

Item 6.1.4

People Committee Meeting

minutes

Minutes of the People Committee Meeting held on 12th March 2019

Present:

Mark Jones, Non-Executive Director (Chair)
Ken Morris, Non-Executive Director
Nick Brooks, Non-Executive Director

In Attendance:

Jo Twist, Director of Workforce & Service Improvement
Dr. Raph Perry, Medical Director
Sue Pemberton, Director of Nursing & Operations
Ruth Dawson, Head of Education
Jennifer O'Brien, Executive Secretary (minutes)
Fiona Altintas, Divisional Head of Nursing Surgery
(Item 5.4 only)
Karen Wafer, Divisional Head of Nursing Medicine
(Item 5.4 only)

Apologies:

1. Apologies for Absence

None, as above.

2. Declarations of Interest

None declared.

3. Minutes of Meeting held on Tuesday 18th December 2018

The minutes of the previous meeting were noted and approved.

4. Action Log

All outstanding items on the action log were included as items on the agenda.

Item 1-The draft Health & Wellbeing Strategy had been developed which contained three main themes; physical, mental and social wellbeing. It would be presented at the Health & Wellbeing Group, followed by the

Action

Operational Board and then brought to the People Committee in June 2019.

Item 2-An update on the implementation of pay award and pay progression was provided below under agenda item 5.1. This item would be marked as complete and removed from the action log.

Item 3-It was confirmed that administrative rights of the roster system had been determined. This item would be marked as complete and removed from the action log.

Item 4-The draft equality and inclusion strategy was provided below under agenda item 5.2.1. 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 People Committee members of her inclusion in the round table discussions regarding the implementation of a National Workforce Plan that was linked into the recently published NHS England (NHSE) long term plan.

Five key areas were determined by the round table discussions; nursing vacancies, how to make the NHS the best employer, equality & inclusion, WRES data (due to the issue with a national decline in responses this year) and devolving power from the centre to the STP's. A letter had been sent to Trust Chief Executives requesting a response in relation to the proposed areas of inclusion into the National Workforce Plan. It was thought that an area for focus was digital transformation and in relation to the skill gap of staff. There was also a lack of Continuing Professional Development (CPD) funding. The Director of Workforce & Service Improvement informed colleagues that there were no new topics of work to consider, however there would be more focus on the key areas detailed above.

It was confirmed that the new pay progression scales would only be applied to new starters to the NHS or promoted staff. HR management staff across the regions recognised the need to establish an agreed national policy as to how the implementation of these pay scales would work and agree a joint way of working.

The Committee agreed the necessity of tracking developments in the quality and development of appraisals ahead of the introduction of the wider introduction of the performance based reward system.

5.2 Draft Equality & Inclusion Strategy

5.2.1 Draft Equality & Inclusion Strategy 2019-21

The Director of Workforce & Service Improvement asked People Committee members to note that the Equality & Inclusion (E&I) Strategy and the E&I action plan were in draft format and currently out to consultation. The documents had been shared with the E&I Group,

Health Watch (external governance body) and the CCG lead, all of whom sat on the steering group. The documents were also available on the LHCH staff intranet as part of the wider staff consultation and had been shared at Team Brief, Operational Board and Learning & Sharing.

The strategy included the Trust equality objectives as determined by the E&I Group following a review of local and national data, patient feedback, complaints analysis, staff survey results and aspects for service delivery that presented a local challenge.

It was agreed that flexible working and flexible training would be very advantageous for a lot of staff and medical staff and would help the Trust employ people who ordinarily had been unable to take on a more rigid training programme for varying reasons. It was acknowledged that this would be a huge culture change to implement, however, the Trust needed to become more flexible in areas such as this, recognising the need to engage with managers and staff on the options. It was also agreed that the Trust needed to promote that LHCH were open to flexible working patterns more proactively.

The Director of Workforce & Service Improvement confirmed that the protected characteristics data the Trust aimed to collect from people was of a personal nature, however it would always be voluntary as to whether people chose to divulge this information.

It was confirmed that the Trust were providing access to both internal and regional Equality Network Groups including LGBT, BAME and Women's Network. The Trust were looking to launch a staff carer's network shortly.

The Committee agreed that once the Equality & Inclusion (E&I) Strategy and the E&I action plans were finalised they would review progress to gain assurance that the plans were fully implemented.

5.2.2 Equality & Inclusion Action Plan

The contents of the action plan were noted by all Committee members.

5.3 Workforce Plan

The Director of Workforce & Service Improvement presented the initial draft workforce plan which had been submitted as part of the annual planning process. The final plan would be approved by the Board of Directors before submission.

Clarification was provided as to what both a Nursing Associate and a Physician Assistant were, with The Director of Workforce & Service Improvement confirming that these newly developed roles had enabled alternative routes into higher level nursing care. Further details on Physician Assistants would be provided in the final draft of the plan as this was only a very recent development.

An increase to the Trust's radiology workforce was planned in 2019/20 to support the operation of two additional scanners which would increase diagnostic capacity. Plans were also being developed for a new aseptic

unit within Pharmacy which would require a small number of additional staff. A focus for the Health Care Partnerships would be to develop dedicated plans to improve efficiencies across clinical support functions and understanding the potential for sharing and merging Radiology, Pharmacy and Therapy services.

The Trust planned to review bank rates to ensure equity within the Trust, however, management did not want to discourage staff from working on the bank and this review would be done in full consultation with staff.

JTw

Committee members were asked to note that the current high sickness levels were with HCA's and not registered nurses. Committee members recognised that in order to reduce the high sickness levels, a key area of focus needed to be understanding the reasons for these occurrences. There was also a concern that there was not enough opportunity for staff to advance to a band 4 role from a band 2 impacting on retention of band 2 staff. It was hoped that the newly established Nursing Associate role may encourage people to stay and develop at LHCH.

5.4 Safer Staffing Annual Report

The paper detailed the systems used to determine and assess safe staffing levels across the hospital wards and community services. People Committee members praised the report for giving a true insight into the work being carried out within the Trust to ensure safe staffing levels, the assessment of quality standards at LHCH gave further assurance.

The Divisional Head of Nursing for Medicine confirmed that the fixed term contracts used within respiratory physiology were unique to that area and whilst staff would move into permanent positions when the opportunity arose the fixed term contracts had never been an issue and worked well for both staff and employer. Management had no concerns in this area, staffing levels had recently been reviewed and it had been determined that those levels were right at the moment.

No concerns were noted within the surgery division and senior nurses now felt there was a more stable workforce in place, with the regular quarterly recruitment days noted as key to this improvement.

It was noted that a couple of the wards had achieved gold status, with the remaining working towards gold. Aspen, the Trust's same day admissions unit had been a positive success as had the stronger leadership team now in place in Theatre's where there was now a matron and lead perfusionist in place. The division was currently showing low levels for falls and pressure ulcers and sickness was always being monitored with the full support from HR colleagues, staff on long term sick were being managed well.

In the coming 12 months, the senior nursing team looked forward to what was available for people development wise within the Trust, with management looking to identify anything the Trust could do to be more efficient or to develop a more integrated workforce; ward based pharmacy technicians was one such proposal.

Colleagues did acknowledge that due to the current national situation, over time, nursing vacancies may increase and the Trust were trying to prepare for that proactively.

The Director of Nursing & Operations stated that the Trust needed to be able to provide assurance to external governing bodies that all staffing groups had been reviewed and the Trust employed the correct mixture of staff required. An update on what assurance could be provided would be provided at the next People Committee meeting in June 2019.

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The Divisional Head of Nursing for Surgery and the Divisional Head of Nursing for Medicine left the meeting.

5.5 Staff Survey 2018 Results/Staff NHS Constitution Compliance

The Director of Workforce & Service Improvement confirmed that the staff survey results had been reviewed at the Board of Directors meeting on Tuesday 5th March 2019 and were very positive. One note of concern was the WRES data which showed a rise in bullying and harassment between staff. This was a concern for the Trust and it could not be determined from the results whether these incidents related to one area or several, and it was also not correlated with any other data such as FTSU, ER casework, Datix etc.

It was confirmed that a Black, Asian & Minority Ethnicity (BAME) champion would be put in place to lead the BAME Group. The Trust acknowledged that the results were significantly worse than the previous year and an urgent focus would be placed on this issue. An update would be provided at the People Committee in June 2019, with more data to support the plans.

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The quality of appraisals still scored below expected, as did morale. A paper to the Executive Team on the 9th January 2019 showed that the training needs regarding appraisal's had increased by 6% but were still below average. It was noted that this was still an area of focus for the Trust.

The Director of Nursing & Operations expressed concern about three areas; Radiology, Research & Cherry Ward. Although committee members were informed that a new manager was scheduled to start on Cherry Ward in April 2019, therefore it was anticipated that this would have a positive effect on that area. A review into the issues in Radiology would be included within the clinical services review at the June People Committee, although Committee members were asked to note that a new manager started in Radiology in November 2018 and these results were as of October 2018. The incoming Interim Director of Research & Innovation would be asked to present at the September People Committee meeting to give an update on why the score was so slow within the Research department and whether any improvements had been seen. The score for both Theatres & Cath Labs was much more positive than in the previous year.

MPC

The Director of Workforce & Service Improvement stated that the NHS Constitution Compliance would be presented to the BoD in May 2019, and there was nothing of concern to note.

The Committee would seek assurance in Q3 that the Divisional level action plans address findings from the staff survey.

6. HR/Education/OD Assurance Reports

6.1 Workforce KPI Dashboard

People Committee members noted that this dashboard reported on the results as at Q3, staff survey results weren't included, however they would be available for the June 2019 People Committee meeting.

Colleagues acknowledged the reduction in Trust wide agency spend as well as theatre management working well. There were concerns raised about staff sickness, which management recognised as an issue under discussions above within agenda item 5.3.

The develop section of the report highlighted that a review of the appraisal format was currently underway. This was following the use of paper appraisals last year due to the implementation of OLM as a learning management system.

A slight increase in turnover was noted but it remained within target. Further analysis would be undertaken to identify any potential underlying reasons for these retention figures in the specified areas. Although colleagues were asked to note that whilst a higher rate was indicated for Knowsley COPD they were one of the top rated areas within the recent staff survey results for 2018. It was thought that many leavers were due to staff accepting higher bands at other Trusts and there were never any issues back filling those vacancies.

The Director of Workforce & Service Improvement informed committee members that an in depth review into sickness was going to Operational Board on 29th March 2019 together with turnover, this would then be presented to the People Committee in June 2019.

It was stated that the operating plan for LHCH showed that for this Trust working with a certain level of bank was always going to be included, however as the 2019/20 year approached the Trust would consider whether a move from less agency and more bank could be achieved by increasing recruitment and retention rates. There would be some focus on admin, information and finance, which were the largest areas of agency usage with agency finance staff particularly costly. This issue would be discussed with the corporate division.

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6.2 Key Issues - Workforce Development Group

People Committee members were asked to note that the Workforce Development Group had been reviewing the terms of reference. The date of these meetings had now been organised for the full year ahead and the Terms of Reference had been reviewed and agreed which would help Group members determine the purpose of the group.

It was noted that a number of Groups sat under the Workforce Development Group and these were performing well. The Strategic Education Group had now moved to multi-disciplinary which was working

much better. Discussions were currently underway to determine corporate/support staff representative to attend the meeting.

The Health & Wellbeing Group draft strategy had now been completed and would be shared at the People Committee meeting in June 2019.

The Trust were still awaiting EDS 3 with first stage proposals currently being reviewed, therefore, LHCH would go ahead with the strategy for EDS 2 and colleagues would feedback to the People Committee when more detail were known.

The Policy Group met on the 30th January 2019 and reviewed the Disciplinary, Grievance, Temporary Staffing and Roster policies. Feedback was given and revised drafts would be issued for consultation and discussion.

6.3 Talent Management/Leadership Plan Update

The Leadership Strategy developed in September 2018 and was being implemented. There had been slow attendance at the first cohort of the resistance leadership programme, however, attendance was starting to improve. A Master class had been given by an external coach which 17 clinical and non-clinical staff had attended. Following positive feedback and strong attendance figures, a further resilience session had been booked for June 2019.

Data from the staff survey results, talent management and succession planning would be used to shape future provision of leadership development. A further cohort of the localised Mary Seacole programme was planned, and once evaluated a decision would be made in respect of further cohorts. The Education Team were continually looking for different ways of learning acknowledging that people learn in varying ways. The Trust's focus is not just on current leaders but those members of staff seen as potential leaders.

6.4 Appraisal Update

Following the change over from My Pact Enterprise Learning Management & Appraisal system to OLM in July 2018, a paper appraisal system was utilised for 2018/19. The appraisal window ran from May to August 31st and 92% of staff were recorded as having received an appraisal.

As ESR/OLM had been successfully running from July 2018 and was now established as the LHCH eLearning platform, there was now a need to review the format and process for appraisals for the forthcoming window.

A proposed format for the appraisal, which could be uploaded into ESR and used electronically, had been developed in-house and was included as appendix 1 to the paper. Heads of Departments had been invited to attend focus groups in order to provide feedback on the proposed format. There didn't appear to be any organisation in England currently utilising ESR for appraisals. It was however being developed in Wales, and there

were plans for the team to visit and discuss implementation plans with Welsh colleagues.

People Committee members stated that there needed to be clarity of what objectives individuals would be measured against. As this was going to relate directly to staff members level of pay it was important that the Trust were as clear as they could be. The Trust had to ensure they supported staff in having those potentially difficult conversations, as People Committee members wanted to be assured that staff were ready to have those newly formatted appraisals with staff members.

7. Governance

7.1 Workforce Risks

There were currently eight 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 live risks were shown within appendix 1 of the report, all of which had been reviewed within the last quarter.

A more positive pick up rate for exit interviews was noted with the most recent data relating to this due to form part of the turnover paper going to Operational Board on 29th March 2019.

The accommodation issue was still a fairly significant risk. There were still on-going issues impacting on the move of various departments within the Trust. However, the plan was still to move HR & Finance out of Moroney House in order to develop that into an Education Centre.

There was an organisational change relating to the opening the EP lab to 8pm and the Interventionist lab to 6pm as part of the medicine development plan and the expansion of services. The Medical Director stated that no issues with staff were anticipated as it regulated the hours for employees.

7.2 Annual Committee Evaluation/ToR Review

No issues were reported with the performance of the People Committee.

7.2.1 Review of People Committee Terms of Reference

The proposed changes were accepted by all Committee members.

The Committee would now receive assurance against the delivery of key deliverables of the Trust Retention Plan.

8. Date and Time of Next Meeting

Tuesday 11th June 2019, 12.00 to 2.00pm, Research Meeting Room.