



Board of Directors Meeting in Public

Subject:		People, Culture and Improvement		Date: 29 July 2021		
	Committee	•				
		Report of the Committee				
Prepared By:		Deborah Kearsley, Head of Operational HR				
Approved By:		Manjeet Gill: Non-Executive Director and Committee Chair				
Presented By:	Manjeet Gill: I	Manjeet Gill: Non-Executive Director and Committee Chair				
Purpose						
		y of the key discussion areas and		Decision		
		People, Culture and Improvement		Approval		
				Assurance	X	
				Consider		
Strategic Objectives						
To provide	To support	To inspire			To play a	
outstanding	each other to	excellence	m	most from our leading role in		
care to our	do a great job		re	sources	transforming	
patients					health and	
					care services	
X	X	X	X		X	
Overall Level of Assurance						
					_	
	Assurance Significant	Sufficient	Li	mited	None	
		Sufficient x	Li	mited	None	
Risks/Issues			Li	mited	None	
Risks/Issues Financial	Significant					
	Significant Improving produc	X	e ut	ilisation and im	pact	
Financial Patient Impact Staff Impact	Significant Improving produc	x tivity and workforce ffing levels and a g	e ut	ilisation and im	pact	
Financial Patient Impact	Improving product Maintain safe state Improve working	x tivity and workforce ffing levels and a g	e ut	ilisation and im	pact	
Financial Patient Impact Staff Impact	Improving product Maintain safe state Improve working Staffing levels im	x tivity and workforce ffing levels and a g lives	e ut	ilisation and im I patient experie	pact	
Financial Patient Impact Staff Impact Services Reputational	Improving product Maintain safe state Improve working Staffing levels im SFH recommende	x tivity and workforce ffing levels and a g lives pact service and be	e ut	ilisation and im d patient experience availability work	pact	
Financial Patient Impact Staff Impact Services Reputational	Improving product Maintain safe state Improve working Staffing levels im SFH recommende	x tivity and workforce ffing levels and a g lives pact service and be ed as a great place	e ut	ilisation and im d patient experience availability work	pact	

Executive Summary

The most recent People, Culture and Improvement Committee took place on 29 July 2021. The Committee was chaired by Manjeet Gill, Non-Executive Director.

A People, Culture and Improvement Committee workshop, hosted by 360 Assurance, was held on 7 June 2021 to review the results of a Committee maturity self-assessment, and from which an action plan was developed. The Committee agreed with the assessment and agreed the action plan and timescales for improvement.

The Committee acknowledged the positive stories including;

- The continued work undertaken by the Human Resources department to support the COVID-19 vaccination programme;
- SFH colleague welfare and wellbeing offer has been shortlisted in the 2021 HSJ
 Patient Safety Awards in the category 'Mental Health Initiative of the year
- The national network Proud2bOps won the HSJ Partnership Workforce Innovation Award.
- Nottingham and Nottinghamshire ICS: **Mass Vaccination Team** has been shortlisted for a **HPMA Award** in the category for **cross-sector working**.

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In terms of horizon scanning, the Committee were made aware of the following;

- Increased Workforce loss which is causing capacity and service delivery pressures. This is being driven by increased number of staff self-isolating due to COVID-19, increased staff sickness, junior doctors change over and increased levels of annual leave. This is further compounded by increased demand for the Trust's services.
- The **Health and Safety Executive** are visiting the Trust to conduct an inspection on 3 August 2021, 4 August 2021 and 5 August 2021.
- The Committee were provided an update confirming the corrective payment associated with overtime and annual leave payments will be made in September 2021.

The **Board Assurance Framework (BAF)** - The Committee reviewed the BAF, but due to the current challenges in terms of staff absences, increase activity via ED and the increase in COVID-19 patients, the Committee did not support the reduction of PR3: Critical Shortage of Workforce Capacity and Capability. Therefore the Committee confirmed the risk remains significant.

A paper was presented regarding a significant risk related to **maternity services and midwifery staffing levels**. The Committee was provided with an overview of the controls in place to monitor and mitigate the risk and assurance was gained from the Committee regarding work being taken forward in relation to this agenda.

In April 2021 the Trust launched its **People, Culture and Improvement Plan 2021/2022**. The 12 month strategy supports national NHS and Trust priorities while also focusing on recovery and restoration. A report was presented to the Committee which provided a detailed overview of key actions, areas of achievement and progress across Q1 of 2021/2022, while also highlighting key delivery items and actions planned for Q2. Assurance was provided to the Committee that the strategy, action plan and achievements support national and local people agendas, and the actions also support the wider ICS agenda. The Committee was **assured** from the update regarding the progress made in Q1 of 2021/2022 against the People, Culture and Improvement agenda.

An assurance item was provided regarding the People, Culture and Improvement agenda. It was recognised the 2020/201 has been a challenging year, and a significant amount of work has been undertaken. During 2021 the Trust has seen significant workforce loss due to the pandemic and the rolling 12-month average for absence due to ill health is 4.3%, which sits above the Trust target of 3.5%. Benchmarking shows that the Trust's sickness sits below our NHSi peer group, additionally across the ICS the average sickness levels for 2020/2021 is reported at 4.9%. The paper identified 93% of substantive staff has received their COVID-19 vaccine. The Trust has implemented a quarterly staff survey in Q2 and work continues to implement actions from the 2020/2021 annual staff survey. Assurance was provided to the Committee in relation to apprenticeships and it was confirmed between September and November 2021 there will be approximately 70 individuals commencing a clinical apprenticeship within the nursing workforce. The Committee received assurance regarding the on-going work related to the people and inclusion agenda.

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An update was provided to the Committee regarding **Speaking Up Agenda**. In Q1 there have been 29 FTUP cases, a 38% increase when compared to Q1 in 2020/2021. The Committee sought assurance regarding the concerns about leadership and culture. The Committee were provided an overview of leadership development programmes which are being implemented to address the concerns. The Committee were **assured** from the report regarding the Speaking Up Agenda.

Four assurance papers were presented to the Committee in relation to the **Equality**, **Diversity and Inclusion Agenda**.

- Six High Impact Actions The National Equality, Diversity and Inclusion Team have identified six high impact actions that they believe every organisation should implement as part of an effort to improve recruitment and promotion pathways. Following the launch of the Midlands regional strategy, all Trusts were asked to produce an action plan. SFH have produced an action plan, which has been incorporated into the Midlands Action Plan which was submitted to NHS E&I on 30 June 2021.
- Race Disparity Ration As part of the Six High Impact Actions, all Trusts were asked to produce a race disparity ration for AFC staff and use the data to support the Six High Impact Actions plan. The ratios are good although the Trust is seeking to improve development opportunities for B5 to B6 where race representation drops. The evidence suggests the disparity is impacted on the Trust's successful recruitment of international nurses. Nevertheless plans are being developed to improve this ratio.
- Equality, Diversity and Inclusion Strategy 2021 The Trust's Workforce EDI Strategy was published in April 2021.
- WRES and WDES These are mandatory data reports, a high level overview of the data was presented to the Committee, further work is on-going to scrutinise the data in order to provide summary reports and develop associated action plans.

The Committee was **assured** by the reports presented regarding the Equality, Diversity and Inclusion Agenda.

A further assurance item was presented regarding **Nursing and Midwifery monthly safe staffing** for March – May 2021. The paper identifies that workforce and staffing continues to be challenging which is largely influenced by staff sickness absence, sickness absence related to COVID-19 and vacancy rates. This has resulted in gaps being covered by Bank and Agency nurses. It is also recognised the Nursing and Midwifery workforce has experienced significant pressures over the last 18 months further compounding the challenges. The Nursing and Midwifery workforce have a robust plan to manage mitigate the risks which will be shared at the next People, Culture and Improvement Committee. The Committee recommends the Nursing and Midwifery monthly safe staffing paper is **escalated** to the Board of Directors as the challenges identified have the potential to **impact on patient care and safety.**

An assurance report was presented regarding the **Employee Relations cases** at the Trust. **assurance was gained** from the group that employee relations are managed appropriately and in a timely manner

The COVID-19 pandemic has impacted on the provision of the activities offered by

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volunteers. A restoration programme schedule for the volunteers has been established and during Q1 a significant amount of work has taken place, with assistance from the Infection, Prevention and Control Team, senior nursing colleagues and Capital Estates Manager, to ensure the environment and practices are safe to support **volunteers** returning to revised roles. A paper was therefore presented to the Committee to outline the work completed during Q1 and outlines priorities for Q2. The Committee received **assurance** from the report regarding the status of the **SFH Voluntary Services**.

A further assurance report was presented in relation to communications and marketing activity. The Committee recognised both the **internal and external communications**, along with the **relationship building with external stakeholders** and **utilisation of social media** which has been taken forward by the communications department.

To support the Trust with Strategic Planning over a 5-year period, SFH have developed a **Strategic Workforce Model**. The model looks at the Trust and Divisions by service line and staff group. A paper was presented to the Committee which outlines the key outcomes of the work undertaken linked to the workforce model. The report outlines that over a 5-year period there is a **projected gap in the workforce of 422.5 WTE**. This therefore prompts a discussion on how the 'gap' can be closed and the development of different workforce strategies. The report identifies the key strategic themes include **retention plans**; **succession planning and career pathways**; **workforce productivity and rostering**; **health**, **wellbeing**, **recovery and resilience**. The paper outlines **engagement** with the Clinical Divisions and professional groups is vital to taking this piece of work forward which is the next steps in terms of the strategy. The Committee received assurance this important piece of work is being considered and taken forward.

The Committee were provided with an update in relation to **medical appraisal and revalidation** and received assurance regarding this agenda.

Escalations

The following areas are for **escalation** to the Trust Board of Directors

- Nursing and Midwifery Safe Staffing Report (March 2021 April 2021 and May 2021).
- Freedom to Speak Up Agenda
- Equality, Diversity and Inclusion Agenda
- Strategic Workforce Model SFH

Recommendation

The Trust Board are **recommended to take assurance** regarding the activities and discussions points covered at the July 2021 People, Culture and Improvement Committee, **linked with aspects of People, Culture and Improvement**.