

People Committee

Item 6.1.4.2

Minutes

Date of Meeting: Tuesday 16th May 2017
Time: 13.30 – 16.30
Venue: Conference Room

Present: Mark Jones, Non-Executive Director (Chair)
David Bricknell, Non-Executive Director
Lawrence Cotter, Non-Executive Director

In attendance: Jo Twist, Director of HR
Sue Pemberton, Director of Nursing and Quality
Tony Wilding, Chief Operating Officer
Raph Perry, Medical Director
Mark Jackson, Director of Research and Informatics
Liz Pritchard, Head of Leadership and Organisational Development
Helen Turner, Executive Assistant

1. Welcome and Apologies for absence

No apologies recorded.

2. Declarations of Interests Relating to Agenda Items

None declared.

3. Minutes from Previous Meeting 6th March 2017

Agreed as a true record

4. Action Log

Item 1 – Closed – agenda refers at 9.1
Item 2 – Closed – agenda refers at 8.4
Item 3 – Closed – agenda refers at 9.1
Item 5 – Closed – agenda refers at 5.2
Item 6 – Closed – agenda refers at 5.2
Item 7 – Closed
Item 8 – Closed – the committee clarified the MyPACT funding is not

available for use with OLM

Item 9 – Closed

Item 11 – Closed – presentation to CoG instead of BoD

Item 12,13 & 14 – Clarified with the committee that due to this meeting being brought forward, focus on staff appraisals and staff survey would be at the September meeting following the June Big Conversations, the Divisions have commenced focus on hot spots and initial findings were presented at April Operational Board. The September reports will include

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- Further granular analysis on the staff survey
- Divisional actions plans including hot spots and target work accordingly
- Evidence of change accountability focus from HR to the divisions.

Item 15 – Closed – agenda refers at 8.3

Item 16 – Closed – agenda refers at 9.2

Item 17 – Closed – agenda refers at 9.1

Item 18 – Closed

5. Strategy

5.1 National Workforce Update

The Committee received an update from the Director of HR on the national workforce agenda which due to purdah was lighter than at previous committees, updates reported were:

1. Changes to Tier 2 immigration main impact being increased costs to employers
2. Employers pension levy has risen
3. IR35 implementation is reportedly causing leavers particularly with NHS IT contractors
4. 1% pay increase to all staff from May 2017 backdated to April
5. Reported appetite for summer industrial action from the RCN

The committee noted the update

5.2 Revised People Strategy Framework

The committee received and welcomed the refreshed draft people strategy framework to provide assurance the Trust is aligned with the Carter recommendations and was responding in a timely way to the staff survey. Feedback was requested and given on the objectives and key measures which were aligned to the patient and family experience.

Feedback received included

- The staff experience vision needed refreshing and the updated strategy was an opportunity to do this.
- Include within the strategy - new roles; efficiency and flexibility
- The strategy should include Governors and volunteers

- The brevity of the strategy was welcomed
- Under develop – use ‘Team LHCH’
- More emphasis on Equality and Inclusion
- Confirmed that the strategy would be available to all staff
- Clarity was given on the meaning of ‘attract’ by the ‘reductions in key workforce KPIs’ in that it was talking about turnover in first two years, reduction in case work, sickness therefore bank and agency as we recruit the right staff first time with the roll out of VBR.
- Add under the strategic objectives for ‘develop’; ‘contributing to decision making and work planning’ as per outcomes in the staff survey.

The committee were supportive of the framework and recommended it be presented at the July Board of Directors.

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5.3 Equality and Inclusion Strategy Plan Update

The People Committee received assurance that the Equality and Inclusion agenda was being driven in line with the strategy due to the committed work of the steering group which had received excellent feedback from the external assessors.

The committee were assured that bullying and harassment of groups with protected characteristics was being adequately dealt with; high attendance at the BME engagement event where the bullying and harassment action plan was presented on 16th May was an example of this and the action plan change stage could be moved to a one from a two to reflect this.

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It was confirmed that the disability figures required a data cleanse to ensure that our lower than average compared to the national average figures were correct and the committee asked that the data be produced by team to be assured that there weren't areas of concentration for disability/protected characteristics.

Once the correct data was received a plan will be developed in line with the introduction of WDES to understand the specific issues/results and a similar approach to WRES will be required to engage the workforce and develop meaningful actions.

Further discussion was had on the Trust being disability ready and the committee received assurance that it was a two tick employer and that the Trust had been adequately assessed to ensure reasonable adjustment and is included in the estates strategy

5.4 People Committee Dashboard Performance

Following consultation at the Board of Directors, People Committee received and approved the performance indicators and metrics assigned to red, amber and green ratings to the People Committee dashboard subject to the

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inclusion of two additional metrics:

- Nurse turnover
- Nurse leavers broken down into age groups

The committee had no further questions or comments

6. Collective Leadership

6. Dashboard

6.1 Workforce Strategic

People Committee noted and discussed the strategic dashboard and sought assurance on the increased use of bank and agency and the decline in the friends and family Q4 survey as a place to work, which would be discussed at item 10.1.

Bank and Agency - the committee requested focus on and action plans for non-clinical areas to be presented at the September meeting to reduce high agency spend. The Workforce Utilisation Group would increase its focus on all areas of bank and agency use.

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The committee also requested that 2017/18 bank and agency trajectories were recirculated.

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Further assurance was sought and received on the increase in bank use for nurses and that the resource and profile was adequate for the Trust's needs with rostering continuing to be a priority area for LHCH matrons. The committee requested continued scrutiny within this area and that the bank would be further enhanced by staff being recruited who were external to LHCH.

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The committee discussed the Carter requirement of an NW LDS 'bank', whilst recognising the advantages of being able to draw on a wider pool to alleviate staff shortages, it was also highlighted the risks associated with this such as the dilution of specialised staff and improvement work in areas such as critical care, tissue viability and nurse bank and agency spend.

The committee also received further assurance that the processing of invoices in a timelier manner would be addressed to mitigate the spike in spend

6.2 Workforce Dashboard

People Committee noted and discussed the workforce dashboard which was reviewed in tandem with item 7.1 vacancy levels and recruitment plan update.

It was confirmed that feedback on the new Occupational Health provider is excellent and that the pre-employment and management referral trend is improving

Assurance was received on both the vacancy authorisation red indicator which had been set at an unrealistic target of one day to authorise and would be reset to two days and the red indicator for shortlisting which was also red and would be resolved through offering more support to managers.

Further assurance was given on the payroll key indicators which had been updated to reflect the agreed payroll KPI; however work is on-going to develop more meaningful KPIs on the pension indicators.

The committee congratulated the team on achieving for the first time a green indicator on time to hire.

7. Resourcing

7.1 Vacancy Levels and Recruitment Plan Update

The committee received and discussed the vacancy levels and recruitment plans in line with item 11.1 workforce risks.

The committee noted that Cath Lab vacancies were hard to fill due its specialist nature; nurses in general preferred to work in acute hospitals to experience a more varied workload for example trauma, varied operations etc and were assured that other initiatives to attract Cath Lab staff were being considered such as financial incentives for referring friends or development of home grown nurses but this would require funding for training.

Recruitment of doctors was also discussed and the Medical Director gave a comprehensive account of the issues:

- Consultant anaesthetists – hard to recruit to area but two have recently been appointed with another in train. No other issues with recruiting consultants generally.
- Recruitment of middle grade anaesthetists in critical care was a chronic problem however funding has been successful to develop a tier of ANPs to support the anaesthetic team; development will take two years and three ANPs have been identified to start training in September and a mixture of 12 trained and qualified ANPs to be recruited over the next 12 – 18 months.
- Registrar surgical staff turnover has been reported as dissatisfaction with training and measures are in place to address the issues through appointment of Consultant Surgeon of the Week (CSOW) which would support more training time for juniors and ANPs; the surgical training issues were also evident with the departure of four ANPs from the surgical division, more support would be given to future ANPs and a change in divisional surgical leadership was also noted that would further address the retention issues in the division. The committee did note that there were no issues with ANP retention in cardiology or thoracic.

7.2 Bank and Agency Trust wide Usage

Item 6.1 refers

The committee noted and were assured that the high levels of sickness in Cath Labs were being monitored and addressed on a case by case basis, however over 60% of Cath Lab staff were reporting various conditions which they were being supported with but there was an impact on the team and service

The committee also noted that it was more cost effective to employ bank staff than pay overtime with the exception of pay on Sundays.

7.3 Organisational Change Register

The committee noted and commented that the scale of organisational change across the Trust was an area of concern but were assured that staff were supported and that reviews of the recent change programmes in ACS and radiology would be undertaken at three and six months post implementation. The recent three month review of ACS whilst positive has allowed the Trust to understand future workforce challenges such as the reviewing of reasonable adjustments.

7.4 Employee Relations Annual Report

The committee noted and commented that the low levels of employee relation issues were commendable in an organisation of the Trust's size and noted that this was due to up skilling of managers and the positive influence of HR business partners.

7.5 Consultant Job Planning Update

The committee noted that the annual report was the first ever produced at the Trust due to the implementation of the Allocate software tool and welcomed the benefits that include:

- Monitoring of over working/under working
- Accurate remuneration
- Defining what the consultants do
- Signing up to the European Working Time Directive of 48 hours
- Data on annual leave and private practice
- Setting clear expectations
- Tracking efficiency gains

The committee asked for the MIAA report on job planning to be circulated once received.

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Leadership and OD

8.1 Leadership, Talent Management and Management Development Review Update

The committee welcomed the Head of Leadership and Organisational Development to give an update on leadership, talent management and management development. The paper was noted as read and that the leadership programme for the triumvirates had worked well and thus focus on other parts of the organisation was now essential particularly clinical leads and bands 4-7. Assurance was given that the staffing difficulties referred to in the paper had now been fully resolved and that the clinical lead low uptake was being addressed through a revised approach and that clinical leads were now clear that leadership development was not optional.

The committee queried and noted that the clinical leadership curriculum mentioned in the report came from the Kings Fund and NHS Leadership Academy as well as consultation with clinical leads, the committee were further assured that the talent management process was a robust model recommended by the NHS Leadership Academy.

Assurance was requested on

- leadership training take up
- enrolment
- attendance

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A full review of leadership training activity would be submitted to the December committee with a progress report in September.

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The committee whilst fully supportive of and acknowledging the need of leadership training throughout the organisation discussed the demands on staff time and were assured that this was being taken into consideration for example leadership training for nurses was concentrated through sessions such as Band 6 and Band 7 leadership days.

The committee at its September meeting requested a summary of the talent management process with a view to being assured that:

- Talent Management is being applied across all groups within the Trust.
- That all key roles have suitable “ready now” and “ready later” succession candidates and where not action plans are being developed.

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8.2 Appraisal Policy and Divisional Action Planning

People committee noted the report as read and asked for assurance on the quality and evaluation of appraisals at its next meeting. Assurance was given that appraisal training; which included bespoke sessions, attendance at team away days, 121s and attendance at team briefs/huddles was being

offered to staff but the uptake had been low.

It was also requested that appraisers were informed of the intention to evaluate the quality of appraisals and that a progress report on appraisals be submitted to the September meeting with a full analysis at the December meeting.

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8.3 Staff Engagement Update

The committee noted the staff engagement cycle, which was being further worked on by the communications team and would be available to all staff imminently. The 'Big Conversations' led by the Chief Executive and aligned to the staff survey key findings begin in June but the committee asked for the divisional responses to the staff survey to be shared at its September meeting to gain assurance that the Trust was responding adequately to the findings.

The committee noted that the division's response to the staff survey results were currently being 'worked up' in collaboration with their HR business partner and would be monitored through Operational Board.

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8.4 Trainee Doctor Action Plan and Review Update

The committee noted the report as read and that the action plan was complete but that the removal of enhanced monitoring will depend upon the GMC survey response which has just closed.

The committee had no further questions or comments.

9. Education and Development

9.1 Learning and Development Action Plan

The committee noted the report as read and were assured that although much work had been done to establish a central record for clinical and mandatory training the team were still not in a position to present all the L&D data. The L&D team are working hard to 'unpick' the existing information needed to achieve this.

Assurance was received that the Head of Education and Learning was working closely with the End of Life team to record the appropriate compliance for EoL training and that the decrease in mentorship was due to a staff time/workload issue.

Progress was also noted against the move to OLM from MyPACT which now has an established a project team and project plan, but additional project support will be required. The project aims for conclusion in May 2018.

9.2 Learning Needs Analysis

The committee noted the report as read and were assured that despite non-

attendance at the three focus group sessions the education team were pursuing the data collection for the LNA by one to one sessions with managers.

The lack of CPD applied funding was also noted and that it was now on the Trust risk register. To mitigate the reduction in funding, work was on-going with finance to identify funds to review the Edge Hill contract which delivered training at a marginal cost of its actual value.

The committee noted their concerns on the quality of development training and available staff time.

10. Wellbeing

10.1 Family and Friends Q4 Findings

The committee raised concerns at the decline in staff satisfaction as a place to work in the Q4 staff survey but recognised that the response rate was only 16% compared with the annual staff survey response which was 69%. The Leadership and OD team, working with the communications team are considering how to increase the response rate for the survey.

10.2 Staff Wellbeing Group Annual Update

The committee commended the amount of wellbeing activity available to staff and had no further comments or questions.

10.3 FTSU Guardian Policy Update

The committee heard that the National FTSU guardian, Dr Henrietta Hughes had visited the Trust on 9 May 2017 and had written to Jane to commend the Trust on all the work it had done on fostering an open culture.

The committee had no further comments or questions.

11. Governance

11.1 Workforce Risks

Agenda item 7.1 refers

11.2 MIAA Roster Review

The committee noted the report as read and commented that the People Committee's role was one of assurance and not authorisation and as such the sentence under the heading 'Production of Roster Timetable' should read 'there is an E- Rostering policy in place that was issued in June 2016 following authorisation by the Board on the recommendation of the People Committee in January 2016'.

The committee also asked that the lock down of rosters for payroll be added to the committee December 2017 review in addition to the MIAA recommendations.

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11.3 External Contracts Monitoring

The committee noted the report and felt that the monitoring of external contracts should be reported through IPC and the Chair committed to follow up with the IPC Chair.

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11.4 Amended People Committee Business Cycle

The committee noted the cycle and asked that the talent management review be moved to September 2017.

Date of Next Meeting

Tuesday 5 September 2017, 1pm – 4pm, Boardroom