

# **Board of Directors - Open**

& FINANCIAL IMPACT

**CONSIDERATION OF** 

**LEGAL ISSUES** 

Date:	11 <sup>th</sup> November 2020	Item Ref:	18d
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TITLE OF PAPER	People Committee – Summary Report to the Trust Board of Directors in respect of Significant Issues
	Significant issues
TO BE PRESENTED BY	Heather Smith, Non-Executive Director
ACTION REQUIRED	For assurance
OUTCOME	To report items of significance discussed at the People Committee meetings held on: 15 <sup>th</sup> October 2020
TIMETABLE FOR DECISION	None required
LINKS TO OTHER KEY REPORTS / DECISIONS	Minutes of the Committee
STRATEGIC AIM	Strategic Aim: People
STRATEGIC OBJECTIVE	Strategic Objective: ALL
BAF RISK NUMBER &	BAF Risk Number: ALL
DESCRIPTION	BAF Risk Description: ALL
LINKS TO NHS	Trust Board Assurance Framework
CONSTITUTION /OTHER	NHS Audit Framework
RELEVANT FRAMEWORKS,	
RISK, OUTCOMES ETC	
IMPLICATIONS FOR SERVICE DELIVERY	Timely reporting to the Trust Board of Directors

Author of Report	Heather Smith
Designation	Non-Executive Director
Date of Report	20 <sup>th</sup> October 2020

None required.



# 1. Purpose

To report in a timely manner, items of particular significance discussed at the People Committee meeting held on 15<sup>th</sup> October 2020.

# 2. Significant Issues of Interest to Trust Board

Trust Board members will receive the minutes of the People Committee meeting held on 15<sup>th</sup> October 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.

- A progress update was provided for a number of areas, specifically Health and Wellbeing, Casework Management, Listening into Action. The positive work was noted and a number of issues were raised. For example, there is a great deal of activity that has been going on to address health and wellbeing of staff. However, the Committee will need assurance that these actions are having impact. Possible ways to measure this were discussed. Casework management remains an area for attention, with an increase in the length and number of cases being an ongoing concern. A decision was made to incorporate this data into the standard performance report received by Committee at each meeting, so that progress can be monitored.
- Black Lives Matter assurance received that the organisation is listening and reacting positively.
   The outcomes from the second stage of the Big Conversation will be presented at a future meeting.
- Committee noted a statistically significant downward trend in terms of turnover of staff since March 2020, which is encouraging.
- Concerns were raised about continued issues with nurse recruitment, with Committee requiring
  further assurance that we are doing all we can. Feedback on the clarity of the report is to be
  passed on and a request made that tracking performance in terms of targets set for transactional
  HR processes is included, going forward. Current indications are that we should see significant
  numbers of new starters in the next report, which will be welcomed.
- Committee noted that in future it will aim to put the Board Assurance Framework as a more central consideration, determining for each agenda item how Committee can be assured that the relevant section of the Board Assurance Framework has been addressed.
- Committee noted that it would be beneficial to have three Non-Executive Directors as members of Committee to ensure quoracy going forward.

#### 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 14th July 2020 and 23rd September 2020.

ITEM 2a, 15-10-20 CONFIRMED 15-10-20



# **People Committee**

# Minutes of the People Committee meeting held on Wednesday 23<sup>rd</sup> September 2020, via teleconference / Fulwood House

#### **Members Present:**

1. Heather Smith Non-Executive Director of the Board (voting) (HS) – Chair of Committee (the Chair)

2. Mike Potts Trust Chair (voting) (MP) (the Trust Chair) (part)

3. Beverley Murphy Director of Nursing, Professions & Operations / Executive Director of the Board (voting)(BM)

4. Caroline Parry Interim Director of People and Executive Director of the Board (voting) (CP)

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

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

#### In Attendance:

7. Sarah Bawden Interim Deputy Director of Human Resources (SB)

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

9. Karen Dickinson Head of Education Training and Development (for items 4a, 4b, 5) (KD) 10. Aimee Hatchman HR Systems and Workforce Information Manager (for item 10) (AH)

11. Helen Walsh PA to Interim Executive Director of People (HW) (minutes)

### Apologies:

Brendan Stone, Associate Non-Executive Director (voting) (BS)

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 Brendan Stone (the Trust Chair Mike Potts in attendance). n.b. Michelle Fearon is no longer a Committee member.			
	b. Declaration of interests			
	No declarations of interest were noted.			
2.	Minutes of the meeting held on 14th July 2020			
	a. Accuracy			
	The minutes of the meeting held on 14 <sup>th</sup> July 2020 were agreed as an accurate record.  06-10-20 post meeting accuracy to minutes dated 14 <sup>th</sup> July 2020 – to note that the Performance Report indicated an incorrect 'vacancy rate' not 'sickness rate'.			
	The confirmed People Committee minutes, dated 14 <sup>th</sup> July 2020, will be available to Committee members when they are submitted to the November 2020 meeting of Trust Board, along with the significant issues report from today's meeting.			



	b. Matters arising / Action Log	ACTION
	Disability briefing  ACTION (minutes 14-07-20 pg.9) – to provide a specific briefing on disability to Committee in November.	Liz Johnson
i	i. Listening into Action briefing	
(	Mrs Evans confirmed that a briefing on Listening into Action will be presented to Committee outlining a review of progress so far and refreshed plans. The briefing will be shared with the Executive Team before People Committee.	
	ACTION bfwd (minutes 25-06-20 pg. 8) – now confirmed for October People Committee agenda (previously Sept).	Rita Evans
i	ii. Health and Safety Q2 report	
	ACTION (minutes 24-07-20 pg. 3-6) – To further develop the actions and risk register to take into account comments made by the Committee July 2020, including deadlines to the RAG ratings, specifically the amber and red areas, cultural and behavioural change aspects, percentages, and data to help describe the areas that are working well and the areas that aren't working so well. Date to be confirmed – likely November.	Phillip Easthope
1	Ms Murphy reported that the shortlisting for the Health and Safety Manager vacancy took place yesterday. It was also noted that Health and Safety is now part of the Executive portfolio for Phillip Easthope.	
i	v. Supervision	
1	It was agreed at the June meeting to provide a report to Committee regarding 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, and to triangulate our data i.e. the feedback from supervisions and the outcomes of the staff survey, outputs from training, attendance, sickness. The Committee Chair requested that this formed the core of the next report to this Committee.	
	ACTION bfwd (minutes 25-06-20 pg. 7-8) – to provide a report to Committee.  Date to be confirmed – likely November.	Linda Wilkinson
	v. Black Lives Matter	
4	ACTION – Committee to receive a briefing in October.	Rita Evans Liz Johnson
,	vi. Fair and Just Culture	
	ACTION (minutes 14-07-20 pg. 7) – To provide more information to Committee 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. Date to be confirmed (likely January 2021).	Sarah Bawden

### vii. People Committee Action Log

Noted that the remainder of the actions on the People Committee Action Log are either complete, or on the agenda for today's meeting.

#### 3. Revised People Plan

Committee acknowledged receipt of the report. Ms Parry presented this item and the following was noted.

- There has been a vast amount of engagement on the People Strategy and the
  Delivery Plan during development. Following requests from the Board and Staff
  Side, engagement has taken place with our Staff Network Groups (BAME,
  Lived Experience Group, Service Users Group). Useful feedback and support
  received from these groups. Noted that a collaborative piece of work is already
  underway, regarding Peer Support Workers, following conversations with LEG.
- The three-year Plan is ambitious and is in-line with requirements at national level (NHS People Plan) as well as at local level (SY&B and the Sheffield ACP Workforce Strategy). The Plan is also cross-referenced with our Back To Good Programme.
- It was noted that we are awaiting sight of the national metrics and our KPIs will be updated accordingly in-line with those once received. Also noted that the draft National People Plan was received by the ICS HRDs Network for comments so we are confident that our feedback, as a Trust, has been included via that route.
- Following a query from the Trust Chair, Ms Parry agreed to share the Plan with our Council of Governors for their comments and feedback.
- Committee acknowledged the alignment of the People Strategy with other Trust Strategies, such as the OD Strategy, Emergency Planning Strategy and Quality Strategy. It was noted that Audit Committee had previously stated the importance of connectivity between all of our Trust Strategies. The Chair acknowledged the positive team-work that is taking place to align the various pieces of work. Ms Parry added that there will also be lots of positive opportunities to link our activities with other Trusts in the ICS System.
- Following a query from the Chair about the vacancy for the Back Care and Manual Handling Adviser, it was noted that two previous rounds of interviews were unsuccessful and that a third round is expected to take place early October 2020.
- In conclusion, the Chair requested, at a future meeting, analysis of the impact
  of actions for each area that Committee is focussing on i.e. impact statements.
   Ms Parry said that the Project Management Office will assist with this. The
  Trust Chair added that this could be in the form of surveys, focus groups etc.
- Ms Parry thanked senior colleagues in HR for their collaborative working and input into the Plan.

Caroline Parry ACTION - CP to share the People Strategy and Delivery Plan with our Council of Governors. ACTION - CP and others to prepare a joint report to highlight the impact of Caroline Parry actions for each area that Committee is focussing on. Target: January meeting **People Strategy theme: Workforce Transformation** a. Upskilling existing staff to meet future service needs Ms Dickinson joined the meeting for items 4a, 4b and 5 Committee acknowledged receipt of the report and the following was noted. The report focussed on the skills needs for our existing workforce, to provide assurance to Committee that all available resources for learning and development are fully utilised and aligned to priority service and transformation priorities and our response to the NHS People Plan for 20/21. • It was noted that the investment in the development of our existing workforce is important to help them reach their full potential. • The aim is to provide equal access to opportunities to our existing staff and to attract, develop and retain talented people to work for us from a wide variety of backgrounds. • Ms Dickinson reported that the intended outcome of the paper is to identify and provide solutions to the areas of priority learning needs without funding and to highlight and address the inequalities inherent in the current system. The Chair agreed that this is key to boosting morale and staff feeling valued and added that Ms Johnson may wish to carry out an Equality Impact Assessment on the process. Committee were assured that all available resources for learning and development are aligned to supporting priority service and transformation priorities and our response to the NHS People Plan for 20/21 and that there is a process for capturing staff development needs to support continuous professional development and that these are used to support our recruitment, retention and talent management objectives. **ACTION – Ms Johnson to undertake an Equality Impact Assessment.** Liz Johnson b. Progression pathways for existing staff to improve retention & recruitment Committee acknowledged receipt of the report and the following was noted. Career progression pathways will unblock barriers for moving into higher level professional roles such as nursing, as well as help address our staffing shortages, and raise standards and quality. • The aim is to provide a career pathway from entry level support worker through to registered nurse. Next steps include - skills audit of current support staff and Accreditation of Prior Learning (APL) to highlight current skills gaps; develop and agree a standardised Band 3 job description and development of a Business Case for investment for Band 2 to Band 3 progression. • Ms Murphy reported that staffing establishments need to be well-balanced and it is part of her role to ensure that we have robust staffing reviews and workforce

- plans going forward, which is going to take a few months to achieve.
- Ms Parry added that investment in our entry-level staff is extremely important and reputationally if we can progress this we will widen our reach for recruitment opportunities.
- Committee were assured that progress is being made against the People Strategy Delivery Plan and aligned to priority service and transformation objectives and our response to the NHS People Plan for 20/21.
- Following discussion, Committee supported the concept of equity and consistency and the impact it has on our staff but also acknowledged the need to improve how our internal funding is managed and the need for a measured approach to any external funding that becomes available.
- Committee fully supported the development of the Business Case for investment.

# 5. Annual Self-Assessment Report – Health Education England

Committee acknowledged receipt of the report and the following was noted.

- The report highlighted the requirements of HEE's Quality and Improvement
  Outcomes Framework and an identified gap in Libraries and Knowledge Services
  with assurance through an associated action plan.
- Committee were asked to approve the Self-Assessment Report on behalf of Board for submission by 30<sup>th</sup> September 2020.
- Following discussion, the Chair welcomed the opportunity to read about the challenges as well as the successes and was happy to approve the SAR as a thorough analysis of the Trust's position.
- Committee were assured that the Trust is meeting its obligations under the Learning and Development agreement (LDA) with Health Education England and that any identified gaps have an agreed action plan.

#### **People Strategy theme: Recruitment and Retention**

# 6. Rapid Improvement Plan update – Registered Nurse vacancies

Committee acknowledged receipt of the report.

Ms Murphy presented this item and the following was noted.

- It was noted that the Rapid Improvement Event struggled to have the level of impact we envisaged, however, more time and resource has been applied and we now have a report that is presented to the Executive Team each Thursday morning that highlights how many wte nursing posts we've got and at which grades; how many are off / sick etc and how many vacancies we have, alongside, how many adverts we've got out, how many people are about to be interviewed and how many have been offered jobs. Ms Murphy added that the current report shows us that our Registered Nurse vacancies for Acute Services, will reduce by 50% as soon as all of the people we have offered jobs to come into post.
- Ms Murphy was able to assure Committee that in a matter of weeks the Registered Nurse shortage will be much improved, and with a robust plan in place we will remain in a much more sustainable position.
- Following a query from Mrs Bawden it was noted that reporting on the demographic of our existing staff will be a key enabler to workforce planning.
- Ms Murphy praised the achievements of Michelle Fearon and our Workforce

- Information and Recruitment colleagues, Aimee Hatchman and Georgina Hanson who worked together to produce the report.
- The Chair welcomed the opportunity to be able to understand the scale of the issue, which is a key element to this Committee, and asked for regular updates to future meetings to be assured that the plan is being maintained, with a focus on the significant change described.

ACTION – Ms Murphy agreed to provide a 1-page information briefing at each meeting of Committee in order to assure Committee of progress and the impact of the plan.

Beverley Murphy

## People Strategy theme: Leadership and Talent

### 7. Case Management Review – update on disciplinary and problem resolution process

Committee acknowledged receipt of the report.

Mrs Bawden presented this item and the following was noted.

- The total number of cases ongoing at present is 46 and is steadily increasing, however, on the whole 46 is a significant improvement on the 70+ cases that were ongoing some eighteen months to two years ago when the improvement work began.
- Also tracking the average number of weeks of cases open which, depending on which policy area it is, can look excessively high and the numbers are only improved by the use of external investigators.
- The other area reported on is suspensions i.e. looking at other alternatives to suspension such as restricted practice / change of base etc.
- At present we aren't achieving the timescales set out in our own policies. COVID safety measures are preventing processes from concluding. We are working with Staff Side regionally and locally to come to an agreement to at least progress the cases that would have otherwise reached a conclusion by now. However, we know that some hearings won't be able to take place virtually, and COVID Ward pressures are having an impact on managers' time.
- Now that we have a much better handle on early resolution and the root cause
  where staff are moving into a process, it has been established that we are low
  users of the Capability Policy in this organisation. The use of this policy, as well
  as the new Just and Learning Approach, will help us to support staff to improve.
- Following a query from the Trust Chair, Mrs Bawden explained that there is a lot more we can do to assist managers, such as our Conflict Resolution Training but it will require investment.
- Ms Parry added that compassionate leadership, changing behaviours, culture and approaches to enable informal resolutions are incredibly important and would be part of a general management training offer.
- In conclusion the Chair noted that Committee are assured that the case
  management numbers are improving and there is regular analysis of a number of
  metrics to assist with further improvement. Committee are also assured that there
  is a handle on early resolution but there is more work to do in terms of training for
  managers.
- The Chair congratulated Mrs Bawden and the wider team for the work undertaken
  to get to this stage and asked for regular updates on the analysis in order to
  measure the impact that the new measures are having.

	The Chair also asked for a briefing about the training for managers at the next meeting.		
	ACTION – Briefing to Committee on the analysis of the impact that the new measures are having and an update on the training for managers – October.	Sarah Bawden	
Peo	ple Strategy theme: Staff Health and Wellbeing		
	Noted for the October agenda.		
Org	anisational Development		
8.	Organisational Diagnostic findings, proposed framework for 2020-23 OD Strateg	y & next steps	
	Mrs Evans presented this verbal item and the following was noted.		
	<ul> <li>The Trust acknowledges the findings and recommendations from the recent Organisational Diagnostic and is using these to underpin the 2020- 23 OD Strategy; along with other data and through co-creation with staff and service users. Therefore, the recommendations from the organisational diagnostic will be driven forward through the 2020-23 OD Strategy and help enable leaders and all staff to develop our organisation and culture to be as fit for purpose as we can be. This will support us to collectively meet the opportunities and challenges of Our Vision/Strategic Priorities, the NHS Long Term Plan, NHS People Plan and the demands of our NHS system.</li> <li>Next steps include:         <ul> <li>Develop draft 2020-23 OD strategy and refreshed Trust values, through co-creation with key stakeholders including staff, service users and the Board – August to mid-October 2020</li> <li>Share/discuss proposed OD Strategy outline - People Committee Sept 2020</li> <li>Share/discuss draft OD Strategy and proposed refreshed Values with Board - Discuss draft OD Strategy and proposed refreshed Values with People Committee – verbal item 15 October 2020</li> <li>Take final version 2020-23 OD Strategy &amp; refreshed Trust Values to Board for sign-off – 11 November 2020.</li> </ul> </li> <li>Following a query from Ms Parry about Workforce Transformation and introducing new roles, Mrs Evans explained that the diagram on page 9 would be developed to include this element where OD are concerned.</li> <li>Committee were assured that the OD Strategy is progressing in the right direction</li> </ul>		
	and welcomed the acknowledgement of the alignment with the Trust's other strategies including the People Strategy.		
	ACTION – Verbal update at October Committee re how the OD Strategy and proposed refreshed Values are progressing.	Rita Evans	
Equ	Equality, Diversity and Inclusion		
9.	Equality, Diversity and Inclusion Strategic Overview 2020-24		
	Committee acknowledged receipt of the report.  Ms Johnson presented this item and the following was noted.		

- The report described the legal and policy context for Equality Diversity and Inclusion for public organisations and the NHS; the detail of the current position in terms of the diversity of our organisation and the people who use our services compared to the Sheffield population [this information is updated and reviewed annually as part of our reporting requirements under the Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017, it is provided in this report for context analysis year on year and amendments to any action planning reported in the Annual Equality and Human Rights report].
- The report also provided an overview of our current Equality Diversity and Inclusion Objectives and Priorities. It was noted that the NHS Equality Delivery System 2 (EDS) has been reviewed and a new version is due to be published, the EDS is a national policy framework focused on four Goals: Better health outcomes for all Improved patient access and experience Empowered, Engaged and Well Supported Staff Inclusive Leadership at All Levels. The review is unlikely to make a difference to workforce priorities because it will be aligned with the new NHS People Plan, however indications are that it will introduce a reviewed approach to responding to the two 'service orientated goals'. Therefore, our service objectives will be reviewed again when the revised EDS is published including a wider consultation with service users and stakeholders.
- The report also contained a section that confirms the current broad strategic vision of our organisation and also provides a summary of the current Equality Diversity and Inclusion Objectives 2020 -2024.
- Two recent policy publications are particularly relevant to ED&I and have been published since our objectives were agreed in March 2020 [the NHS People Plan for 2020/21 and Responding to Covid19 Phase 3]. Because of the significant impact of COVID-19 on national policy on ED&I the report also provided detail about how we are currently responding to the specific actions described in these papers and what needs to happen in addition. A new objective 'Improve the experience of communities disproportionately impacted by COVID-19', has been added in response.
- The Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017 legally require public organisation objectives to be measurable which Ms Johnson reflected on in Appendix 1 of the report, outlining the targets and measures associated with each objective outcome.
- Committee were asked to receive the report for assurance but also to consider and advise on current reporting arrangements for ED&I in terms of areas that are clinical services rather than workforce related. The Chair responded that she would ask the Chair of Quality Committee to add E, D & I onto its agenda for discussion. It was also noted that the E, D & I report should be presented to a Board Development Session.
- The Chair and Trust Chair congratulated Ms Johnson on producing a comprehensive report containing useful and informative data.
- Committee is assured that there are objectives and actions in place with regard to equality, diversity and inclusion.

ACTION – Take the E, D & I report to Board Development Session – more detail / presentation. Liz J to speak to David Walsh.

Liz Johnson David Walsh

ACTION – Take the E, D & I report to Quality Assurance Committee. The Trust Chair / Committee Chair to speak to Sandie Keene.

Heather Smith Mike Potts

Perf	Performance Monitoring		
10.	HR Performance Dashboard		
	<ul> <li>Committee acknowledged receipt of the report. Ms Hatchman joined the meeting and presented this item. The following was noted.</li> <li>Slightly different format this month which reflects the new format required for the Board Performance Report.</li> <li>No significant change in reporting since last time, however, sickness absence has dipped since May but this is expected to rise again based on COVID reports in September. The 12 month total is on a downward trajectory at the moment but will be monitored ongoing.</li> </ul>		
	<ul> <li>No significant change to headcount. The Aspirant Nurses were removed from the vacancy data which has resulted in a decrease in vacancies last month.</li> <li>The Trust Chair noted the significant increase of leavers in Non-Medical Support. Ms Hatchman said she would report back on the reason behind the 3% increase in that staff group.</li> <li>The Chair noted there is very little improvement in turnover rate and wished to challenge the rate set to make it more ambitious. There is a need to set realistic delivery targets that stretch us.</li> </ul>		
	ACTION – Ms Hatchman to provide Committee with more detail behind the reason for the 3% increase in leavers from Non-Medical Support.	Aimee Hatchman	
11.	Draft Performance Framework		
	Committee were asked to provide feedback to Phillip Easthope on the Draft Performance Framework. Ms Murphy explained that this is part of a larger piece of work with Performance colleagues to make sure that the overall system we put in place is consistent with the Performance Framework once finalised.		
	Following brief discussion, the Chair reported that the development of the framework has full support of Committee, but recognised it is a work in progress.  Comments back to Phillip Easthope direct.		
	ACTION – Committee members to provide their comments direct to Phillip Easthope.	ALL	
Gen	General Governance		
12. HR Policies			
	Assurance document from Policy Governance Group		
	Mr Walsh reported that the Policy Governance Group met on 14 <sup>th</sup> September 2020 and approved the policies noted below.		

# a. PDR Policy Mr Walsh added that the 'test' pertaining to training had also been signed-off by PGG. Committee members ratified the recommendation from PGG in relation to the PDR Policy. The policy can now be replaced, on the intranet, with the newly ratified version. b. Redeployment Policy (extension to review date) Committee members ratified the recommendation from PGG in relation to extending the review date of the Redeployment Policy, from 30<sup>th</sup> September 2020 to 30th November 2020. c. Disciplinary Policy (revised extension to review date) Committee members ratified the recommendation from PGG in relation to extending the review date of the Disciplinary Policy, from 30th September 2020 to 28th February 2020. 13. People Committee Terms of Reference Mr Walsh highlighted the key areas of change in the latest draft of the Terms of Reference, including: the name of the Committee and 'future proofing' to enable Committee to be flexible in terms of its frequency of meetings, for example. Other changes include amendments to job titles and the voting / non-voting rights of Committee members including the exception of the Executive Director of People, whose role is non-voting at Board but it is a voting role at People Committee. n.b. this also applies to the Associate Non-Executive Director. The Chair explained that she would like to discuss with members outside of the meeting a change to the frequency of Committee meetings to align with the new Board meeting arrangements (i.e. to take place every other month). Mrs Evans asked for the Organisational Development section to be expanded. The Chair asked if the Citizen and External Partnership wording could be removed. Ms Parry pointed out that the job title 'Executive Director of People' instead of 'Executive Director of Human Resources' has yet to be officially confirmed. It was noted that the Annual Review of all Board sub-committees would take place at the same time in due course. Usually in line with when Audit Committee is required to publish theirs. **ACTION – Mr Walsh to discuss the further amendments with Ms Parry, Mrs**

Evans and the Chair and report to Board, in due course, with a verbal update at

next Committee.

David Walsh

14.	4. Joint Consultative Forum briefing		
	Ms Parry reported that the Joint Consultative Forum (JCF) reports to People Committee as outlined in the newly approved Terms of Reference for JCF. The last meeting of JCF took place on 26 <sup>th</sup> August 2020 and there were no items of significance to report to People Committee. However, it was noted that JCF receive, as standing items: the Case Management Dashboard, other key HR briefings, 'Back to Good' briefing and HR Policy verification (part of the policy governance process). It was also noted that Staff Side have been fully involved in the development of the People Strategy and Delivery Plan which will be a regular item on the JCF agenda going forward.		
15.	Communications Plan		
	Committee acknowledged receipt of the report and Ms Parry presented the item.  Committee were assured that the People Strategy and Delivery Plan will be communicated to staff and stakeholders appropriately, via the proposed communications plan.		
Any	other Business		
16.	To note any other business within the scope of the Committee's Terms of Reference		
	No further business was noted.		
17.	Evaluation / Annual Planner		
	a. Confirmation of significant issues to report to Board of Directors (Nov 2020)		
	Overall the Committee reflected that a number of key strategies are now in place (People; Organisational Development; Equality, Diversity and Inclusion) and that the focus needs to shift to tracking the impact of actions to implement these strategies.  Significant issues to note were:  1. Council of Governors should receive the People Strategy now that it is complete.  2. Committee received an update on the principles around Workforce Transformation and want to see more impact statements / equality analysis etc.  3. Committee approved the need for a business case to address Band 2 to Band 3 progression, which currently has anomalies to be resolved. Also, the need for an overall staffing/role diversity review was acknowledged.  4. Registered Nurses – number of vacant posts is having an adverse impact on standards of care but Committee are assured this is being addressed and an improved position will be evident in the coming weeks. Updates will be provided to each meeting of Committee so that progress can be checked.  5. Case Management Review – better handle on early resolution and the number of cases is decreasing but recognise still a lot of work to be done around culture and leadership management styles. An update on management training requested.		

- 6. An overarching report on the Trust's proposed approach to Equality, Diversity and Inclusion was welcomed by Committee and the need for the report to be shared with Quality Committee is to be actioned.
- 7. Committee were assured that the Organisational Development framework is developing in the right direction and look forward to receiving a report measuring the impact.

Notwithstanding the positive work going on in the development of new ways of working, it must be noted that this is not yet having a positive impact on the HR Performance Dashboard data. Whilst acknowledging that it takes time for change to trickle through an organisation, we must keep asking, 'is the action plan working/having an impact?' The Committee agreed to have this focus and to continue to challenge ourselves about this and to seek the assurance evidence to help us to do this.

# b. Determine meeting effectiveness

Committee members reflected positively on the effectiveness of the meeting, noting that a move away from operational themes in favour of a focus on assurance is welcomed, which concurs with the remit of Committee.

# c. Key agenda items for the October 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.

HS CHECKED 06-10-20, CONFIRMED BY COMMITTEE 15-10-20

Date and time of next meeting: Thursday 15<sup>th</sup> October 2020, 1.00pm-3.00pm via teleconference / Fulwood House

Apologies to: Helen Walsh, PA to the Executive Director of People Helen.Walsh@shsc.nhs.uk

ITEM 2a, 23-09-20 CONFIRMED 23-09-20



# **People Committee**

# Minutes of the People Committee meeting held on Tuesday 14<sup>th</sup> July 2020, via teleconference / Fulwood House

#### **Members Present:**

1. Heather Smith Non-Executive Director of the Board (voting) (HS) – Chair of Committee (the Chair)

Jayne Brown
 Caroline Parry
 Trust Chair (voting) (JB) (the Trust Chair) (part)
 Interim Director of Human Resources (CP)

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

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

In Attendance:

7. Richard Bulmer Service Director (on behalf of MF)

8. Brenda Rhule Deputy Chief Nurse (on behalf of DG) (part)

9. Clive Clarke Deputy Chief Executive (non-voting) (for item 3) (CC)

10. Stephen Price Fire and Security Officer (for item 3) (SP)11. Charlie Stephenson Health and Safety Risk Adviser (for item 3) (CS)

12. Sarah Bawden Interim Deputy Director of Human Resources (for item 4) (SB)
13. Aimee Hatchman HR Systems and Workforce Information Manager (for item 7) (AH)

14. Beverley Murphy Improvement Director (BM) (observing)

15. Helen Walsh PA to Executive Director & Interim Director of Human Resources (HW) (minutes)

# **Apologies:**

Michelle Fearon, Interim Chief Operating Officer and Executive Director of the Board (voting) (MF)
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)
Debra Gilderdale, Director of Nursing & Professions and Executive Director of the Board (voting) (DG)
Brendan Stone, Associate Non-Executive Director (non-voting) (BS)
Liz Johnson, Head of Equality and Inclusion, Bank and eRostering (LJ)
Karen Dickinson, Head of Education Training and Development (KD)

No further apologies were received.

No	Item
1.	a. Welcome and apologies
	The Chair, Heather Smith welcomed members to the meeting.  Apologies were received from Michelle Fearon, Dean Wilson, Liz Lightbown, Debra Gilderdale, Brendan Stone, Karen Dickinson.
	b. Declaration of interests
	No declarations of interest were noted.
2.	Minutes of the meeting held on 25 <sup>th</sup> June 2020
	a. Accuracy
	The minutes of the meeting held on 25 <sup>th</sup> June 2020 were agreed as an accurate record.



The confirmed People Committee minutes, dated 25 <sup>th</sup> June 2020, will be re-circulated to members when they are submitted to the August 2020 meeting of Trust Board, along we significant issues report from today's meeting.	
b. Matters arising / Action Log	ACTION
i. Re-launch of People Committee	
The Chair of Committee reported that Holly Cubitt, Head of Communications will factor this into their work-plan for later in the year.	
ii. Organisational Development Strategy	
Mrs Evans confirmed that the final version of the OD Strategy will be presented to Committee in September, followed by October Trust Board.	
ACTION – to note for September People Committee agenda, and October Trust Board agenda.	Rita Evans David Walsh
iii. Listening into Action briefing	
Mrs Evans confirmed that a briefing on Listening into Action will be presented to Committee in September – a review of progress so far and refreshed plans.	
ACTION – to note for September People Committee agenda.	Rita Evans
iv. 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 People Committee agenda, and October Trust Board agenda.	David Walsh
v. Final version of the Workforce Strategy and Delivery Plan	
Ms Parry confirmed that the final version of the Workforce Strategy and Delivery Plan would be provided to the Chair of Committee before the end of August, ahead of a full report being submitted to September Trust Board.	
ACTION – to note for September Trust Board.	Caroline Parr David Walsh
Noted that progress updates will be provided to Committee on the four themes of the Strategy as follows – (Sept) health and wellbeing, leadership and talent (Oct) recruitment and retention, workforce transformation.	
Communications Ms Parry confirmed that a Communications strategy will be in place following her meeting with Holly Cubitt for messages to be sent to all staff each month to highlight and demonstrate what has been done following engagement with Staff Side and various staff groups.	

	vi. Nurses Recruitment – Rapid Improvement Plan	
	ACTION – to share the Rapid Improvement Plan at a future meeting of Committee (likely September).	Michelle Fearon
	vii. Supervision	
	It was agreed at the June meeting to provide a report to Committee regarding 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, and to triangulate our data i.e. the feedback from supervisions and the outcomes of the staff survey, outputs from training, attendance, sickness. The Committee Chair requested that this formed the core of the next report to this Committee.	
	ACTION – to provide a report to the November meeting of Committee.	Linda Wilkinson
	viii. Black Lives Matter	
	ACTION – Committee to receive a briefing at a future meeting (likely October).	Rita Evans Liz Johnson
	ix. People Committee Action Log	
	Noted that the remainder of the actions on the People Committee Action Log are either complete, or on the agenda for today's meeting.	
3.	Trust compliance with Health and Safety and Fire Safety legislation	
	Committee acknowledged receipt of the report, covering quarter 1.	
	Mr Clarke attended the meeting for this item, provided an introduction to the report and introduced the authors of the report – Stephen Price, Fire Health and Safety and Security Manager and Charlie Stephenson, Health and Safety Adviser. Input to the report was also obtained from Anita Winter, Associate Director – Patient Safety.	
	The following was noted –	
	<ul> <li>Committee were provided last time with an overview of the leadership requirements within the health and safety environment and discussed the need for a clear work plan to identify reporting and monitoring to provide assurance to Committee, on a quarterly basis, that we are compliant with health and safety and health and safety legislation. Noted that the report is being submitted to the Health and Safety Group next week.</li> </ul>	
	<ul> <li>On the Risk Register there are two particular fire safety issues causing concern         <ul> <li>the first being the fires resulting from smoking materials and arson within inpatient areas (high-risk) and the second being the age of our buildings, and compartments not being fire resistant, which has attracted an ongoing programme of work to address (moderate risk).</li> </ul> </li> </ul>	
	ACTION - The Trust Chair asked that the Risk Register be completed with the name of the Executive Lead for Fire and Safety risks (Clive Clarke).	Clive Clarke

- Committee reviewed the Compliance Assessment and Recommendations (Appendix 2) which seeks to provide a judgement on Health and Safety and Fire Safety compliance along with recommendations considered to be necessary to achieve statutory compliance. In accordance with legislation and guidance from the Department of Health we have a Fire Safety Policy which includes a statement of intent on behalf of the Board, and policy instructions identified to support managers in the workplace to undertake their statutory duties. We undertake technical fire risk assessments at all of our premises which are in turn provided to all of the workplace managers, incorporated in their generic risk assessments and escalated through the Directorate Governance structure.
- The Fire Remedial Action Plan is a significant concern as it relates to the fires on wards that have occurred recently (as noted on the Risk Register). Clinical Operations will provide a communication aimed at supporting those clinical areas to implement our Smoke-free Policy, thus mitigating the risk.
- Following a query from the Trust Chair regarding deadlines, Mr Price and Mr Clarke explained that work is ongoing, with Clinical Operations colleagues regarding the Remedial Action Plan but agreed to add deadlines to the RAG ratings, specifically the amber and red areas.

# ACTION - The Trust Chair asked that deadlines are added to the RAG ratings, specifically the amber and red areas.

Clive Clarke

- Following a further query from the Trust Chair regarding how we are supporting workplace managers and clients to enact the changes necessary relating to the use of cigarettes and smoking materials, Mr Clarke added that since the Rapid Improvement Day and the work ongoing with Moira Leahy and Pete Stewart on smoking cessation on the wards, there has been a new focus involving Organisational Development, Clinical Operations etc. The Trust Chair added that the right level of communications around this will be key. Mr Bulmer said that some incidents have been reported where there has been challenge with the interventions which has given us chance to address this directly with those teams in a supportive way in-line with the Smoke-free Policy. The interventions will be kept under review to ensure we maintain the desired effect.
- Mr Price added that we are a Smoke-free Trust which means that the Fire Service can enact an enforcement notice when we aren't meeting smoke-free regulations.
- Following a query from Ms Parry about the use of 'must' in place of 'should' (at appendix 2), Mr Price agreed that it should read 'All workplace managers must undertake a generic workplace risk assessment of particular fire risks appertaining to their workplace including those identified in the Technical Fire Risk Assessment.' Following a further query from Ms Parry regarding the Fire Safety Training, Mr Price replied that the content of the program has been converted to online training to enable it to continue during the COVID-19 pandemic.

- Mr Stephenson reported on the 'Health and Safety suitable and efficient Risk
  Assessments' and the use of audits to check on the completion of these, which
  culminates in an annual statement of compliance, signed-off by our Chief
  Executive Officer (similar to the one used in the Fire Safety Policy).
   Mr Stephenson added that it is the intention to share the template risk
  assessments and other useful documents with relevant workplace managers via
  the Trust's 'W 'drive.
- Mr Stephenson also report that all Services have a core number of Risk
  Assessments (eight) undertaken jointly by a competent Health and Safety
  Adviser and a clinical member of staff within the Service in accordance with
  Health and Safety statutory requirements, to determine the levels of health and
  safety risk in each Service and an adequate response to these risks. The core
  eight categories are: 1. Slips, trips, falls; 2. Lone working; 3. COSHH; 4. DSE;
   5. Violence and Aggression; 6. First Aid; 7. Moving and Handling of Loads;
   8. Moving and Handling of People.
- In light of the COVID-19 pandemic an additional COVID generic risk assessment has been added to the core 8 categories. Additional COVID-19 supporting guidance has been issued by the Safe Working Group; posters and floor vinyls purchased and some environmental improvements made such as spit guards.
- A programme of such audits, scheduled for completion by end of July 2020, is held on the Trust's W drive, within the 'Environmental Risk Assessments' folder. This programme of work will enable the Trust to be assured that relevant standards of health and safety are being met. All of the processes are reflected in the newly written Health and Safety Work Plan which will be submitted to the next meeting of the Health and Safety Group next week.
- Following a query from Ms Parry, it was agreed that the Health and Safety intranet page should be a standalone widget rather than being contained within the HR widget. Mr Clarke added that we need to do all we can to raise the profile of health and safety and support people to enact the interventions required of them.

# ACTION – Mr Clarke agreed to contact the Communications Team about the health and safety intranet page.

Clive Clarke

Following a query from Ms Parry regarding the workstation assessments being more complex given that a lot of staff are now operating from a home environment, Mr Stephenson replied that the guidance and check-sheet is capable of reflecting a home workplace and we should therefore ensure that staff are aware of them. Mr Clarke added that he would convene a meeting with Ms Parry to discuss further what future working will look like for most staff which may include support for managers to ascertain the needs of staff who are working from home.

ACTION – Mr Clarke and Ms Parry to discuss future working and support for managers.

Clive Clarke Caroline Parry In conclusion, the Chair of Committee thanked Mr Price and Mr Stephenson for the work undertaken to produce the helpful report received.

Overall 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, which may require a conversation with the Organisational Development Team to assist with this. 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.

ACTION – To further develop Appendix 2 including deadlines, percentages, data to help describe the areas that are working well and the areas that aren't working so well. Also, to meet with the OD Team to assist with the cultural and behavioural change aspects.

Clive Clarke

ACTION – Quarter 2 report expected at People Committee in November 2020. The Chair of Committee advised that the Q2 update can be added to the Q1 report as long it's marked clearly where the changes are.

Clive Clarke

Strategic theme: 'Collective, inclusive, compassionate leadership, with equal opportunity for growth and development'

#### 4. Just and Learning Culture

Committee acknowledged receipt of the report and Powerpoint presentation. Mrs Bawden, Acting Deputy Director of Human Resources joined the meeting and presented this item. The following was noted.

- Committee noted last time that a great deal of positive progress on a number of issues are all coming together in a way which can impact positively on staff wellbeing, morale, culture etc notably the bullying and harassment work.
- This was further demonstrated to Committee with the development of a 'Fair and Just Culture' approach in terms of staffing issues resolution (known as 'Just and Learning' at Mersey Care – system leaders).
- The key drivers are the external good practice benchmarks we aspire to be a Trust whose processes meet with the values of the organisation. We know that some of our ways of dealing with disciplinaries, grievances, bullying and harassment etc are a little disconnected with what we really want to achieve.
- We must improve confidence in our processes, which will come from being a learning organisation and demonstrating that we are striving to change in areas where we need to, coupled with early resolution and appropriate training for managers. Also, a clear understanding of what constitutes misconduct. A mistake, or human error, is not misconduct but negligence is.
- Conversations to improve our processes began a couple of years ago when there were approximately 70 live formal cases at the Trust, some of which did not need to reach the formality stage.
- A lot of work has taken place in conjunction with Staff Side which has culminated in co-production of policies.

- The Trust Chair welcomed the approach outlined saying that it is important to have a fair and just process but that doesn't mean that people aren't going to be held to account.
- Following a query from Mr Walsh regarding other investigations that aren't staffing performance related, Mrs Bawden replied that we have great links with the patient safety team and are working with them regarding how 'just and learning' is linked to the complaints investigation process.
- Ms Parry added that this piece of work straddles both the leadership and health and wellbeing aspects of our People Strategy. The new process aims to equip managers with the skills necessary to defuse difficult situations at an early stage, which will in turn reduce sickness absence and creates a better environment where people feel safe to have those conversations, avoiding the stress of any tensions. The new process encompasses learning which was partly achieved by asking those involved in cases to reflect on what had happened, this enables us to continuously improve our approach around managing casework. Also, includes support for the staff member involved.
- In conclusion the Committee Chair said that this new approach was welcomed and on behalf of 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.
- Mrs Bawden observed that there has been more of a reduction in cases in Scheduled and Planned Care than in Acute and Crisis. We are able to track themes and subtleties with far better accuracy now, which will help us target where support is most needed.

ACTION – To provide 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. Date to be confirmed.

Sarah Bawden

### **Organisational Development**

### 5. Organisational Development verbal briefing

Mrs Evans presented this verbal item and the following was noted –

- Noted that the final version of the OD Strategy will be presented to the Executive Team before being submitted to the People Committee. Committee will expect to receive the Strategy in September (and before this via email) followed by October Trust Board.
- Noted that Board members will receive an overview of it at the Board Development Session in early August.
- On a general note the Trust Chair stated that colleagues should ensure that the Executive Team receive reports in good time before reports are due at their respective Committees.

#### Equality, Diversity and Inclusion

# 6. Equality, Diversity and Inclusion Action Plan incorporating WRES, WDES, Gender Pay Gap and Equality Objectives

Committee acknowledged receipt of the report.

Mrs Evans presented this item and the following was noted -

- The full over-arching E, D & I report would be received by Committee at the September meeting. Plans are in place to refresh the overall strategy and plan before September. In the meantime, the overall action plan has been updated and shared with Committee at this meeting.
- Good progress has been made in some areas. Other areas of concern which we are paying attention to and will address in the over-arching report.
- Also considering capacity in terms of moving forward in each of the areas.
- The Trust Chair thanked Mrs Evans and Ms Johnson for a comprehensive report. However, the Trust Chair suggested we could do even more, be more ambitious, because she felt that we, and the NHS nationally, are using a performance management approach to equality and diversity which doesn't help those who are feeling the negative effects of equality issues. Mrs Evans replied that we absolutely do need to move beyond process in E, D & I. Mrs Evans added that, for example, 'big conversations' are planned around Black Lives Matter which goes beyond process and brings together various groups people from BAME/white backgrounds, service users and staff to determine what the issues are and how we can make a difference. The process remains as the supporting mechanism but it's not the driver that will get us to higher levels of inclusion. What Ms Johnson has produced is a good foundation to take us to the next stage alongside the results of the cultural diagnostic.
- Ms Parry added that, the Workforce Race Equality Standard and the
  Workforce Disability Equality Standard are both very target driven and have
  been for some time. We've worked closely with Ms Johnson on the
  development of the People Strategy where there is quite a lot of overlap with
  E,D and I and bullying and harassment which involved a great deal of
  engagement with staff and Staff Side to re-write the policy. Ms Parry agreed
  there is still a lot to do in terms of engagement around the E, D, I agenda.
- Mr Bulmer referred to the Sheffield Fairness Report, the Black Report and
  economic in-equality and the fact that BAME issues have been discussed for
  many years. Mrs Evans agreed that we certainly need to build economic inequality into our plans. The Trust Chair agreed and asked that colleagues
  explore, and make explicit, the correlation between economic disadvantages
  and protected characteristics.
- Ms Murphy added, in order to drive change we need to start somewhere and get people talking about it across the organisation which will fuel richer conversations and ensure that our data is used in practice to improve in those areas where we need to improve. Mrs Evans agreed, that it's also important to know why we're producing the data, we have a really strong foundation in place that has developed over the past 12 months. Now is the opportunity to use that and produce more of a transformational piece which links in with the cultural project and the overall OD plan.
- Following a query from the Committee Chair about flexible working being reported as almost non-existent, Ms Parry replied that flexible working is in use and added that a session on flexible working was delivered at our Health and Wellbeing Event last year and HR undertook to run some follow-up workshops online with managers which has proved to be a really effective way of delivering the sessions as it ensures that more people can take part. More sessions are planned which Ms Parry will discuss further with Ms Johnson. Given the current climate, flexible working will be a beneficial tool to assist with new ways of working and attracting and retaining staff. Other beneficial

initiatives include - flexibility around childcare such as term time contracts, job shares, working from home etc. Mr Bulmer welcomed this approach coupled with the cultural shift approach that the OD Team are working on. Ms Rhule added that she is taking forward work on the Rapid Improvement Cell for the recruitment of nurses which will include development of a retention package.

- The Trust Chair added that the disability element of the plan should be explored even further given that the definition of disability is so broad, and suggested that Committee receive a briefing on this area at the November meeting.
- The Committee Chair asked for her thanks to be passed on to Ms Johnson for producing the action plan which is much improved on the previous iteration, and provides assurance to Committee that we know where we are at and are being candid in a more transactional way; but agreed with others that what we need now is an over-arching report.

ACTION – to provide the over-arching Equality, Diversity and Inclusion report to Committee in September, and to provide a specific briefing on disability to Committee in November. As well as - explore, and make explicit, the correlation between economic disadvantages and protected characteristics.

Rita Evans Liz Johnson

#### **Performance Monitoring**

#### **HR Performance Dashboard**

Committee acknowledged receipt of the report.

Ms Hatchman joined the meeting and presented this item. The following was noted.

- Vacancy figure stated in the report is incorrect should be 6.4% which is still lower than last time.
- No major changes to report.
- It is anticipated that the sickness rate will rise on the next report. It is presumed that the low sickness level is due to some staff being off due to 'shielding' who would otherwise have registered as sick.
- 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.

ACTION – for Committee Chair to contact the Executive Team to consider additional resource.

Heather Smith

#### **General Governance**

#### **HR Policies**

# **Assurance document from Policy Governance Group**

Mr Walsh reported that the Policy Governance Group met yesterday and approved the policies noted below. It was noted that it has been necessary to fine-tune the policy governance process which the Committee Chair welcomed.

# a. First Aid Policy

Committee members ratified the recommendation from PGG in relation to the First Aid Policy. The policy can now be replaced on the intranet with the newly ratified version.

#### b. Disabled Staff Policy

Committee members ratified the recommendation from PGG in relation to the Disabled Staff Policy. The policy can now be replaced on the intranet with the newly ratified version.

# c. PDR Policy (revised extension to review date)

Committee members ratified the recommendation from PGG in relation to further extending the review date of the PDR Policy, from 31<sup>st</sup> August 2020 to 30<sup>th</sup> September 2020, given that Policy Governance Group and People Committee don't meet in August.

# 9. Risks assigned to People Committee

Mr Walsh presented this item and the following was noted -

#### a. Corporate Risk Register (CRR)

Committee received the latest CRR and noted the new risk (no. 4409 with a high score of 16) regarding 'insufficient nursing / nursing associate placement capacity to meet demand'. It was also noted that the remainder of the risks are broadly the same as last time and the scores remain unchanged.

The Committee Chair commented that all of the risks are being actioned and monitored by this Committee but the impact is still to be seen. The Committee Chair asked what it would take for each of the scores to see significant improvement or be removed from the register and requested more clarity regarding this. Mr Walsh replied that the Risk Management Strategy is being reviewed which will include clarity as described. The Trust Chair suggested that if a risk has a score of 8 or less that it could be removed from the register. Mr Walsh concurred with this suggestion and added that there is a piece of work to do around obtaining the right level of assurance which could, for example, be in the form of a report from the Executive Team which may highlight that a risk can be removed from the register but continues to be monitored elsewhere.

#### b. Board Assurance Framework (BAF)

Committee received the latest BAF which has been updated to reflect the new strategic objectives. It was noted that there are now three strategic aims - 1. Deliver Outstanding Care 2. Create a great place to work 3. Improve our use of resources. However, Mr Walsh pointed out that these could be subject to change given that it's the first time that Committee have seen this iteration and it hasn't been received at Trust Board or Board Development Session yet. At Mr Walsh's

suggestion, Committee agreed to accept the new strategic aims as draft until they are confirmed at the next Board Development Session, which was welcomed by the Chair of Committee.

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

# 10. ACP People Strategy briefing

Ms Parry presented this item and the following was noted -

- The Accountable Care Partnership produced a People Strategy earlier this year which was paused due to changes arising from the COVID-19 pandemic.
   A report was presented to their Executive Delivery Group at the end of June outlining the initial priorities and additions.
- The key areas include recruitment and retention; leadership and development; culture; person-centred approach to staff wellbeing, and valuing the un-paid workforce. Recognising, given recent experiences, that health and wellbeing is a huge issue and requires a lot of work in this particular area.
- Also, continuing work around 'Brand Sheffield' how we promote the City, which
  we can tap into alongside what we offer locally as a Trust. The ACP are also
  looking to develop a health and care section within Sheffield City Council's
  'Sheffield Makes' brand.
- They are going to be delivering training around person-centred approaches with frontline staff across the ACP System, planning to roll that out towards the end of July 2020.
- Also looking at support for care home staff. Support for workforce planning and resourcing in these areas that have experienced difficulties over the past few months.
- System leadership continues to be a big area and the ACP continue to develop that community going forward.
- Also, the rapid increase of virtual platforms has opened up a lot of opportunities.
   The ACP are looking at creating a learning and development offer for staff across the whole ACP System.
- Ms Parry added that we have taken account of these ACP priorities and additions in our own People Strategy to ensure that it complements the ACP People Strategy. Ms Parry will undertake further discussions with Jane Ginniver who is the ACP Lead on this piece of work, to keep up-to-date with developments.

#### **Any other Business**

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

Ms Parry shared some information from the latest WebEx from the Chief People Officer with regards to the National NHS People Plan, which is yet to be published. It was noted that the key areas they are focussing on are – looking after people (health and wellbeing); inclusion and belonging; working differently; learning from COVID; delivery together (systems working); and recognition that there are staffing gaps throughout the NHS. The Committee Chair was pleased to note that these areas concur with our own People Strategy and Delivery Plan, which is in the process of being finalised.

No further business was noted.

# **Evaluation / Annual Planner** 12. a. Confirmation of significant issues to report to Board of Directors (Aug 2020) 1. A detailed report on Health and Safety 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. 2. Committee noted a great deal of positive progress on a number of issues and a number of 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. 3. Further thought needed about how we are assessing whether actions pertaining to items presented at Committee are making an impact going forward. 4. It was noted that a comms plan is being discussed but not yet actioned. 5. 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. 6. 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 Committee in September. 7. 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. 13. Determine meeting effectiveness Committee members reflected positively on the effectiveness of the meeting, noting that a move away from operational themes in favour of a focus on assurance is welcomed, which concurs with the remit of Committee. 14. Key agenda items for the September 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.

HS CHECKED 15-09-20, CONFIRMED AT COMMITTEE 23-09-20

Date and time of next meeting:
Wednesday 23<sup>rd</sup> September 2020, 2.30pm-4.30pm
via teleconference / Fulwood House

Apologies to: Helen Walsh, PA to the Director of Human Resources

Helen.Walsh@shsc.nhs.uk