

The Royal Wolverhampton Hospitals NHS Trust

HR SUB-COMMITTEE

Notes from the Meeting held at 9:30am on Tuesday, 25th January 2011
Room 8, WMI

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

Action

1. Apologies

As noted above.

2. Minutes of the Last Meeting – 23rd November 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 Update on Roll Out of Trust Contracts**

CM advised that all members of staff have been issued with a contract, there are still a few issues with correct data for a small number of staff. The next step is to chase up the signature sheets to identify the number of staff who have signed and returned their contract for the personal file.

DH stated that we need to remember to review the status of PCT staff contracts and proposed this was carried out late summer.

CM stated that a cross check has been carried out across the two contracts, the majority of terms are identical apart from the notice periods for Bands 5 and 6, whereby RWHT requires 3 months notice and the PCT only require 1 month. No other major issues but we will need to form a view and plan for roll out.

CM

4. Monthly Update:**4.1 HR Director's Report**

National Proposal for Pay Freeze – the recent NHS Employers Bulletin advised that all the Unions have rejected the proposal on the pay freeze; further guidance will be given with a view to asking whether employers wish to apply this locally.

PCT Staffside Representatives (TNC) – DH and D Loughton met with the PCT Staffside reps and commenced the formal process for TUPE.

DH handed out copies of the following revised policies:

- HR Framework/Management of Change
- Disciplinary Policy
- Grievance Policy
- Sickness Policy and
- Pay Protection Policy

The Management of Change and the pay protection policy, which reduces the protection period for PCT staff from 5 years to 1 year are the priority for review and agreement.

These Policies will also be presented at the Trust's JNC meeting on Wednesday, 26th January. The pay protection for RWHT will change from 3 years to 1 year.

The PCT TNC meeting is the first week in February, and will respond after that.

Headlines from Presentation at the Senior Manager Briefing: 20th January

- Recruitment & Retention Premia – will cease from 1st April 2011
- Default retirement age (65) goes from 1st October 2011 – consideration re workforce planning as may be seen as discriminatory to ask what retirement plans are.

4.2 Division 1 Report

KE presented the highlights of the report for Division 1 for December 2010:

Sickness Absence – increased to 6.33%, previous month 4.99%. The majority of absences were due to short term sickness mainly due to muskeleto, mental health, post op recover and influenza/viral illnesses. Sickness absence workshops still continue.

Appraisal Rate – decreased in compliance to amber; the Divisional Manager has requested that areas at either amber or red compliance are to provide an action plan by the end of January.

Vacancies – increased in the Division during December, nursing vacancies at 26.94% wte, the increase due to the blue prints for the Eye Centre being changed to reflect the current situation.

Agency Costs - increased in November to £95k, main spend is in Urology, Ophthalmology and Head & Neck. DH queried why agency costs for doctors were being counted when there were vacancies within the departments. KE to follow up.

KE

Case Work – Three disciplinary cases ongoing; three Employment Tribunals ongoing.

Mandatory Training – all areas green in compliance.

LN commented that the Information Governance (IG) Toolkit will now be reported against, currently shadow reporting is ongoing and figures are low. There is a Directive from the Department of Health to comply, therefore, she requested that the Divisions give some focus on this training requirement.

4.3 Division 2

ZD presented the highlights of the report for Division 2 for the month of December 2010.

Action

Sickness Absence – two thirds of Directorates within Division 2 exceeded the Trust target with a significant increase in viral infections and influenza.

Appraisal Rate – remains in green and increased on last month, noting that Emergency Medicine and Pharmacy had made good progress.

Nursing Vacancies – increased with 13.2 band 6 vacancies across the Division; Zena Young, Divisional Nurse had reported that this is an acceptable level. DH queried whether this was turnover or indicative to pressures within the area. If this was the case, then will need to look at something to address for next year's winter planning; GS to review.

GS

Agency Spend - was down on previous month; less bank shifts had been requested.

Casework – Four Sickness absence case at Stage 3; two disciplinary investigations ongoing; four cases have been concluded within the previous month; one Grievance concluded and there is one ET ongoing.

Professional Registration – no lapses.

HR Framework – Therapy services are commencing a consultation with the Orthopaedic Therapy Services to go from 5 day working to 7 day working week.

Mandatory Training – all areas green with the exception of hand hygiene.

4.4 **Estates & Facilities:**

KE presented the highlights of the Estates & Facilities report for December 2010.

Sickness Absence – increased, again mainly due to viral illnesses.

Appraisals – compliance improved for third consecutive month, but still at amber.

Agency - increased slightly in November, incurred by Medical Physics.

Casework – two disciplinary investigations ongoing, one grievance being investigated, one appeal against a Stage 3 outcome and one Stage 4 sickness absence meeting.

Mandatory Training – all areas green.

4.5 **Corporate Report**

HT-W presented the highlights of the Corporate report for December 2010.

Sickness Absence – 5.87% which is an increase on last month, but is lower than the trend across the Trust. Finance, HR, IT/Health Records and Nursing Directorate were above Trust target. Sickness workshops are being introduced in IT to address ongoing issues. Reasons for absence were again higher levels of influenza/viral infections.

Appraisals – unfortunately, due to the renewal date of appraisals in December, the compliance figure went into red.

Agency spend for December for distributed evenly between Finance, Estates Department and Medical Director.

4.6	Occupational Health Report	Action
	MB presented the highlights from the OH report:	
	<u>Health Surveillance Programme</u> – information from Estates now received on what environmental monitoring has been carried out in the Trust in the past, so now addressing and will work with Health & Safety Department.	
	<u>Influenza Vaccine</u> – figure stands at 55%.	
	<u>Measles Screening Programme</u> – now gone up to 2,483 staff immune. DH queried whether there would be any impact on PCT staff; MB advised that this will be looked into.	MB
	<u>National Audit of Occupational Health Practice in Depression and Management of long term Sickness absence in the NHS in England</u> – MB provided key highlights from the outcomes of the audit; DH requested a paper for TMT.	MB
	JV queried that as reported, the Trust is making good progress here but is the national picture for OH reflected the same. MB stated that the national report shows good and bad, however, since the national audit has commenced and the Boorman report issued, there are now national benchmarks set.	
4.7	Education & Training Report	
	LN presented the highlights from the Education and Training report:	
	<u>Deanery Visit</u> – repeat visit for FYs due to a patient safety issue identified in EAU; Dr Odum is looking into the issue.	
	<u>LDA Monitoring</u> – there has been a 99% uptake against the Wolverhampton University's commissioned activity and 100% against the Birmingham University activity.	
	<u>Mandatory Training</u> – overall the Trust stands at 92%, however, the Information Governance Toolkit has now been utilised but the current figure of completion is low. DH commented that this training has been brought in by the Government following the recent incidents regarding data issues so every employee should undertake this training; LN commented that this is also included within the Operating Framework and rather than a one-off requirement, this is now an annual training requirement.	
	<u>Appraisal</u> – there has been a dip over the winter period, which is as expected due to winter pressures, however, the Trust is up on last year's same position.	
	<u>Library Services</u> – have developed a Dementia web site as one of the key workstreams in the Trust currently.	
	<u>Clinical Skills</u> – due to lack of availability of FFP3 masks, there had been a possibility that 800 staff would have had to be retrained in using alternative masks, however, further supplies have been located.	
	<u>Leadership & Management</u> – in March a Band 8 emotional intelligence programme will be rolled out and one of the presenters for that course will be Amanda Knight who is an author of the Applied Emotional Intelligence book. The course will be by invitation and we will work with Clinical Directors and Matrons.	
	<u>Workbased Learning</u> – Lots of bed making training sessions have taken place to support winter pressures, but these have now been stood down.	

Action

The Joint Investment Framework funding for Bands 1-4 will cease in July this year, this is related to funding for staff to undertake NVQs. It has not been confirmed whether there will be anything else to replace it, as it is all tied into the MPET review and Developing the Workforce; consultation is out on that until the end of March.

MF queried whether the Bullying & Harassment figures will be included within the monthly reporting stats for Mandatory Training; LN confirmed that these should be included.

LN stated that the new NHSLA standards have been issued and is very prescriptive on what needs to be included so she will review, and update and amend the Induction & Mandatory Training Policy accordingly and submit to the next HR Sub Committee.

LN

Agenda Item:
March 2011

4.8 Communications Update

ST provided a brief update:

Flu News – the regular meetings have been stood down in light of a reduction in admissions. There have been 10 editions of regular flu bulletins; good feedback received from staff who had found the information helpful.

TCS - a further newsletter went out on the 17th January with the latest update.

Inside Story – filmed in the Maternity Unit 20 years ago and returned to give update.

Future Comms –

- Carbon Communications Plan due and
- Single Emergency Portal Communications Plan and a stakeholder engagement event has been scheduled at the end of the month.

5. Nursing Workforce Profile Sept 2010

DH stated that the report has been pulled together by the Nursing team and the nurse recruitment team will need to engage with this.

DH proposed setting up a workforce group, to meet quarterly, to focus on recruitment and other schemes such as interments and changing roles and to look at different dimensions of workforce so that we can plan across the year.

6. Review of On Call Arrangements

CM stated we understand what on call arrangements are currently in place and how much they are costing but we now need to calculate the costings for an alternative system; this information is currently being produced by the Finance Department.

The regional group is working up a model in order that the Black Country unit can come up with one mechanism for on call, however, she has been advised that Unison have rejected the concept of any regional agreements as they want to negotiate locally; she was unaware of the UNITE position.

DH & CM to discuss the Trust's position outside of this meeting

DH/CM

7. Update/Revision of HR Strategies

The three documents :

- HR Strategy
- Organisational Development Strategy
- Education & Training Strategy

Action

**Agenda Item:
6 months**

**ALL
Agenda Item:
15/03/11**

have been rewritten in support of the Monitor review process to include the integration of TCS. DH stated that these documents become our working documents and suggested that the group report back to this committee on a six monthly basis on the action plans

DH requested feedback on the strategies to DH, DW, CM and LN; these will be discussed at the next meeting

8. HR Policy Development

- **HR Framework (Management of Change) & includes Pay Protection**
- **Disciplinary Policy**
- **Grievance Policy**
- **Sickness Policy**

DH stated that for this review the PCT's Policies and RWHT's policies have been reviewed together to produce a common policy for all staff following the integration on 1st April 2011.

DH stated the HR Framework (Management of Change) is the latest version in draft form and will go to Staffside for their comment and review. Changes to the document include:

- Taken out the 30 day minimum consultation for schemes that do not include potential redundancies;
- Includes MARS (Mutually Agreed Resignation Scheme)
- Removed the section on skill mix for nursing;
- Change to the pay protection period.

We have removed member of 'staffside' on the panel that suspend the member of staff within the Disciplinary Policy and removed appeals that have to be heard at Exec level; the policies have been streamlined.

The Policies have been passed to the PCT Staffside and are due to get the next RWHT JNC meeting this week; further meetings will be arranged to discuss. Any comments or feedback on the policies should be forwarded as soon as possible.

ALL

9. Any Other Business

No other items to discuss.

10. Date and Time of Next Meeting

9:30am, 15th March 2011 – Conference Room, Hollybush House.

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