

## Re: Your request made under the Freedom of Information Act 2000

### 1. Do you currently receive a neutral vendor managed service, or master vendor managed service, for the supply of temporary agency staff?

Please provide the following information for each staffing group. If there is no service provider, please state this.

#### i. Medical / Dental

- Name of the managed service provider? **Holt**
- Are they a neutral vendor or master vendor? **NA**
- Expiry date of contract with the managed service provider? **October 2024**

#### ii. Allied Health Professionals (AHPs) / Scientific, Therapeutic and Technical

- Name of the managed service provider? **Maxxima**
- Are they a neutral vendor or master vendor? **NA**
- Expiry date of contract with the managed service provider? **December 2025**
- 

#### iii. Nursing and Midwifery / Healthcare Assistants (HCAs)

- Name of the managed service provider? **NA**
- Are they a neutral vendor or master vendor? **NA**
- Expiry date of contract with the managed service provider? **NA**

#### iv. Non-Medical, Non-Clinical (NMNC)

- Name of the managed service provider? **NA**
- Are they a neutral vendor or master vendor? **NA**
- Expiry date of contract with the managed service provider? **NA**

### 2. Do you currently have a direct engagement (DE) provider in place, for VAT reclaim on agency spend?

Please provide the following information for each staffing group. If there is no service provider, please state this.

#### i. Medical / Dental

- Name of the DE provider? **Holt/LMS**
- Expiry date of contract with the managed service provider? **October 2024**

#### ii. Allied Health Professionals (AHPs) / Scientific, Therapeutic and Technical

- Name of the DE provider? **Holt**
- Expiry date of contract with the managed service provider? **October 2024**

**iii. Non-Medical, Non-Clinical (NMNC)**

- Name of the DE provider? **NA**
- Expiry date of contract with the managed service provider? **NA**

**3. Please can you provide 2022 full calendar year (01/01/2022 – 31/12/2022) spend figures on temporary agency staff (agency throughput)?**

Please provide the following information for each staffing group. If there is no agency spend, please state this.

**i. Medical / Dental**

- 2022 spend on temporary agency staff (excluding VAT)?
- **10,553,000**

**ii. Allied Health Professionals (AHPs) / Scientific, Therapeutic and Technical**

- 2022 spend on temporary agency staff (excluding VAT)?
- **£639,000**

**iii. Nursing and Midwifery / Healthcare Assistants (HCAs)**

- 2022 spend on temporary agency staff (excluding VAT)?
- **£8,601,000**

**iv. Non-Medical, Non-Clinical (NMNC)**

- 2022 spend on temporary agency staff (excluding VAT)?
- **£1,580,000**

**4. Please can you provide the name of the person who looks after temporary agency staffing at the Trust?**

Please provide the following information for each staffing group. If multiple people lead this from different departments, please give the details of each person.

**i. Medical / Dental**

**Richard Somerset Head of Procurement**  
**Mark Brookes Associate Director of P&OD**  
**Mick Mallaband Deputy Medical Director for Workforce**

**ii. Allied Health Professionals (AHPs) / Scientific, Therapeutic and Technical**

**Richard Somerset Head of Procurement**

Our Ref: 71/2023  
JANUARY 2023

Mark Brookes Associate Director of P&OD  
Heather Jackson – Director for AHP Workforce

**iii. Nursing and Midwifery / Healthcare Assistants (HCAs)**

Richard Somerset Head of Procurement  
Mark Brookes Associate Director of P&OD  
Karen Jessop Chief Nurse

**iv. Non-Medical, Non-Clinical (NMNC)**

Richard Somerset Head of Procurement  
Mark Brookes Associate Director of P&OD  
Howard Timms Estate and Facilities Director  
Various managers across the trust – Too many to detail

**5. Please can you provide the name of the person who leads temporary agency staffing at ICS level? Requester should ask the ICB not the Trust**

Please provide the following information for each staffing group. If multiple people lead this from different departments at ICS level, please give the details of each person.

**i. Medical / Dental**

- Name
- Job Title
- Department

**ii. Allied Health Professionals (AHPs) / Scientific, Therapeutic and Technical**

- Name
- Job Title
- Department

**iii. Nursing and Midwifery / Healthcare Assistants (HCAs)**

- Name
- Job Title
- Department

**iv. Non-Medical, Non-Clinical (NMNC)**

- Name
- Job Title
- Department

Our Ref: 71/2023  
JANUARY 2023