

## Board of Directors (in Public) Item 6.1.2a

**Subject:** People Committee BAF Key Issues Report  
**Date of Meeting:** 27<sup>th</sup> September 2023  
**Prepared by:** Karen Nightingall, Chief People Officer  
**Presented by:** Margaret Carney, Chair of People Committee  
**Meeting Held:** 5<sup>th</sup> September 2023 (E-Meeting)

This report sets out the key assurances, risks and actions from the recent People Committee meeting. Areas for escalation to the Board of Directors are included below as required.

Agenda Item	Lead Exec	Assurance Received	New/ Emerging Risks	Actions/Comments
5. Dashboard - SOF format/workforce KPIs	KN	Agreement to move to the Strategic Oversight Framework (SOF) format.	-	MC to meet with relevant leads to refine SOF metrics.
6.1 National workforce update and Unions (Partnership/LNC)	KN	Assurance provided around the Trusts preparedness of the impending industrial action along with challenges.  Update provided around 'Scaling of people services'.  15-year workforce plan has been launched.	Industrial action risk continues to be reviewed.  Cheshire and Mersey have been slow to respond and form collaboration.  -	Divisions continue to work on plans. It is hoped that action from the government will take place before planned strikes.  A meeting is scheduled with the PCO of the ICB and HR Directors across Cheshire and Mersey to discuss further.  LHCH to review strategies to ensure this reflects the workforce plan.
6.2 EDIB improvement plan and Anti Racist framework	KN	The development of a robust action plan for 23-24 will drive the agenda forward and engagement with colleagues from protected groups will be intrinsic to this work.	-	Further work required around the anti-racism framework in order to move into silver status followed by gold status.

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6.3 People Delivery Group - update	KN	Agreement to change the policy development governance cycle, ratification of policies will take place at the monthly policy group.	-	-
6.4 Quarterly HR and L&D Assurance Report (progress strategies)	KN	<p>Mandatory training has steadily improved in compliance figures in the past quarter.</p> <p>Further Professional Nurse Advocates (PNA) places now available and currently recruiting.</p> <p>Preceptorship Quality Mark application successful. Quality mark gold standard received with a request from NSHE for LHCH to support other organisations with applications.</p>	Focus is required around bank staff mandatory training which has been low at around 60%.	Further discussion will take place at the Council of Governors meeting and Gold command.
6.5 Staff Survey– You Said; We Listened and Divisional Action Plans	KN	<p>The paper presented the clinical divisional action plans. The surgery division noted the highest deteriorations in scores.</p> <p>A response rate of 8.7% was received for the Pulse survey. Around 70% of staff reported feeling happy when completing the survey.</p> <p>Appraisal form enhanced in terms of talent management and wellbeing sections with strengthened processes.</p>	-	<p>Surgery action plan to be presented to the committee when appropriate.</p> <p>Response rate should be improved upon going forward.</p>

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6.6 Director of Medical Education Update / GMC Survey	RP	<p>92.2% of eligible doctors at LHCH completed the survey, an improvement upon previous years. 54.9% of trainers completed the GMC Trainer survey.</p> <p>Significant improvement in scores for cardiothoracic surgical training reflecting engagement of the education leads.</p>	-	Action plans were developed and put in place following the 2022 GMC survey report and, in many cases, the positive impact has been demonstrated. New action plans have been developed in response to the most recent results and progress against them will be reviewed regularly and tested with an ongoing program of internal surveys.
6.7 Culture & Wellbeing strategy – for approval	KN	LHCH aims to not only enhance employee satisfaction and retention but also bolster its competitive advantage, talent capabilities, and long-term sustainability.	-	'Live well, work well' events continue to grow. A clear action plan will be in place to evolve events moving forward.
6.9 Safer staffing annual report	SP	All areas are compliant with safe staffing in line with the set criteria and guidance for each area.	-	
7.1 Board Assurance Framework (BAF)	KN	The committee received the board assurance framework and agreed the framework is reported accurately. The main strategic risks remain unchanged.	-	BAF 4, 5 and 6 have been combined into one board assurance risk.