



### **Board of Directors Meeting in Public**

| Subject:  | Committee   | Ilture and Improvement he Committee                      |                                    | Date: 4 November 2021 |   |
|---|---|--|------------------------------------|-----------------------|---|
| Prepared By:  |   | Deborah Kearsley, Head of Operational HR                 |                                    |                       |   |
| Approved By:  | Manjeet Gill: I   | Manjeet Gill: Non-Executive Director and Committee Chair |                                    |                       |   |
| Presented By:   | Manjeet Gill: I   | Manjeet Gill: Non-Executive Director and Committee Chair |                                    |                       |   |
| Purpose   |   |  |                                    |                       |   |
| To provide a sum  | mary of the key dis   | y of the key discussion areas and                        |                                    | Decision              |   |
|   |   | People, Organisational                                   |                                    | Approval              |   |
|   | Culture Committe  | ee held on 19  |                                    | Assurance             | X   |
| October 2021  |   | Consid   |                                    | Consider              |   |
| Strategic Objectives  |   |  |                                    |                       |   |
| To provide outstanding care to our patients                 | To support each other to do a great job                     | To inspire excellence                                    | To get the most from our resources |                       | To play a leading role in transforming health and care services |
| X   | X   | X  | X                                  |                       | X   |
| Overall Level of Assurance                                  |   |  |                                    |                       |   |
|   | Significant   | Sufficient   | Limited                            |                       | None  |
|   |   | X  |                                    |                       |   |
| Risks/Issues  |   |  |                                    |                       |   |
| Financial   | Improving productivity and workforce utilisation and impact |  |                                    |                       |   |
| Patient Impact  | Maintain safe staffing levels and a good patient experience |  |                                    |                       |   |
| Staff Impact  | Improve working lives                                       |  |                                    |                       |   |
| Services  | Staffing levels impact service and bed availability         |  |                                    |                       |   |
| Reputational  | SFH recommended as a great place to work                    |  |                                    |                       |   |
| Committees/groups where this item has been presented before |   |  |                                    |                       |   |
| None  |   |  |                                    |                       |   |
| Executive Summary   |   |  |                                    |                       |   |

The most recent People, Culture and Improvement Committee took place on 19 October 2021. The Committee was chaired by Manjeet Gill, Non-Executive Director.

At the Committee there were a number of positive stories highlighted including.

- The high number of nominations for the **Staff Excellence Awards**
- Highly commended in the HPMA awards for the collaborative work regarding vaccinations
- Nominations and shortlisted for **national awards** including
  - HSJ Awards for the Proud2bOps Team
  - Allocate Awards finalists
  - Nominated and shortlisted for 3 Nursing Times Awards
- Article published in the BMJ by Dr Dan Smith regarding redesign of the Doctors in Training Rota System.

The Board Assurance Framework (BAF) was discussed. In relation to risk PR5, it was acknowledged that additional plans have been put in place to improve control, but it was felt the risk score should remain the same. The additional measures are in relation to the

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ePMA implementation which has been delayed due to COVID-19 and workforce issues. The additional measures and action taken have provided **assurance** to the committee regarding the risk rating and therefore the committee endorsed the risk scores remaining unchanged.

An update was provided to the committee regarding the **People**, **Culture and Improvement Strategy 2021/2022** and progress made against the strategy. The committee acknowledged the People, Culture and Improvement Strategy is a one year strategy which is due to come to an end in March 2022, hence work was commencing to develop a 5 year strategy. The progress report evidenced work undertaken and provided an overview of the priorities for quarter 3. The **committee received assurance** from the report regarding actions and activities to meet the requirements of the People, Culture and Improvement Strategy 2021/2022.

A **People, Inclusion, Culture and Improvement Assurance Report** was presented to the committee. This report provided updates on key workforce matrix around our people. It was recognised quarter 1 and 2 of 2021/2022 have been challenging which has impacted on workforce loss. Assurance was provided to the committee regarding the **recruitment activities** and the implementation of **alternative clinical roles** to support the delivery of outstanding care to our patients. The committee sought assurance regarding the recruitment timescales and it was highlighted additional resource is being invested into the recruitment team to reduce the recruitment timescales. The committee gained **assurance** from the paper regarding the People, Inclusion, Culture and Improvement agenda.

The committee were presented with an update paper by the Freedom to Speak Up Guarding regarding **Speaking Up** at the Trust. The presentation highlighted that in quarter 2 there had been 45 Freedom to Speak Up cases. One of the concerns raised was by a medic which is the first concern on record raised by a doctor and this was raised via the Freedom to Speak Up **Medical Champion**. The report evidenced concerns involving leadership style behaviours including incivility remain the leading theme of concerns. The committee received **assurance** from the presentation in relation to the speaking up agenda at the Trust.

A report was presented to the committee to provide assurance relating to the Nursing Staff including the nursing and midwifery workforce plan. This report highlighted the **planned versus actual staffing levels** and the impact of these upon nursing and midwifery sensitive indicators for the month of June, July and August 2021. The report evidenced the overall staffing position for June, July and August 2021 has remained relatively stable. The report highlighted there has been an increase in workforce loss due to ill health and the use of agency to cover staffing gaps has increased. This increase is as a result of short term sickness, business continuity planning and long term sickness cover. It was highlighted that recruitment and retention of registered nurse continues to be a priority. The committee received **assurance** regarding nursing and midwifery staffing levels and the impact these upon sensitive indicators.

A Nursing, Midwifery and Allied Health Professional Bi-annual staffing report was presented to the committee. This is a statutory report which provides assurance in relation the Trust's compliance with the National Institute for Health and Care Excellence (NICE) Safe Staffing Guidance, National Quality Board (NQB) Standards and the NHS Improvement (NHSi) Developing Workforce Safeguards. The assurance paper provided an

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update on the on-going plans to provide safe staffing levels within nursing, midwifery and AHP disciplines across the Trust. In addition the maternity staffing position was highlighted including the recruitment and retention risks, which is also a national issue. In relation the AHP staffing and risk position the report provided an overview of the on-going recruitment plans to support each service. The committee accepted the report and received assurance in relation to nursing, midwifery and AHP staffing capacity and compliance.

An assurance report was presented regarding **Medical Revalidation**. Currently the completion rate for medical appraisals is **87%**. The report highlighted the overall completion rate for Appraisals reduced during the last 18 months as a result of the pandemic. In addition the number of medical workforce has increased and some of the appraisers have retired and hence this has also had an impact. The actions taken to increase the medical revalidation numbers include improved reporting, better engagement with the Local Negotiating Committee (LNC), increased engagement with doctors and increasing the number of trained appraisers. The committee received **assurance regarding medical revalidation**.

A paper was presented to the committee regarding the work of the **Bullying and Harassment Task and Finish group**. The 2020 staff survey evidenced concerns in relation to staff experiencing bullying and harassment from patients, carers and staff. A task group was established in 2020 fo on-going actions to reduce bulling and harassment experienced by staff. This group is being reframed with the title of **Civility and Respect at Sherwood**, therefore focusing on the positive behaviours expected from colleagues and devising a positive programme of work that focuses on learning and change. The committee endorsed the reframing of the group to take forward this important piece of work at the Trust.

A further assurance paper was presented to provide an update in relation the Trust's **Prevention of Violence and Aggression** agenda. It was strongly illustrated that progress had been made through encouraging staff to report incidents of violence and aggression, while there has also been a revised **training and education programme** delivered to staff regarding managing challenging behaviours and action against individuals who abuse staff. The committee noted the content of the paper and gained **assurance regarding the progress in relation to the prevention of violence and aggression at the Trust.** 

#### Recommendation

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