

## E-Meeting of the People Committee Meeting

## minutes

### Minutes of People Committee Meeting held on Monday 2<sup>nd</sup> December 2024

**Present:**

Margaret Carney (MC) (Chair)  
Justine Brislen (JB)  
Nicholas Brooks (NB)  
Peter Cook (PC)  
Rachael McDonald (RMc)  
Jane Royds (JR)  
Joan Mathews (JM)  
Claire Quarterman (CQ)

Non-Executive Director  
Clinical and Medical Education Lead  
Non-Executive Director  
Recruitment and Resourcing Lead  
Deputy Chief People Officer  
Chief People Officer  
Director of Nursing & Quality  
Director of Medical Education

**In attendance:**

Ian Ferguson (IF)

Public Governor - Merseyside

**Apologies for Absence:**

Claudette Elliott (CE)  
Manoj Kuduvalli (MK)  
John Doyle (JD)

Non-Executive Director  
Medical Director  
Non-Executive Director

**Minutes typed by:**

Natalie Hunter (NH) (Minutes)

Senior Executive Assistant

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

**1. Apologies for absence/Matters arising**

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

**2. Declarations of Interest**

There were no declarations of interest.

**3. Minutes of meeting held on 9<sup>th</sup> September 2024**

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

**4. Action Log**

Action 1 - MC asked for a learning report relating to InPhase and other sources including themes and data to be brought back in December.

Update – This was discussed within the agenda. This action was closed.

**5. Dashboard - SOF format/workforce KPIs**

The appraisal window closed at the end of September. The Trust, as of 11<sup>th</sup> November, are compliant at 91.8% with a target of 90%. Mandatory training compliance was scoring 90.4% with a

**Action**

target of 95%. During September, a safeguarding training module was uploaded to profiles which caused a drop in compliance, but this should increase in the coming months.

For turnover, the Trust is recording 10.4% with a target of 10%. For overall sickness, the Trust rate is 5.09% which is an increase. Long term sickness is 2.78% and short-term sickness 2.31%.

The staff survey is yet to be confirmed at 60% or just above. JR thanked the HR team for their support with encouraging staff to complete the staff survey.

MC thanked JR for the update.

MC noted the deep dive within sickness and questioned any learning from this. RMc discussed reviewing all sickness cases within the deep dive which highlighted some gaps such as return to work interviews. Some managers felt there was a lack in confidence in applying the policy therefore further training will be provided. There will be a toolkit alongside the new policy which will be launched in January 2025. JR noted the next deep dive will be in January/early February 2025.

MC raised that the SOF states both long term sickness and short-term sickness are under target but overall are scoring over target. RMc discussed the way this is reported within the SOF suggests the presenting of this data can cause confusion. RMc agreed to work with the Data and Analytics team to address the presentation of the data within the SOF.

**RMc**

## **6. Strategy**

### **6.1 Regional/ National workforce update**

JR provided an update on the regional and national workforce. JD discussed the potential for pay negotiations to be raised within 2025 for nurses and other groups. The government are planning to introduce a new employment rights bill over the next couple of years, but this will provide greater employment rights, flexible working options and an end to zero hours contracts.

Sexual safety is a national priority and the NHS framework has been published. Local sub-groups have been set up to support training, safeguarding, education and policy development.

The Liverpool Acute and Adult Specialist Providers (LAASP) road map has been published and the Trust are working through governance arrangements. All information will be shared with staff as well as listening groups being set up for staff to raise any questions and to offer support.

There are a number of retirements within local Trusts such as CEOs and other executives as well as collaborations of Trusts with shared executives.

Regionally, work has been ongoing to review occupational health provision as well as payroll to look into savings as a system.

MC thanked JR for the updates provided.

NB questioned occupational health being rationalised. JR noted that as a system there are a number of different providers used by each Trust so there may be some economies of scale and savings made and this will not affect accessibility for staff.

MC noted a number of Executive changes for Trusts across the region and questioned how the changes will be managed. JR advised that there will be an increased number of shared roles.

MC questioned how the Board of Directors can receive assurance regarding sexual safety and safeguarding. RMc discussed setting up a working group to work together with the HR team as well as the Deputy Director of Nursing and the Safeguarding team to create an action plan to

provide assurance. RMc agreed to bring back a report on sexual safety and safeguarding with key actions from the working group.

RMc

## **6.2 EDIB Strategy Update inc Steering Group**

PC shared an update on the EDIB Strategy. PC discussed there has been a report of anti-racism via the QR code by a member of the public as well as a member of staff. Both issues are being looked into by the HR Business team.

Staff networks have been successful with good attendance at each network. Policies will be created by the networks which will be shared with the Equality Diversity Inclusion and Belonging steering group.

PC shared a presentation on EDIB.

The Trust were awarded the Navajo Charter Mark on 7<sup>th</sup> October 2024. The Charter Mark is an equality mark supported by the LGBTIQA+ Community networks across Merseyside. The Trust have recently achieved a gold award for Armed Forces Employers. The anti-racism campaign has been relaunched alongside the commitment statement. Banners are displayed around the Trust with QR codes to raise any racism concerns.

There are multiple staff networks running within the Trust including menopause café, LGBT+ and international staff network. All networks are well attended and there are a number of networks in development such as the disability network, race equality network and women's network.

Black history month was celebrated within October with this year's theme of reclaiming narratives. Claudette Elliot, Non-Executive Director, recorded a short message to help support the message alongside joint messages from the CEO and Chair.

Menopause awareness month took place within October with sessions being well attended and additional sessions being provided.

Diwali celebrations took place on 1<sup>st</sup> November which was supported and funded by HR but the international staff ran the event which included dancing, music, food and stories.

MC thanked PC for the updates provided.

NB questioned how the networks are run and how the impact is assessed. PC discussed the networks are face to face meetings with some of the networks now taking minutes and producing an action log. Terms of reference will be created for each network. HR have supported the networks so far but the meetings will run autonomously with event ideas coming from the networks themselves.

RMc discussed inviting the staff network chairs and members to discuss their ideas and upcoming events within the networks with HR. An Aftathought training session is being produced around anti-racism with lived experiences and findings from the "Too Hot to Handle Report" which governors and NEDs may wish to attend. Further details will be communicated in the new year.

## **6.3 People Delivery Group – update**

RMc provided an update on People Delivery Group. The engagement continues to be high with good conversations taking place within each meeting. The meeting is split into three areas with strategy, HR and governance discussions and improved engagement.

There was a presentation of sickness deep dive which was helpful to support staff and to agree actions for the Divisions. There is a focus on sexual safety as well as safeguarding.

MC thanked RMc for the update provided.

#### **6.4 Quarterly HR and L&D Assurance Report**

The report provided the Committee with assurance on the quarterly HR and L&D assurance report.

Fit testing compliance remains high in most areas and there is a plan in place to address the low compliance in other areas. Fit testing within theatres is 47.41%. Mandatory training compliance scored 90.04% which is a decrease on previous months due to the addition of a e-learning module being added to staff profiles. The compliance is expected to improve by the end of December.

As of 11<sup>th</sup> November 2024, 91.8% of colleagues recorded complete appraisals with 13 still in progress due to ESR errors. The Trust are ranked 9<sup>th</sup> out of 32 NHS Trusts across the Cheshire and Merseyside area for Lead Employer (Resident Doctor) Mandatory training at 84.87%. Bank mandatory training reported 80% compliant.

Sickness absence reporting increased in October with stress, anxiety and depression remaining high for long term absence, but positive progress has been made to support staff to return to work and the cases are continuing to decrease with a further reduction in long term sickness figure for October.

RMc advised there is an increased focus on bank and agency expenditure within the Trust as well as regionally and nationally. The Trust are looking into how the data collected can support and provide further assurance on expenditure. HR are supporting the Estates team to look into overtime usage.

NB questioned if fit testing personal protection equipment would protect from any chemical harm. JB noted the fit testing PPE will protect from respiratory virus but not chemical or nuclear. JM discussed all areas are covered within the emergency plan such as nuclear or chemical harm.

MC questioned the impact of not reaching fit testing targets. JB discussed following COVID in March 2020, the Trust had low compliance with fit testing, but this improved through bronze, silver and gold command structures. The Trust escalation process is still through the silver command meeting. JM confirmed communications are ongoing with staff as well as Executive colleagues to ensure fit testing compliance increases.

A discussion took place regarding the reduction of bank and agency staff. JM noted each nursing roster is scrutinised on a weekly basis by the senior team and supported by HR. RMc noted further scrutiny of bank and agency as well as annual leave allowances are being undertaken within Finance and Performance Group.

MC thanked JB for the updates provided.

#### **6.5 Staff Survey Update**

JR provided an update on the staff survey where engagement with staff was difficult, but the Trust scored 60.2% with a target of 60% but this figure may increase.

JB discussed the National Education and Training (NET) survey closed at the end of November with 66 students completing the survey. The Trust should receive feedback in early 2025.

MC thanked JR and JB for the updates.

JM raised the issue of possible apprehension by staff members due to the changes ongoing within the Trust. JM noted the high number of applicants for clinical roles.

## **7. Governance**

### **7.1 Board Assurance Framework**

The Board Assurance Framework was included within the pack.

The committee discussed the impact the Liverpool collaboration will have on the board assurance framework. MC discussed having a narrative around the system work as opposed to a score and noted the importance to look at potential opportunities instead of focusing on risks.

RMc will review the BAF to reflect the Liverpool collaboration work with risks as well as actions to mitigate those risks and circulate following the meeting.

The committee **noted** the Board Assurance Framework.

### **7.2 Appraisal Cycle Update**

### **7.3 Trainee Doctor Survey Action Plan/DME Update (GMC Survey)**

JB shared the trainee doctor survey action plan.

The GMC survey feedback was overall positive with ongoing work to support staff within the Trust. Some areas were highlighted for improvements and mitigating actions are in place.

There were 18 responses for LED which supported initial fact finding with 15 of those staff working within the Trust for over 6 months. 8 out of 18 reported experiencing some form of bully, harassment or belittling behaviour. A deep dive has been organised to look further into this.

Work is ongoing against the actions and recommendations listed by NHSE with the aim of improving the educational experience and working lives of doctors in training.

The next pulse survey is planned for January 2025.

Simulation training has been successful within the Trust and there will be a small, dedicated simulation space within the Sir Ken Dodd Education Centre.

MC thanked JB for the updates provided.

NB noted that 8 out of 18 locally employed doctors complained of bullying and harassment which was a high number and questioned how this will be managed. JB discussed a steering group is looking into this further with a deeper dive being planned.

NB noted the critical safety importance of the clinical supervision of cardiac surgery. CQ confirmed actions are in place to address this issue as well as an escalation plan.

NB questioned whether the cardiology trainees are dual accredited with two exit exams. CQ advised that this is covered within the MRCP and the trainees will have dual accreditation but there will be changes within portfolios.

### **7.4 People Delivery Group minutes – 7<sup>th</sup> May 2024 / People Delivery Group minutes – 4<sup>th</sup> September 2024**

The committee **noted** the minutes.

## **8. Evaluation of Meeting**

MC thanked the committee for their attendance.

**RMc**

**9. Any other business**

IF thanked the committee for allowing his attendance within the meeting. IF questioned how HR professionals are supporting the HR team with the upcoming changes. JR discussed meeting on a weekly basis with the Senior Team as well as quarterly meetings with the whole team. All updates are shared within the team with open communication.

**10. Date and Time of Next Meeting:**

Monday 3<sup>rd</sup> March 2025, 10:00-12:00. Microsoft Teams