

CHAIRMAN'S SUMMARY REPORT

Name of Committee/Group:	<u>HR Sub Committee</u>	
Report From:	Director of HR	
Date:	25 th March 2013	
Action Required by receiving committee/group:	<input checked="" type="checkbox"/> For Information <input type="checkbox"/> Decision <input type="checkbox"/> Other	
Aims of Committee: Bullet point aims of the reporting committee (from Terms of Reference)	<p>1.0 Strategic Direction</p> <p>1.1 To consider the Trust strategic objectives, national HR strategies, employment legislation and local initiatives and assess their impact on the Trust, and develop plans to achieve implementation of the same.</p> <p>1.2 To monitor and report on implementation and effectiveness and progress of national and local strategies.</p> <p>1.3 To consider the development, and its on-going implementation of a HR workforce Strategy that fits with the Trust's organisational needs and direction.</p> <p>1.4 Policy Development: to identify need for development and/or revision of HR Policies and procedures to serve operational service activities, prior to submission to either Trust Board or JNC as appropriate.</p> <p>2.0 Performance Management</p> <p>2.1 To review and monitor the implementation of HR Strategy.</p> <p>2.2 To review and monitor across the Trust using HR key performance indicators such as;</p>	
Drivers: Are there any links with Care Quality Commission/Health & Safety/NHSLA/Trust Policy/Patient Experience etc.		
Main Discussion/Action Points: Bullet point the main areas of discussion held at the committee/group meeting which need to be highlighted	<ol style="list-style-type: none"> 1. Update from Divisions, Occupational Health & Wellbeing and Education and Training reported and noted. 2. Update report on HR Strategy Implementation Action Plan Progress 3. Update on the Medical Staffing Project 4. Review of Policies; HR01 Leave Policy and HR27 Consultant & Medical Staff Study & Professional Leave Policy. 5. Update on NHSLA Monitoring Reports on Audit Action Plans:- <ol style="list-style-type: none"> a. HR41 Stress Policy b. HR41 Stress Policy – Stress Risk Assessments Analysis c. HR15 Prevention of Harassment & Bullying Policy d. HR04 Engagement of Temporary Workers Policy 	
Risks Identified:		

Include Risk Grade (categorisation matrix/Datix number)	
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Minutes of the HR Sub-Committee

Date 29th January 2013
Venue Conference Room, Hollybush House
Time 9:30am

Present:	Name	Role
	Mary Brassington (MB)	Head of Occupational Health & Wellbeing
	Kerry Evans (KE)	Divisional HR Manager
	Michelle Fish (MF)	Divisional HR Manager
	Denise Harnin (DH) Chair	Director of HR
	Caroline Marshall (CM)	Deputy Director of HR
	Louise Nickell (LN)	Head of Education & Training
	Nick Price (NP)	Divisional HR Manager
	Hannah Reade (HER)	Head of HR Shared Services
	Julie Shillingford (JS)	Head of HR Advisory Services
	Diane Wilding (DW) (Chair)	Deputy Director of HR
In Attendance:	Name	Role
	Maria Dent (MD)	Secretary
Apologies:	Name	Role
	G Argent (GA)	Divisional Manager Estates & Facilities
	Lewis Grant (LG)	Deputy Chief Operating Officer
	Tim Powell (TP)	Deputy Chief Operating Officer
	M Simcock (MS)	Health Safety & Improvement Co-ordinator
	Gemma Smallwood (GS)	HR Manager - Resourcing
	Jeremy Vanes (JV)	Non-Executive

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1.	Apologies for Absence As noted above.	
2.	Minutes of the Previous Meeting dated 11th December 2012 The minutes were agreed as a true record.	
3.	Matters Arising from the Last Meeting All actions reviewed, to note:	
3.1	Item 3.3: Audit Report on HR04 Engagement of Temporary Workers – KE confirmed that the audit reporting has now reverted to 12 monthly audits and the policy has been amended accordingly.	

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3.2	Item 4.7: Work Based Learning - Foundation Degree – LN confirmed that Judy Turner is meeting with Managers to draw up the foundation degree requests.	
3.3	<p>Item 4.7: Unemployment Work Placement Scheme – DH stated that the report on this went to TMT and Trust Board in January; there is full commitment in principle in carrying out the scheme again, dependent upon funding being sourced; DH to confer with Directors to confirm.</p> <p>Overall, the project was a great success, providing a great profile for the Trust and full commitment was given by the Board to repeat.</p>	DH
3.4	Item 4.7: SIM Ward – LN advised that she has followed up with provider company regarding multi-cultural skin tones for the dummies, waiting to hear.	
3.5	Item 5: Terms of Reference – CM advised that the TORs were discussed and accepted at the last meeting, although not fully ratified. CM stated that no further comments had been received. DH agreed to sign off the revised TORs.	TMT
4.	Monthly Update/Reporting:	
4.1	HR Directors Report	
4.1.1	<p>Agenda for Change (AfC) Proposals DH reported that AfC proposals are currently out for consultation with the Unions and to date, RCN and CSP have accepted the proposals. UNITE has objected. DH stated that if successful, the implementation date will be 1st April.</p>	
4.1.2	<p>Scoping Document on Junior Doctor Contract DH reported that negotiations on Junior Doctors contract are to commence and a set of Heads of Terms have been agreed nationally with the BMA and the NHS Employers; discussions to commence from 1st April.</p>	
4.1.3	<p>Clinical Excellence Awards (CEAs) Similarly, negotiations to commence on the CEAs; Head of Terms to frame those negotiations are currently being worked up with discussions to commence from 1st April.</p>	
4.1.4	<p>Francis Report DH reported that the Francis report is due out on the 6th February; and stated that any outcomes from this will require actioning.</p>	
4.2	<p>Update Report for Division 1 - Surgery: KE provided an update on key points :-</p> <ul style="list-style-type: none"> • Sickness absence for October was at 3.52% but a slight increase has been seen in November and December, although the figure is lower than the same time last year. Meetings are taking place with Managers to look at the processes in place and a number of audits have taken place and any areas of concern have been escalated to Managers. Local training is ongoing. • Mandatory Training – majority areas at ‘green’ for compliance in generic training; continued emphasis to increase compliance in all areas ongoing. <p>DH advised that the Trust has agreed to apply for NHSLA Level 3 in September 2013; continued surveillance on all KPIs will be required.</p>	

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	<ul style="list-style-type: none"> • Appraisal stands at 85% for the Division; action plans sent out to address. <p>DH stated that if the new pay arrangements and proposals under Agenda for Change are agreed, enabling arrangements will be required and in place from April, in order to drive those proposals. The proposals are around staff getting pay progression through the enabling gates, and we will need robust processes to enable or defer peoples pay progression. CM commented that there is the Pay Progression Policy already in force which currently provides the tools for Managers which can be included into a Capability framework; DH and CM to discuss further.</p> <ul style="list-style-type: none"> • Ongoing HR frameworks within the Division include:- <ul style="list-style-type: none"> ○ Dental services ○ Ophthalmology ○ Pathology ○ Vascular 	CM/DH
4.3	<p>Update Report for Division 2 – Medicine and Community: MF provided an update on the key points:</p> <ul style="list-style-type: none"> • Sickness absence at 5.1% for December; slight decline on November and slight decline on the same period last year. An audit and training plan has been developed for the next 12 months to review all sickness absence management across the whole Trust. • HR Frameworks currently ongoing <ul style="list-style-type: none"> ○ GEM Centre administration and clerical staff - out for consultation. • Pharmacy – big push towards 7 day working but some issues around EWTD compliance. LN commented that feedback from Deanery visits is regularly around availability of Pharmacy services; DH stated that as the Trust moves to running fully on 7 day working basis; the support services also need to be in place. <p>DH commented that the report of Zena Young, Divisional Nurse, presented to TMT, stated that there was a problem with nursing vacancies in Division 1. MF commented that there are also problems in Division 2, but having spoken with GS; GS has confirmed that due to district nursing and NMU expanded their nursing vacancies only in December, the rating for vacancies has gone from green to amber; this is only related to an increase in establishments in NMU. MF stated that she had been informed that the nurses on winter wards, who are employed on fixed term contracts, are starting to leave and agreement has now been given in the Division yesterday to make these posts substantive. DH requested KE to review status on this within Division 1.</p>	KE
4.4	<p>Update Report for Estates & Facilities NP provided an update on the key points for the Estates & Facilities Department:-</p> <ul style="list-style-type: none"> • Sickness absence at 3.73%, similar trend to last year. • Mandatory training: some slight reduction to compliance rates; but Managers addressing. • HR Frameworks:- <ul style="list-style-type: none"> ○ retail outlets - three staff have TUPE transferred across to WHSmiths effective from 13th January, no issues with transfer. ○ PCT estate transfers across on 1st April 2013, but no TUPE implications because the staff employed are moving to new organisation called PropCo. 	

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	<ul style="list-style-type: none"> Chatback – follow up sessions have been run with the Porters following the survey. 	
4.5	<p>Update Report for Corporate Services</p> <p>NP provided an update on the key points for the Corporate Services:</p> <ul style="list-style-type: none"> Sickness absence is at 3.06% which is lower than previous month's report. IT department has seen a much lower rate which has been brought about by meetings and training workshops to focus on this. Appraisals stands at 87%. HR Frameworks ongoing <ul style="list-style-type: none"> IT Department, nearing completion Materials management in Procurement Information Team – to commence consultation with staff imminently Chatback – work ongoing within Governance Teams following Chatback survey. 	
4.6	<p>Occupational Health Report</p> <p>MB provided a brief update for Occupation Health & Wellbeing:</p> <ul style="list-style-type: none"> Sickness Absence Management – a new role for a Health and Wellbeing Co-ordinator at Band 4 has been agreed for a 12 month fixed term contract to provide continued support with the revised process and the call-back scheme. <p>DH commented that now that enablers and processes are in place for the Sickness Absence Policy, for year 2, the focus will be to ensure that management practice is consistent and to track where the policy has been successfully implemented and where it hasn't. NP commented that although enablers are now in place, Managers still need confidence and support from HRMs to process through. As mentioned earlier, a training plan is in place for all areas across the Trust and together with the ongoing workshops and meetings by exception, the benefits from this should be seen. DW stated that it will be important to continue reporting and updating the group on this.</p> <ul style="list-style-type: none"> Stress referrals, decrease has been seen, however, it has been noted that percentage of staff now self-referring has increased, notably from the call-back contact call; Managers are kept informed. SEQOHS Accreditation – all required evidence now uploaded with assessment due in May. Flu Vaccinations – two weeks left for the flu vaccination campaign which will be closing on the 8th February; any outstanding vaccinations will be returned. Currently at 52.4%; but will give push for final two weeks. Sharps Management Steering Group – reported recently to recent IPPC; D Loughton and C Etches pleased with report and outcomes. West Park –capital bid submitted for some adjustment works within the OH department at West Park. Wolverhampton University Contract – the department has won the contract for all students at Wolverhampton University. 	
4.7	<p>Education & Training Report</p> <p>LN provided a brief update for the Education and Training department:</p> <ul style="list-style-type: none"> Foundation Visit in October – reports received 3 months after the visit; the Trust response is expected back within one week. Mandatory Training & Induction <ul style="list-style-type: none"> local induction is main area of concern around the 95% compliance rate; 	

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	<p>it has been agreed to make February an amnesty month to encourage staff to take up.</p> <ul style="list-style-type: none"> ○ Concern around training which is delivered by the Governance team as they cannot identify the target group, which means that the Training Department cannot provide compliance reports. This is for ' Training in investigation in Incidents, Complaints and Claims'. LN to escalate to C Etches, if no further clarification received at the NHSLA Group meeting. ● NHSLA Monthly Audit Report on OP41 has been carried out, no variance against plan and progressing audit action plan well. ● CQC unexpected visit on 24th January; outcome 14 was one of the outcomes they reviewed; all went well. ● Medical Undergraduate – moving to tariff based SIFT system. ● Appraisals are at 86.95 Trust wide. Revalidation is also being promoted and taken forward; plans in place to send out personal email reminders to all doctors. ● Audit on training perception carried out; results issued with today's papers. ● Receptionist Development programme is underway and has been well received. 	
5.	<p>Terms of Reference See 3.5 - the revised Terms of Reference were agreed; DH to take forward to TMT.</p>	TMT
6.	<p>HR Strategy Implementation Progress Update Report DW reported that this is the six monthly progress report update on the current action plan; she noted that events have moved on since the action plan was developed and proposed that the senior team revisit to develop further. Actions within the current plan are all on track in the majority of areas.</p>	DH/DW/CM
7.	<p>Medical Staffing Project Update HER gave an update on the Medical Staffing Project:-</p> <ul style="list-style-type: none"> ● The current focus is on the locum bank. The December internal fill rate was approximately at 29%, however, some months are at 50%. ● The HTE framework has now been implemented and embedded; this is a provider framework for providing staff through agencies but at better rates and terms than previously. The framework is used throughout the Trust, however, there are a few exceptions in areas such as A&E and Oncology where there are difficulties in sourcing staff. ● The main reasons for bookings are to cover known vacancies; peak in workload increase (particularly December), sickness and annual leave cover. ● The booking principles have been accepted and complied with across the Trust. ● The team continue to increase numbers on the bank, but there has been some delay with the feedback for shortlisting from the Divisions; this will be followed up. ● Longer term gaps in the Deanery allocation will affect how much we can fill internally, because the bank isn't set up to cover long term; agency staff are currently employed in a number of areas across the Trust. ● The Medical staffing team struggled to provide accommodation for doctors during the adverse weather conditions; DW has agreed to raise with the Business Continuity Group. ● There have been a small number of enquiries around taking on doctors who want to work through their own limited companies on a Trust SLA. A number of Directorates, such as A&E and Oncology, are keen to use this route and there 	

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	<p>would also be cost saving as cheaper than going through the agencies. It was understood that this was a model that previously the Trust wanted to avoid, however, HER asked if the Trust could review its position and if that was the case, HER would meet with Procurement Department to ensure a process was set up. DH requested a briefing update report which she would take to the weekly Directors meetings for consideration.</p> <ul style="list-style-type: none"> • GS is currently working with the Training & Development department on a specific induction for Bank doctors. • A new booking system is being implemented through a LocumPod, provided by 3 Blue Dots. The system will modernise and streamline processes by managing internal bookings, managing all the databases, which includes all doctors details in one central secure area, allow Finance to have access to electronic timesheets and billing and links in to ESR, which overall will mean that recruiting can be done in a much more easily and timely manner. External agencies are also signed up to it, so CVs are sent through electronically, again ensuring a speedier process. DW commented that it has been agreed to trial the system in the current financial year and to review the benefits and cost savings for medical staffing processes. 	HER
8	HR Policies Development/Update:	
8.1	<p>HR01 Leave Policy JS advised that there has been a single change to the Policy to bring the Policy into alignment with recent legislation around annual leave and sickness absence. Amendment agreed.</p>	JNC TMT
8.2	<p>HR27 Consultant & Medical Staff Study & Professional Leave Policy CM advised that this policy has been reported to HR Sub previously and has been presented at LNC; however, following the meeting with the LNC, further amendments were required. Awaiting formal sign off from the Chair of the LNC; before taking forward to TMT for formal ratification.</p>	CM
	<p>DH stated that a mechanism is required to inform of changes from the LNC to individual consultants; so proposed a bulletin to be sent out. She also commented that a process is required in how we ground collective agreements individually; for both LNC and JNC. CM and DH to consider.</p>	CM/DH
8.3	<p>NHSLA Monitoring Report - Audit Action Plans – HR41 Stress Policy Report presented for update of action plan.</p>	
8.4	<p>NHSLA Monitoring Report - Audit Action Plans – HR41 Stress Policy – Stress Risk Assessments Analysis Report presented for update of action plan; DH requested DW to follow up on the action plan directly with MS.</p>	DW
8.5	<p>NHSLA Monitoring Report - Audit Action Plans –</p> <ul style="list-style-type: none"> • HR15 Prevention of Harassment & Bullying Policy • HR04 Engagement of Temporary Workers Policy <p>KE stated that audit reports and action plans on the above policies were presented to HR Sub Committee in September 2012; however, the original action plans have been amended to reflect recent review; KE briefly outlined the changes. Work continues to address outstanding actions.</p>	

Item No.		Action
9.	Any Other Business	
9.1	KE commented that if the NHSLA Level 3 assessment takes place in September 2013, a number of audits will be out of date so an additional HR Sub Committee meeting will be required before September in order to have 12 monthly audits recorded.	
9.2	DH requested the group to ensure all Policies are reviewed in timely manner.	
10.	Date & Time of the Next meeting 9:30am, 19 th March 2013 Ophthalmology Board Room.	

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