

**VACANCY CONTROL PANEL REQUEST FORM**

**SUPPORTING INFORMATION FOR CONSIDERATION**

<b>TRAC REFERENCE NUMBER</b>	
<b>JOB TITLE</b>	ADVANCED CRITICAL CARE PRACTITIONER
<b>BAND</b>	8A
<b>WTE</b>	1
<b>SPECIALITY/WARD/AREA</b>	DEPT OF CRITICAL CARE
<b>SITE</b>	WILLIAM HARVEY HOSPITAL

**1. Please provide reasons for request to recruit / staff change form request:**

**Direct Clinical Care post: -**

- necessity for patient care/safer staffing/patient pathway
- impact on patient care if not recruited too (including patient metrics)
- patient acuity (is this within establishment or WTE required for additional beds/service)

**The overall staffing strategy for the department of critical care is to have a full compliment of advanced critical care practitioners (ACCPs) working on every shift. This would compliment the medical staff and reduce the need for temporary and inexperienced junior clinical fellows. The junior clinical fellow posts have proved difficult and time consuming to recruit to. To that end, we have already started our own ACCP training programme:**

- We have already trained 2 ACCPs. The time taken from recruitment of a trainee to being trained and participating on the rota is nearly 3 years. We also have 3 currently in training who will complete their training in September 2025.
- There is a lack of trained ACCPs in the country and it is very unusual to be able to recruit a trained ACCP. However, a trained ACCP has expressed a strong interest in working in the department and we need to act swiftly in order to secure their services. If we are successful, we would save significantly both financially and in terms of time. We would save financially as we would not need to pay them whilst in training. We would save on University fees and we would have someone experienced and participating on the rota straight away, delivering good clinical care.
- This post would replace a junior clinical fellow post so this is not an additional or new position but rather a switching of current funding.

**Non Direct Care Post: -**

- Business critical reason i.e. diagnostic reductions in cancer pathway, length of stay reduction, cost improvement programme etc (including metrics impacted)
- Governance and safety
- Financial impact/benefits

**2. Please provide details of the current establishment, vacancies and structure chart:**

Budget code	2701 (anaesthetics and critical care)
-------------	---------------------------------------

Band	Establishment / WTE	Staff in post / WTE	Vacancies / WTE	Agency usage WTE and cost £	NHSP WTE usage and cost £
8a	2.0	2.0	1.0 (newly created)		

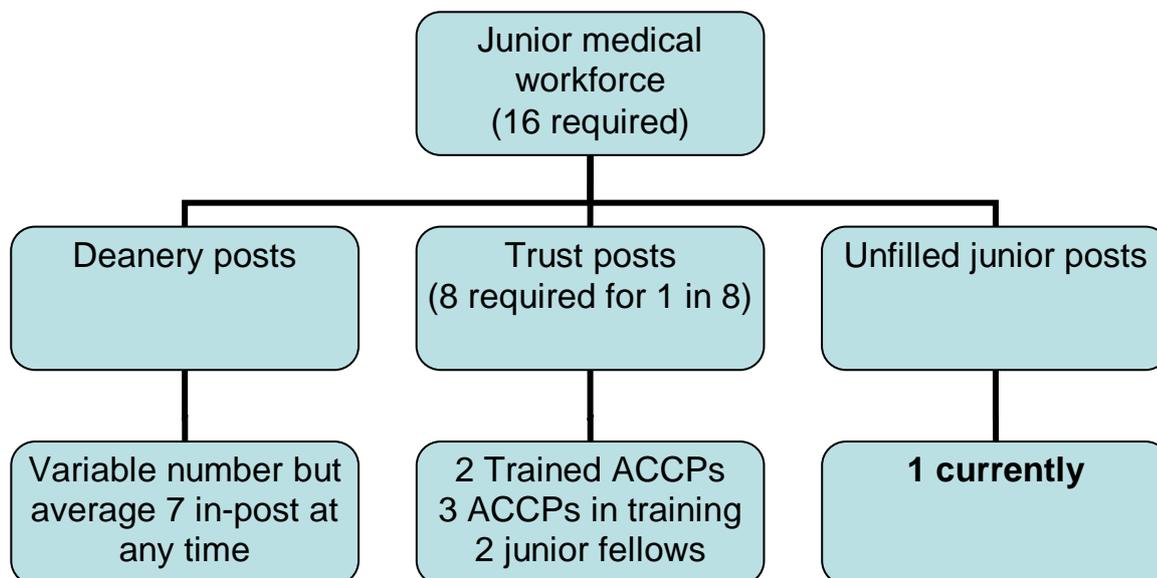
\*\* Please note this should be filled in for entire budget code

\*\*\*Establishment (please include this position/s as a vacancy)

**3. Please give details to questions below**

How many posts are currently being held (WTE)	<b>16</b>
How many posts have been taken out of establishment (WTE)	<b>?</b>
How long has post been vacant (months)	<b>12</b>

**Please insert an overview of the structure here:**



**4. Please detail any alternatives considered below**

	Considered Y/N	What was considered/completed/what was the outcome and date
Role Redesign	Y	We have already redesigned the workforce in light of difficulty recruiting to posts and to make the workforce more permanent experienced in intensive care medicine.
Apprenticeship	Y	Trainee ACCPs already employed but take time to deliver direct clinical care
Reallocation of work	N	Unable to reallocate critical care to other areas of the hospital safely.
Technology	N	
Any other alternatives		

**5. If the post is currently filled with premium pay cost (agency or overtime) please quantify the monthly cost reduction that recruiting into this post will have, and confirm the premium costs will cease upon recruitment (in your workings show the number of hours per week being used, the name of cover and the hourly rate, and calculate the monthly agency / overtime cost less the monthly substantive cost.): \***

*Not currently filled.*

**We will need to recruit to this post with a trainee ACCP if we do not get a trained ACCP.  
We will need to pay for 2 years at band 7 with no direct clinical care/activity on rota that is not supernumerary.  
We will need to pay towards University fees etc.**

**Managing Director Signature ..... Date .....  
(signature to be gained prior to uploading form to TRAC)**