

Item 5.1.4a

People Committee Meeting

minutes

Minutes of the People Committee Meeting held on 11th June 2019

Present:	Mark Jones, Non-Executive Director (Chair) Bob Burgoyne, Non-Executive Director Nick Brooks, Non-Executive Director
In Attendance:	Jo Twist, Director of Workforce & Service Improvement Sue Pemberton, Director of Nursing & Operations Ruth Dawson, Head of Education Jennifer O'Brien, Executive Secretary (minutes) Fiona Ross, HR Business Partner (Item 6.3 only) Katie Toner, HR Business Partner (Item 6.3 only) Maria Dean, HR Business Partner (Item 6.3 only)
Apologies:	Dr Raph Perry, Medical Director

1. Apologies for Absence

As above.

2. Declarations of Interest

None declared.

3. Minutes of Meeting held on Tuesday 12th March 2019

The minutes of the previous meeting were noted and approved.

4. Action Log

Item 1-The draft Health & Wellbeing Strategy was discussed below under agenda item 6.7. This item would be marked as complete and removed from the action log.

Item 2-The scope to assess the review of bank rates to ensure equity across the Trust to be presented at the December 2019 People Committee.

Action

Item 3-The AHP and Nursing strategy updates were presented below under agenda item 5.4. This item would be marked as complete and removed from the action log.

Item 4-The divisional staff survey action plan progress update was discussed below under agenda item 6.3. This item would be marked as complete and removed from the action log.

The Interim Director of Research & Innovation was scheduled to present at the September 2019 People Committee to give an update on the low score within the Research department following the staff survey results for 2018.

Item 5-The Director of Workforce & Service Improvement confirmed that agency cost had reduced and was now below plan against trajectory. This item would be marked as complete and removed from the action log.

5. Strategy

5.1 National Workforce Update

The Director of Workforce & Service Improvement informed colleagues that the 72 page interim NHS People Plan had been distributed that week and HR colleagues would now work to align the Team LHCH Strategy with the plan. Although The Director of Workforce & Service Improvement was yet to review the plan in detail, People Committee members were informed that although there were five key areas within the plan, the focus was to make the “NHS the Best Place to Work”. It was noted that this version of the plan was only an interim and a full and final version had been promised to Trust’s by the end of the calendar year.

As part of the planning process The Director of Workforce & Service Improvement acknowledged the need to assess the impact of the next five years on LHCH staff. When completing workforce planning, the following was critical;

- Recruitment of nurses; looking at current numbers of nurses, trainees and students in order to build the LHCH workforce from within.
- Highlight the Trust’s support of flexible working, particularly when promoting the return to practice scheme.
- Look at reskilling of existing workforce.

A verbal update would be provided in September 2019, with a full update aligned with the new LHCH Team Strategy.

Another concern in the HR network was regarding pensions for high earners, particularly consultants. The Government had agreed to bring forward the pension review, with a consultation to take place that would lead to changes from April 2020 to scope the impact on the Trust

although does not address the tax arrangements themselves. A task & finish group would be established to determine the impact on LHCH and whether action needs to be taken before it was sorted nationally.

The People Committee would be kept update.

5.2 Annual Review of Team LHCH Objectives

Colleagues were asked to note that the people plan was only received after this paper was issued and as a result the findings were yet to be included within the objectives.

Following a review of the objectives by the Workforce Senior Leadership Team, it was agreed that the current objectives remained very relevant. However, it was proposed to add further objectives in relation to building capacity and capability of the staff to ensure continuous quality improvement of Trust services. The proposed objectives were noted as;

- Increase the number of staff trained and involved in quality improvement work.
- Develop the quality improvement capability to improvement methodologies to support the achievements of the Trusts objective and its vision to be the best.
- Empower staff to champion improvements in their working areas and engage in decision making.
- Celebrate Quality Improvement.

Colleagues were asked to note that a further update would be available once the interim people plan had been worked through.

People Committee approved the proposed objectives.

5.3 Equality & Inclusion Update including Annual Equality Workforce Data Publication and WRES Update

The Workforce Equality Monitoring Report was attached as Appendix 1 to the report which had been updated to reflect data from 1st April 2018 to 31st March 2019. It had been presented to Operational Board and had been brought to People Committee for information.

It was noted that the report had been presented to the Executive Team for ratification and had now been published on the Trusts internet page.

A question was raised regarding the accuracy of the disability recruitment table provided on page 11 of the report. The Director of Workforce and Service Improvement would update the table the redistribute and publish it.

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The Director of Workforce and Service Improvement confirmed that the Trust was currently developing a gender re-assignment staff policy to help provide support and increase awareness. Gender neutral facilities had been made available throughout the Trust for both staff and patients. New capital projects would also create gender neutral changing facilities for patients. The gender re-assignment staff policy would go through the

Equality & Inclusion group and an equality impact assessment would be completed.

5.4 AHP and Nursing Strategy Update

The AHP and Nursing Strategy had been provided for information only and noted by People Committee members.

It was recognised that there were other areas in the Trust that would benefit from a similar strategy. Colleagues were informed that the Head of Information Governance & Administration was currently developing such a strategy for admin areas that would to be presented at the next Board of Directors meeting.

6. Dashboards and HR Assurance Reports

6.1 Team LHCH including Workforce KPI Dashboard and Staff Survey Results Correlation

The report was noted by all People Committee colleagues.

Following discussion, the following summaries were noted;

- There would be a strong focus on mandatory training moving forward as this was highlighted by the CQC, ensuring colleagues were aware that ESR could be accessed remotely using the app.
- Alternative methods of motivating colleagues to complete the friends & family survey would be considered as there was only 15% uptake recorded in Q4 2018/19. It was thought that the main reason for the lack of uptake was the amount of surveys staff were asked to complete throughout the year.
- The score in relation to health and wellbeing was showing as less than target, however, the Trust had developed a new strategy and action plan to address this.
- The Bank spend was based on the previous year, with it noted that long term sickness impacted on the increased spend on bank.

6.2 Key Issues - Workforce Development Group

This paper provided an update from the Workforce Department and key highlights from the various groups within the Workforce Governance Structure.

Although it seemed that attendance continued to be a challenge, due to the very diverse workforce of staff with competing priorities and commitments, it was noted that attendance had improved with the previous two meetings experiencing full attendance.

The full contents of the report were noted by People Committee colleagues.

6.3 Divisional Staff Survey Action Plan Update

The Human Resources Business Partners provided the divisional responses to the 2018 staff survey.

The reports were provided in a clear and concise format, providing details on last year's areas for improvement, positives from this year's report and areas for improvement from this year's report together with a closing summary.

The summary for the surgery division was noted below:

- Improvement was seen regarding senior managers not acting violent and aggressive with an increase to 84.2% this year compared to 79% last year.
- A significant positive increase had been reported in relation to adequate resources to do the job from 59% in 2017 to 71.4% in 2018.
- Good staff engagement and training with staff more positive about the training options provided.
- 48.6% of staff reported often thinking about leaving the organisation, therefore HR colleagues were trying to be proactive with exit interviews and the issue discussed at the divisional performance meetings. Line Managers would be encouraged to put more detailed reasons on leaver's forms rather than 'other', in order that any common themes could be identified.

The consultation period regarding flexible working patterns had started; three options had been proposed and would be distributed to the wards for feedback. The Health Roster Administrator was also being utilised to show that more flexible shift patterns were available.

39% of staff reported coming into work despite not feeling well enough and whilst the current sickness was higher than liked, the Trust did not want staff working when they shouldn't. It was hoped that the change in shift patterns would help and that managers could utilise Occupational Health more effectively. Moving forward managers would regularly review sickness information, discuss with staff in departmental meetings and pro-actively manage staff that may be unfit for work.

Whilst the Bullying and Harassment responses were low in terms of the numbers of staff experiencing incidents, the levels were higher than what information was coming through the Freedom to Speak Up summit and other reporting mechanisms, therefore a focus would be made to ensure staff were aware of how to report incidents. HR colleagues would also attempt to assess the background to the bullying & harassment issues experienced at the Trust.

The summary for the clinical services division was noted below:

- Improvement was seen regarding staff looking forward to going to work, being involved in deciding on changes, recognition received for good work and the extent to which the organisation values my

work.

- Anaesthesia medical staff scored 83.3% against whether they enjoyed going to work.
- The SICU score in relation to whether there was enough staff to be able to carry out job effectively had increased to 74.6% in 2018 from 51.5% in 2017.
- An increase had been reported in Physiotherapy with regards to colleague support and in Pharmacy with management support.

Areas of improvement for 2019 were staff retention in Physiotherapy, patient feedback in Radiology and physical violence from patients or relatives in SICU, with a lot of work due to take place around delirium.

The summary for the medicine division was noted below:

- Significant increases recorded for enough staff at this organisation to do my job properly from 18% in 2017 to 70.6% in 2018. The data reflected the succession planning work completed by the manager in Pulmonary Function.
- Increases were also seen in support I get from my immediate line manager, the recognition I get for good work and adequate materials and resources to do my job.

The medicine division did report hot spot areas relating to Bullying & Harassment, which would be the main area of focus for the senior management team moving forward. Management would be engaging with the Organisational Development team to look for interventions as well as trying to identify whether there was anything in the exit data that would identify problems.

Health & Wellbeing was also an area of concern due to employees conflicting demands on time at work, it would be considered taking parts of the event to staff that couldn't make it to the event held at a central location.

People Committee noted the full contents of the three reports and requested that a review of the Corporate divisions results be presented at the September 2019 People Committee meeting.

The three HR Business Partners left the meeting.

6.4 Employee Relations Annual Report

The report was taken as read by all People Committee members. It provided a review of the Employee Relations activity undertaken within the HR department over the financial year 2018/19.

6.5 Turnover / Retention Plan Update

The paper provided an update on turnover levels within the Trust with data showing that current levels of voluntary turnover remained marginally above target at 10.15%.

Actions required to improve performance were covered within the Trust's

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Retention Strategy and associated three year action plan. This had been created internally and supported the work the Trust were doing on the NHSI cohort 4 Retention Programme who confirmed that the Trust's approach was robust and should result in improvements.

The Trust would actively promote at all levels any newly developed offerings, initiatives and outcomes which arose as a result of the Retention Strategy and Action Plan and new Staff Health & Wellbeing Strategy, raising awareness across the workforce to improve staff retention and drive down turnover. There would be a focus on HCA's as they were an employee group with great potential for progression. The option of career clinics would also be investigated together with support for Managers to help staff develop.

Staff appraisals were currently underway throughout the Trust, with Managers encouraged to understand that the emphasis was about the conversation with the staff member rather than the paperwork. The recent training regarding the new appraisal system was very well attended.

6.6 Sickness Plan Update

It was noted that sickness throughout the Trust had experienced a steady rise in 2018/19, with this paper providing a summary of Trust wide sickness.

A table was provided on page three of the report which showed the absence rates by professional groups, colleagues were asked to consider the varying sizes of the professional groups when reviewing the data.

As anxiety/stress/depression or other psychiatric illnesses were the highest reported reasons for sickness further education was needed for managers in order that an initial conversation with staff regarding mental health issues could be had and support given. Mental Health awareness in staff would be a main area of focus for the Trust.

Some of the strategies to address the increase in the sickness rates included a review of the sickness policy; currently undertaken to potentially move to a stepped down approach, together with an audit of staff sickness files across the Trust to address any potential underlying concerns.

People Committee noted the contents of the report and stated that they would require regular updates on the measures being taken to tackle this rise in sickness.

The Director of Workforce and Service Improvement would bring back an action plan on how this rise in sickness levels would be dealt with at the September 2019 People Committee and present a comparative with fellow specialist Trusts.

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6.7 Draft Health & Wellbeing Strategy

The draft Health & Wellbeing Strategy was presented with colleagues

asked to note that this had been presented at a number of consultation events as well as Operational Board.

The strategy had been developed to ensure the Trusts approach to staff health and wellbeing was comprehensive and structured to ensure maximum impact of any initiatives, looking at the physical, mental and social wellbeing of staff and it aligned well with the interim People Plan.

The strategy would be supported by an implementation plan which would contain a greater level of detail regarding the actions required and enable effective monitoring of progress. The plan would be ratified by the Workforce Development Group in July and monitored via the Health & Well Being Group. Assurance would be provided against the plan to People Committee through key workforce indicators and a quarterly key issues paper.

The Director of Workforce and Service Improvement was asked to consider whether a measure needed to be included on the impact of staff engagement with this agenda.

7. Governance

7.1 Workforce Risks

There were currently six live workforce risks, the highest of which had a residual score of nine. All recorded risks were regularly reviewed and reported through the Workforce Development Group. The current risks had also been reviewed at the last Risk Management & Corporate Governance Committee on 29th April 2019.

A profile of the live workforce risks was shown within Appendix 1 of the report. HR risks included sickness and turnover rates whilst Education risks included poor culture in certain teams, mandatory training and the risk to training due to the lack of resources. This final risk was being managed by the Accommodation Group as ways of releasing Moroney House to become an Education Centre were being reviewed.

People Committee noted the contents of the report.

7.2 MIAA ESR / Payroll Report*

Paper received for information only. People Committee noted the contents of the report.

8. Date and Time of Next Meeting

Tuesday 3rd September 2019, 12.00 to 2.00pm, Research Meeting Room.