

Approved Minutes of the Workforce Organisational Development Committee of 22 February 2019

13 May 2019

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Agenda Item No: 12.9

Minutes of the Workforce and Organisational Development Committee

Date **22nd February 2019**
Venue **Room 2, WMI**
Time **10:30am**

Present:	Name	Role
	Rose Baker	Associate Chief Nurse
	Alan Duffell	Director of Workforce
	Roger Dunshea	Non-Executive
	Sally Evans (part)	Head of Communications
	Junior Hemans (Chair)	Non-Executive
	Daniela Locke	Head of Workforce
	Sultan Mahmud (part)	Director of Integration
	Louise Nickell	Head of Education & Training
	Adam Race	Deputy Director of Workforce
	Mike Sharon	Director of Strategic Planning & Contracting

In Attendance:		
	Maria Dent	Meeting Administrator
	Catherine Lisseman	Lead for Medical Leadership Development

Apologies:		
	Lewis Grant (part)	Deputy COO, Division 1
	Tim Powell (part)	Deputy COO, Division 2
	Sandra Roberts	Divisional Manager, Estates & Facilities
	Kate Shaw	Deputy COO, Division 3

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Standing Items		
1.	Introduction & Apologies for Absence The meeting commenced with introductions by all in attendance and apologies for absence noted as shown above. It was noted that unfortunately, the Committee was not quorate but it was agreed to proceed.	
2.	Declarations of Interest None declared.	

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4.2	<p>Update on the Closing of Band 1 / 2018 Pay Deal (Action 18/070) D Locke provided further update on the closing of band 1/transition to band 2 and an update on the pay progression system as part of the 2018 pay deal.</p> <p>Closing of Band 1 :</p> <ul style="list-style-type: none"> • Progress continues to be very positive, working in partnership with Staffside and Operational Leads on the closing of band 1 and the communication with those staff affected. • The next step is a letter to be sent out to staff affected with revised job descriptions. • Staffside has already carried out a briefing to union members; and in early March there will be some further workshops for all other staff. • The main impact for those who wish to transfer to a band 2 post will be the impact on the individuals' financial situation as it is understood that there may be an impact on social hours and on any benefits that they are in receipt of. Each staff member has to make an individual decision as to whether they wish to transfer but all staff have to transfer by 2021. <p>Pay Progression :</p> <ul style="list-style-type: none"> • A policy has been worked up and has been sent to Staffside for comments, with the plan to take through to JNC and Trust Policy Group prior to formal sign off at TMC in order to become operational by the 1st April 2019. • Key standards have to be met before staff can progress up to the next pay step, which are: <ul style="list-style-type: none"> ○ Mandatory training up to date ○ Satisfactory appraisal completed ○ No disciplinary sanctions ○ No formal capability process ○ And for Line managers, they need to have appraised all their staff. <p>Processes are in place to commence from implementation date.</p> <p>A Duffell advised that there was a slight anomaly in that there was a recognition that the 2018 Pay Deal applied to new staff only, however, in line with most Trusts, as it would not be practical to have a split process for existing and new staff, it had been agreed to apply the process to all staff across the Trust, hence the HR team was working alongside Staffside regarding implementation. He noted that there was an understanding and expectation that this practice would take several months to embed and although there were other aspects to the new Pay Deal which come into force from 2020, the above change would have the main impact on staff as from 1st April any incremental pay rise would need management intervention to process.</p> <p>L Nickell queried whether any skills or knowledge gaps identified; D Locke commented that none had been identified to date.</p> <p>R Baker queried whether there was a clear process to ensure that managers' were aware of which Job description they should be using for the staff appraisal,</p>	

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	<p>D Locke confirmed that a robust process would be in place.</p> <p>D Locke also advised that the appraisal policy, which was linked to the Pay Progression policy was also being reviewed and was due to go live from 1st April 2019.</p> <p>R Baker queried whether there was a process for staff on maternity leave, D Locke advised that a process for the pay step discussion, which is part of the appraisal, has been built into the policy. A Duffell confirmed that the national view is that if there is any delay due to no fault of the member of staff, then the staff member would not be detrimentally affected.</p> <p>It was confirmed that communication of the new process would be circulated out across the Trust to all Managers.</p>	
	(S Mahmud joined the meeting)	
Key Update & Workforce Performance		
5.	Key Updates	
5.1	<p>Gender Pay Gaps</p> <p>A Duffell confirmed that the Gender pay gap reporting was due to be completed by the 30th March 2019 and further update on this item would be brought to the next WODC.</p>	<p>19/002 A Race</p>
5.2	<p>Workforce Implementation Plan</p> <p>A Duffell informed that from a long term plan perspective, by autumn, the Trust needed to have a workforce implementation plan to support the national NHS Long Term Plan. This had been broken down under five key themes:</p> <ul style="list-style-type: none"> (i) Future of medical workforce (ii) Future of clinical workforce (iii) How do we make the NHS the best place to work (iv) Leadership and talent management (v) Technical skills <p>Also identified, four cross coding themes:</p> <ul style="list-style-type: none"> (i) Workforce analysis (ii) Workforce architecture (iii) Workforce transformation (iv) International recruitment from national perspective <p>Work had commenced and the working groups would input into the workforce implementation but this may not be out until the autumn.</p>	
5.3	<p>Clear Definition of Data</p> <p>A Duffell informed that the NHS has reported that in Spring, potentially, there would be a new set of guidelines and rules in relation to non-clinical agency staff.</p>	

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7.	<p>2018 Staff Survey Update</p> <p>D Locke tabled a report providing the headline results from the national 2018 Trust wide staff survey which had seen a response rate, slightly lower than on previous years, at 38%. She advised that one of the key changes to note was that in previous years there had been approximately 28 key finding areas but this had now been changed to under ten themes, so reporting had changed quite dramatically this year. Further information had been requested to undertake a deeper dive on the outcomes of each of the themed headings.</p> <p>A Race confirmed that the highlight reports had been shared with operational key leads and the HR Divisional Managers who had identified their key priorities and action plans would be worked up that would be more meaningful, specific and time bound.</p> <p>A Duffell highlighted that results in the following two key indicators had seen an increase which was a real positive result for the Trust -</p> <ul style="list-style-type: none"> (1) Is RWT a good place to work up – increased from 66% to 70.8% and (2) Recommend your friends or relative to receive treatment here – increased from 73.4% to 77.3% <p>In response to a query from M Sharon regarding the results around EDI; A Duffell stated that these were very early results and an in-depth review around the individual questions would take place to ascertain any areas of concerns.</p> <p>A Race confirmed that he was planning to submit an update report to TMC in March and would provide further update to WODC in April.</p>	<p>19/005 A Race</p>
Strategic Focus Areas		
8.	<p>Leadership Delivery Approach (Actions 18/057/18/058 and 18/059)</p> <p>C Lisseman presented the latest version of the Leadership Delivery Approach. She advised that the document outlined how the Leadership Delivery Education Team supported the Education and Training Strategy in terms of the delivery of leadership topics across the Trust. The initial report presented to WODC had been a comprehensive document around the current position and following consultation the report now incorporated a three year plan of action of how the Education Team could support the Trust in its wider delivery of topics. The document was out for consultation with the Faculties and providing that there were no significant amendments, C Lisseman was looking for approval.</p> <p>M Sharon commented that the Trust was embarking on Continuous Quality Improvement (CQI) programme and proposed that the document incorporated a level of training and skills around CQI.</p> <p>R Dunshea noted that to provide the Board with assurance that RWT managers were equipped to do their jobs, he would expect that the document stated what managers were required to do, but felt that there was a gap around management skills.</p> <p>A Duffell stated that as this document needed to be signed off before the 1st April, any comments should be provided directly to C Lisseman who would amend and recirculate to the Committee for virtual approval, within an agreed timeframe of 2</p>	<p>19/006 C Lisseman</p> <p>19/007 All</p>

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	week. The final version would be circulated to the WODC with the April meeting reports.	
9.	Tackling Bullying & Harassment – Action Plans 2019 (Action 18/065) Update provided at Section (4).	
10.	Annual Review of WODC Performance (Action 18/068) A Duffell presented the report on the outcomes following the review of the Committee effectiveness and proposed that J Hemans and himself would discuss any areas of concerns and agree an action plan and way forward.	19/008
11.	WODC Workplan 2019 – 2020 A Duffell presented the updated workplan for the meetings of the WODC 2019-2020, the workplan was approved.	
12.	Performance Metrics and Targets for 2019/20 Item deferred until April 2019.	
13.	Workforce Resourcing Item deferred until April 2019.	
14.	Communications Agenda S Evans provided an update on the current Communications agenda. She informed that the draft Communications Strategy had been reported to WODC around May/June 2018 however, there had been a discussion on whether the Strategy should incorporate Staff Engagement but it had been decided to keep separate, therefore the Communication Strategy update was due in April 2019, ahead of going to Trust Board in May.	19/009 S Evans
15.	Health & Wellbeing Item deferred until April 2019.	
16.	Mandatory Training Review L Nickell presented the report on the Mandatory Training Review, which had been presented and discussed by the Executive Directors. She advised that this review had taken into account the requirements in preparation for the CQC and the rationalisation of mandatory training. In terms of the Training Needs Analysis (TNA), the proposal was to agree tier one topics which were mandatory generic, tier two topics which were mandatory specific and an option for down grading some existing topics and to remove these from the TNA. The Exec Directors also discussed the option of having two levels of compliance, one to keep mandatory training thresholds internally at 95%, but for external reporting the proposal was that the threshold was reduced to 85%, this was in line with the feedback from CQC in that the Trust sets itself too high a target. The proposals had been agreed by the Exec Directors and would be include within the 2019/20 workforce reporting. L Nickell highlighted: <ul style="list-style-type: none"> • From July, new starters would be asked to complete their e-learning mandatory training topics before they started at the Trust which would help onboard staff much quicker. 	19/010 A Race

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	<ul style="list-style-type: none"> • With the introduction of the pay award and also for Clinical Excellence Awards, there would sanctions around non-compliance of MT • In preparation for the imminent CQC well led review, weekly mandatory training reports would be produced and sent directly to Divisions and Directorates, to help encourage a more responsive report. • There has been a focus on safeguarding training and individual letters would be sent out with two medical safeguarding training sessions scheduled in March. 	
17.	<p>Developing Workforce Safeguards</p> <p>A Duffell informed that the report circulated provided a brief summary of a document that was circulated at the end of 2018 by NHSI, which initially focussed on nursing around safeguards, assurance, new roles and governance, however, this has now been broadened to cover the whole workforce.</p> <p>A Duffell advised that a self-assessment on workforce planning needed to be completed and this would be brought to a future WODC. He advised that initial steps had been identified and would be followed through.</p> <p>R Dunshea queried whether this item should be presented at one of the Board Development session in order that the Board understand fully the implications of this; A Duffell agreed to discuss further with A-M Cannaby and J Odum.</p> <p>R Baker commented that although the NHSI would start to measure Trusts against these safeguards from April 2019, there was a 12 month shadow period, however RWT needed to be prepared.</p>	<p>19/011 D Locke/A Race</p> <p>19/012 A Duffell</p>
18.	<p>Workforce Race Equality Standards (WRES) – Update</p> <p>D Locke informed that in January the national NHS WRES data analysis report had been published and this had been circulated for information. An analysis and comparison of the national picture against RWT's results of 2018 had been undertaken and were included within the cover report.</p> <p>Three indicators showed continuous improvement, both nationally and within the Trust around</p> <ul style="list-style-type: none"> • recruitment practices, • disciplinary procedures and • non-mandatory training, <p>in that the indicators of experiences of BME staff have become more positive.</p> <p>The areas that continue to be of some concern and had not shown any improvement or movement were around BME staff having experienced harassment and bullying by either staff, patients or service users.</p> <p>RWT positive areas against the national position were around –</p> <ul style="list-style-type: none"> • Improvement on equal opportunities for career progression and promotion, and • Personally experiencing discrimination at work from managers or colleagues, again seen a drop in staff reporting negatively. <p>D Locke stated that as discussed previously, the results from the staff survey</p>	

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	<p>would be reviewed and the Equality, Diversity and Inclusion Steering Group would focus on taking forward the agenda, particularly around leadership and development.</p> <p>A Duffell suggested that for the internal reporting it would be helpful to add colour coding to view, at a glance, whether any improvement or otherwise; D Locke to follow up.</p> <p>D Locke reported that the changes to the Disciplinary procedure, with the introduction of the fast track and fair blame process, had had an impact on the results, together with the introduction of the cultural ambassadors. She advised that the Trust had also introduced Staff Engagement Voice Networks meetings and the BMAE network would be commencing in March, so the Trust was continuing to focus its efforts in supporting its staff. A further route for staff is through the Freedom to Speak Up Guardian (FSUG), Neelam Mehay, and the HR teams linked in closely with the FSUG. Future developments included a programme around behaviours and recognising unconscious bias for both managers and staff.</p> <p>R Dunshea queried whether, in order to raise the profile of Equality, Diversity and Inclusion across the Trust, it would be feasible to promote the Trust's initiatives to staff via the Trust's newsletter; A Duffell agreed to explore further.</p>	<p>19/013 D Locke</p> <p>19/014 D Locke/ S Evans</p>
19.	<p>Workforce Disability Equality Standard (WDES)</p> <p>D Locke informed that reporting on WDES would be effective from April 2019 in a similar format as to that reported against the Workforce Race Equality, with the Trust results due to be published by 1st August. The teams were currently in the early stages of collating the required data and the data and action plans would be taken to the Board for approval ahead of the summer publishing date. A Disability Forum had been started, as the data required included qualitative information and experiences and not just figures. Further update will be brought to WODC for assurance.</p>	<p>19/015 D Locke</p>
Key Risks		
20.	<p>New Risks</p> <p>No new risks identified.</p>	
21.	<p>Board Assurance Framework</p> <p>A Duffell commented that the Committee had previously discussed as to whether the risk level around the vacancies should be reduced as the vacancy figures continued to improve across the Trust. R Baker commented that there was some apprehension on this proposed action as it was well known that there was a reduced number of nurses in training, so could be a concern in going forward.</p> <p>It was agreed to consider this proposal further at the next meeting and to consider what the thresholds might be, before amending the risk level.</p>	<p>19/016 A Duffell</p>
Papers for Information (To Note)		
22.	Action Notes of the Nursing Workforce Group	

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23.	Notes from the Attract and Retain Steering Group	
24.	Minutes of the Medical Workforce Group	
25.	Minutes of the Academy Steering Group	
26.	Any Other Business No further issues raised.	
27.	Date and time of Next Meeting 10:30am-12:30pm, 26 th April 2019 Estates Development Meeting Room, Hollybush House	