

Board of Directors - Open

Date:	12 th August 2020	Item Ref:	15d
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TITLE OF PAPER	People Committee – Summary Report to the Trust Board of Directors in respect of Significant Issues
TO BE PRESENTED BY	Heather Smith, Non-Executive Director
ACTION REQUIRED	For assurance
OUTOOME	

OUTCOME	To report items of significance discussed at the People Committee meetings held on: 25 th June and 14 th July 2020.
TIMETABLE FOR DECISION	None required
LINKS TO OTHER KEY REPORTS / DECISIONS	Minutes of the Committee
STRATEGIC AIM STRATEGIC OBJECTIVE	Strategic Aim: People Strategic Objective: ALL BAF Risk Number: ALL
BAF RISK NUMBER & DESCRIPTION	BAF Risk Description: ALL
LINKS TO NHS CONSTITUTION /OTHER RELEVANT FRAMEWORKS, RISK, OUTCOMES ETC	Trust Board Assurance Framework NHS Audit Framework
IMPLICATIONS FOR SERVICE DELIVERY & FINANCIAL IMPACT	Timely reporting to the Trust Board of Directors
CONSIDERATION OF LEGAL ISSUES	None required.

Author of Report	Heather Smith
Designation	Non-Executive Director
Date of Report	16 th July 2020



1. Purpose

To report in a timely manner, items of particular significance discussed at the People Committee meetings held on 25th June and 14th July 2020.

2. Significant Issues of Interest to Trust Board

Trust Board members will receive the minutes of the People Committee meetings held on 25th June and 14th July 2020 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.

- **June update:** Committee is not currently assured about health and safety matters, due to the absence of appropriate reports. This is a significant piece of work to be done and a review is underway. There is a plan so that Committee are able to enact assurance going forward, which will be outlined to Committee in July.
 - **July update:** a detailed report was considered by the Committee, as a result of issues raised at the June meeting. The Committee were assured that appropriate policies and systems are in place but compliance and implementation sometimes present difficulties. The Committee asked that health and safety managers include actions to address cultural/behaviour-change barriers to compliance. In addition, the Committee asked for regular updates in areas identified as amber or red, to include the provision of data, which is needed for triangulation and to give Committee assurance rather than reassurance.
- June update: Committee noted a great deal of positive progress on a number of issues which are
 all coming together in a way which can impact on staff wellbeing, morale, culture etc notably
 (considered in this meeting): the bullying and harassment work, staff survey workstreams, a new
 approach to the quality of supervision, organisational development actions, equality and diversity
 discussions
 - **July update**: additional agenda items reinforced this perception, including a report on the development of a 'Fair and Just Culture' approach in terms of staffing issues resolution. This approach was welcomed and Committee asked for more information on how we are supporting front-line managers to implement this cultural shift and also a reflective report in the future on whether the new policy is having an impact.
- **June:** Further thought needed about how we are assessing whether these actions are making an impact going forward. **(this was still the case in the items presented to the July meeting)**
- June update: Committee sought information about the communications plan for sharing with staff
 how positive changes are being implemented to make the organisation a good place to work.
 Committee agreed to receive an item on communications at the next meeting.
 July update: this is being discussed but not yet actioned.
- June update: Committee also agreed that an overall evaluation of each strategic area, and the
 measurables, would be beneficial to receive at future meetings. A useful discussion took place
 about how a cluster of qualitative and quantitative indicators could be put together.
- June update: Committee recognise the challenges with many of the workstreams but very much
 welcomed everyone's contributions, including new members, which has improved the cohesion of
 the meeting and enabled a collaborative approach to improvement.

Additional issues from the July meeting:

- a report on Equality, Diversity and Inclusion included an action plan which was much improved from the one presented at a previous meeting. However, it did highlight a number of issues where more progress is needed, particularly in relation to staff with disabilities. Committee requested an additional report on this area in the Autumn.

In addition, Committee commented that the action plan was focussed on compliance with data required for targets set by national NHS bodies, rather than broader issues concerned with engagement of staff and cultural matters. This was acknowledged and an overarching EDI strategy and approach is to be presented to the Committee in September.

a discussion around the Performance Dashboard led to a request that the Executive Team
consider if any additional administrative support could be allocated to the HR team in order for
them to make progress with matters such as e-Rostering, which would help with the quality of
data being produced.

3. Contact Details

For further information, please contact:

Heather Smith, Non-Executive Director Caroline Parry, Interim Executive Director of Human Resources Helen Walsh, PA to Interim Executive Director of Human Resources

Attached: Approved minutes of Committee dated 28th May and 25th June 2020.



Workforce & Organisation Development Committee

Minutes of the Workforce & Organisation Development Committee meeting held on Thursday 28th May 2020, via teleconference / Fulwood House

Present:

Heather Smith
 Jayne Brown
 Michelle Fearon
 Debra Gilderdale
 Caroline Parry
 Mon-Executive Director of the Board (voting) (HS) – Chair of Committee (the Chair)
 Trust Chair (voting) (JB) (the Trust Chair)
 Interim Chief Operating Officer and Executive Director of the Board (voting) (MF)
 Director of Nursing & Professions and Executive Director of the Board (voting) (DG)
 Acting Director of Human Resources (non-voting) (CP)

Caroline Parry
 Rita Evans
 Liz Johnson
 Acting Director of Human Resources (non-voting) (CP)
 Director of Organisational Development (non-voting) (RE)
 Head of Equality and Inclusion, Bank and eRostering (LJ)

8. David Walsh Director of Corporate Governance and Board Secretary (non-voting) (DWa) (part)

In Attendance:

9. Gaby Dale Organisational Development Business Partner (observing item 4) (GD)
10. Aimee Hatchman
11. Anita Winter Associate Director – Patient Safety (for item 9a) (AW)

12. Helen Walsh PA to Director of Human Resources (HW) (minutes)

Apologies:

Dean Wilson, Director of Human Resources and Executive Director of the Board (voting at WODC) (DWi) Liz Lightbown, Director of Nursing & Professions and Executive Director of the Board (voting) (LL) Julie King, Programme Lead Nursing Quality Improvement Projects (JK) Brendan Stone, Associate Non-Executive Director (non-voting) (BS) Karen Dickinson, Head of Education Training and Development (KD)

No further apologies were received.

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1.	a. Welcome and apologies
	The Chair, Heather Smith welcomed members to the meeting. Apologies were received from Dean Wilson, Liz Lightbown, Julie King, Brendan Stone, Karen Dickinson.
	b. Declaration of interests
	No declarations of interest were noted.
2.	Minutes of the meeting held on 28th April 2020



a. Accuracy	
The minutes of the meeting held on 28 th April 2020 were agreed as an accurate record.	
The confirmed WODC minutes, dated 28 th April 2020, will be re-circulated to Committee n when they are submitted to the June 2020 meeting of Trust Board, along with the significant report from today's meeting.	
b. Matters arising / Action Log	ACTIO
i. People Strategy Delivery Plan KPIs	
At a previous meeting of WODC Ms Lightbown suggested that it would be beneficial to see on the KPI document what the desired outcomes are for each of the 'Key Findings' and also to include 'blue' (complete and embedded) as part of the RAG rating.	
It was noted that KPIs have been included as part of the latest iteration of the Delivery Plan, and this action can now be removed from the Action Log.	
ii. People Strategy Amends / Additions	
The Chair reiterated that it was agreed at Trust Board that she would sign off any further amends. The Strategy will also take account of the National People Strategy once this is published. The Chair and Ms Parry agreed that the deadline for amendments / additions to our People Strategy is 31st August 2020.	
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ACTION Bfwd – Ms Parry to arrange to meet with staff groups and share how their feedback has informed the development of the People Strategy and delivery plan.	Caroline Parry
feedback has informed the development of the People Strategy and delivery plan. ACTION Bfwd – Ms Parry / Ms Johnson to expand on the statement in the People	Parry Caroline Parry Liz
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feedback has informed the development of the People Strategy and delivery plan. ACTION Bfwd – Ms Parry / Ms Johnson to expand on the statement in the People Strategy relating to the availability of flexible working arrangements. iii. Bullying and harassment The Chair noted that a report is expected at Committee that considers how the impact of our Trust B&H initiatives can be measured and recorded. Also noted that Staff Side have been involved in the project from the outset. The Bullying and Harassment Policy will be presented to Committee in June, for ratification, following a complete re-write, co-produced with Staff Side, and renamed. Following brief discussion, it was agreed that Ms Parry would provide a final report on this topic to Committee in June 2020. After that it will be reported on in updates regarding the People Strategy Delivery Plan as part of the fair and just culture approach / health and wellbeing of staff. The Chair highlighted that the Trust Board will be interested to note developments with the project and that Staff Side are in agreement	Parry Caroline Parry Liz

	At the last meeting in April, Committee were not assured by the report in terms of getting underneath the concerns highlighted by the results of the Staff Survey. Ms Evans highlighted that the cultural issues are covered in the OD report (later in the agenda), however, Ms Johnson and Mrs Evans agreed to present, a standalone report on Staff Survey, to Committee in June to report on the significant progress being made.	
	The actions are a combination of high level and local level which have very different approaches. The action plan will indicate the relationship between the workstreams and the wider strategies of the Trust. Ms Johnson added that a joint communication to staff has been issued in conjunction with Staff Side.	
	The Chair highlighted that the Trust Board will be interested to note developments with the project, how we are communicating with staff, and that Staff Side are in agreement with the approaches being taken.	
	ACTION – Ms Johnson and Mrs Evans to provide a standalone report to Committee in June 2020, and Trust Board in July 2020.	Liz Johnson Rita Evans
	v. Health and Safety	
	The Chair reported that, following the last meeting in April, she contacted Jan Ditheridge, CEO and Clive Clarke, Deputy CEO. Mr Clarke is actively pursuing the concerns raised by Committee, including the nurse call system, and the Chair will speak to him tomorrow to outline the issues further. Mr Clarke will present a report to Committee in June.	
	The Chair added that the Director of Corporate Governance is conducting a review of the Trust governance structure but, for now, health and safety will remain with the People Committee.	
	ACTION – Mr Clarke to present a full report on health and safety to Committee in June 2020.	Clive Clarke
	vi. WODC Action Log	
	Noted that the remainder of the actions on the WODC Action Log are either complete, or on the agenda for today's meeting, or deferred to a future meeting.	
	c. Confirmation of new name of Committee	
	The Chair confirmed that the Committee is now called the People Committee. This will be reflected in the agenda and reports from the June meeting onwards.	
	The Trust Chair commented on the symbolic nature of the new name which emphasises what we care about - "our people / staff", and asked whether we should launch the Committee to make staff aware of the work we are doing and the new name of the Committee.	
	ACTION – The Chair to contact the Communications Team to launch the People Committee.	Heather Smith
3.	People Strategy Delivery Plan (draft)	

Committee acknowledged receipt of the report and Delivery Plan.

Ms Parry presented this key item on the agenda, and the following was noted.

- To note that this is the first draft of the Delivery Plan. This is because more engagement is required with certain groups, who will be consulted with further over the next couple of months. The groups include the Lived Experience Group, the Service User Engagement Group, the BAME Staff Network Group and the LGBTQ+Group (the latter is a new group that is being convened). Ms Parry plans to present to these groups what has already been included and discuss ongoing engagement and involvement with the delivery plan.
- The draft takes account of the situation with the COVID-19 pandemic and also, running concurrent to the Delivery Plan being developed, is the CQC action planning. It will be essential to ensure that the Delivery Plan and CQC planning complement each other as much as possible.
- Ms Parry pointed out that KPIs have been drawn up alongside the Delivery Plan but, unfortunately, they were not shared with Committee members this time but will be provided to the Chair of Committee after the meeting.
- The Trust Chair reported that she likes the format of the Delivery Plan and how its
 presents the information, however, she would like to see the elements of the Plan
 prioritised into levels of importance, with clear milestones. Ms Parry replied that
 there are different groups being set up to take forward the CQC actions, with
 workforce cutting across all aspects of them, which will inform the priorities for the
 Delivery Plan going forward.
- Mrs Evans reported that she has been involved in the development of the Delivery Plan with Ms Parry and others. The dependencies are still to be completed which will be important to show that alignment with all areas – how one area of work can help another area. Which is one of the processes being worked through in OD as well.
- The intention for the OD Strategy is to put it into a similar format to the Delivery Plan so that it is clear where the dependencies are. The Chair welcomed this consistent approach, which should be applied to all 'plans' across workforce, including the Equality, Diversity and Inclusion plan, and perhaps the same format, language and KPIs to use are those in the CQC Action Plan. Ms Parry said that the Project Management Office assisted with the Delivery Plan and used a format that they are trying to adopt consistently Trust-wide.
- Mrs Evans added that it will be beneficial to ensure, for each of the strategies / work
 plans, that we are ambitious in our vision. Ms Parry added that we will be mindful of
 overlap and take care not to duplicate, wherever possible.
- Ms Johnson reported that each specific piece of work that makes up the Delivery Plan (and OD Strategy) will undergo an Equality Impact Assessment, rather than separate pieces of work on equality. Ms Parry to ensure that this point is made clear in the Delivery Plan.
- Ms Parry added that she will discuss with Ms Gilderdale the recruitment and retention element of the Delivery Plan, regarding what else might need to be included, with particular reference to nurses.
- Following a query from the Trust Chair about the importance of the alignment of two
 of our most important strategies the Nursing Strategy and the People Strategy, it
 was agreed that Ms Parry and Ms Gilderdale will discuss this further given that it had
 been agreed some time ago not to have a separate strategy for nursing, but this may
 change now that Ms Gilderdale is in post.

Committee were assured that there is now a Delivery Plan that indicates work-flow going forward, and that there is robust ownership across the organisation. Caroline Parry, Rita ACTION – Ms Parry, to provide a verbal update to Committee in June on the Evans. Liz priority areas, and with Mrs Evans and Ms Johnson consider using a consistent Johnson format for all plans going forward. Caroline Parry ACTION – Ms Parry and Ms Gilderdale to discuss the nursing element of the Debra Delivery Plan as outlined above. Gilderdale Strategic theme: Health and Wellbeing to support staff to feel healthy, happy and well at work No report for this meeting Strategic theme: Recruit and retain the right staff with the right skills No report for this meeting. Strategic theme: Workforce Transformation to meet service needs both now and in the future No report for this meeting. Strategic theme: Collective, inclusive, compassionate leadership, with equal opportunity **Organisational Development interim update** Committee acknowledged receipt of the report. Mrs Evans presented the item, and the following was noted. Gaby Dale, OD Business Partner co-produced the report and joined the meeting for this item. The report relates to Quarter 4. The last formal update was back in January. This report shows progress since the verbal update in April. Key items include looking at the interdependencies between the areas that now sit within the OD portfolio. The 'plan on a page' (appendix A) considers how the nine original OD priority areas align with the four key focussed areas, alongside the diagnostic work. These three workstreams will inform a more comprehensive OD Strategy from September 2020 onwards. Business as usual until then, supporting the strategic priorities, and, to underpin the more comprehensive strategy, the OD team are looking at one of the key systemic areas that we need to change which is the culture of the organisation. • When the OD Strategy is developed we will have that assurance that we are already addressing some of the knotty issues in the organisation. Mrs Evans referred to slide 6 which shows the alignment between the initial OD priorities and the areas that have been identified as part of the 'getting back to good' journey. Funding has been requested for the latter CQC areas, and it is hoped that extra resource will be obtained for the initial priorities as well. The OD team have also been working on their 'function and form.' There is a lot more matrix work being undertaken now with each of the additional portfolio areas. There are new members of the team, some of which will draw from the existing resource in the organisation. For example, Emma Highfield from the Recovery

- Team will be working with OD for six months to drive some of the key projects forward.
- Slides 9 and 10 show the scope of the OD work being undertaken from the wider system level, organisational level through to the work that is commissioned by teams and individuals. Slide 10 shows who will be leading on each area and who will be supporting each area.
- It is important to identify the critical issues and accelerate pace.
- The 'plan on a page' (appendix A) highlights work in progress and shows the four key focus areas for 2021 and the objectives. It also shows the key actions that have taken place in Q1 and Q2, and key milestone dates. The reason for focusing on Q1 and Q2 is because it is an iterative process they will inform Q3 and Q4.
- It is recognised that, so far, this is a programme management approach but the aim is put it into the same format as the People Strategy Delivery Plan.
- Mrs Evans also shared with Committee the update report that indicates the work that is being undertaken with the University.
- A lot of progress is being made which was highlighted in the comms piece in Connect recently which also identified the first phase of cultural change in the organisation. There has been a positive response to that communication and 20 people have already expressed an interest in being involved. They will be invited to take part using some of the Listening into Action methodology as well.
- With regards to the diagnostic Mrs Evans proposed that she feeds back to Committee on some of the emerging themes at the June meeting. One to one interviews will be undertaken to inform this more thoroughly. This will then inform the final report that will be shared with Committee in July, which in turn, will inform the OD Strategy (a draft of which will also be shared with Committee). Mrs Evans added that Stefan Cantore from the University will join the meeting for that item.
- Ms Parry said it was a useful report that indicates an awful lot of work. Ms Parry and Mrs Evans work closely and it is important to work through where priorities overlap and complement each other's areas of work.
- The Trust Chair thanked Mrs Evans for the report and found the presentation slides style particularly helpful. It was agreed that it would be good to hear from the University but to frame that conversation beforehand to outline that the role of the Committee is 'assurance'. However, the Trust Chair added that she still isn't clear on deliverables and how we will measure success. How will we know when we have made an impact? Mrs Evans will include this in the next iteration of the plan, on two pages rather than one.
- Following a query from Mrs Evans about how to engage with Trust Board members, the Trust Chair suggested that the Board Development Session in August is used to undertake a focussed session on the People Strategy and OD Strategy, given that these two strategies are so critical. The Chair agreed and added that it might link in well with the leadership session that the Chief Executive has planned for August.
- The Chair thanked Mrs Evans for responding to Committee's request last time, and summarised by asking Mrs Evans to consider, for her next report in June, how to ensure that Committee can enact an assurance process around the key deliverables and impact. Committee would also expect to see in June the emerging themes from the diagnostic and Listening into Action.

ACTION – Mrs Evans to provide another report to Committee in June, that will provide assurance regarding key deliverables, actions that are ongoing, clear outcomes and how impact will be measured.

The final report to be provided to Committee in July 2020, and Trust Board in

Rita Evans

	September 2020.	Rita Evans
	ACTION – Mrs Evans to contact David Walsh about the agenda for the Trust Board Development Session in August 2020.	Rila Evalis
5.	Combined Action Plan relating to Equality, Diversity and Inclusion	
Ĭ	Committee acknowledged receipt of the report. Ms Johnson presented the item, and the following was noted.	
	 Ms Johnson reported that it was a useful exercise to undertake, to provide progress and assurance, however, it was a challenge to bring together all areas of equality, diversity and inclusion into one plan, and some of the contents are a little incongruous. Noted that the Chair's request to present the information in a standardised format would be difficult given that some of the data is potentially defined regarding how it needs to be presented publicly. The Chair thanked Ms Johnson for producing the document, realising the complexities around some of the metrics pertaining to the WRES and WDES. The Chair agreed to discuss with Ms Johnson separately regarding how the information can be best translated to provide assurance to Committee going forward. ACTION – The Chair and Ms Johnson to discuss separately how the information can be best translated to provide assurance to Committee going forward. 	Heather Smith Liz Johnson
6.	HR Performance Report Dashboard	
	 Committee acknowledged receipt of the first draft of the report. Ms Hatchman joined the meeting for this item, and the following was noted. The Workforce Information Team have reviewed all of the data that they produce to ensure that reports are produced that are relevant, readable and useful. Since production of the report provided to Committee, Ms Hatchman has taken part in an NHSi training session as part of some of the CQC work. It covered how to use data to provide assurance and exception reporting, and highlighted the essential elements of a report. Ms Hatchman explained the premise behind each of the charts – for example, the one for sickness absence shows the upper and lower level data with a green line indicating in March that there was a spike in sickness absence due to COVID-19. The charts also show an average line – which depicts trends in data. If there is more than 7 data points above or below the average that means that there is a positive or negative change in that statistic. The aim is to highlight on each chart where key statistics might be useful to Committee – using different colours on the data points. The intention is to run off one consistent reporting template each month and report on it at different levels. This could be by service or by staff group. The Workforce Information Team receive many requests for data so it is important to have consistency of data to share with whoever requests it at any one time. In future the dashboard will potentially cover a number of different themes i.e. recruitment and retention, employee relations, data quality, rostering, temporary staffing – which is a significant piece of work, so as much feedback as possible is appreciated, to ensure the reports are useful and can be used effectively. 	

- At present the team are focussing on the temporary staffing dashboard and the People Committee KPI dashboard. Once the format for these is right the team will move onto other themes.
- Ms Hatchman added that the team will also be creating Standard Operating
 Procedures (SOPs) that sit with the reports / dashboards to define what data we are
 looking at, the parameters put in place, who the data owners are etc. In addition, the
 team will build in reviews to ensure that short term reports aren't being produced if
 they are no longer required.
- Following a query from Ms Gilderdale, Ms Hatchman confirmed that Trust turnover of staff decreased as a result of COVID-19. 'Turnover' is one of the particular themes where the data can be interrogated (including or excluding any outliers) to determine where the root causes are.
- Ms Fearon thanked Ms Hatchman for the support she has provided to the Care Networks, and the dedication of the whole Workforce Information Team to produce reports that work. The Trust Chair agreed and thanked Ms Hatchman. Ms Parry echoed this and said that Ms Hatchman is a great addition to the HR Directorate and it is fantastic to finally have the data presented in this way.
- Following a query from the Trust Chair, Ms Hatchman said that the high-level report can be made available with narrative for Committee meeting in June.

ACTION – Ms Hatchman to provide a high-level dashboard with narrative for Committee in June.

Aimee Hatchman

7. CQC tracking report

Committee acknowledged receipt of the report.

Ms Fearon presented the item, and the following was noted.

- Ms Fearon provided a summary in respect of Mandatory Training and Supervision.
- Great success and progress has been made, with an increase in trajectory in both areas, and there is great confidence that that will continue.
- Further work has been undertaken to ensure that clinical teams / individuals are receiving supervision in a consistent and timely way.
- Committee have received the Supervision Policy with Committee papers.
- Following a query from the Chair, Ms Fearon replied that the CQC asked us to provide evidence that we comply with Trust policy, by 31st May 2020, which states that a minimum of 4 supervision sessions are undertaken over a 12-month period. Ms Fearon added, that in order to comply with our CQC s29a programme, 80% of our clinical staff were required to have 4 or more supervisions (as per policy) and 80% of staff compliant with mandatory training, by 31st May 2020.
- In conclusion the Chair reported that we have succeeded in reaching the compliance rates set out in the s29a programme and asked that thanks from the Committee are passed on to all those involved.
- The Chair added that next month Committee will be receiving a report that looks at the quality and impact of supervisions in both clinical and corporate areas.

ACTION – Committee to receive a report at the June meeting re the quality and impact of supervisions in both clinical and corporate areas.

Michelle Fearon (Linda Wilkinson)

General Governance

HR Policies	ı
The Chair reported that the new governance process is a lot clearer now, and the reports for each policy now provide much clearer rationale and the assurance to Committee that Policy Governance Group have undertaken the four key tests before recommending for ratification by Committee. However, this assurance is missing from the report accompanying the Supervision Policy, and the Chair said she would seek further clarity from Mr Walsh regarding that.	
a. Update re policies remit at assurance Committees, aligned with Executive Director portfolios	
Mr Walsh reported that an initial review of aligning policies with new portfolio areas has been undertaken by Brenda Russell, PA to Corporate Governance. This will enable the each accountable Director to be notified when their policies are due for review.	
It was noted that this wouldn't have an impact on Committees. For example, the Health and Safety policies would still be ratified by this Committee but instead of the Director of HR being accountable it will be the Deputy Chief Executive.	
Following brief discussion. Committee noted that some positive amendments had been	
Following brief discussion, Committee noted that some positive amendments had been made to the previous policy. The Trust Chair asked if we could check that our current secondments are following our own new policy. Committee ratified this policy and noted that it had been re-submitted within the shortened timescale given at the last Committee meeting, for which recognition should be passed on to the author. ACTION – Ms Parry to arrange for HR to check that our current secondments	Caroline
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e. Redeployment Policy extension to review date request

Committee received the extension to review date request for this policy. It was noted that Policy Governance Group have approved a new review date of 30-09-20. Committee ratified the extension request.

9. Risks assigned to Workforce – update on three high-risk areas

Committee requested, at the meeting in April, to receive a report to provide assurance on the following three high-risk areas as identified by Committee.

Below is a summary of action taken to mitigate risk in each of the three areas.

a. Moving and Handling Training and Back Care / Manual Handling Adviser

Back-Care / Manual Handling Adviser

In the absence of Dean Wilson, Executive Director of Human Resources, the lead role for progressing recruitment of the Back-Care Adviser post will be via Anita Winter, Associate Director – Patient Safety.

We have been unsuccessful in recruiting to the Band 7 Back Care Adviser post despite two rounds of adverts being placed on NHS Jobs. When the role was initially developed the grading was based on the lowest of the bandings being advertised across the Region which at that time ranged from Band 7 to band 8C (each role having differing breadths and levels of responsibility). The Moving and Handling Task & Finish Group believe that the inability to recruit is likely to be due to the grading of the post.

This issue was raised as a concern at the Health & Safety Committee on 21st May 2020, and it was agreed that the responsibilities of the Band 7 Back Care Adviser role would be reviewed and adjusted in line with Band 8a. The job description will be reviewed w/c 25th May 2020 and the post will be processed through the Agenda for Change panel w/c 1st June 2020 and then re-advertised. Funding approval was confirmed at the meeting by Clive Clarke, Deputy Chief Executive.

Moving and Handling Training

In the meantime, work continues overseeing Moving and Handling training delivery and compliance through the Moving and Handling Task & Finish Group.

However, it should be noted that due to social distancing, it is currently not possible to safely deliver the practical element of Moving and Handling Level 2 due to the close personal contact needed to undertake the hands-on elements of the course.

To mitigate the risk, we are asking staff non-compliant with Level 2 Moving and Handling to undertake the level 1 knowledge package and as at 17th May 2020, 300 staff were non-compliant with Level 2, however 78% had achieved Level 1.

Moving and handling Training compliance for the Trust as at 17th May 2020 is as follows:

- 88.92% for Level 1
- 60.22% for Level 2

Ms Winter updated that the compliance rate for Level 2 has now decreased to 59.45% but we are proactively trying to engage with staff who haven't yet completed their training (via the methods now available that doesn't involve face-to-face training). The Chair and Trust Chair thanked Ms Winter for the report.

The Chair added that a verbal update (on both items) should be provided to Committee in June, via Ms Parry.

ACTION – Ms Parry to provide a verbal update at the Committee meeting in June regarding the Moving and Handling Training and the Back-care / Manual Handling Adviser recruitment.

Caroline Parry (Karen Dickinson)

Committee also noted -

The Back Care and Manual Handling Policy (version 8) was ratified in March 2013. EDG approved a second extension to the review date on 20th February 2020, the revised review dated being 30th June 2020. However, given the absence of a Back-Care Adviser, the existing policy will remain in situ with a further extension being requested to 30th November 2020. This lengthy extension period is to allow for recruitment to the Back-Care Adviser post, review of the policy by the post-holder, and the extended policy governance process which now includes ratification by the Workforce and OD Committee, which meets once a month.

b. Registered Nurses

Ms Fearon presented the report and the following was noted.

- Ms Fearon stated that the report seeks to provide Committee with the current vacancy position and to highlight the stark challenge that we have, particularly across our acute services and with our registered nurses
- As an appendix to the report the previous Board paper was also provided to Committee to outline some of the background to those challenges.
- The report highlights where we are right now and what we plan to do to get us where we need to be. This will involve a new approach (developed by Debra Gilderdale, Caroline Parry and Michelle Fearon) to bring together a 'rapid improvement cell' particularly focussed on registered nursing recruitment, involving the right people, staff and Staff Side so that we can move forward with this at pace.
- Ms Parry added that the People Strategy Delivery Plan supports this activity
 recognising the rapid response and the current positive interest in the NHS, borne
 out of the COVID-19 situation. It includes a marketing strategy / social media.
 There is much more we can do to attract people to work for us. Bespoke benefits
 packages are one consideration particularly for experienced nurses.
- Following a query from the Trust Chair, Ms Fearon replied that we recruited more new nurses than any other Trust in the region from the University this cohort.
- The 'growing our own' is another area we need to pay attention too. Ms Gilderdale echoed this saying that it's multi-facetted. Recruitment is one area but it's also about retaining staff we've already got and making the best of them.
- The main concern is the lack of Band 6 experienced nurses.
- Following a further query about the offer from the University, Ms Fearon replied that
 Tony Bainbridge has been working closely with the University and their Preceptors
 around their experiences over the two years of their journey. Positive feedback has
 been received regarding the support they've received and the learning and

adaptation as a Trust based on that experience. Ms Parry added that we have also engaged with the Research Team. Michelle Horspool has contributed to the Delivery Plan and the team have undertaken research studies into recruitment and retention which will play a valuable part in the rapid action group to support us in different initiatives. It might include supporting new nurses to progress via different routes but also mature nurses – use it as an opportunity to engage with them and use their expertise. • Following a suggestion from the Chair that regular updates are provided to Committee, Ms Fearon agreed that she would provide an update at the next meeting and then every two months. The Chair asked that for the report in June this focusses on the actions being taken. Michelle ACTION – Committee to receive a verbal update at the June meeting to highlight Fearon the actions being undertaken. For information (to include external partnership reports, audits etc where available) Review of 'responding to the Recruitment Challenge' paper Ms Parry reviewed each of the key points against what we are doing as a Trust. There are elements we can build on, such as the KPI on time taken to recruit. Like most Trusts we have struggled with this in the past and are keen to ensure we are using the same 'measurement' as other Trust's to enable accurate benchmarking of data. The report mentions common mandatory and statutory training. There is an NHS England Core Skills Framework which we are heavily involved in and lead on. The report also mentions that 75% of Trust have the TRAC recruitment programme. We have developed a business case for this, and hope to be able to use this system as soon as we can because it will help increase our reporting functionality hugely. There were no other outliers in the report other than areas that we already do that we need to sharpen up on. **Any other Business** To note any other business within the scope of the Committee's Terms of Reference No further business was noted. **Evaluation / Annual Planner** a. Future update reports The Chair reported, following a conversation with Ms Parry, that future updates could be provided to Committee by adding a new date and text in red to the existing report. This will negate the need to produce a new report from scratch each time.

Critical risk issues had been identified for monitoring at this meeting: Moving and Handling training; recruitment of a Back-care manual handling advisor; recruitment of Registered Nurses. With respect to the first two, Committee are assured that

b. Confirmation of significant issues to report to Board of Directors (June 2020)

12.

these issues are being addressed but asked for further updates at future meetings to close any gaps in assurance. With respect to recruitment of Registered Nurses, the Committee could not be provided with assurance that current methods of increasing recruitment were having impact. The Committee heard from the COO that a 'rapid improvement cell' was being put in place in order to address this. Regular updates were requested by the Committee.

- Committee are assured that plans are in place for the People Strategy Delivery Plan, the Organisational Development plan and for the Equality, Diversity and Inclusion workstreams. However, Committee asked for more ways of receiving assurance whether it be via key deliverables being identified, or, clearer identification of what the impact measures are going to be.
- There is significant progress with the HR Performance Dashboard, and Committee are also assured that it is going to be informed by national best practice.

c. Key agenda items for the June 2020 meeting of Committee

Committee received the Annual Planner for information. Authors to refer to the annual planner which will be updated following a Committee debrief and agenda planning discussion.

> Date and time of next meeting: Thursday 25th June 2020, 2.00pm-4.00pm via teleconference / Fulwood House

Apologies to: Helen Walsh, PA to the Director of Human Resources
Helen.Walsh@shsc.nhs.uk

ITEM 2a, 14-07-20 UNCONFIRMED



People Committee

Minutes of the People Committee meeting held on Thursday 25th June 2020, via teleconference / Fulwood House

Members Present:

Heather Smith
 Michelle Fearon
 Debra Gilderdale
 Non-Executive Director of the Board (voting) (HS) – Chair of Committee (the Chair)
 Literim Chief Operating Officer and Executive Director of the Board (voting) (MF)
 Director of Nursing & Professions and Executive Director of the Board (voting) (DG)

4. Brendan Stone Associate Non-Executive Director (non-voting) (BS)

5. Caroline Parry Acting Executive Director of Human Resources (non-voting) (CP)

6. Rita Evans Director of Organisational Development (non-voting) (RE)

7. David Walsh Director of Corporate Governance and Board Secretary (non-voting) (DWa) (part)

8. Liz Johnson Head of Equality and Inclusion, Bank and eRostering (LJ)

In Attendance:

9. Clive Clarke Deputy Chief Executive (non-voting) (for item 4) (CC)

10. Sarah Bawden Acting Deputy Director of Human Resources (for item 5) (SB)

11. Linda Wilkinson Director of Psychology (for item 8) (LW)

12. Aimee Hatchman HR Systems and Workforce Information Manager (for item 11) (AH)

13. Beverley Murphy Improvement Director (BM) (observing part meeting)

14. Helen Walsh PA to Executive Director & Acting Director of Human Resources (HW) (minutes)

Apologies:

Jayne Brown, Trust Chair (voting) (JB) (the Trust Chair)

Dean Wilson, Director of Human Resources and Executive Director of the Board (voting role at PC) (DWi) Liz Lightbown, Director of Nursing & Professions and Executive Director of the Board (voting) (LL) Karen Dickinson, Head of Education Training and Development (KD)

No further apologies were received.

No	ltem	
1.	a. Welcome and apologies	
	The Chair, Heather Smith welcomed members to the meeting. Apologies were received from Dean Wilson, Jayne Brown, Liz Lightbown, Karen Dickinson.	
	b. Declaration of interests	
	No declarations of interest were noted.	
2.	Minutes of the meeting held on 28 th May 2020	
	a. Accuracy	
	The minutes of the meeting held on 28 th May 2020 were agreed as an accurate record. The confirmed People Committee minutes, dated 28 th May 2020, will be re-circulated to Committee members when they are submitted to the July / August 2020 meeting of Trust Board, along with the significant issues report from today's meeting.	



b. Matters arising / Action Log	ACTION
i. Relaunch of the People Committee	
It was noted that the Chair of Committee has spoken with the Communications Team about the re-launch of the People Committee and will revisit this in a month or two, given the pressures the team are under currently. This will be part of a wider communication plan for the development work going on across the Trust.	
ii. Equality, diversity and inclusion	
The Chair reported that she and Ms Johnson had discussed how the comprehensive information provided last time could be translated to provide assurance to Committee, and noted that an overarching report would be provided to Committee in July.	
ACTION – to note for July agenda.	Liz Johnson
iii. Organisational Development	
Mr Walsh confirmed that the intention is to have a Board Development Session in August. Mrs Evans would present a session on Organisational Development at that meeting, following a verbal update to the July meeting of Committee (with the final version of the OD Strategy to Committee in September – key item on agenda).	
<u>POST MEETING NOTE</u> – July Board items deferred to August Board (re-instated as regular Board business instead of Board Development Session).	
ACTION - Mrs Evans to present a session on Organisational Development at a future Board Development Session, following a verbal update to the July meeting of Committee (with the final version of the OD Strategy to Committee in September – key item on agenda).	Rita Evans
iv. Existing Secondments	
Ms Parry confirmed that HR will check that our existing secondments adhere to the new Secondment Policy. This action can now be removed from the Action Log.	
v. People Committee Terms of Reference	
Mr Walsh confirmed that a draft of the amended Terms of Reference for People Committee would be developed and final version available for sign-off at Committee in September.	
ACTION – to note for September agenda.	David Walsh
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vi. People Committee Action Log	
vi. People Committee Action Log Noted that the remainder of the actions on the People Committee Action Log are	

3. People Strategy Delivery Plan verbal update on priority areas

Ms Parry provided a verbal update on the priority areas, and the following was noted.

- Development of a consistent format and set of reporting measures for all HRrelated Action Plans is ongoing.
- Following a discussion with Ms Gilderdale, Ms Parry reported that a separate Nursing Strategy is not required. Ms Gilderdale confirmed that the People Strategy covers nursing comprehensively. The Chair thanked Ms Parry and her team for their hard work in developing an overarching Strategy that negates the need to have multiple strategies.
- Ms Parry reported that a number of groups indicated that they didn't feel that they
 were sufficiently engaged with the co-production of the Strategy. Ms Parry
 reported that on 15th July she is meeting virtually with the Chairs of the Lived
 Experience Group, Service User Safety Engagement Group and BME Staff
 Network Group along with Ms Evans for the OD Strategy and Ms Johnson on
 behalf of the newly formed LGBTQI+ Group.
- In addition, Peter Isebor, Chair of the BME Staff Network Group has provided a number of names to Ms Parry so that a smaller group can feed in to the Strategy and report back to the BME Staff Network Group.
- Ms Parry added that Sarah Bawden joined the SUSEG Group yesterday to talk about peer Support Workers and the career structure for them i.e. recruitment, retention, induction. This is a result of feedback received on the Strategy at early development stage.
- It was confirmed that final amendments to the Strategy will be shared with the Chair of Committee by Ms Parry, by the end of August, ahead of a full report being provided to Trust Board in September.
- Ms Fearon reported that it is now important to communicate to the wider Trust the elements of the Strategy, and the 'getting back to good' CQC initiatives, that affect the day to day work of our staff. The Chair asked that Ms Fearon feed that back to Executive colleagues for implementation.
- Ms Parry reported that the ACP are taking stock of their Workforce Strategy which
 was paused in March due to COVID-19. Our Strategy will largely reflect what is
 already in the ACP Strategy but this will be double-checked.

ACTION – Ms Parry to check that elements of the refreshed ACP Workforce Strategy are reflected in our People Strategy.

Caroline Parry

ACTION – Ms Parry to share final amendments to the Strategy with the Chair by the end of August, and a full report to be provided to September Trust Board.

Caroline Parry

ACTION – Ms Parry to provide progress updates to Committee on the four themes of the Strategy – health and wellbeing, leadership and talent, recruitment and retention and workforce transformation, as reflected in the structure of the standardised agenda.

Caroline Parry

ACTION – Ms Fearon to share with Executive colleagues her thoughts around communicating with the wider Trust, as described above.

Michelle Fearon

4. Health and Safety

Committee acknowledged receipt of the report.

Clive Clarke, Deputy Chief Executive joined the meeting and presented this item. The following was noted.

- Health and Safety transferred to Mr Clarke's remit, in April 2020, as part of the refresh of Executive portfolios.
- Committee have not been assured by health and safety matters for many months and had requested an update in order to enact assurance.
- The first part of the report covers the recruitment plan and structure for the Health and Safety Team, for information.
- The latter part of the report covers the work programme for health and safety
 which includes thirteen elements reported either quarterly, bi-annually or on an
 annual basis, via the Health and Safety Group and into Board sub-Committees.
- Committee concurred with Ms Fearon's view that she didn't feel assured by the
 report regarding the wider health and safety issues and what we are doing
 about them and underlying performance issues. Mr Clarke said that he could
 not, as yet, assure Committee without the further development of a work
 programme. Ms Fearon asked about the core areas of health and safety that
 Committee should be sighted on and what actions are being taken to mitigate
 risk. Mr Clarke committed to provide this to Committee at the next meeting in
 July.
- Following a query from Ms Parry about training and influencing behaviours and culture, and what next re COVID-19, Mr Clarke agreed to include these in the next report.
- Mrs Evans said that OD can help with framing the body of work to enact the development of the team.
- Ms Gilderdale added that CAS alerts (Central Alerting System) are provided to the newly convened weekly Governance Board which health and safety colleagues feed into.
- Mr Walsh reported that he is attending the next meeting of the Health and Safety Group and is working with Helen Payne to refresh and develop the terms of reference for the Health and Safety Group.

ACTION – Mr Clarke to provide a comprehensive update at the next meeting of Committee in July.

Clive Clarke

Strategic theme: Health and Wellbeing to support staff to feel healthy, happy and well at work

5. Zero tolerance and the Trust approach to bullying and harassment

Committee acknowledged receipt of the report.

Mrs Bawden joined the meeting and presented this item. The following was noted.

- The bullying and harassment workstream is a piece of work developed in conjunction with, and co-produced with, Staff Side, which has been a positive experience. As well as with colleagues from the Health and Wellbeing Group.
- Engagement with staff members took place via a series of drop-in Sessions; microsystems work took place with team managers and reviews were also completed at the end of each Case to establish the learning points. However, it was noted that it was a challenge to obtain feedback from staff on such a sensitive subject.

- A lot of time has been spent on understanding where changes can be made to make the most positive impact. The biggest change is around how we position the Unacceptable Behaviours Policy that sits beneath all of our commitments and pledges previously called the Bullying and Harassment Policy. The renaming of the policy is in response to feedback regarding the kind of experiences that staff wanted help with, and a significant part of that is they felt they didn't have any route to go down without making it a formal complaint about bullying. The new policy has also been repositioned to be more inclusive, it sets out the process for early resolution and clarifies more clearly what happens if issues can't be resolved at an early stage. It also seeks to describe, if the allegation constitutes 'misconduct' that this is dealt with by the appropriate channels.
- Mrs Bawden added that the reputational cases we've heard about more recently would have been helped by the changes now put in place.
- The new policy relies on us to have more access to mediators and support outside of normal line management. Mediation has already had a positive effect on a couple of recent cases. These were situations, particularly around staff being unhappy in relation to COVID-19 and the workplace, that have been dealt with a lot quicker than they normally would have been.
- There is a programme of support for managers, to understand the new policy and to provide the skills involved for managing conflict in the workplace.
 Trained mediators will be available to support those discussions.
- Ms Parry thanked Mrs Bawden and colleagues including Staff Side, Stacey Roulson, Wendy Fowler - Freedom to Speak Up Guardian and Phillip Easthope, Executive Lead on the bullying and harassment work. Ms Parry added that this workstream is covered in the People Strategy under health and wellbeing.
- Ms Fearon commented that it is a fantastic piece of work and welcomed the appreciative enquiry methodology, and seeking to reach an early resolution via mediation will make a huge difference.
- The Chair asked Ms Bawden to consider what the measures are that will give Committee the assurance that this new approach is working, compared to three years ago. Ms Johnson added that there will be a question related to behaviours in the NHS Staff Experience Survey which will help measure the impact of the new approach going forward.
- Ms Evans added that initially we will get more people using the policy which will
 cause a spike in data but, over time, the mediation approach, combined with
 other cultural initiatives, should mean that the number of cases is minimised.
- Ms Parry added that the Listening into Action Group will be a useful forum for this piece of work. The Champions will help spread the message but also, another Pulse-Check could be run (which is initially where the concern re bullying, harassment and behaviours was raised).
- It wasn't a specific question in the NHS Staff Experience Survey last time but will be next time.
- Another measure could be to monitor the number of staff who refer to Union colleagues. Staff Side are great advocates of the new approach given that they co-authored the policy.

ACTION – a further update to Committee in July on a fair and just culture and the measurables, followed by a report to Trust Board including the collaborative approach with Staff Side.

Caroline Parry Sarah Bawden

6. NHS Staff Experience Survey update

Committee acknowledged receipt of the report.

Mrs Evans and Ms Johnson presented this item and the following was noted.

- Reports are in the process of being provided to individual areas of the Trust.
- Ms Evans reiterated, as highlighted previously at Committee, that we are
 working with teams to understand the local quantitative and qualitative data and
 what they know about the services and team culture, but also the high-level
 work via the organisational diagnostic and 121 interviews.
- Ms Johnson has attended team meetings to assist with the embedding of the improvements to be made which has received a positive response.
- One particular team, that had an issue with bullying, had a meaningful discussion about how the staff survey related to that previous experience.
- Teams have also indicated that they will encourage staff to complete the survey because they want to see more results to enable them to have the quality conversations to help develop in those areas that need improvement.
- Ms Evans added that we will better understand how the Staff Survey outcomes can help us when we begin to implement the measures to evaluate the overall impact of the OD Strategy.
- Following a query from Mr Stone regarding some areas of the Trust that need more intervention than others, Ms Johnson explained that the example report provided acts as a road map and the Listening into Action Team, the OD Team and the Microsystems Team have all offered to provide input in order to identify the priority areas.
- Mr Walsh welcomed the improvements made to the plan which, he noted, is unrecognisable from a few months ago. Following a query from Mr Walsh regarding the proposal to increase responses to the survey, Ms Johnson replied that the Staff Survey Steering Group have developed a communications plan to properly address what works best to engage as many staff as possible, which will include informing staff about what changes have been / are being made as a direct result of staff responses to the survey in previous years. Ms Johnson also attended a conference that provided lots of ideas to incentivise and engage staff. This year the staff survey will look slightly different, with a focus on COVID-19 questions.
- Ms Fearon added that, whilst being supportive, we shouldn't hold back in informing Teams/Individuals of their remit to help improve areas which will in turn inform the staff survey results. The Trust will participate in the staff survey every year, therefore, whatever time and effort we invest in it, before, during and after each survey won't be wasted. The more we talk about the survey and embed it in teams and communicate how the results are making a difference locally, will undoubtedly make an impact on how staff choose to react and respond to the questions in the survey, be it positive or negative. Of course, we want positive results but we also want to demonstrate localised learning.
- Ms Parry thanked Ms Johnson for the great work on this project, and added, that we should start to use the language of the staff survey in other areas, such as the PDR process. We could issue a brief questionnaire to staff to ask them if they felt their previous PDR was a quality conversation etc and our current PDR questions could be amended to better correlate with the staff survey.
- Mrs Evans concluded that the OD Team are working on a Staff Engagement Strategy. Promoting the value that a particular survey or initiative can add is key to achieving positive results.

Strategic theme: Recruit and retain the right staff with the right skills Registered Nursing update - actions undertaken and progress made Ms Fearon presented this verbal item, and the following was noted. • The first of the Rapid Improvement Group meetings was held last week, which was a very positive forum. Within two weeks a focussed event will be convened which will involve colleagues from Workforce, Clinical Services and enabling functions that will consider what we can do, by when, and what impact will it have. Should be able to share the plan at the next meeting of Committee. • The Chair added that, having attended the Quality Committee, it is clear that nurse recruitment is mission-critical, which means that the People Committee need to keenly monitor progress of this group to stay on top of it. ACTION - Ms Fearon to share the Rapid Improvement Plan at a future meeting Michelle Fearon of Committee (likely September). Strategic theme: Workforce Transformation to meet service needs both now and in the future Theme to be considered at next meeting. Strategic theme: Collective, inclusive, compassionate leadership, with equal opportunity 8. Supervision update Committee acknowledged receipt of the report. Ms Wilkinson joined the meeting and presented this item. The following was noted. Work has been undertaken with Sheffield University to identify quality measures, in the form of a questionnaire to monitor employee's experiences of supervision. This will be reportable alongside the compliance data. • In addition, a new model is proposed for group supervision whereby service users are asked about their experiences followed by focus groups for staff which will enable consistency of care Trust-wide. The model covers the importance of supervision and the impact this has on quality of care. Following a guery from Mr Stone, Ms Wilkinson replied that staff groups, such as the CERT Team, comply with the reflective practice and shared values ethos. Mr Stone thanked Ms Wilkinson for the superb work around supervision and added that the model described indicates that there is potentially a deep culture change which is excellent news. Ms Fearon concurred and thanked Ms Wilkinson. Ms Fearon added that the key enabler to this work was when the focus shifted from 'complying with a section 29a notice' to one of valuing colleagues and communicating that shared common purpose. Ms Parry concurred and thanked Ms Wilkinson. Ms Parry added that some of the learning identified could be transferred to improving the PDR process. • The Chair commented on the positive pieces of work discussed at Committee and added, in terms of supervision, that she would like to see in a future report the definition of what 'good' would look like and what 'outstanding' would look like so that we know what to aim for, and what the measures are.

 Ms Wilkinson said that it would be useful to triangulate our data i.e. the feedback from supervisions and the outcomes of the staff survey, outputs from training, attendance, sickness. The Chair agreed and requested that this formed the core of the next report to this committee.

ACTION – Ms Wilkinson and colleagues to prepare a report for a future meeting of Committee as described above.

Linda Wilkinson

9. Organisational Development interim update

Committee acknowledged receipt of the report.

Mrs Evans presented the item, and the following was noted.

- The report seeks to provide assurance about the plan and specifically about the deliverables.
- The OD Team are considering how to evaluate those deliverables which will form part of the OD Strategy. In the meantime, there are some good measures already in place re the staff survey itself working specifically on the overall approach and how we will measure the culture aspects.
- There are already a few changes to the milestones which reflects that there isn't a Trust Board meeting in July. Final sign-off by Trust Board will slip into October 2020.
- The plan is evolving. The Organisational Design element has been discussed with the CEO, it is ambitious on the deliverables so the timescales for these will be revisited.
- The bid monies from NHS Improvement will mean that this is an area that has been specifically highlighted that we work on.
- In terms of the Organisational Diagnostic, the team are looking at quick wins. Aligning with the work of the Listening into Action Team. Mrs Evans will share some of the quick wins with the Executive Team next week.
- Mrs Evans proposed to bring an update on LiA to the September meeting of Committee (review progress so far and refreshing plans). Will take to Executive Team first for discussion.

ACTION – A further OD verbal update will be provided to Committee in July 2020.

Rita Evans

POST MEETING NOTE: The Organisational Diagnostic report will be shared with Committee outside of the July meeting (to allow Executives time to provide their input) and before the Board Development Session in August.

ACTION – An update on LiA to be provided to Committee in September 2020. Review of progress so far and refreshed plans.

Rita Evans

ACTION – The final OD Strategy report to be provided to Committee in September 2020, followed by Trust Board in October 2020 for sign-off.

Rita Evans

Equality, Diversity and Inclusion 10. **Black Lives Matter** Mrs Evans and Ms Johnson presented this verbal item, and the following was noted. • Following recent events, and the marches nationally and globally, the leadership team hadn't pre-empted or responded quickly enough to how staff are affected and how they are feeling. However, the CEO's later communication to all staff and letter has been positively received. Discussions are taking place with the BAME Staff Network Group regarding how we move forward. One element of this discussion is the need for a safe place to have conversations about racism. • An update has appeared in Connect and Mrs Evans has received a number of positive emails in response. • There is a need to bring together and develop the relevant groups and codesign how we can grow the talent of BAME colleagues. • There is a piece of work to do to refresh our strategic approach around the whole area of Equality, Diversity and Inclusion and re-establish and refresh what our principles are, working out the key messages together. Other key areas to consider are mandatory training (specifically around race equality and cultural competence – using our staff network groups to help support and facilitate that), and how we use our Workforce Race Equality data in a more informed way. Ms Parry, Mrs Evans and Ms Johnson are meeting with members of the OD Team to develop the plan and involve the right people. • Ms Johnson reported that the Accountable Care Partnership have responded and Clive Clarke is Chairing the Strategy Group which has two main sub groups; one is community engagement and the other is workforce and staffing issues. Ms Johnson and Sally Edwards from STH are co-Chairing the latter. It involves Staff Side representatives and the Chairs of the network groups from across the City. Ms Johnson added that the Trust is a leader around BAME staff engagement. We have the most active BAME Staff Network Group in the City. The staff involved are amazing and their leadership is phenomenal, but the ask is more of them now so we need to recognise this and discuss it perhaps at this Committee, Executive Group and other forums. Mr Stone helpfully added that we need to be mindful that, within the BAME network groups, there will be people with different ethnicities that will have very different experiences to each other. ACTION – Committee to receive an update at a future meeting. Liz Johnson Date to be agreed. **Performance Monitoring HR Performance Dashboard** Committee acknowledged receipt of the report. Ms Hatchman joined the meeting and presented this item. The following was noted. The report indicates a drop in the Trust's sickness rate in May 2020 compared with March and April.

- Testing for COIVD-19 wasn't readily available in March and April which meant staff were off sick with suspected symptoms of the virus. When testing became available in May and the negative test results shared with the Workforce Information Team they updated ESR which accounts for the lower rate in May.
- The Chair asked that the next report indicates the targets for sickness and vacancies.
- Ms Parry reported that Beverley Murphy, Improvement Director has shared a HR Performance Report from another Trust which has been useful to share that good practice and will help inform our report in future.

ACTION – the next report to include targets for areas such as sickness and vacancies.

Aimee Hatchman

General Governance

12. HR Policies

Overarching update from the Director of Corporate Governance

Mr Walsh reported that, going forward, Committee will receive an overarching update alongside the summary reports from the Policy Governance Group. The policies themselves will be held in an archive shared folder for Committee members to access if need be.

The Chair indicated that she is happy with this approach. The four tests examined by PGG are well-defined, and the ratification process for Committee to enact is now clear.

a. Health and Safety Policy

Committee members ratified the recommendation from PGG in relation to the Health and Safety Policy.

b. Unacceptable Behaviours Policy

Committee members ratified the recommendation from PGG in relation to the Unacceptable Behaviours Policy.

c. Leave Policy

Committee members ratified the recommendation from PGG in relation to the Leave Policy.

d. PDR Policy extension to review date request

Committee members ratified the recommendation from PGG in relation to extending the review date of the PDR Policy, to 31st August 2020.

e. Back-care and Manual Handling Policy extension to review date request

Committee members ratified the recommendation from PGG in relation to extending the review date of the Back-care and Manual Handling Policy, to 30th November 2020.

13. Risks assigned to Workforce – update on three high-risk areas

Committee requested, at the meeting in April, to receive a report to provide assurance on the following three high-risk areas as identified by Committee. These reports were received at the May meeting of Committee.

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

a. Moving and Handling Training

- The compliance rate for this training is currently 91.78% for Level 1 and 61.2% for Level 2. Of the 298 staff who are non-compliant at Level 2, 252 of them (84%) have achieved the Level 1 training.
- Training is currently online via the new training intranet pages.
- At the Moving and Handling Steering Group on 17th June, chaired by Anita Winter, Associate Director - Patient Safety, they agreed to consider re-starting shorter face-to-face training from mid-July on Tuesdays (eight learners in each session). Learners will be required to complete the theory side of the training online before attending.
- Jennie Wilson, Mandatory Training Lead is currently working on all of the PPE and safety elements whilst also considering re-starting other face-to-face training like Immediate Life Support (ILS) and Respect.

b. Back Care / Manual Handling Adviser vacancy

- The Job Description and Person Specification has been reviewed, and the banding of the vacancy increased to 8a.
- Two unsuccessful recruitment campaigns so far.
- It is proposed that the post will be re-advertised next week, with interviews taking place in July / August 2020.

c. Registered Nurses

Covered at item 7.

For information (to include external partnership reports, audits etc where available)

To be considered at next meeting.

Any other Business

14. To note any other business within the scope of the Committee's Terms of Reference

No further business was noted.

a. Confirmation of significant issues to report to Board of Directors (July 2020) Committee is not currently assured about health and safety matters, due to the absence of appropriate reports. This is a significant piece of work to be done and a review of the area is underway. However, there is a plan so that Committee are able to enact assurance, which will be outlined to the Committee in July. Committee noted a great deal of positive progress on a number of issues which are all coming together in a way which can impact on staff wellbeing, morale, culture etc i.e. the bullying and harassment work, staff survey workstreams, a new approach to the quality of supervision, organisational development actions, equality and diversity discussions. Further thought needed about how we are assessing whether these actions are making an impact going forward. Committee sought information about the communications plan for sharing with staff how positive changes are being implemented to make the organisation a good place to work. Committee agreed to receive an item on communications at a future meeting. Committee also agreed that an overall evaluation of each area, and the measurables, would be beneficial to receive at future meetings. A useful discussion took place about how a cluster of qualitative and quantitative indicators could be put together. b. Determine meeting effectiveness Committee recognise the challenges with many of the workstreams but very much welcomed everyone's contributions, including new members, which has improved the cohesion of the meeting and enabled a collaborative approach to improvement. c. Key agenda items for the July 2020 meeting of Committee Committee received the Annual Planner for information. Authors to refer to the annual planner which will be updated following a Committee debrief and agenda planning discussion.

Evaluation / Annual Planner

15.

Date and time of next meeting: Tuesday 14th July 2020, 2.00pm-4.00pm via teleconference / Fulwood House

Apologies to: Helen Walsh, PA to the Director of Human Resources
Helen.Walsh@shsc.nhs.uk