

minutes

E-Meeting of the People Committee Meeting

Minutes of People Committee Meeting held on Monday 5th June 2023

Present:

Margaret Carney (MC) (Chair)
Nicholas Brooks (NB)
Peter Cook (PC)
Rachael McDonald (RMc)
Karen Nightingall (KN)
Sue Pemberton (SP)
Justin Ratnasingham (JR)
Louise Robson (LR)
Beth Williams-Lalley (BW-L)
Clare Quarterman (CQ)

Non-Executive Director
Non-Executive Director
Recruitment and Resourcing Lead
Head of Health & Wellbeing, Inclusion & Culture
Chief People Officer
Director of Nursing
Divisional Medical Director, Clinical Services
Non-Executive Director
HR & OD Manager
Director of Medical Education

In Attendance:

Megan Underwood (MU)

Senior Executive Assistant

Apologies for Absence:

Justine Brislen (JB)
Raph Perry (RP)

Clinical and Medical Education Lead
Deputy CEO and Medical Director

Minutes typed by:

Ruth Gaunt (RG) (Minutes)

Senior Executive Assistant

The Chair, Margaret Carney (MC) welcomed all to the meeting.

1. Apologies for absence

All meeting participants attended the Microsoft Teams meeting. Apologies were noted as above.

2. Declarations of Interest

No participants declared any interests.

3. Minutes of meeting held on 7th March 2023

The minutes were approved as a true and accurate record of the meeting.

Action

3.1 Matters Arising

NB questioned whether the theatres open day was successful in terms of recruitment. Assurance was provided that 7-8 people attended from which 2 people were recruited. 3 students are due to start in September following the previous open day once qualifications are received. Internal theatres open day is also due to take place plus a business plan in the attempt to bring in more ODP apprenticeships.

4. Action Log

Action 1 - Feedback to People Committee 'Be civil, be kind' and the use of the civility charter for current consultant workforce and doctors highlighting any specific actions and impact. Session for the theatre consultant, nursing and perfusion workforce being planned for May 17th during audit day. Update to be provided following the event.

Update – Theatres Audit Day took place on 17th May which included a combination of sessions delivered by Afterthought and a session on behaviours and culture. The majority of verbal feedback received has been positive around the quality of the sessions. The OD team are due to carry out social style training to improve communication. BW-L provided assurance that all staff across the Trust should be aware of 'Be civil, be kind', however sessions will continue. A bespoke session took place in Theatres and JR requested a session be provided at the Radiology audit day.

LR stated that during Cath labs walkabout, assurance was provided that improvements had been seen and it was recognised that ongoing focus is required.

Outcome – Action complete.

Action 2 - Update on the Trust's oversight of clinical coders. RMc to provide an update at the next meeting.

Outcome – Carried forward.

Action 3 - CQ to meet with James Greenwood to suggest a human factors session take place at a future audit day.

Update – To be discussed as agenda item.

Outcome – Action complete.

Action 4 - Following trainee pulse survey and culture session in May, provide an update and detailed action plan relating to Cardiothoracic Surgery.

Update – To be discussed as agenda item.

Outcome – Action complete.

5. Strategy

5.1 National workforce update and Unions (Partnership/LNC)

KN provided the committee with a verbal update which informed colleagues of 'Scaling of people services'. NHS Employers will visit 5-6 locations around the country to discuss scaling up people services for which organisations may collaborate within ICS areas to gain synergy/efficiency in work taking place. A strategy document has been produced around project managing and bringing projects together. The direction of travel is positive in terms of improving efficiency and productivity. Principles of the strategy are clear, however operationally there will be challenges due to financial constraints. Toolkits are being built for joined up work for echo and diagnostics.

The Chief People Officer for the ICB in Cheshire and Mersey is gathering information about work taking place in the region from a collaborative perspective. There are a number of significant projects being taken forward and KN will provide updates to committee around developments moving forward.

KN

LR stated that different parts of the country identify workforce issues as their biggest challenge, however very few are doing more than tactical and coordination work to gain traction.

KN provided an update to the committee regarding ongoing industrial action. The BMA doctors strike is due to take place on 14th -17th June, Consultants ballots are ongoing. HCPSA have provided notification of ballot. Radiographers and nursing staff are due to ballot.

KN stated that there is no way of checking which staff are members of a union, however the Trust is informed of the numbers at the point of strike, albeit this may be limited data and the Trust must plan for this. JR advised that should the consultants strike go ahead; it will have a bigger impact than the junior doctor's strike. The next junior doctors strike will take place at a time when several consultants are attending conferences and meetings, therefore the impact on activity will be more than the previous strike.

KN informed the committee that staff have been provided with an option to split the agreed pay award over several months to assist with budget planning.

KN advised that the ongoing tribunal case is almost complete, however the Trust will pursue costs.

KN stated that collaborations have taken place with Broadgreen for car parking and collaborations will include the canteen and food facilities across the site.

5.2 Equality and Inclusion Strategy Update including EDIB steering group

The paper was circulated prior to the meeting and was noted as read. The paper was considered by the Board on 2nd June. The paper provides a summary of EDI activity over the last 12 months as outlined in the EDIB action plan and provides early insight into WRES/WDES performance based on the 2022 staff survey indicators.

The paper is intended to demonstrate that good progress has been made against delivery of the EDIB strategy and the team have complied with national requirements and public sector duty under the Equality Act.

As the EDIB national agenda expands rapidly, the development of a robust action plan for 23-24 will be key in helping to drive the agenda forward and engagement with colleagues and patients from protected groups will be essential to this work. The monitoring and review of equality related activities for both patients and workforce is undertaken through the Trust's established EDIB Steering Group and assurance on activity and progress against the EDIB action plan will continue to be provided to the People Committee on a quarterly basis.

Good evidence has been provided in terms of the strategy and focus should continue around continuous improvement. WRES/WDES quality monitor report is complete and will be discussed at the EDIB meeting in order to be published in line with public sector duties.

Full WRES/WDES analysis report to be presented to Board in June. Focus for next year will include a 'Think Tank' session and more focus on engagement with minority groups, disabled workforce, and the armed forces community.

NB highlighted that the Trust's excellent results should not be overshadowed by the fact that there are residual issues that require improvement.

RMc explained that the accelerator programme was piloted with international nursing colleagues and will be spread across the organisation into other areas going forward. Learning from the accelerator programme will be taken to improve the disparity in the disabled workforce, those with health conditions and other protected staff groups.

LR asked if there will be external input into the 'Think Tank'. RMc confirmed that this will be considered however bespoke sessions are already provided by external providers.

BW-L provided assurance around action taken regarding patients and families bullying towards staff. 'Its not ok' was launched and includes an empowerment pyramid explaining the power of language to diffuse situations and at what point management support is required. 'Afta thought' drama-based work have provided scenarios around mental health, disabilities and people who have been irate. SP advised that groups of visiting relatives can be challenging and how those situations are managed and staff are supported. Focus is required in providing managers and ward team empowerment to have difficult conversations and manage any conflict.

Update report to presented in July to incorporate equal opportunities, training and development around difficult conversations.

5.3 Deputy HR/L&D Dir - People Delivery Group

RMc provided a verbal update and informed the committee that good engagement was made at the People Delivery Group meeting in May, predominantly focused on the people strategy and the launch of appraisals. BP's presented draft staff survey action plans. The divisional workforce planning template was socialised with good feedback received. PC presented an update in relation to retention, which included exit interview information and trends. BW-L provided an informative update regarding the financial wellbeing survey.

Discussion took place around equity and the centralisation of funding for education. JB is in the process of developing a policy in relation to this. Good progress on development of policies and procedures was made with 6 policies ratified at the meeting.

5.4 Annual workforce plan

RMc provided a verbal update and informed the committee that the evidence-based workforce plan was submitted, integrated with finance activity and performance plans. In terms of overarching assumptions and approach, ESR data was used when submitting plans which was mapped against finance data from February 2022 to achieve a baseline. No significant changes in the workforce were profiled within 23-24 establishment and the plan submitted did not include business cases for investments as they had not been through the Ops board approval process.

There are 21 business cases for investments that have now been approved across the organisation to support services. Increase in nursing was not included as will this revert to baseline by April 2024. There was an increase in established profile for pharmacy and therapies to support 7-day working and the transition of Trainee Nurse Associates was profiled.

Reduction in the workforce was included, to reflect the changes in the Innovation Agency(hosted services) having been through the MARS process with a reduction of 16 posts. Targeted healthy lung was excluded when the plan was submitted. A reduction of registered nurses was based on the recruitment to nursing posts and profiled reduction in agency, at an average over the last two years.

BP's are working on divisional workforce plan templates, to be finalised in September and presented to the People Committee identifying local level plans.

5.5 Quarterly HR and L&D Assurance Report

The purpose of the paper was to provide assurance to the People Committee on the progress of key HR, Learning & Development activities and initiatives, and the mechanisms in place to

measure impact on delivery. The report was circulated prior to the meeting and was noted as read.

RMc proposed a new format for the next committee to prevent duplication and focus on compliance and assurance. RMc will present at the next meeting.

RMc

RMc highlighted key messages around the ER activity. Several complex cases have recently been concluded. In recent weeks there have been an increase in informal action and potentially disciplinary action, to include complex and nuanced cases. Update to be provided at the next meeting.

RMc

SP advised that the Trust currently have 3 nurse consultant roles in post with a view for other roles to be developed where consultant nurses would offer more value. The tissue viability nurse consultant leads a regional meeting with other tissue viability nurses, she also provides advice to other Trusts. Update to be provided at a future meeting.

LR highlighted the great initiatives around leadership development and asked are they structured around MDT or individual disciplines. RMc confirmed that the Trust have bespoke leadership programs to include the influence and impact program and also developing aspirant clinical leaders program. The leadership journey offer is available for all to access based on requirements in appraisals.

5.6 Progress against People Strategy, Recruitment & Retention Strategy, L&D Strategy and Culture & Wellbeing framework/strategy)

The paper was circulated prior to the meeting and was noted as read. BW-L highlighted key issues of note.

Financial Wellbeing Survey

The staff survey provided useful insight highlighting that financial struggles are not limited to lower banded employees. Over 80% of the workforce are living pay day to pay day. Almost 70% would not have £1000 to cover an emergency. The Trust have collaborated with the local CAB and Resilience Hub and debt charities have visited the Trust to offer advice. Workshops have been hosted online and recorded so available on replay. As the pay increase has now been agreed there may be improved stats should a further survey take place.

Health & Wellbeing Events

Several health and wellbeing events have taken place to include stress awareness month, mental health burnout, breathwork, how to regulate emotions and pet therapy dogs. The 'Live well work well' event is due to take place on Tuesday in collaboration with LUHFT, Broadgreen and Mersey Care with a holistic approach to wellbeing around mental health, physical health and financial wellbeing.

BW-L highlighted concerns around wellbeing being one of the key priorities however there are cuts within this area in the ICB. A member of the LHCH psychology team is now fully dedicated to local interventions to include hot and cold debriefs for staff who experience trauma or PTSD. They will delivery 'train the trainer' approach training on how to provide support in real-time moments

High pressured clinical environments demonstrate the biggest areas of incivility and kindness, therefore ongoing sessions will take place.

Recruitment and Retention

SP highlighted improved figures in leavers. Having a dedicated nurse supported by HR, overseeing recruitment and retention has made a big impact. SP suggested other Trusts could learn from the work at LHCH.

5.7 Staff Survey Results

Staff survey results were circulated prior to the meeting and notes as read. KN highlighted key areas of note. LHCH is number one for a place to work, number one for staff engagement and in the top 3 for care as our top priority and place to treat. NHS Employers will arrange for 25 Trusts to hear LHCH actions to achieve high scores.

5.8 Staff Survey Divisional Action Plans

Divisional action plans were presented at Ops Board with assurance provided around interactions and engagement with divisional teams. The corporate action plan was also presented at Ops board, this includes a thematic plan based upon themes across all corporate areas.

MC asked where specific actions for crosscutting issues would be picked up. RMc advised that improvements have been made around appraisals which address some of those issues.

5.9 Workforce Quality Report

The workforce quality report was circulated prior to the meeting for information. The report includes a lookback of the last 12 months. The committee approved the report which will be submitted as part of the quality indicators, well lead annual report.

6. Dashboards

6.1 Workforce KPI Dashboard

Workforce headcount decreased in April with a significant reduction seen in the vacancy rate. Sickness reporting at 3.91% in April 23 which is a 1.02% in month decrease. Reductions seen across all divisions in April with Medicine reporting under target at 3.27%. Stress and Anxiety remains the highest reason for absence, however there was a 28% reduction in the month. Increase seen in Gastrointestinal problems at 12.59%. Voluntary turnover is showing a downward trend at 11.62%. Retention meetings with managers whose department have higher than average turnover and “stay conversations” are in place. Quarterly leaver and exit interview reports presented at PDG – reports replicated at department level. Reduction seen in bank and agency spend. Correlation with lower levels of sickness, reduced levels of annual leave and vacancy rate. Roster perform meeting being co-ordinated to support roster efficiently.

Radiology agency stopped May. Main usage remains Psychology, Theatre and SICU. Mandatory Training increase by 0.82% in April raising compliance to 94.2%. Increase seen across all divisions. Action Plan required for all areas/modules reporting under 95%.

Recruitment – 152 new starters have been processed since between Jan and April and corporate induction has been improved to support the onboarding experience and to increase capacity. There are currently 21 positions being advertised, with 41 vacancies at either the shortlisting or interview stages. There are 52 undergoing pre-employment checks with 25 cleared to start. All international nurses have now arrived at the Trust, giving a total of 128 international nurses being recruited since 2021. The final OSCE exams will take place in June 2023.

Time to hire is showing a downward trend over the past 2 months. ER activity has increased and is varied in complexity - good progress has been made in progressing and closing cases.

Workforce KPI's to be converted to the SOF format at a future meeting.

RMc

7. Governance

7.1 Board Assurance Framework (BAF)

The committee received the board assurance framework and agreed the framework is reported accurately. The main strategic risks remain unchanged. Narrative in terms of actions have been updated to mitigate risks.

7.2 Terms of Reference Annual Review

The committee approved the revised terms of reference.

7.3 Director of Medical Education update

CQ presented the director of medical education update and highlighted key areas of note. Action plans against the results of both the 2022 GMC national training survey and issues raised by the January 2023 LHCH local training survey are now largely complete. Currently awaiting the results of the recently closed 2023 GMC national training survey and in the interim a further LHCH local training survey will be undertaken in July 2023.

Main issues and action plans are included in the report and the Trust is making progress against all points. Action plans were based on results of 2022 GMC national training survey. The Trust have updated those plans by doing local surveys, rapidly identifying issues before they reach the GMC survey. Feedback was received from IMT doctors in critical care and within a couple of weeks, they had noticed a positive change of their experience of training within that area.

At the last people committee, discussion took place around the plan to carry out a survey in April in anticipation of the survey opening in May. However, shortly after, an email was received from the GMC to say the survey was opening in March and closed in May. As a result, the local survey was not run as it was felt that focus was required on the GMC survey. Based on the hard work of team and education specialty tutors, 92% of trainees completed the survey.

54.9% of the trainers completed the survey. Concerns were raised around the value that was placed on training by the trainers however CQ has recently completed a review of all educational roles that consultants hold within the hospital, and the commitment to education is huge. Results of the GMC survey are expected around August 2023, however CQ has received notification from the GMC that LHCH had no free text comments regarding bullying or patient safety. CQ will present formal results once received along with action plans. A plan is in place to resume local 3-monthly surveys going forward from July.

CQ highlighted support to education supervisors as an area of priority. In order to provide high quality educational experience, high quality support to trainers is required. CQ has completed a review of recognition of time allocated within job plans and opportunities for educational CPD. Focus will be required around high-quality educational appraisals and how this can be supported within LHCH.

Another area of key focus will take place regarding plans to develop simulation within the Trust, with a two-pronged approach to include the potential development of a simulation center which will require significant fundraising to support and investment in equipment, in the interim establishment of a core simulation faculty to support delivery of simulation-based training improving links across clinical teams to develop cross-specialty training in clinical scenarios and human factors. By September there will be a core faculty and a plan to move forward and CQ will provide an update to the committee.

Areas of focus to improve experiences of trainees in Cardiothoracic surgery include, induction, clinical and educational supervision, feedback and completion of assessments, workload and access to relevant training opportunities, teaching handover – adequacy and educational value, raising concerns and concerns being acted upon, enjoyment of placement and recommendation to other trainees.

CQ

NB noted that communication has been received from the British Cardiovascular Society that due to the level of concern regarding bullying of trainee cardiologists, a new initiative is being set up to address it. NB therefore highlighted the positive result that no adverse comments being made at LHCH. CQ advised that realization is being made around the importance of the way trainees are treated and how they train. If concerns are raised, they will be acted upon.

The committee commended CQ in terms of leadership and the importance that has being placed on improvements.

7.4 People Delivery Group Approved Minutes:

***People Delivery Group minutes, 7th February 2023**

For information only.

8. Evaluation of Meeting

The committee agreed that the meeting had good focus on key areas of concern. Reports provided the correct level of assurance with close alignment to risks. The assurance committee should maintain its focus on key risks.

9. Date and Time of Next Meeting:

Tuesday 5th September 2023 at 10am, Microsoft Teams.