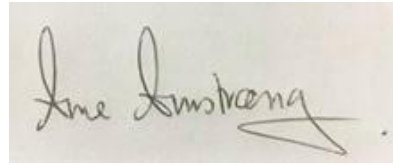
Email:

directorofhealthworkforce@gov.scot

Yours sincerely

A handwritten signature in black ink, appearing to read 'G Russell', with a long horizontal flourish extending to the right.

Gillian Russell
Director of Health Workforce

A handwritten signature in black ink, clearly legible as 'Anne Armstrong', with a stylized flourish at the end.

Anne Armstrong
Interim Chief Nursing Officer

From: [redacted] **On Behalf Of** Medical Locum Task & Finish Group

Sent: 27 September 2024 16:16

To: Director of Health Workforce <Directorofhealthworkforce@gov.scot>;
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carol.potter@nhs.scot; fv.chief.executive@nhs.scot;
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brian.chittick@nhs.scot; Nicky.Connor@nhs.scot; chiefexec.tayside@nhs.scot;
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[redacted]@gjnh.scot.nhs.uk; [redacted]@aapct.scot.nhs.uk; [redacted]< [redacted]
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[redacted]@nhs.scot[redacted]@nhs.scot; [redacted] < [redacted]@nhs.scot>;
[redacted]@ggc.scot.nhs.uk; [redacted]@nhs.scot;
[redacted]@lanarkshire.scot.nhs.uk; [redacted]@nhslothian.scot.nhs.uk;
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[redacted]@nhs.scot; [redacted]@aapct.scot.nhs.uk;
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[redacted]@nhs.scot; [redacted]@nhs.scot; [redacted]@ggc.scot.nhs.uk;
[redacted]@gjnh.scot.nhs.uk; [redacted]@nhs.scot; [redacted]@nhs.scot;
[redacted]@ggc.scot.nhs.uk; [redacted]@nhs.scot;
[redacted]@lanarkshire.scot.nhs.uk; [redacted]@nhslothian.scot.nhs.uk;
[redacted]@nhs.scot; [redacted]@nhs.scot; [redacted]@nhs.scot;
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[redacted](NHS Shetland) < [redacted]@nhs.scot>; [redacted](NHS WESTERN
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Cc: Director of Health Workforce <Directorofhealthworkforce@gov.scot>;
Fife.chiefexecutive@nhs.scot; [redacted]< [redacted]@gov.scot>; [redacted] <
[redacted]@gov.scot>; Deputy Director of Health Workforce, Planning and
Development <DeputyDirectorHWPD@gov.scot>
Subject: Letter from Co-Chairs of the Medical Locum Task and Finish Group

Dear all

Please find attached a letter and supporting documents issued on behalf of Gillian Russell and Carol Potter, co-chairs of the Medical Locum Task and Finish Group in relation to the recently developed Medical Locum Sign-Off Process Checklist and Medical Locum Monthly Reporting Template.

Kind regards
[redacted]

[redacted]

Sponsorship and Infrastructure | Health Workforce Directorate | Scottish Government | St. Andrew's House | Regent Road | Edinburgh | EH1 3DG

Medical Locum Engagement Task and Finish Group

Email: MLTFG@gov.scot

27/09/2024

Enquiries to: MLTFG@gov.scot

Dear all

Medical Locum Engagement Task and Finish Group

Following our previous letter dated 9 July 2024 with regards to the use of direct engagement as a best practice approach to the engagement of medical locums, members of the Task and Finish Group have been considering further interventions designed to ensure the appropriate and cost-effective use of these workers.

As part of discussions, the group agreed that there was merit in introducing greater consistency in relation to the sign-off process operated by Health Boards when considering engaging medical locums from external agencies.

In order to provide Health Boards with a consistent approach to the approval of medical locum engagements, a medical locum sign-off checklist has been developed and is attached alongside this letter. The checklist outlines a number of steps that Boards should take when signing off a medical locum engagement, including the development of a business case for any engagements exceeding 6 weeks in duration.

Whilst we acknowledge that Boards may operate additional steps to the ones included in the checklist, we expect colleagues to adopt the approach outlined. It is our intention to request an update from Boards on their experience of using the checklist at the beginning of March next year.

Members of the Task and Finish Group were also supportive of the routine collation and presentation of locum usage and spend data. The group felt that regular collection of this data would support greater understanding of locum usage across the country, as well as informed decision making in relation to the national and local interventions which have the potential to deliver the greatest impact.

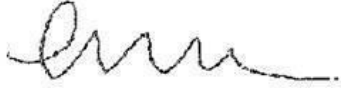
With this in mind, a small number of territorial Health Boards have been piloting a medical locum reporting template which requests a breadth of information, including details of those services reliant on locum workers, information about the length of engagements and details of the top 5 most expensive locum engagements in each Board on a monthly basis. Feedback from the pilot has been positive, with Boards reporting that collation of the data has supported internal reporting and allows for greater visibility of locum usage across the service.

In light of the feedback, the group have agreed to proceed with implementing the reporting template on a monthly basis and we would be grateful if you could nominate someone from

within your Board that we can contact to arrange receipt of the reports. Please email MLTFG@gov.scot once you have identified the relevant colleague.

Yours sincerely,

Gillian Russell – Director of Health Workforce, Scottish Government

A handwritten signature in black ink, appearing to read 'Gillian Russell', with a horizontal line extending to the right.

Carol Potter – Chief Executive, NHS Fife

A handwritten signature in black ink, appearing to read 'Carol Potter', with a horizontal line extending to the right.

Co-chairs of the Medical Locum Engagement Task & Finish Group