

HOSPITAL ENVIRONMENT

1. Choosing between 'district general,' and 'specialist / tertiary care hospital,' in which type of hospital do you work? Please note that this question is about the hospital specifically, and not about its services. Please tick one option as appropriate.

In which type of hospital do you work?	Please tick one option as appropriate.
District general hospital	X
Specialist / tertiary care hospital	
Other (please specify)	

2. In total, how many beds did the hospital have for patients as of 30 September 2018? Please provide information on the total number of available and filled beds, with a breakdown for the number of haematology beds. Please fill in the below table with the number of beds.

Number of beds	<u>Total</u> number of beds as of 30 September 2018.	Number of <u>filled</u> beds as of 30 September 2018.	Number of <u>available</u> beds as of 30 September 2018.
Total number of patient beds in the hospital	494	463	31
Beds allocated to haematology patients in the hospital			

On average haematology is allocated 10-12 beds within the Trust.
As haematology fall within general medicine we are no able to give an exact figure.
Beds are given depending on need.

3. In total, how many outpatients were treated between 30 September 2017 and 30 September 2018? Please fill in the below box with the number of outpatients.

Number of outpatients treated between 30 September 2017 and 30 September 2018:	12,485 outpatients treated. (seen)
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4. Is the hospital in which you work overspent, underspent or on budget? Please tick one option as appropriate.

Is the hospital in which you work overspent, underspent or on budget?	Please tick one option as appropriate.
Underspent	
On budget	
Overspent	X

WORKFORCE

5. In total, how many full time equivalent employees were employed within the Clinical Haematology department of your NHS Trust as of 30 September 2016 and as of 30 September 2018? If roles are shared with other departments, please use the percentage of each employee's time spent working with the Clinical Haematology department to work out a total number of full time equivalent employees.

Total number of full time equivalent Clinical Haematology employees as of <u>30 September 2016</u>	Total number of full time equivalent Clinical Haematology employees as of <u>30 September 2018</u>
7.3 WTE Clinicians	10.65 clinician and nurse

6. Please provide the number of full time equivalent employees within the Haematology department at your NHS Trust, split according the roles below. Please provide these numbers as they existed on 30 September 2016 and 30 September 2018.

For 30 September 2018 only, please give details of how many full time equivalent employees in the Clinical Haematology department were within five years of retirement on this date.

If roles are shared with other departments, please use the percentage of each employee's time spent working with the Clinical Haematology department to work out a total number of full time equivalent employees. Please fill out this information in the table on the following page.

Job role (full time equivalent employees)	Number of full time equivalent employees at your NHS Trust as of <u>30 Sept 2016</u>	Number of full time equivalent employees at your NHS Trust as of <u>30 Sept 2018</u>	Number of full time equivalent employees at your NHS Trust within 5 years of retirement age as of <u>30 Sept 2018</u>
Medical roles:			
Consultant Clinical Haematologist	4.3 WTE	4.65WTE	1WTE
Haematology SpR/StR (or equivalent)	1 WTE	2 WTE	0
Haematology Core Medical Trainee / Foundation Year Doctor	2WTE	2WTE	0
Other medical haematology role (Associate Specialist, Trust Grade staff, etc.)	0	1 WTE	0
Haematology Physicians' Associate / Physicians' Assistant	0	0	
Nursing roles:			
Haematology Clinical Nurse Specialist	0	1	0
Other haematology nursing roles – Note: this applies only to haematology roles, not generalist roles	0	0	0
Pharmacist roles:			
Haematology Consultant Clinical Pharmacist			
Other haematology pharmacist role			
Laboratory roles:			
Haematology Clinical Scientist (Band 8 and above)			
Haematology Clinical Scientist (all other bands)			
Haematology Biomedical Scientist (Band 8 or above)			
Haematology Biomedical Scientist (Band 7)			
Haematology Biomedical Scientist (Band 6)			
Haematology Biomedical			

Scientist (Band 5)			
Haematology Associate Practitioner / MTO (Band 4)			
Haematology Medical Laboratory Assistant (Band 3)			
Other haematology laboratory role (please specify)			
Management / support roles:			
Haematology Management Staff (all roles)	0.33%	0.33%	
Haematology Data Manager	0	0	
Haematology Clerical Staff (all roles)	0.5 WTE	0.5 WTE	
Haematology Secretarial Staff (all roles)	2.5 WTE	3 WTE	

7. As of 30 September 2017 and 30 September 2018, how many full time equivalent vacancies did your NHS Trust have advertised for the each of the job roles specified below within the Haematology department? Please fill in the table as appropriate.

If certain vacancies are for roles shared with other departments, please use the percentage of each employee's time spent working with the Clinical Haematology department to work out a total number of full time equivalent employees. Please fill out this information in the table on the following page.

Job role (full time equivalent employees)	Number of full time / full time equivalent vacancies advertised as of <u>30 Sept 2017</u> at your NHS Trust	Number of full time / full time equivalent vacancies advertised as of <u>30 Sept 2018</u> at your NHS Trust
Medical roles:		
Consultant Clinical Haematologist	0	0
Haematology SpR/StR (or equivalent)	0	0
Haematology Core Medical Trainee / Foundation Year Doctor	1	1
Other medical haematology role (Associate Specialist, Trust Grade staff, etc.)	0	0
Haematology Physicians' Associate / Physicians' Assistant	0	0
Nursing roles:		
Haematology Clinical Nurse Specialist	0	0
Other haematology nursing roles– Note: this applies only to haematology roles, not generalist roles		
Pharmacist roles:		
Haematology Consultant Clinical Pharmacist		
Other haematology pharmacist role		
Laboratory roles:		
Haematology Clinical Scientist (Band 8 and above)		
Haematology Clinical Scientist (all other bands)		
Haematology Biomedical Scientist (Band 8 and above)		
Haematology Biomedical Scientist (Band 7)		
Haematology Biomedical Scientist (Band 6)		
Haematology Biomedical Scientist (Band 5)		
Haematology Associate		

Practitioner / MTO (Band 4)		
Haematology Medical Laboratory Assistant (Band 3)		
Other haematology laboratory role (please specify)		
Management / support roles:		
Haematology Management Staff (all roles)		
Haematology Data Manager		
Haematology Clerical Staff (all roles)		
Haematology Secretarial Staff (all roles)		

8. During the period from 30 September 2017 to 30 September 2018, how many days of sick leave were taken by Clinical Haematology staff? (Please give one figure for all staff combined)- unable to provide this information

As supplementary information (if available), how many of these days of sick leave were due to stress, depression, or other mental health conditions? A/A

How many days of sick leave did Clinical Haematology staff take between 30 September 2017 and 30 September 2018?	How many days of sick leave due to <u>stress, depression or other mental health conditions</u> did Clinical Haematology staff take between 30 September 2017 and 30 September 2018?
172 days	0 days

<p>If you do not have access to this data, provide a description below on how you believe absences due to sick leave (especially due to stress, depression or other mental health conditions) amongst the clinical haematology staff compare to those of staff within the rest of your NHS Trust.</p>

9. Please outline which multidisciplinary teams involving clinical haematology staff were in existence at your NHS Trust as of 30 September 2018.

For each team please also indicate how frequently the teams meet. This includes both virtual and face-to-face meetings.

Multidisciplinary teams in	Do multidisciplinary teams in the below areas
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the following areas:	operate at your hospital? If so, how often do they meet? Please tick as appropriate.				
	More than once per week	Weekly	Monthly	Less than once each month	Does not operate
Blood transfusion			x		
General Haematology		x			
Haemoglobinopathy			x		
Thrombosis and Haemostasis					
Laboratory					
Malignant:					
• Bone Marrow Transplant					
• Lymphoma		2 weekly			
• Leukaemia					
• Myeloma		2 weekly			
• Other					
Paediatric:					
• Haemato-oncology					
• Bone Marrow Transplant					
• Haemoglobinopathy					
• Thrombosis and Haemostasis					
• Laboratory					
Other (please specify below):					
.....					
.....					
.....					

WAYS OF WORKING / ROTAS

10. As of 30 September 2018, what percentage of their working hours (on average) did Consultant Clinical Haematology staff at your NHS Trust devote to non-clinical duties? These duties can be either:

- Within the NHS Trust (e.g. managerial/leadership roles); or
- Outside the NHS Trust (e.g. Royal College roles, Examining responsibilities, British Society for Haematology roles, or other professional roles at a national / international level).

This does not have to be a precise figure, but rather your sense as to the average proportion of time spent by Consultant Clinical Haematologist staff at your NHS Trust on non-clinical duties.

Consultant Clinical Haematology staff spend the following proportion of their working hours on non-clinical duties within the NHS Trust:	17 hrs week across consultant body.
Consultant Clinical Haematology staff spend the following proportion of their working hours on non-clinical duties outside the NHS Trust:	0% of working hours

11. Between 30 September 2017 and 30 September 2018, how often did Clinical Haematology staff have to miss, postpone or complete outside of working hours the following due to their workload? Please note that here, 'Clinical Haematology staff' refers to medical clinicians.

- Mandatory scheduled training (e.g. fire training, blood transfusion training, etc);
- CPD sessions;
- Job planning and appraisal procedures.

Please give an estimate of how often this occurred (considering the clinical haematology team as a whole) by ticking one box per row. This does not have to be a precise figure, but rather your sense as to how often (if at all) this happened.

The Trust does not record this information.

How often did clinical haematology staff miss the below activities due to their workload?	Not at all	Less than once every 2 months	Once every 2 months	Once per month	Once per week	More than once per week
<u>Mandatory training</u> (please tick one option as appropriate)						
<u>CPD sessions</u> (please tick one option as appropriate)						
<u>Job planning and appraisal</u> (please tick one option as appropriate)						
<u>Other (please specify)</u> (please tick one option as appropriate)						
<u>Other (please specify)</u> (please tick one option as appropriate)						
<u>Other (please specify)</u> (please tick one option as appropriate)						
<u>Other (please specify)</u> (please tick one option as appropriate)						

CLINICAL QUALITY

12. Between 30 September 2017 and 30 September 2018, were any cases of External Quality Assessment (EQA) failure or peer review failure logged at your NHS Trust relating to Clinical Haematology procedures / activities / units? E.g. external accreditation of a unit such as 'bone marrow transplantation,' 'haemophilia,' etc.

If yes, please give the number of EQA and peer review failures in the box below. If not, please enter '0' in the box below

0 EQA failures were recorded

0 peer review failures were recorded

Comments:

FUTURE CHALLENGES

13. What do you regard as the most pressing challenges facing your Clinical Haematology department in the next 5-10 years?

Please tick no more than three boxes and prioritise your answers in order of importance (1-3) with (1) being most important.

Most pressing challenges for your clinical haematology department in the next 5-10 years	Ranking: (1)-(3), with (1) being the most important. Please rank no more than three challenges.
Workforce going into retirement	2
Difficulties in staff recruitment	1
Difficulties in staff retention	
Lack of funding for new positions	
Inadequate training capabilities	
Staff leaving the NHS for private institutions	
Increasing demands on Haematology staff beyond their current role(s)	
Fewer medical graduates choosing to specialise in Haematology	
Low morale / sickness absence	
Other – please specify	
Other – please specify	

14. Please share any other comments on the challenges that you predict will face your Clinical Haematology department in the next 5-10 years.