

TRUST BOARD

Date of Meeting 25th July 2011

Title of Report: **OD and Education and Training Strategies - Implementation Progress**

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Summary: The report details good progress against the implementation plans of these two strategies. Monitoring of the strategies is required 6 monthly.

Action Required by the receiving committee:

<input type="checkbox"/> Decision <input type="checkbox"/> Approval <input type="checkbox"/> Receive for Information <input checked="" type="checkbox"/> Receive for Assurance	Decision of Committee (to be entered after the meeting)
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Implications	
Clinical	Discussed through HR subcommittee and the Education and Training committee. Representatives of clinical expertise at both meetings. No concerns raised. Happy with progress made.
Patients, carers or the public	Stakeholder involvement includes agreeing the Learning and Development agreement with the SHA and the monitoring of the delivery of that agreement. The monitoring of educational activity with various Universities to ensure value for money and appropriateness of educational content – to ensure outputs of education meet patient care requirements
Resources	None identified
References	HR Subcommittee report- 24 th May 2011 TMT 24/06/11
Assurances linked to report subject	CQC Registration, NHSLA, Information Governance, Health & Safety, Staff survey, Deanery Visits, Medical Undergraduate monitoring visits
Assurance framework number	

Risks Identified:

None identified

Include Risk Grade (categorisation matrix/Datix number/Risk Register Number)

BACKGROUND DETAILS

This report provides the detail around the implementation plan progress of the following strategies: Education and Training Strategy and the OD & Leadership and Management Strategy - identifying any risks and actions required.

The monitoring of these strategies occurs 6 monthly through the HR subcommittee and the Education and Training committee.

In the review of this OD strategy in Jan 2011, the strategy was significantly changed to reflect the OD requirements of the new organisation post TCS. It was not necessary to harmonise the RWHT and PCT strategies as there was no OD strategy for community services in the PCT prior to TCS.

In the review of the Education and Training Strategy in Jan 2011, only minor changes were required to reflect the more diverse workforce post TCS. It was not necessary to harmonise the RWHT and PCT strategies as there was no Education and Training strategy in the PCT prior to TCS. Verbal agreement at the PCT Education Committee was around prioritisation of completion of mandatory training.

All year 1 metrics for both strategies were completed by March 2011.

All subsequent metrics are on target for completion.

<p>Work Activity</p>	<p><u>OD/Leadership and Management Strategy</u></p> <p>- All year 1 metrics were completed by March 2011</p> <ul style="list-style-type: none"> • Leadership and Management Framework-leadership qualities defined for SLM/FT leaders-achieved • Level of competence defined for different managers-competence levels defined for Directorate management team-further developmental work around levels within that team to be explored following completion of FT leadership programme • Existing leaders audit for gap analysis-Board gap analysis completed as part of FT work. Audit of Directorate management team has been included in FT leadership programme • Development programmes reviewed with leadership framework-audit in progress • LIA programme completed- Chatback development emerged from this • Audit of organisational culture-Chat back action plans developed-Plans submitted to HR team • National staff survey analysed around engagement-Action plans to be developed-HR team have worked with Divisions/Directorates to achieve this <p>The OD strategy was changed significantly as a result of TCS, therefore the strategic implementation plan has been revised- and year 1 targets of this are now enacted</p> <ul style="list-style-type: none"> • Staff aware and working in support of vision and values- Chatback survey during 2011 • Benefits realisation outcomes- workstream 1, 2 and 3- to be reviewed • Identified polices and processes redesigned and implemented- workstream 1, 2 and 3- in progress • Leadership qualities defined- completed as part of FT leadership programme • Competence levels for leadership defined – ongoing • Existing leaders gap analysis- completed as part of FT leadership programme • Leadership programmes reviewed – in progress • Talent management map- in development • Welcome events- in development • Staff involvement programme - to be included in OD plan • Cultural audit –to be included in OD plan • Staff survey responses analysed and action plans developed – where required • Service improvement suite of programmes- to be developed
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Education and Training Strategy

- All year 1 metrics were completed by March 2011

- Audit of training directory- Audit completed
- Course directory standardised-completed
- Satisfactory external audits for Education-Action plans to be monitored through education forum and actions completed-Post Grad Education Committee, Healthcare Scientists and Nursing and AHP committee –continuous monitoring
- Retain NMC accreditation-Currently no issues
- Junior docs feedback is positive-JDFs more widespread, minutes monitored through Clinical Tutors office, Post evaluation survey results (annual survey=trust overall score=green), any specific Directorate issues acted upon within Directorates
- B’ham University medical school monitoring visits satisfactory-Last visit was good- developmental visit due June 11
- LDA monitoring- No deviations from schedules
- Recognition events for educational success-Preceptorship programme event in Sept, NVQ and other events held locally and corporately- corporate event due post summer
- Live coaching database- Define ‘experiences’ for coaching- experiences defined
- Record coaching activity-Established coaching activity criteria
- Map leadership courses to career framework-completed & posted on KITE
- 360s for senior managers/leaders-360s underway for Consultants, those on EI courses and those who will undertake FT leadership programme
- Horizon scan talent management systems-completed
- Education and Training committee constitution redefined-completed
- Education spending plans meet resource allocation-Deadlines and spend meets allocation-completed and continually assessed as per LDA schedules
- Mandatory training review-Currently underway
- 65% of staff to undergo appraisal and have PDP-currently =72%

	<p>- All year 2 metrics are on target to be completed by March 2012</p> <ul style="list-style-type: none"> • All items as above- all on target to achieve • In addition: <ul style="list-style-type: none"> ○ Expanded coaching database- on target ○ Record coaching activity database on track for completion ○ Roll out process of managers 360- on target ○ Talent plan- to be developed ○ Annual E&T report- financial annual report to go to May committee ○ Appraisal target of 70%- currently 72% ○ Educational requirements for support roles- in progress
External QA visits/reports summary	Aspects of the implementation plan progress will be assessed through the staff survey, NHSLA inspections, the CQC, external Undergraduate Medical and Postgraduate Medical QA visits
External action plans - monitoring progress against plans	Covered in Postgraduate Medical and Undergraduate Medical reports- as required
Internal QA issues affecting activity	None
Finance - Allocation & spending plans (include variance from plans)	N/A
Overall risks and risk assessment rating	None identified
Future activity	Monitoring of operational activity through Education and Training Directorate performance dashboard. Strategic monitoring through HR subgroup and the Education and Training committee
Recommendations to HR sub Committee	To note the report

Actions /decisions required from HR sub Committee	None
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