



## CÙRAM IS SLÀINTE NAN EILEAN SIAR

WESTERN ISLES HEALTH AND SOCIAL CARE PARTNERSHIP

### Integrated Joint Board Workforce and Demographic Report as 30 September 2022

#### Introduction

The workforce and demographic monitoring report provides an overview of the Integrated Joint Board's workforce position at the end of September 2022 and the risk the Health and Social Care Partners and the wider community face due to the worsening workforce position now and into the future. It contains the following sections:

1. Summary
2. Demography
3. Workforce Summary
4. Vacancies and Available Workforce
5. Age, Retirals and Sickness
6. Future need
7. Risks
8. Data Sources

## 1. Summary

- 1.1 The Western Isles is at a very critical point with regards to the decreasing population and the change in demographics, with a **25% increase in the over 75s** and a **reducing workforce of 6% by 2028 from 2018**. These numbers are already greatly affecting the Health and Social Care Partnership's ability to fill posts and provide the level of services the Islands need. The workforce situation without intervention will worsen considerable in the next few years and rapidly.
- 1.2 To provide clarity to the situation, the jobs that are overall affected by the reducing workforce on the islands are the semi-skilled jobs, band 2-5 Agenda for Change and grades A to E for single status. These types of jobs for the Health and Social Care Partnership would be for example, Health Care Assistants, Social Care Assistants and Workers, Domestic and Catering staff. Although salary paid plays a part in recruiting, the biggest issue is there is not enough people of workforce age on the islands that are not employed already in the Western Isles (discussed in detail in further paragraphs). To also firm up the point, our semiskilled work force are mostly women (94%), so in fact we are reducing the available workforce to recruit from by half.
- 1.3 Semi-skilled jobs are normally not the sort of jobs that people from other parts of Scotland and parts of the UK move to the Western Isles to take up. They are on the whole not highly paid jobs and with the cost of the move, will not be financially viable. Together with Western Isles having one of the highest levels of fuel poverty and perceived problems with transport links, inward migration for these levels of roles very rarely happens.
- 1.4 The second group of workers that need to be recruited are the skilled workforce, i.e., AHP, GPs, Senior Social Workers and Medical Consultants, recruitment issues are more dependent on available trained workers. However, there is a lack of long-term rental and available housing properties on the Islands (not necessarily key worker housing). A remote and rural lifestyle is not for everyone and there is not enough done to promote that lifestyle, with a lot of negative press which can be off putting for potential job hunters. There are reducing school roles which has meant the closure of many rural schools which can also be also off putting for potential families that expect a school to be in walking distance for their young children.

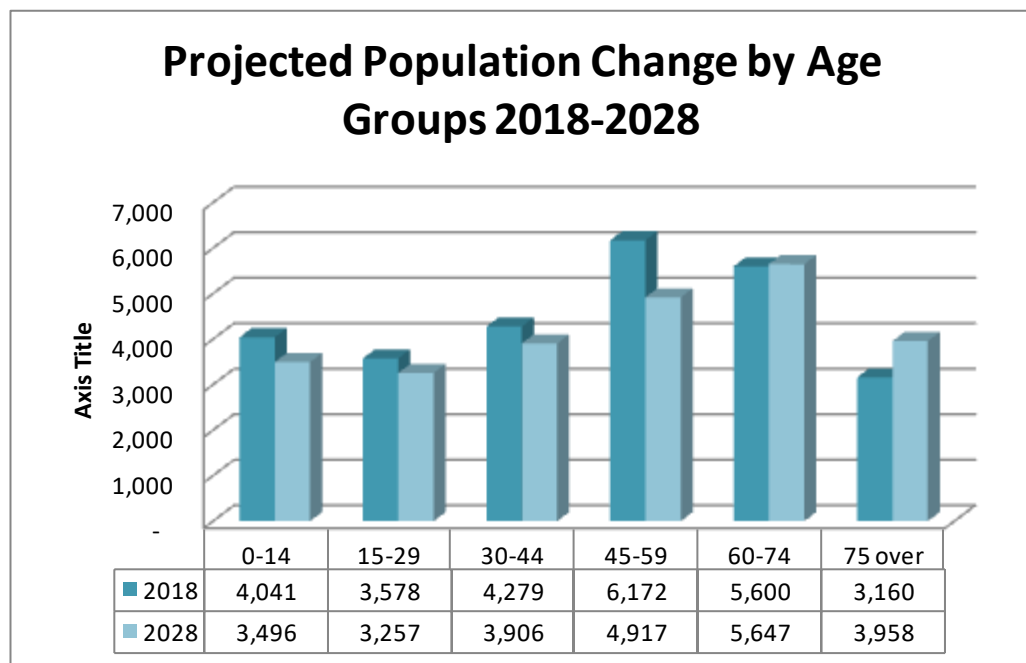
- 1.5 Looking at the population and demographics of the Island, this is not a task simply for the Health and Social Care partners but all stakeholders on the Islands and the Scottish Government. It is not just about encouraging people up to live here but bringing onto the island families of working age and keeping these people and their young children on the island to provide a sustainable workforce and community for the future. Previously the Community Planning Partnership commissioned a report in 2007 which identified the islands needed circa 1,000 working age and child bearing age families, to inward migrate to sustain the islands workforce and population required. Very little has been undertaken to encourage this and the Western Isles is overall in **a worse position** in 2022 that was projected in 2007.
- 1.6 The table below is a summary from a detailed analysis that has been undertaken on IJB workforce issues, partly based on Quarter 6 2022 and known future recruitment required (Goathill Complex and increased winter capacity) and using predictive data from various Government and Local Government sources to look forward in the short term (2-3 years). A summary RAG status for the short term (next 2 years, **not** the status as of month 6) of the main areas of concern is shown below.

Short Term Risk 1-2 years	Vacancies	Age	Retiral	Sickness
Allied Health Professionals	M	M	L	L
Dental	H	M	L	M
Hospital (Acute) Nursing	M	H	H	M
Community Hospital Nursing	M	H	M	H
Community Nursing	H	H	L	M
Mental Health	VH	H	L	H
Management and PCIP	VH	H	L	L
Adult Services	M	H	M	M
Residential Services	VH	VH	VH	H
Home Care & Reablement	VH	H	H	H
Management inc Assessment	H	M	L	L

- 1.7 To note the age column is recognising staff over 55 however, the retiral for the short term will be looking at 65+ age group. You can therefore have a higher risk relating to 55+ but a medium short term retiral age as more of the staff are in the 55-60 age range. Also to note the Risk against the vacancies is for the next 2 years and takes into consideration the increased staff required for the Goathill complex and other funding for new posts received in Health and Social Care. These posts are not including in further analysis of vacancies as services have yet to commence.

## 2. Demography

- 2.1 Using updated population prediction ([Population Projections \(cne-siar.gov.uk\)](https://cne-siar.gov.uk)) the islands are expecting to see a **6% drop** in population by 2028, one of the biggest population decreases in Scotland. Working age population is set to **decrease by 6%** by 2028 and in contrast the over 75s with the greatest levels of co-morbidity is set to **rise by 25%**. The population changes will result in a year-on-year reduction in the available workforce to nurse, care and attend to the most vulnerable of people whose numbers are increasing year on year. The Health and Social Care services are already feeling the effect of the changes in demography with high levels of vacancies in social care workforce and domestic and catering workforce.



- 2.2 Looking at the latest mid population statistics available there was a drop in population of 220 from 2019 to 2020. Although 40 was due to net outward migration the biggest change is negative natural change i.e. there were 375 deaths compared to 203 births. Looking at the table above and the data in 2.3 this trend will continue.

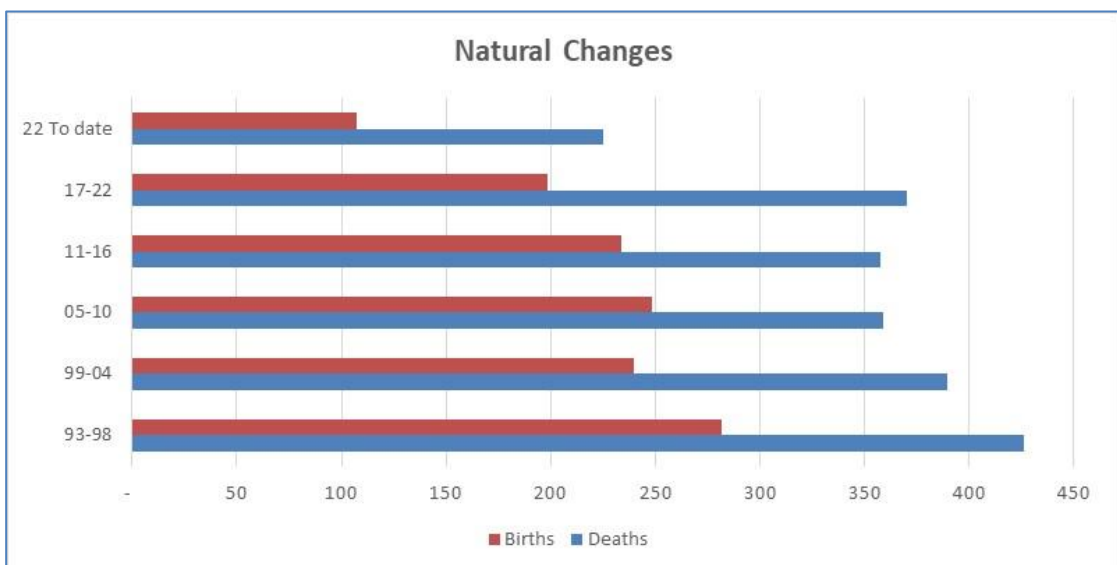
- 2.3 Current ratio between death and births is very disturbing with the first 9 calendar months ratio of 1: 0.47, which means for every **2 deaths there is just under 1 birth**, compared to a Scottish average for the same period of 1:0.75. This ratio has dropped considerably from about 2018 where the ratio was 1:0.60. Although birth rates dropped in 2020 the year of lock down, there has been some recovery in 2022 however the death rates are increasing due to the substantive increase in our elderly population.
- 2.4 The table below assumes the level of natural change remains at 2022 estimate levels i.e., ratio of 1: 0.47 and excludes net migration as numbers often negate each other. It is important to note the if outward migration female population of childbearing age from our islands (i.e. moving away to university) continues and the inward migration of people are aged 45 and over, then births will drop further. The population graph from 2012 to 2030 shows the following, to note as a stark comparison, in 1901 the population of the Western Isles was **46,172**.



- 2.5 An Outer Hebrides Migration Study (hallaitken) was commissioned and published in 2007 using 2005 data and projecting what would happen if we could not stop the outward migration and encourage inward migration of young families to the Outer Hebrides. I have plotted the population across to 2020 and what the study said would happen if we could not achieve the aims of inward and outward migration, has happened, as shown in the table below. To note the workforce population has already decreased by 7% by 2020 and therefore the accumulative effect by 2028 is approximately 12%:

Time of Hall Report Using 2005 data	Original Data 2005	Current Available 2020/21	% Reduction 2005-2020	Number Reduction
<b>Population</b>	<b>26,930</b>	<b>26,500</b>	<b>-2%</b>	<b>-430</b>
Infant 0-4	1,279	1,106	-14%	-173
Primary Age 5-11	2,178	1,856	-15%	-322
Senior Age 12-18	2,398	1,982	-17%	-416
Workforce Age 19-64	15,656	14,583	-7%	-1,073
Aging Population 65+	5,419	6,973	29%	1,554
Average Age Population	42.40	49.90	18%	
Birth Rate (3 year average )	243	188	-23%	-55
Child bearing Woman 18-45	4,224	3,590	-15%	-634

- 2.6 The population itself from 2005, to about 2020 has been only a gradual decline and in some years a small increase, due to an increase in 55–59-year-olds not the young. However, what has occurred within that period, which the Islands are now starting to feel the impact of, is that the young have migrated, and we are now seeing a sizable decline in births due to the loss of childbearing women, together with the increasing deaths due to the now aging population. The islands are not replenishing their loss of population through an increase in births, and the Islands are in that position where de-population will now start increasing faster year on year. The increase in deaths and decrease in births for the last 30 years averaged, can be clearly shown in the graph below:



- 2.7 Population statistics across the islands vary looking at different data tables. There have been areas of rapid decline in population but also areas that have seen a small increase. However, the data projections have always indicated a slow decline and then an increase, as deaths start to outweigh the births in a greater ratio as seen in the period from 2018 onward, as described in the paragraphs above.
- 2.8 It is interesting to note all of the smaller islands and remote areas of the Western Isles have seen a substantive decline from the early 20<sup>th</sup> century to now as shown in table below. Not all current data is available by parish, and GP Lists have been used as a substitute for 2021 census. GP lists tend to be accurate but maybe slightly overstated more than a census but by only a few %.

Area	1901	1921	1951	1981	2001	2022	% 1901-2022	% 1981-2022
Barra	2,545	2,456	1,884	1,339	1,172	1,280	-50%	-4%
Barvas	6,731	6,660	5,111	3,994	3,133	NA	-53%	-22%
Harris	5,271	5,276	3,991	2,780	2,120	1,842	-65%	-34%
Lochs	4,733	4,396	3,111	2,319	1,814	NA	-62%	-22%
Uists and Benbecula	9,407	8,067	6,457	6,178	4,721	4,740	-50%	-23%
Uig	4,497	3,956	2,718	1,824	1,527	NA	-66%	-16%

- 2.9 The table above shows the parishes away from the main town of the Western Isles, Stornoway over the last 120 years. In numbers the remote and rural decline from 1901 to 2001 was 18,697 people, compared to a small decline in Stornoway of 968. It has to be noted that the area of Stornoway has now a larger spread of houses over what would have been fields and farms in 1901 and the actual centre of town is less congested.
- 2.10 The reduction in rural population was partially due to a move to Stornoway into the new housing schemes but also a migration away from the Islands for work and school. Up until about 40 years ago children from the rural areas boarded in Stornoway or from the Uists, prior to the change in council, if you wanted to do Highers/O grades from the age of 12/13 you went to Inverness or Portree. A lot of children never returned permanently to their homes and made their home away from the Islands or within Stornoway.

- 2.11 As can be seen all areas have seen a decline, albeit Isle of Barra decline has slowed down and the island has seen a slight increase from 2001-2022. It can be seen clearly in the Uist data the effect of the withdrawal of the army in the late 1990s. However, all island areas in the last 3 years are now seeing higher deaths, lower births and a reduction in childbearing aged women. Using the present population statistics per island, i.e., population over 65 and women of childbearing age, an extrapolation per island of the change in population can be estimated. This is just for illustration purposes and further work needs to be undertaken on postcode analysis if available. The figures do not include any assumptions in change of the island's economy, i.e., large engineering firms relocating to islands.

	2022	Year Net Growth	Est Pop 2027	Est pop 2030
Harris	1,842	-23	1,728	1,659
Uist and Benbecula	4,740	-39	4,545	4,428
Barra	1,280	-9	1,235	1,209

- 2.12 It is also worth noting that the Western Isles has the highest equal female pensioner population at 27% in comparison to 20% in Scotland. This is against a back drop of 94% of frontline social care workers being female.
- 2.13 The pandemic has brought about changes how people work; this may not be positive for the island as net inward migration may not result in an increase in available workforce as people are able to take their job with them or maybe already at retiral age. Opposite to that there is a potential growth in the existing population to work for off island companies and the public sector but remain on island. It is also worth noting that remote working from off the island could decrease the economic benefit for the local economy as does the use of short term locums to fill local posts.

### 3. Workforce Data Summary

- 3.1 The table below as of 30<sup>th</sup> September 2022 shows high level statistics per service with regards to vacancies, age of workforce and gender profile. The following paragraphs drills down into the details and how each area interacts. To note the figures do not include the increase in staff required at the Goathill Complex as the building is not yet ready to be commissioned.



Estab Head	As of 30 September 2022 Service Area	Vac. Head	% Vac	Head Over 55+ %	Head Over 65+ %	Female % in Post
79	Allied Health Professionals	6	8%	<b>21.9%</b>	<b>2.7%</b>	88%
72	Dental	13	18%	<b>22.0%</b>	<b>1.7%</b>	83%
128	Hospital (Acute) Nursing	11	9%	<b>25.6%</b>	<b>6.8%</b>	96%
60	Community Hospital Nursing	6	10%	<b>31.5%</b>	<b>5.6%</b>	94%
117	Community Nursing	22	19%	<b>28.4%</b>	<b>1.1%</b>	99%
54	Mental Health	12	22%	<b>28.6%</b>	<b>0.0%</b>	76%
36	Management and PCIP/GP	13	36%	<b>39.1%</b>	<b>4.3%</b>	87%
114	Adult Services	9	8%	<b>30.8%</b>	<b>1.9%</b>	90%
216	Residential Services	8	4%	<b>44.2%</b>	<b>7.7%</b>	93%
199	Home Care & Reablement	34	17%	<b>38.2%</b>	<b>4.2%</b>	96%
51	Management inc Assessment	9	18%	<b>22.5%</b>	<b>2.5%</b>	83%
<b>1,126</b>	<b>Total</b>	<b>143</b>	<b>13%</b>	<b>32.7%</b>	<b>4.3%</b>	<b>92%</b>

#### 4. Vacancies and Available Workforce

- 4.1 As can be seen from the table above in some areas of the IJB there are significant vacancies, even taking into consideration the low establishment numbers in some services. It is becoming increasingly difficult to recruit, not just too specialised posts but to the unskilled and semiskilled posts which are mostly found from within the Islands employment market. Due to the predominance of our female workforce, we are in effect halving our available employment pool with which we are competing with many other sectors on the island, tourist industry, catering, supermarkets, and fish factories for example.
- 4.2 The private sector is starting to offer golden hellos, some of the supermarkets have increased the hourly rates and are offering better staff discounts. It becomes increasingly difficult for the public sector to compete. NHS Western Isles are looking into whether some of the hotel services jobs are eligible for a Recruit and Retention Premium payment, to help with recruitment.
- 4.3 Looking at available workforce across the islands (we know geographically the available workforce and jobs do not always collate) April 2022 (latest data) Universal statistics for Na h-Eileanan Siar shows 420 people looking for work, gender split 280 men and **140 women**. The figures are not split geographically but 46% of the people are over 50. In the last 4 months there has been an increase of men on universal credit but a slight decrease for woman. The data set is now not showing the same details but the annual average from 2021 to 2022 is showing a similar figure, just slightly higher than 420.

- 4.4 Highlighted is the available female workforce where we draw the majority of our unskilled and semiskilled workforce from. There were only 140 females looking for work at the time the data was collected and it has to be noted, many of them may not be suitable or wish to work for health and social care for various reasons.
- 4.5 Looking at the latest school leaver information (19/20 – the 20/21 data is affected by the Pandemic) 57% of pupils go to Higher and Further Education, majority of which will be mainland provided, i.e. outward migration. That leaves 43% or 103 available school leavers to entice into Health and Social Care. However, using the female predominance of our workforce again halves the available pool. As mentioned above in 4.1 Health and Social Care is in competition with other sectors too. Some of Social Care jobs require driving licences so many of the 16+ leavers may go into the tourist or catering industries and therefore it may be difficult to attract back once they reach 18+. Many of the pupils that outward migrate do not return but depending on their choice of career and personal circumstances chose to stay on the mainland.

Total	Higher Education	Further Education	Employment	Other
<b>241</b>	95	43	84	19
<b>100%</b>	39%	18%	35%	8%

## 5. Age, Retiral and Sickness

- 5.1 The age of the workforce in summary is shown in section 3.1, the aging workforce is having an effect on the retirals due in the short, medium and long term. The sickness of our workforce can directly correlate to the high age of our workforce. There is not normally an increase in sick episodes but staff in the 55 plus age category can be off for long periods of time, some with long term conditions. The table below shows likely retirals in the next 10 years by service. To note although establishment numbers are reasonably stable in the residential services in the last 2 years by end of 23/24 there maybe be 20 retirals with already 20 staff, 65 and over as of 30 September 22.

Retirals	RAG	22/23	23/24	24/25	25/26	26/27	27/28	28/29	29/30	30/31	31/32	Total
Allied Health Professionals	L	2			1		3	1	3	2	1	13
Dental	L	1			2	2		2	3	2	1	13
Hospital (Acute) Nursing	H	8	2	2	0	1	3	0	1	4	3	24
Community Hospital Nursing	M	3	1	1	2	3	0	1	3	1	0	15
Community Nursing	L	1		3	3	2	1	5	5	3	2	25
Mental Health	L				1	3	1			3		8
Management and PCIP	L	1	1	0	0	2	0	1	1	0	1	7
Adult Services	M	2	3	1	0	1	6	5	6	3	5	32
Residential Services	VH	16	4	5	7	9	11	5	6	10	12	85
Home Care & Reablement	H	7	4	5	7	7	7	6	3	11	3	60
Management inc. Assessment	L	1	0	1	1	1	3	1	1	0	1	10
		42	15	18	24	31	35	27	32	39	29	292

- 5.2 The sickness figures for the Health and Social Care Partnership for the first two quarters of 2022 and annual figure for 2021 is shown in the following table. Data can be drilled down to allow managers to look at specific work areas, reasons why staff are off sick and patterns in absenteeism. It can be noted that there are high levels of sickness within frontline social care staff and Dental Staff. Both the community Hospital and Community Nursing are seeing increasing sickness in quarter 2. Although there has been a reduction in sickness in some areas, sickness remains constantly high for over a year in both residential and homecare services. NHS set target for sickness is 4% which is rarely achieved, normal overall sickness for NHS Western Isles falls in the region of 5-6% level. It must be noted however both partners budget for approx. 4% sickness rates.

	21/22	Q1	Q2	Risk	Change
Adult Day Care	14.6%	5.0%	6.3%	M	↑
Adult Homecare	11.4%	9.7%	10.5%	H	↑
Adult Learning Disabilities	6.8%	4.7%	5.5%	M	↑
Adult Residential	9.3%	9.3%	8.9%	H	↓
Mental Health	12.0%	7.5%	10.7%	H	↑
Acute Nursing	8.4%	6.5%	8.2%	M	↑
Community Hospital	5.5%	4.8%	9.2%	H	↑
Community Nursing	5.0%	3.9%	6.4%	M	↑
Dental	7.8%	11.6%	8.4%	M	↓
AHP	4.8%	6.4%	3.4%	L	↓

**6. Workforce Need – Health and Social Care**

- 6.1 There is a high level of Health and Social Care recruitment (including soft facilities) required across the Island, specifically within the next year. This includes approximately 53 posts for the Goathill Complex (approx. 31 for stage 1), increased workforce to cover winter pressures and help with Home Care Capacity and increase staffing in Hospital at Home. This is on top of the high current vacant posts in home care and other health and social care areas and likely risk of retirements.

**7. Main Workforce Risks**

There are many potential operational and financial risks faced in planning for the future Health and Social services for the population of the Western Isles. For example:

- Services cannot be provided to clients. Homecare specifically is at risk of service break-down, with high levels of assessed clients not receiving care and unassessed clients who also may need care.
- High sickness rates, double what has been budgeted for is causing various levels of overspending due to increased bank and relief staff.
- Use of agency staff to fill gaps:
  - Cost implication, agency staff for medical grades can be much higher than substantive role. As of Sept 2022, there is a projected overspend on psychiatry and medical locums of @ £700k will £500k on GP OOH due to use of GP locums.
  - VAT implication for NHS – NHS cannot claim back the VAT of agency locums which results in a 20% increase above the hourly rate.
  - For Social Care amount of agency staff required would be unmanageable with regards to sourcing staff to island, and accommodation needs.
  - Destabilising of patient/client care with different agency locums brought in to care and treat.
  - Inability to house agency staff specifically in southern isles either driving up costs or losing the agency worker.
- workforce issues for new services e.g. Goathill complex, mental health projects, increased winter capacity.

- Catch 22, possible reduction in services over the next 10 years could impact on a) inward migration of families – needed to boost population and b) could result in outward migration of families if care needs cannot be met (not just for adult services).

## **8. Data Sources**

8.1 The following are links or description of the data sources used in compiling this report, there are many interesting articles pertaining to workforce issues as well as the published data:

- [Population Projections \(cne-siar.gov.uk\)](https://www.cne-siar.gov.uk)
- Outer Hebrides Migration Study Report <https://www.cne-siar.gov.uk/media/5597/ohmsstudy.pdf>
- [Mid-Year Population Estimates | National Records of Scotland \(nrsotland.gov.uk\)](https://nrsotland.gov.uk)
- [General Practice | GP Workforce & Practice populations | Health Topics | ISD Scotland](#)
- [Monthly Data on Births and Deaths Registered in Scotland | National Records of Scotland \(nrsotland.gov.uk\)](https://nrsotland.gov.uk)
- Workforce Data obtained from CnES HR system and by information held by Social Care managers
- NHS SSTS (Scottish Standard Time System) reports and funded vacancies held within financial records
- Available Workforce Universal Credit statistics, 29 April 2013 to 9 December 2021 - GOV.UK ([www.gov.uk](http://www.gov.uk))
- School leavers Summary Statistics for Attainment and Initial Leaver Destinations, No. 3: 2021 Edition - gov.scot ([www.gov.scot](http://www.gov.scot))
- [LI01 Regional labour market: Local indicators for counties, local and unitary authorities - Office for National Statistics \(ons.gov.uk\)](https://ons.gov.uk)

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