

TRUST BOARD OF DIRECTORS
Meeting Date: 12th September 2018

No. 20iia/b

TITLE OF PAPER	Workforce and OD Committee – Summary Report to the Trust Board of Directors in respect of Significant Issues
TO BE PRESENTED BY	Prof. Laura Serrant, Chair – Workforce and OD Committee, Non-Executive Director
ACTION REQUIRED	For assurance

OUTCOME	To report items of significance discussed at the Workforce and OD Committee meeting held on: 31st July 2018
TIMETABLE FOR DECISION	None required.
LINKS TO OTHER KEY REPORTS / DECISIONS	Minutes of the Committee
STRATEGIC AIM STRATEGIC OBJECTIVE BAF RISK NUMBER & DESCRIPTION	Strategic Aim: People Strategic Objective: ALL BAF Risk Number: ALL BAF Risk Description: ALL
LINKS TO NHS CONSTITUTION & OTHER RELEVANT FRAMEWORKS, RISK, OUTCOMES ETC	<ul style="list-style-type: none"> Trust Board Assurance Framework NHS Audit Framework
IMPLICATIONS FOR SERVICE DELIVERY AND FINANCIAL IMPACT	Timely reporting to the Trust Board of Directors
CONSIDERATION OF LEGAL ISSUES	None required.

Author of Report	Laura Serrant
Designation	Chair – Workforce and OD Committee (Non-Executive Director)
Date of Report	29 th August 2018

1. Purpose

To report in a timely manner, items of particular significance discussed at the Workforce and OD Committee meeting held on 31st July 2018.

2. Significant Issues of Interest to Trust Board

Trust Board members will receive the minutes of the Workforce and OD Committee meeting held on 31st July 2018 in due course, however, the Chair of the Committee by means of this report wishes to notify Trust Board Members of the following significant issues.

- a) WODC appears to be an outlier compared to other Trust Board Sub Committees with regards to quoracy of the Committee in terms of how many Executive Directors should be present at each meeting, where decisions are to be made. It was noted that the current WODC Terms of Reference were last amended December 2017 and state that, in order to be quorate, 3 x non-Executive Directors (1 being the Chair) and 1 x Director must be in attendance. This therefore allows the Associate Director of Human Resources and the Director of Corporate Governance to count towards the quoracy of the meeting.
- b) Committee discussed the Workforce Race Equality Standard (WRES) and BME initiatives. There are a number of BME initiatives underway including a review on targeting and equality performance. Committee are assured that there is a plan in place and that the Trust is cited on the main areas. The WRES data will be provided to September Trust Board.
- c) Committee discussed the workforce development work and 'Essentials for Managers – skills training' launch and a general point related to preparing managers to take forward various initiatives linked to strategic priorities.
- d) It was noted that the sickness absence rate for all areas of the Trust is either on or below the 5.1% target i.e. all areas are RAG rated green.
- e) It was also noted that the Trust's PDR compliance rate is 99%, which is one of the best results across NHS organisations nationwide.
- f) Committee welcomed receipt of an improved, shorter Workforce Report however, points of modification were noted in terms of highlighting hotspots and the impact and needs around key posts (recruitment). For the next Workforce Report to be received by WODC in October.
- g) Committee welcomed Brenda Rhule, Deputy Chief Nurse who attended the July meeting of behalf of Liz Lightbown, Executive Director of Nursing, Professions and Care Standards.
- h) Committee received an update regarding Supervision and Clinical Supervision. The development of the eForm has had some success and is now moving to phase 2 in order to capture other types of supervision, such as group supervision. Noted that there is a focus on the duration of supervision meetings, and the nature, timing etc i.e. bespoke to individuals / groups.
- i) The Trust's Organisation Development is currently under review. Concerns were highlighted relating to resources and the importance of maintaining the coaching and mentoring programme developed by Dianne Crookes who leaves the Trust at the end of September 2018. Options are being explored and a paper will be considered by EDG in due course.

- j) Committee were assured that non-mandatory training is covered in the newly entitled Learning Needs Analysis (LNA), the Trust's approach to monitoring study leave (locally) and the leadership training linked to equity and funding.
- k) Workforce related risks now identified in terms of the Corporate Risk Register and further work required on the RAG rating of outcomes. Discussion also took place regarding the Trust Board Assurance Framework to ensure that any gaps are addressed and the number of controls are reviewed for consistency. Particularly ensuring the content and controls are reviewed relating to 'Risk A204 motivation and morale'. Triangulation with the Staff Survey result.

3. Contact Details

For further information, please contact:

Prof. Laura Serrant, Chair – Workforce and OD Committee (Non-Executive Director)
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Attached:

- Approved minutes of the Committee dated **24th April 2018.**

Workforce & Organisation Development Committee

Minutes of Sheffield Health & Social Care NHS Foundation Trust's Workforce and Organisation Development Committee - held on Tuesday 24th April 2018, Fulwood House, Sheffield, S10 3TH.

Present:

- | | |
|----------------------|--|
| 1. Laura Serrant | WODC Chair and Non-Executive Director of the Board (LS) |
| 2. Dean Wilson | Director of Human Resources, Associate Director of the Board (DW) |
| 3. Liz Lightbown | Director of Nursing, Professions & Care Standards and Executive Director of the Board (LL) |
| 4. Ann Stanley | Non-Executive Director of the Board (AS) |
| 5. Olivia Blake | Non-Executive Director of the Board (OB) |
| 6. Margaret Saunders | Director of Corporate Governance, Board Secretary (MS) |

In Attendance:

- | | |
|--------------------|--|
| 7. Caroline Parry | Deputy Director of Human Resources (CP) |
| 8. Karen Dickinson | Head of Education, Training and Development (KD) |
| 9. Dianne Crookes | OD Programme Manager (DC) (for item 12) |
| 10. Giz Sangha | Deputy Chief Nurse (GS) (for item 15) |
| 11. Helen Walsh | PA to Director of Human Resources (notes) (HW) |

Apologies received:

- | | |
|----------------------|--|
| 12. Mike Hunter | Medical Director, Executive Director of the Board (MH) |
| 13. Helen Crimlisk | Deputy Medical Director (HC) |
| 14. Clive Clarke | Deputy Chief Executive, Executive Director of the Board (CC) |
| 15. Phillip Easthope | Director of Finance, Executive Director of the Board (PE) |
| 16. Richard Mills | Non-Executive Director of the Board (RM) |
| 17. Sandie Keene | Non-Executive Director of the Board (SK) |

	Lead
<p>1a Welcome, Apologies and Introductions</p> <p>Prof Laura Serrant was officially received as the new Chair of WODC. The Chair welcomed members to the meeting, apologies were noted and introductions made.</p> <p>1b Declaration of Interests</p> <p>Ms Blake made a declaration in respect of her role at Sheffield City Council. No other declarations of interest were noted.</p>	
<p>2 Minutes of the meeting held on Tuesday 30th January 2018</p> <p>The minutes of the meeting held on 30th January 2018 were agreed as an accurate record.</p> <p>These confirmed WODC minutes will be submitted to the February 2018 Trust Board Meeting.</p>	

30-01-18 – The Chair (SRo) recalled a discussion at Trust Board regarding the Trust’s low Organisational Food Rating and noted that it was therefore important that Committee receive feedback from Ms Parry’s conversation with Helen Payne.

24-04-18 – Ms Parry reported that she has spoken to Helen Payne. The low Organisational Food Rating discussed at Trust Board related to the provision of food on wards (i.e. for patients, not staff). This rating has since improved but it wasn’t related to food for staff as first thought. However, there is a CQUIN for provision of healthy food for staff, as reported at the Staff Health and Wellbeing Group. Tania Baxter is the lead on the Trust’s CQUINs, that are reported on at various other meetings within the Trust.

4) Carers Strategy Implementation Plan

Mr Clarke and Mr Hunter are joint Executive Leads for the Carers Strategy Implementation Plan.

Mrs Stanley reported that the Carers Strategy Implementation Plan now sits within the remit of the Quality Assurance Committee.

5) Health and Safety legislation – appropriately trained Managers

At a previous meeting of Committee Ms Lightbown asked for assurance that the Trust are training the right level of manager with the right knowledge of the legislation and their duties under that legislation. Mr Wilson reported that this will be discussed at the next meeting of the Health and Safety Group. Ms Lightbown also pointed out that the recent Health and Safety Training for Managers was cancelled.

The Chair was assured that colleagues would take appropriate steps to resolve the issues and asked for them to be dealt with in another forum.

Action - Ms Dickinson said she would ensure the issues are addressed at a future meeting of the Mandatory Training Steering Group (renamed Education Training Steering Group - ETSG) instead of WODC.

KD

6) Improving Attendance, including Physio-med

Actions outstanding from January / April WODC

Mr Mills had previously asked if there was value in showing a break-down of absences in each area by age in order to understand whether age is a key factor.

The Chair had asked if the next report to Committee could also show the number of Welcome Back To Work meetings that have taken place. Mrs Rutledge is exploring if this data can be recorded on ESR.

POST MEETING NOTE - Action – Mrs Rutledge to consider these two additions for the next report which will now only be provided annually to Trust Board (not WODC). Next report due to Trust Board July 2019. EDG to receive it first as a pre-Board paper.

SRu

Ms Lightbown said that she would like to know the reasons behind the high levels of sickness absence in the 8 hotspot areas with regards to nurses. There are issues with staffing levels at Firshill that could directly link to the high sickness levels in that area.

Action Bfwd – Mrs Rutledge to provide Ms Lightbown with data relating to nurses in the 8 hot spot areas.

SRu

<p>7) Bullying and Harassment update</p> <p>Following the verbal update provided by Mr Wilson on behalf of Ms Parry at January WODC, Mrs Stanley had asked for an update on the various pieces of work to be presented at a future meeting of WODC and Ms Lightbown suggested that bullying and harassment should be included in the Workforce Report.</p> <p>Action – Ms Parry and Mr Wilson to ensure that data etc relating to bullying and harassment is included in the Workforce Report <u>for October 2018 WODC.</u></p>	<p>CP DW</p>
<p>8) Supervision update</p> <p>At the January 2018 meeting of WODC Ms Lightbown presented the position statement that went to EDG 25th January 2018. The Trust received a “Should do” action relating to supervision following a Care Quality Commission (CQC) Inspection in November 2016 and the Trust was asked to: “<i>Ensure that it has a system in place to monitor the frequency of management supervision across the organisation</i>”.</p> <p>Committee were assured that work is progressing to implement a Trust-wide system to monitor professional, clinical and management supervision. That the virtual supervision group is setting quality standards, audit and monitoring each teams’ uptake of the supervision form usage. The Chair (SRo) noted that this is a helpful summary that ties in with PDRs and the need for staff to have a quality discussion with their manager.</p> <p>Action Bfwd - Committee looked forward to receiving a further update on progress at the July meeting of WODC. <i>POST MEETING NOTE – following discussion between the Chair (LS) and Mr Wilson, only a brief 1 page paper is required for WODC. A complete report will go to EDG.</i></p>	<p>LL (BR)</p>
<p>9) Disciplinary data relating to BME Bank Staff</p> <p>Following discussion at the January meeting of WODC, relating to the Workforce Race Equality Standards, Ms Johnson stated that the disciplinary data shows that there is a significant impact on staff from Bank (all from BME backgrounds). Committee proposed that a separate report is produced on disciplinary data for this staff group.</p> <p><i>POST MEETING NOTE - Action – Ms Johnson to provide Mr Wilson with an update on this piece of work.</i></p>	<p>LJ</p>
<p>10) Gender Pay Gap</p> <p>Mrs Stanley stated that the Trust’s first SHSC Gender Pay Gap report was discussed at February Trust Board prior to being published (8th March 2018). Following a query from Mrs Stanley regarding the optional narrative to accompany the report, Mr Wilson added that the narrative had been discussed at EDG and had been published on the Government website.</p> <p><i>POST MEETING NOTE – Action – An update report on the Trust’s Gender Pay Gap is expected to be received by WODC in <u>October 2018.</u></i></p>	<p>LJ</p>

4 Improving Attendance Annual Report, including Physio-med

Mr Wilson presented this item on behalf of Sue Rutledge, Attendance Case Manager.

WODC members were asked to receive the report ahead of July 2018 Trust Board. Mr Wilson stated that NHSi are likely to take an interest in the Trust's high sickness absence rate later in the year, therefore it is timely that WODC receive the report ahead of discussion at Trust Board.

POST MEETING NOTE AS PER MATTERS ARISING (6) ABOVE – Action – The report has been a standing item at WODC each quarter, however, following discussion post WODC, this report is now only required to be presented (annually) to Trust Board (not WODC). Therefore the next report due to Trust Board will be in July 2019. EDG to receive it first as a pre-Board paper.

SRu

Following a query from Mrs Stanley, Mr Wilson stated that the Attendance Case Manager had been focusing on the 8 hot spot areas (Birch Avenue, Woodland View, Substance Misuse, G1, Grenoside Facilities, Burbage Ward, Community Admin and Firshill) but more recently on the Community Mental Health Team areas following the reconfiguration. It was noted that, following the re-configuration, the new Care Networks won't be reported on until next month or the month after.

Following a query from the Chair and Ms Lightbown regarding what discussions take place at operational level, Ms Parry reported that HR Directorate Partners and HR Advisers will be meeting regularly with the new Care Networks regarding HR matters, including sickness absence. It was also noted that weekly discussions take place with HR colleagues followed by monthly review with the Mr Wilson, Director of Human Resources. Key points or items of concern are escalated to the HR Senior Management Team where necessary.

Action – WODC members requested that wording, regarding the mechanism for addressing sickness absence at operational level, should be added to the report before it goes to July Trust Board.

SRu

Mr Wilson also added that one of the initiatives put in place since last year is the Physio-med service for members of staff with a musculoskeletal (MSK) condition. Feedback regarding this service has been 100% positive and has resulted in a significant reduction in MSK absences. There is also the psychological service offered by IAPT to staff, which, should also result in a reduction in the number of anxiety / stress absences in future reports.

Mr Wilson reminded Committee that there are still some legacy reporting issues at Payroll that has caused delays in data reaching the appropriate systems i.e. ESR.

5 Staff Survey update (and links with Friends and Family Test)

This item was previously deferred to May Trust Board.

A discussion took place regarding the unavoidable delay in providing the report to Trust Board. Ms Lightbown added that analysis of the NHS Staff Survey results 2017, at ward and team level, is expected at Executive Directors' Group soon and suggested that this should also be received by WODC ahead of Trust Board, for assurance, given the outcome of the survey results. However, the timings of all three meetings haven't aligned on this occasion therefore the report will now be expected at July WODC and September Trust Board.

POST MEETING NOTE – Analysis at ward and team level has been presented to EDG and will be disseminated as necessary i.e. not required at WODC.

Action – Ms Parry to provide a brief 1 page paper to July WODC for information, listing the initiatives that have been put in place to address the issues highlighted by the survey results.

CP

6 Staff Health and Wellbeing Strategy

Ms Parry reported that she and Julie Edwards (Chair and vice-Chair of the Staff Health and Wellbeing Group) have developed the Strategy and it is in the final stages of completion. Committee members discussed how best to review the Strategy and agreed to move the July date of WODC to the end of June, however, if this isn't feasible Committee members agreed to receive the Strategy via email in June, and provide comments to Ms Parry and Julie Edwards prior to it being presented at July Board.

POST MEETING NOTE – The Staff Health and Wellbeing Strategy was emailed to Workforce and OD Committee members on 14th June. The Strategy was also provided to EDG on 28th June ahead of July Trust Board. EDG advised that an Action Plan should be provided to WODC instead of a report to Trust Board.

Action – Ms Parry to liaise with Julie Edwards and provide an Action Plan for October 2018 WODC.

CP

7 Communications Strategy

Committee members were asked to receive the Communications Strategy, for final comments following consideration by EDG, prior to being submitted to Trust Board for approval.

Mrs Stanley was pleased to note that, following previous suggestions by Trust Board, the Strategy focussed on only three or four key campaigns. However, on page 8, Mrs Stanley said that wording relating to how the Trust communicates with our Strategic Partners should be added. Also, the term 'branding' is used and Mrs Stanley asked if it could be made clear what the definition of this is in terms of the Strategy.

The Strategy also includes a fleeting reference to stakeholder perceptions which Mrs Stanley felt should be expanded upon by including stakeholder analysis (a similar piece of work had been presented to a Board Development Session).

Following a query from Ms Blake regarding the feasibility of the Trust Board to undertake executive responsibility for the communications function (referred to on page 6 under roles and responsibilities). Ms Saunders assured Committee members that once the Strategy is approved by Trust Board the overall responsibility will fall within the remit of colleagues at operational level, with any sensitive or high level matters being reported to Executive Directors, WODC and Trust Board as appropriate.

Mrs Stanley added that the SWOT analysis could be improved by focussing on a maximum of five 'Strengths' that the Trust really excel at rather than a long list that the Trust are only 'good' at. It was also noted that reference to 'video podcasts following each Trust Board meeting to highlight key messages which can be used internally and externally' is a little ambitious at this stage and not something that all Trust Board members will agree with.

<p>Action – Ms Saunders to update the Communications Strategy, as above, prior to providing it to Trust Board.</p> <p>POST MEETING NOTE – The Communications Strategy was approved at May Trust Board.</p>	MS
<p>8 Mandatory Training update – quarter 4</p> <p>Mr Wilson provided the Chair with context relating to mandatory training. In 2016/17 mandatory training compliance rates at the Trust were low and CQC issued the Trust with an improvement notice. Therefore, a monthly report was received by EDG and quarterly by WODC in order to report progress in the key subject areas. However, now that mandatory training rates have significantly improved, and CQC are satisfied with progress, EDG now only receive ‘highlights and risks’ on a monthly basis – these have then been provided to WODC.</p> <p>The Chair appreciated the need to report to WODC previously but, following discussion, Committee members agreed that, following EDG, the mandatory training report should now be provided to the Mandatory Training Steering Group (renamed Education Training Steering Group - ETSG) instead of WODC. WODC now only need to be made aware of significant issues or concerns relating to mandatory training.</p> <p>Action – Mr Wilson and Ms Dickinson to ensure that Jennie Wilson, Mandatory Training Lead is aware of the new reporting line for the mandatory training report i.e. ETSG then EDG.</p>	DW KD
<p>9 Incremental Pay Progression</p> <p>Mr Wilson reported that the annual savings to date came to approximately £6,300, although the final figure will be less than this as some of the claims will result in being back-dated.</p> <p>Mr Wilson also reported that using incremental pay progression as an incentive for staff to undertake their PDR is now in the NHS Framework, however, the Trust have implemented it for a while now.</p> <p>The Chair was assured that colleagues are implementing this initiative appropriately and stated that it no longer needed to be reported at WODC.</p>	
<p>10 Local Workforce Action Board (LWAB)</p> <p>Committee received papers from LWAB for information. LWAB is the South Yorkshire and Bassetlaw workforce meeting co-Chaired by Kevan Taylor and Mike Curtis.</p> <p>Action – Following discussion, it was agreed that an Executive Summary should be received by WODC every 6 months (to be received at <u>WODC October 2018</u>). In the meantime any questions or comments regarding LWAB should be directed to Mr Wilson and/or Kevan Taylor.</p>	DW ALL

11 Workforce and OD Strategy Delivery Plan verbal update

Ms Parry provided a verbal update and the following was noted.

- The Trust's Learning from Change Event will be taking place on 22nd May 2018 with the intention of providing staff with the opportunity to share their experiences in light of recent reconfigurations.
- The Organisational Change Policy is under review – EDG agreed to an extended review date (end Sept 2018) so that amendments to the policy can be incorporated following the above Event.
- An internal audit on Workforce Planning highlighted a few areas that could be improved. A review of the workforce planning process will be undertaken and a Workforce Planning Workshop is taking place on 13th June 2018.
- Recruitment and Retention remains a key area to improve, with a focus on the recruitment and retention of nurses. A number of new roles are also being introduced to the Trust – more detail to be provided next time.
- The PDR Focal Point Window commenced from 1st April with a focus on 'quality'.
- STH have been issued notice on the current Occupational Health Service Contract. Discussions are underway with the new OH Service provider.

Action – Ms Parry to provide a 6 monthly update report on the Workforce and OD Strategy Delivery Plan for the July meeting of WODC. CP

12 Organisational Development update

Mrs Crookes, OD Programme Manager attended the meeting for this item and the following was noted.

- At last count 462 recorded coaching sessions with 121 clients and just commenced another cohort of 12 coaches (11 from SHSC and 1 from CCG), to be trained to ILM Level 5 in Coaching and Mentoring. Fully funded via a grant from Health Education England. The funding also extends to cover peer supervision. There are concerns regarding the sustainability of trained coaches as they also have substantive roles. 8 are accredited to ILM Level 5 and another 5 are awaiting accreditation.
- Excellent feedback has been received for Coaching at the Frontline – 3 day course. Currently delivering Cohort 8. The course content is easily adaptable for those in leadership roles and is aimed at frontline managers.
- Mentoring for Leadership course takes place next week. Establishing a mentoring register. The course has been offered to staff in niche areas and now considering how this can be opened up Trust-wide. However there are limited resources so, in order to get best value from this, it may need to be targeted at specific staff groups only such as 'returners to work' either following maternity leave or a period of ill health, for example.
- OD also involved in developing teams, facilitating away days. Each group has their own needs which could require skills building, team building, Trust values.
- Ability to access development can be a challenge for some staff and most courses are not fully subscribed. The pressure of the day job comes first and development second. OD considering ways of embedding development into the working culture.
- Annual Compassion Conference 2018 – topic is 'Compassion through Empathy' this year. Will concentrate on how we work in partnership with our stakeholders such as Young Carers, Carers Society and the Local Authority.

Ms Dickinson shared Mrs Crookes' concern regarding the constant challenge for staff to complete courses that aren't mandatory (due to funding and/or staff release time). Courses, particularly around leadership, are often seen as nice to do rather than something that is required in order to progress the Trust's workforce plans and strategy.

The Apprenticeship Levy is a requirement, in Government Policy, for 20% off job training. There is an opportunity to use this to support Trust workforce plans but again there are challenges around releasing staff to undertake the training.

Mrs Crookes added that she is leaving the Trust in September 2018. It was noted that the Organisational Development Team had gradually reduced to just 1 post (OD Programme Manager) at 3 days per week. The Trust will need to consider how OD will function in the future. Ms Parry acknowledged that Mrs Crookes' will be sorely missed and her contribution to OD has been invaluable. Ms Parry added that the OD service is at real risk of losing momentum if the resource is lost or further reduced. Need careful thinking about how OD underpins the delivery of the Workforce Strategy and how it supports relevant work-streams from the Culture Review Group and the Leadership Engagement Network.

Following a question from the Chair regarding what the Trust is doing to mitigate the risk of losing the OD Service, Mr Wilson reported that, following a conversation with Kevan Taylor, the Trust's Chief Executive, a review of OD will be taking place. Mr Wilson thanked Mrs Crookes for undertaking an excellent job with OD especially as it has been so under-resourced.

Action – Ms Parry and Ms Dickinson to provide an update to Committee on the OD Review and strategic training as a whole (i.e. training that isn't mandatory).

CP
KD

13 Workforce Report as at 31st March 2018

Mr Wilson provided a summary of the key points and the following was noted.

- The sickness absence rate for quarter 4 is 6.58%, an increase of 0.63% on the previous quarter. Stress and anxiety remain the highest reported reason for long term sickness and clearly this will be an area that the Trust will seek to address following the recent Staff Survey results.
 - The staff turnover rate (headcount) for the 12 months ending 31st March 2018 is 12.52%. This is below the Trust's target rate of 13%.
 - As at 31st March 2018 the Trust's PDR compliance rate is 96%. This is one of the highest reported level of PDR completion with the NHS and is an excellent result.
 - A further ET claim has been received this week (direct race discrimination).
 - **As at 31st March 2018 the amount of Bank and Agency spend is increasing.**
- Action – Mr Wilson to investigate.**

DW

Mrs Stanley acknowledged the amount of work that goes into producing the Workforce Report and suggested that Committee decide how much detail is required in future. The Chair and Committee members were assured that individuals and operational groups are operating appropriately to address areas of action and concern. Therefore, it was agreed that a much briefer, high level report covering a wider breadth of subjects (such as vacancies, funded establishment, disciplinary data, bullying and harassment data, BME indicators) is provided to WODC in future in order to translate the key points. **This may be in addition to a separate workforce report that will continue to be used by HR colleagues in their Trust-wide operational meetings and to assist discussions with managers.**

POST MEETING NOTE – Action – Following discussion with the Chair post WODC, Mr Wilson to discuss with the Workforce Information Team the requirements for a brief workforce report for July WODC, and for October WODC the addition of sections as described above including bullying and harassment as per matters arising (7) above (i.e. the number of B&H cases, the operation and effectiveness of the B&H Joint Screening Group and the work of the B&H Steering Group).

DW
(CP)

14 Effective Staffing Group minutes

Committee members received the ‘unconfirmed’ minutes from the last meeting of the Effective Staffing Group dated 1st February 2018, for information. It was noted that two further meetings have been re-arranged and cancelled for various reasons.

Mr Wilson reported that the Effective Staffing Group oversees the work of four smaller operational groups (Safer Staffing Group, Bank Agency and eRostering Steering Group, Workforce Planning Group and the Medical Workforce Planning Group). ESG originally reported to WODC in terms of the governance structure.

Following discussion, the Chair confirmed that WODC operates as a strategic assurance Committee with oversight of operational groups as necessary. Therefore, the ESG minutes, once confirmed, will be provided to EDG in future rather than WODC. Ms Lightbown confirmed that a discussion has taken place at EDG in respect of receiving minutes. It was therefore noted that minutes from operational groups are not required at WODC, although Ms Saunders explained that relevant actions from these groups may report into WODC, as appropriate.

Action – Committee members agreed that this should be reflected in the governance structure within the amended Terms of Reference (as per matters arising (1) above).

MS

15 Nurse Recruitment and Retention update

Ms Parry and Mrs Sangha presented this item and the following was noted.

- The Trust participated in the NHSi Retention Support Programme Cohort 2 that resulted in production of a Retention Improvement Plan. Next steps are being discussed via the Nurse Leadership Group and how the new Care Networks structure can support delivery of the Plan.
- A review of the Senior Operational Managers that are in charge of the various Care Networks has taken place. Created additional posts into that structure – some of the SOMs are nurses. Created 3 Nurse Consultant posts to support the clinical services and career progression of Band 5 Nurses. Also created some Research Nurse posts (for secondment opportunities). The supervision arrangements for nurses will be improved, to ensure consistency across the Trust, as well as mentoring, coaching, role swapping (in Community and Inpatient Services), nurse rotation, clinical nurses working with corporate nurses (i.e. Safeguarding / Risk Management processes) in order to embed practices into culture, and PDRs (6 month plans) – all to help retain nursing staff for the future.
- Band 5 Nurse rolling advert has been very successful. The Trust are recruiting Nurses each month. Also recruiting students in their 3rd year so they have a job at the Trust when they finish their training.
- Looking to extend some of the initiatives into the wider medical workforce i.e. rolling advert to cover AHPs etc.
- Over 50s focus groups – “You said, we did” approach. It is important to utilise the skills of these staff rather than lose them.

Following a query from the Chair, Mrs Sangha replied that the ultimate aim is to make sure that the Trust has enough staff to run clinical services and to be planning ahead. The Trust should know who is leaving, who is retiring etc in order to recruit sooner to prevent long periods of skills gaps whilst recruitment takes place. To ensure the workforce is fit for purpose, and is a safe environment for patients and staff.

Following a query from Mrs Stanley regarding how the Trust is perceived by new members of nursing staff, Mrs Sangha said that the Trust has mentoring projects and each cohort is interviewed, and lessons learned from previous cohorts. The feedback so far is that the Trust has “improved as an employer”. Line management and how staff are mentored is very important, as well as, how they are received on their first day.

Ms Lightbown added that a Recruitment and Retention Work-plan is forthcoming at EDG in order to highlight clear outcome measures for each of the work-streams described, which should be followed by an overview at WODC.

Action – The Chair was content with this approach and requested a general overview, for awareness and assurance, at the next meeting of WODC.

CP
(BR)

16 Accountable Care System (ACS) and Integrated Care System (ICS) Formerly the Sustainable Transformation Plan (STP)

Mr Wilson described the shared service approach between seven Trusts covering South Yorkshire and Bassetlaw. Three of the seven Trusts are from Sheffield i.e. Sheffield Health and Social Care Trust, Sheffield Children’s Trust and Sheffield Teaching Hospitals, and are discussing ways of working collaboratively. There are a number of work-streams in the pipeline, one of which is the Occupational Health Service provision across South Yorkshire. The Trust has given notice to the current provider (Sheffield Teaching Hospitals). STH are one of three providers who have tendered their services.

Committee thanked Mr Wilson for the update and noted that it is important for Board members to understand the direction of travel with the “working together” work-streams.

Action – The Chair requested that future updates go to EDG and any significant issues reported to Trust Board or WODC as appropriate. Mr Wilson to note for EDG agendas.

DW

17 360 Assurance Audit Reports – updates on outstanding actions

- a. Disciplinary Review Audit
A briefing has been provided to Trust Management Group. Committee received the action plan for information.
- b. Temporary Staffing Audit
Actions now complete. Noted at HR SMT 17-04-18.
- c. Mandatory Training Audit
Actions now complete.
- d. Workforce Planning Audit
This Audit has just been published. Following a query from Ms Lightbown, Ms Dickinson acknowledged that any outstanding actions and deadlines will be monitored via the Workforce Planning Group. Some of which will feed the Annual Workforce Return for Health Education England.

<p>Following discussion, Committee were assured that all actions and recommendations from 360 Audit are appropriately followed up by Audit Committee, operational groups and the HR Senior Management Team.</p> <p>Action – The Chair proposed that the initial audit reports would be provided to WODC for information, and any significant issues that arise thereafter are to be brought to the attention of WODC via Audit Committee (Mrs Stanley Chair of Audit Committee).</p>	AS
<p>18 Joint Consultative Group</p> <p>Committee members received the “confirmed” minutes from the Joint Consultative Forum dated 29th November 2017, for information.</p> <p>Following discussion, as per the Effective Staffing Group minutes, the Chair confirmed that the JCF minutes should be provided to EDG in future rather than WODC. Ms Saunders added that, items of significance may be reported to WODC as appropriate (as per item (14) above).</p> <p>Action – Committee members agreed that this should be reflected in the governance structure within the amended Terms of Reference (as per matters arising (1) above).</p>	MS
<p>19 Annual Appraisal of Committee</p> <p>Following discussion, Committee members agreed that the Annual Appraisal of Committee links with the review of the WODC Terms of Reference and Work Programme and therefore will be discussed at a future meeting of WODC.</p> <p>Mrs Stanley reminded Committee that there is a requirement for all Sub Committees of Trust Board to submit annual appraisal reports to Audit Committee. The next one is due in May.</p> <p>Action – Ms Saunders to discuss with Mr Wilson in order to provide a report to May Audit Committee.</p> <p>POST MEETING NOTE – Action – to note the review of the WODC Terms of Reference and Work Programme for the October 2018 WODC agenda.</p>	DW MS DW
<p>20 Annual HR Policies update</p> <p>Ms Parry presented the working document for HR policies and reported that a number of policies have breached their review date and briefly described the HR Policy Governance Process.</p> <p>Ms Parry is in discussions with Corporate Governance about streamlining the number of HR policies by combining relevant ones together.</p> <p>Committee were assured that HR have a robust governance process for ensuring policies are reviewed appropriately.</p>	

The Chair agreed that the relevant operational groups (HR Senior Management Team, Joint Policy Group, Joint Consultative Forum and Policy Governance Group) should continue to monitor progress and therefore does not need to report to WODC unless there is a significant issue with a particular policy that Committee members should be aware of.

21 The Living Wage update

Committee members received for information the report that was submitted to Trust Board in March 2018. It was noted that Trust Board agreed to the uplift in the Living Wage from £8.45 per hour to £8.75 per hour, back-dated to November 2017.

22 NHS Staff Council update

Committee members received the NHS Staff Council Framework Agreement on the proposed reform of Agenda for Change dated 21st March 2018.

Mr Wilson reported that the Agreement includes a 3 year pay deal (excluding Doctors) that is subject to staff consultation via the appropriate Unions. The pay deal incorporates the Living Wage rate that the Trust have already adopted.

23 a. Corporate Risk Register

Ms Saunders reported that, at present, there are no Corporate Risks relevant to the Workforce and OD Committee, however, a review is required which will form part of the work relating to the revised WODC Terms of Reference, Annual Appraisal of Committee and the review of the WODC Work Programme.

Action – To note for October WODC agenda (as per matters arising (1) above).

b. Board Assurance Framework

Mrs Stanley provided the Chair with context relating to the Board Assurance Framework. The BAF is maintained to assure Trust Board and Sub Committees regarding risks (drawn from Risk Registers) related to the strategic aims of the Trust.

Ms Saunders reported that progress has been made on most of the entries within the BAF, however, one of the entries relating to eRostering still has a 'limited' rating. This will be updated prior to next Board as the Effective Staffing Group have since been assured that the risk pertaining to eRostering has been mitigated.

Following comments from Mrs Stanley regarding the correct use of the BAF, Ms Saunders added that Corporate Governance are in discussions with EDG colleagues to ensure that the descriptors used within the BAF are appropriate and to refine and streamline it to make it more user friendly.

Action – Following discussion it was agreed that the strategic objectives under the 'People' aim will inform the WODC Terms of Reference and agendas, but is not limited to. Ms Saunders and Mr Wilson to also triangulate with relevant Audit reports.

MS
DW

DW
MS

24 NHS Employers: Response to Facing the Facts, Shaping the Future; a draft health and social care workforce strategy

Committee members received the above document for information. A revised strategy is due in the Summer of 2018. Mr Wilson to bring issues / concerns to WODC as and when necessary.

25 Any Other Business

No further business was reported.

26 Evaluation of Meeting / Chair's Significant Issues Report

The Chair provided an evaluation of the meeting and the following was noted for the Significant Issues Report for May 2018 Trust Board:

- a) *Discussion regarding the purpose of Committee being a strategic oversight group and as such, should receive items of a strategic nature and for assurance.*
- b) *Plan to scope an earlier date for the next meeting in order to align with July Board deadlines. If not possible, it was agreed that the Staff Health and Wellbeing Strategy would be received virtually by Committee.*
- c) *A review of Committee Terms of Reference and Work Programme will take place (aligned with headings from the Board Assurance Framework and Workforce and OD Strategy Delivery Plan as appropriate). The aim is to present a streamlined agenda and content with a clear purpose and outcome measures. Committee agreed that operational items will be received by EDG / Audit Committee, as appropriate, instead of WODC.*
- d) *Committee agreed to receive a streamlined Workforce Report with clear lines of governance via operational meetings such as HR Business Partners meetings with the recently configured Care Networks.*
- e) *Committee reviewed the Board Assurance Framework. EDG colleagues to ensure that the descriptors used are appropriate. It was agreed that the strategic objectives under the 'People' aim will inform the Terms of Reference and Committee agenda, but is not limited to.*
- f) *Agreed to integrate links with the Corporate Risk Register and Board Assurance Framework.*
- g) *A strategic review in terms of Organisation Development is required, as well as a review of training subjects that aren't mandatory.*
- h) *Committee reviewed and approved the Communications Strategy subject to amendment and will now be received by Trust Board.*

Confirmed 31-07-18.

Date of next meeting: Tuesday 31st July 2018
1.00pm – 3.30pm, Committee Room 1, Fulwood House
Apologies to: Helen Walsh, PA to Director of Human Resources,
helen.walsh@shsc.nhs.uk, Tel 0114 22 63960