

## The Royal Wolverhampton Hospitals NHS Trust

**HR SUB-COMMITTEE**

**Notes from the Meeting held at 3:00pm on Tuesday, 23<sup>rd</sup> November 2010**  
**Conference Room, Hollybush House**

A Adams (AA)	✓	G Argent (GA)	✓
Mary Brassington (MB)	✓	Elaine Brooks (EB)	Apols
Zena Dalton (ZD)	✓	Kerry Evans (KE)	Apols
Michelle Fish (MF)	✓	Lewis Grant (LG)	Apols
Denise Harnin (DH)	✓	Caroline Marshall (CM)	✓
Louise Nickell (LN)	✓	Kim Perris (KP)	✓
Tim Powell (TP)	✓	Julie Sharp (JS)	Apols
Margaret Simcock (MS)	Apols	Gemma Smallwood (GS)	✓
Sam Turner (ST)	Apols	Jeremy Vanes (JV)	✓
Chris Wanley (CW)	X	Diane Wilding (DW)	✓
Maurice Hakkak (MH) (on behalf of Lewis Grant)	✓		

**Action**

1. **Apologies**  
As noted above.
2. **Minutes of the Last Meeting – 21<sup>st</sup> September 2010**  
The Minutes of the last meeting were reviewed and agreed as a true record.
3. **Matters & Action Points Arising from the Minutes**
  - 3.1 **Policy Review for TCS**  
DW commented that the Policies will be reviewed in December to take forward in January for approval.
  - 3.2 **Update on Roll Out of Trust Contracts**  
KP advised that there are 77 contracts to issue from the first tranche with a further 100 for new starters who started after the data was pulled from the database with a few anomalies being followed up.
  - 3.3 **Protocol for Notification of Trust Wide Collective Agreements**  
DW stated that there are different legal views on what is required, so will carry out further research work and feedback.
4. **Monthly Update:**
  - 4.1 **HR Director's Report**
    - 4.1.1 **NHS Employers Policy Board**  
DH attended the NHS Policy Board which took place prior to the start of the Conference in Liverpool.  
  
Couple of points to note:
      - Claire Chapman attended the Policy Board meeting and talked about 6

domains for the workforce agenda that are being prioritised nationally:-

- Pay & Pensions
  - Education & Training Consortium
  - Leadership and Talent
  - Staff experience
  - Equality & Diversity
  - Professional standards
- Impact of forthcoming European legislation on the NHS – will look at our opportunity to input into consultation around the EWTG review. They will be canvassing views in Spring 2011 with a paper due in December 2011.

#### 4.1.2 **Mutually Agreed Resignation Scheme (MARS )**

The national MARS scheme has been hailed as a success across the country and considering the changes that we will be handling in the future, we perhaps need to consider whether we wish to set up a local MARS scheme and include that in any kind of redeployment of potential offers; for consideration.

#### 4.1.3 **NHS Employers HR Conference in Liverpool, Nov 2010**

DH stated that the presentation of the keynote speakers are now available on the NHS Employment website and suggested to take particular note of the presentations by David Nicholson, Nigel Edwards and Sarah Wittingham.

#### 4.1.4 **Winter Staffing Update**

DH reviewed current nursing vacancies and was concerned with vacancies on Division 2; TP confirmed that he had had assurance that staffing is appropriate for the winter wards.

#### 4.2 **Division 1 Report**

MH presented the highlights of the report for Division 1 for September 2010:

- Sickness absence at 4.02% mainly due to short term illnesses which is slightly up on the last month, and the October figure has risen to 4.26%, all sickness is being managed across the Division in line with trust policy.
- Appraisals is at 81.5%; although aiming for 85% across the Division.
- Agency spend is similar to previous month; however, the Urology Consultant post is now in post, as from 1<sup>st</sup> November; but there is still some cover in Oncology and Ophthalmology.
- Mandatory training – majority 'green' except hand hygiene which is amber and Directorates have been tasked to address.
- Vacancies have improved with 6.42 trained and 2.82 untrained.
- Case work
  - Currently 3 disciplinaries ongoing.
  - 2 Employment Tribunals – scheduled for April and June next year.

#### 4.3 **Division 2**

TP presented the report for Division 2 for September 2010.

- Sickness absence is running at 4.81%, with 9 Directorates above Trust target but work continues to address.

Action

DH/TP/DW

- Appraisals at 81%.
- Agency spend – slight reduction in spend and reduction in use of bank. Currently finalising proposal on medical staffing with DW and will discuss with DH further outside of this meeting.
- Case work
  - 3 Disciplinarys ongoing
  - 1 investigation concluded in the month
  - 1 possible Employment Tribunal
- Professional Registration – one lapse in month but this refers to a nurse working as a general manager
- Mandatory Training – hand hygiene is a pressure and have addressed through Directorate meetings.

CM commented that the performance report states that the Agency spend would be brought in line by the Medical Staffing project, but this is not in plan for this financial year.

#### 4.4 Corporate & Estates & Facilities

##### 4.4.1 Estates & Facilities:

GA presented the Estates & Facilities report for September 2010.

- Sickness Absence – reported at 4.34%. There are a couple of departments above 4% these are housekeeping, porters and sewing room, mainly due to long term sickness issues.
- Appraisals – at 76.9%; plans in place for specific areas to improve compliance.
- Case work:
  - 2 Disciplinarys
  - 1 Bullying & Harassment
  - 2 Grievances (one individual, one collective)
  - 1 Appeal against Stage 3 Sickness Absence
- Management of Change negotiations in relation to the Catering Department have been implemented and the new service is in its advance transition phase with all wards transferring before Christmas. Initial feedback has been very positive both from patients and staff.
- Introduction of Bank Staff within the department as an alternative of using overtime; the bank will be modelled on the WCPCT model and their bank staff will migrate over in April 2011.
- Mandatory Training – green across the Division.

##### 4.4.2 Corporate

MF presented the highlights from the report for Corporate Division:

- Sickness Absence – at 3.78% for September but latest figures for October showing above the Trust target. Areas of concern IT/Telecomms/Health Records; MF to ensure that the sickness absence is being managed accordingly.

- Appraisals at 79.9%, slight reduction and areas that are under performing have been contacted.
- Agency spend, similar to that for the year, with the majority for spending in Finance to cover vacancies within the department.
- Case Work
  - One case of Bullying and Harassment investigation concluded.
- HR Framework in IT area which has now concluded and new arrangements for IT Applications Team On Call take effect from 1<sup>st</sup> November.
- Mandatory Training – green apart from hand hygiene which is amber.

#### 4.5 Occupational Health Report

MB presented the highlights from the OH report:

- The key driver for the team is the Flu Vaccination programme and take up rate is at 15% in the first 3 weeks.
- Stress Reporting – same trend as seen before, with the higher percentage of cases being against personal stress, followed by work demands and support, case can often be identified as performance management issues. Full reports are provided back to the Manager and copied to the HR Manager.
- Health Surveillance – this came out of the HSE visit that we need to make a stronger link between the health surveillance that we carry out and the COSHH assessments, so now got health surveillance in place for most of the hazards and awaiting information from the Health & Safety team. We will approach everyone for COSHH assessment to derive further information.
- Carried out a further customer Satisfaction survey, however, disappointed with the number of returns from Managers.
- Health Promotion – now got strong formal link with dieticians so that we can refer staff direct to them who have high BMIs.
- Virtual Gym – some problems with IT in downloading the training videos but Virtual Gym are working directly with IT.
- Measles Screening programme – high risk areas completed and continuing to roll out across the whole of the Trust.
- NHS Plus – expected as Occupational Health provider to get Faculty of Occupation Health accreditation and will need to put in an expression of interest to get accredited.

#### 4.6 Education & Training Report

LN presented the highlights from the Education and Training report:

- Deanery Visit –
  - issues within Anaesthetics has now been resolved.

DH request update on Rota's; KP to provide full update and timeline for going through to the Deanery.

KP

## Action

- Oncology – previous issue more in terms of patient assessment by consultant; MH stated that there is a plan in place that the Consultant body will be able to communicate to the Deanery.
- LDA and Learning Beyond Registration funding and monitoring - still awaiting further information from SHA re MPET review to see where the extra money or reduction in funding for various streams of work, SIFT or MADEL will sit and what the implications are for the Trust.
- Mandatory Training – overall summary for Trust is 96% and appraisals are at 79% which is a massive improvement.
- Undergraduates – there will be a series of discussions between Paul Rylance, Denise and possibly the Medical Director to look at the roll out of the Academy approach to medical undergraduate training as it will change the way the education training is delivered in that area. The Academy approach has been delayed for a year.
- Joint Investment Framework funding ends at the end of July 2011 which will mean that we won't have external funding to support training such as NVQs and foundation degrees. The government are considering whether a replacement scheme will be put in place.
- OLM – local report training has started with the Matrons so they can access data at source for their KPIs reporting.
- National Learning Management System – Radiology are piloting some e-learning material which gives experience in e-learning through ESR and also gives CPD points.
- Royal Awards – dates for next year being sourced and nomination forms will be circulated in due course.
- FT Leadership Programme has commenced.
- KITE – the site has been revised and will be re-launched on 1<sup>st</sup> December.
- Revalidation of Medical Staff – pilot sites in various hospitals are testing the systems and processes to support revalidation. As a Trust we made a decision to undertake the 360° appraisal in preparation and this has been rolled out to all directorates apart from one; we will be monitoring the take up in those areas.
- Mandatory Training – it has been agreed to review the mandatory training and topics.

## 5. Review of On Call Arrangements

CM informed that the Agenda for Change terms and conditions for local arrangements for On Call was allowed to continue to March 2011 after which we would get a national steer. The national steer has provided a range of principles that an on call system should meet. A data collection is currently ongoing to understand what arrangements are in place currently, to understand what the implications would be if we carry on with these and to ascertain of where we want to get to. A regional Black Country group has been set up to agree a collective local agreement and local principles for the region; these will need to be agreed at our local organisations. A local Steering group will be set up and will include Management, Finance and Staff Side representation. A further update will be given at the January meeting.

CM

**Action**

DW stated that we need to be mindful of any current HR frameworks and any new arrangements that come on board.

**6. HR Policy Development**

**6.1 HR10 – Code of Practice – Protection of Children**

MF stated the policy has been circulated for comment and requested feedback by the 3<sup>rd</sup> December 2010 as the Policy will not be brought back to the HR Sub Committee again as this Policy needs to be agreed at the TMT in January 2011 in order to meet an action point following an internal audit review.

**All**

Key changes are:

- Changing the name of the Policy to “Responding to allegations and suspicion of child abuse against staff”
- To widen the scope to cover students, volunteers, work experience, locum and bank and contractors.
- The policy is not limited to allegations only at the work place.
- It makes clear what the responsibilities within the policy are and what they are intended for - the protection of children from significant harm is unchanged. The Policy now covers the protection of staff from false accusation concerns.
- Incorporated the new guidance and statute.
- Now clearer accountability from Chief Exec down to all staff.
- Guidance of sharing of information inter agency.

MF stated that she will be attending the Vulnerable Adults Group meeting during January 2011 in regards to linking this policy with the group. JV commented that it may be impossible to marry the two groups into one Policy. DW commented this was the feedback from the Child Protection Lead and we are mindful of this. JV suggested that a copy of the Policy is forwarded Balsinder Jasper-Mander, Non Executive, in relation to her links in this area.

**MF**

This Policy will be going to the Safeguarding Children Committee meeting at the beginning of December for comment and these will be incorporated with any from this group in order that the Policy can go forward to TMT for ratification in January.

**7. Any Other Business**

DH thanked KP for her work within the HR Department and wished her well in her new life in New Zealand.

DW stated that Elaine Brooks will also be leaving the department on the 3<sup>rd</sup> December 2010 to return to a clinical role at the Trust.

**8. Date and Time of Next Meeting**

9:30am, 18<sup>th</sup> January 2011 – Conference Room, Hollybush House.

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