

Minutes of the Workforce and Organisational Development Committee

Date **27th April 2018**
Venue **Conference Room, Hollybush House**
Time **2:00pm**

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| Present: | Name | Role |
| | Sarah Allan | Senior Resourcing Manager |
| | Rose Baker | Associate Chief Nurse |
| | Alan Duffell | Director of Workforce |
| | Roger Dunshea | Non-Executive |
| | Lewis Grant | Deputy COO, Division 1 |
| | Catherine Griffiths | Deputy director of HR |
| | Junior Hemans (Chair) | Non-Executive & Chair |
| | Sultan Mahmud | Director of Integration |
| | Louise Nickell | Head of Education & Training |
| | Sandra Roberts | Divisional Manager, Estates & Facilities |
| | Kate Shaw | Deputy COO, Division 3 |
| | Julie Shillingford | Head of HR Advisory |
| | Tim Powell | Deputy COO, Division 2 |

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| In Attendance: | Maria Dent | Administrator |
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| Apologies: | Ann-Marie Cannaby | Chief Nurse |
| | Daniela Locke | Strategic HR & Change Lead |
| | Jacqueline Small | Non-Executive |

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| Standing Items | | |
| 1. | Apologies for absence Apologies for absence were noted as shown above. | |
| 2. | Declarations of Interest None declared. | |

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| 3 | <p>Confirmation of the Minutes from the Last Meeting, 23rd February 2018 One minor amendment to page 9, otherwise the minutes of the last meeting were agreed as a true record.</p> | |
| 4. | <p>Matters Arising and Review of the Action Log The Action Log was reviewed and updated accordingly.</p> | |
| 4.1 | <p>Action 17/098 – Workforce Metrics : S Roberts confirmed that she had met with D Elsmore around the use of ESR for sickness reporting in the Estates & Facilities department. Discussions had begun on how to progress and develop set up. Action closed.</p> | |
| 4.2 | <p>Action 18/002 – Certificate of Sponsorships : Action completed and risk added to Workforce Risk SR1. A Duffell informed that the Trust had received 5 Certificates for April, although 16 had been submitted and each application had to be resubmitted each month. This continues to be a national issue of concern for all Trusts and NHS Employers will be collating figures from across the country to raise formally at a higher level.</p> | |
| 4.3 | <p>Action 18/006 – The Education & Training Strategy : L Nickell advised that the minor amendments to the strategy had been made and the Strategy was due to the Policy Committee in May. Action closed.</p> | |
| 4.4 | <p>Action 18/012 – Equality, Diversity and Inclusion Approach including Workforce Race Equality Standards – C Griffiths advised that there were two significant risks associated and these had been added to the HR Directorate Risk Register. The risks were around Workforce Race Equality Standards, indicators 2 and 3 and Equality objectives. Action closed.</p> | |
| 4.5 | <p>Action 18/015 – Organisational Structure and Accountability – A Duffell advised that this item had been raised with Keith Wilshire and added to the Board Development agenda items. Action closed.</p> | |
| 5. | <p>Workforce Environmental Scan</p> | |
| 5.1 | <p>NHS Workforce Strategy – A Duffell advised that HR Directors and various NHS bodies had requested sight of the latest iteration of the draft strategy but this had not yet been received, It is considered that the final copy would be released in June. Further update to follow when available.</p> | |
| 5.2 | <p>National Pay Award A Duffell advised that implementation of the new pay award into the next financial year and beyond is likely to create a number of complications for all Trusts, specifically around the mechanism in executing.</p> <p>He advised that ESR is the only electronic system used by RWT, and a number of other NHS Trusts, and it is not yet clear as to whether IBM will be adjusting the system accordingly to accommodate the full required changes. It is expected that the updated system will be received by Trusts following the outcome on the pay proposal from the unions, which is expected in June. Once fully approved, it will be essential to ensure that the hierarchies are correct within ESR and to ensure manager and employee self-service is available. The</p> | |

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| | <p>timescale will be very tight, unless any agreed slippage but he felt that both the systems and the mechanisms needed to be in place before the end of the current financial year. The change in process is a huge culture shift as it will be the responsibility of each individual manager to award incremental pay and the default position is that this will commence from 1st April 2019.</p> <p>R Dunshea question how this was being managed by the Trust, A Duffell advised that the Trust has an ESR Steering Group, chaired by C Griffiths and H Troalen in Finance and he would be attending the next meeting in order to reassess and prioritise the requirements of the new pay deal. Following the meeting there will be an assessment of risks identified in taking forward and, for assurance, C Griffiths agreed to forward on a copy of the risk and issues log once it had been updated.</p> <p>S Mahmud queried the process for application across the NHS; A Duffell confirmed that the standards in applying are based around four/five key tests, with either a simple yes or no response, these are:</p> <ol style="list-style-type: none"> 1. Has the staff member had an appraisal. 2. Does that member of staff have any disciplinary sanction against them ? 3. Does the member of staff have any formal performance or capability issues ? 4. Has the member of staff met their statutory mandatory training requirements? 5. The fifth applies to managers - has the manager completed the requirement in carrying out appraisals for their staff, eg if only 8 out of 10 staff have had had an appraisal, the manager would not receive their own pay increment. <p>A Duffell reiterated that it was, therefore, essential that the hierarchy system was recorded correctly on ESR and that the mandatory training requirements for staff were clear.</p> <p>L Nickell advised that she and C Griffiths would be meeting to discuss the current appraisal policy to ensure that the requirements of the new pay deal were included within the policy for non-medical staff. She advised that the medical staff appraisal policy would be kept separate as there were additional requirements upon this group of staff.</p> <p>A Duffell informed that a further change with the new pay deal is around the increment date for staff in that, currently, staff retain their original increment date, however, should a member of staff move posts, their increment date moves to the date of the new banding. T Powell queried on how this would be monitored to ensure consistency, A Duffell proposed that there would be a 12 month look back review carried out but managers should follow the four key criteria questions and staff will either have complied or not.</p> <p>A Duffell advised that further updates on this initiative will be provided.</p> | <p>18/016 C Griffiths</p> |
| | <p>Chairman's note: J Hemans requested that for future meetings, all reports should be submitted by the Friday before the meeting date (ie one week) to allow sufficient time to circulation and read.</p> | |

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| 6. | 2017 National NHS Staff Survey (Action 17/090 and 18/004) | |
| 6.1 | <p>A Duffell advised that the report circulated had been brought to the Committee for assurance.</p> <p>In response to a question raised by R Dunshea on the actions being taken around any areas of concern, C Griffiths advised that each Division is currently reviewing the data produced and an action plan for corporate Trust wide themes and divisional themes would be brought back to the next meeting.</p> | 18/017 C Griffiths/ Deputy COOs |
| Future Workforce/Resourcing | | |
| 7. | Organisational Resourcing and Vacancy Position S Allan provided an update on the key points within the Resourcing Report: | |
| 7.1 | <p>Centralised Recruitment Model (Action 17/094)</p> <p>S Allan reported that initial meetings had been held with staff regarding the revised structure and the way forward on implementing centralised recruitment. An outline project plan has been drafted which identifies the key activities to be undertaken and this includes the introduction of an electronic system called TRAC. This is an applicant tracking management system which will provide better visibility and data around the whole recruitment process and timelines involved and will be incorporated at the same time as centralised recruitment is implemented. The change in practice will be communicated across the Trust.</p> <p>A Duffell stated that it is understood that there are a number of delays across the recruitment process but the TRAC system will be able to identify any specific areas. T Powell queried the issue around delays in the Vacancy Control Process (VCP); S Allan clarified that this had been highlighted at the recent stakeholder events on recruitment, however, once implemented, the TRAC system will capture data and timelines from the initial date of vacancy up to the start date. S Allan agreed to share the outcome and timelines from these events with the Deputy COOs.</p> | 18/018 S Allan |
| 7.2 | <p>Recruitment Activity</p> <p>S Allan reported that the number of nursing vacancies in March, compared to February, had reduced by approximately 20 WTE and there had been a number of successful appointments in AMU, Emergency, Paeds and Orthopaedics.</p> <p>The Trust had attended the RCN recruitment event in March, and there had been a lot of interest on the day with over 100 expressions of interest. A number of interviews had been held on the day, or followed up after the event, and 14 conditional offers had been made.</p> | |
| 7.3 | <p>Stroke Unit</p> <p>S Allan reported that the joint work between the Stroke team and the recruitment team in running a radio and social media recruitment campaign had resulted in 15 appointments of band 5 nurses for the Stroke Unit.</p> | |
| 7.4 | <p>International Recruitment</p> <p>S Allan advised that the executive directors had agreed to support a proposal for a further international recruitment campaign for nurses and a business case is</p> | |

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| | <p>currently being developed.</p> <p>T Powell commented on a recent news item around European nurse leaving the NHS because of BREXIT and queried the impact on the Trust. S Allan commented that this has not yet had any impact on RWT as the Trust has a low number of European nurses.</p> <p>C Griffiths advised that the Trust responds on a six monthly basis to Cavendish Coalition that is tracking the national picture of the impact of Brexit on the workforce and agreed to forward on the latest update to the group for information.</p> | <p>18/019 C Griffiths</p> |
| 7.5 | <p>R Dunshea commented that, in regards to the resourcing report, it would be helpful to include additional financial data on costings. He also requested a breakdown of all vacancies across all areas of the Trust to provide a comprehensive picture. S Allan stated that the data reported can be provided by Divisions but the report focusses primarily on nurses and medics due to the current practice of centralised and decentralised recruitment. She advised that once centralised recruitment for the whole Trust is in place and the TRAC system is implemented, the Trust will be in a position to report across all staffing groups.</p> | <p>18/020 S Allan</p> |
| 7.6 | <p>R Dunshea suggested that the Committee received a presentation to review the vacancy control process, providing an update around assurance processes, checks, balances, right roles, right grade, skill mix etc. It was agreed this item would be noted for a future agenda.</p> | <p>18/021 S Allan</p> |
| 8. | <p>In-Depth Analysis on Leavers (Acton 17/083)</p> <p>S Allan reported that she had carried out a 12 month review on the number of staff leavers, the reasons for leaving and had focussed on the 3 areas where the normalised turnover rate was above the Trust average. As at the end of March 2018, there had been 660 WTE leaving the Trust and the top 3 reasons for leaving were retirement, followed by relocation and work life/balance and better reward packages.</p> <p>In terms of next steps and actions, the team would be -</p> <ul style="list-style-type: none"> • analysing exit questionnaires and understanding where people move to • review and revise/update the recruitment documentation • introduce pilot stay discussions • roll out internal transfer framework • look at the employment model and work/life balance • look at the number of retirees - what can the Trust offer this group of staff in order to continue to utilise the skills they have <p>A Duffell queried whether it would be useful to plot the number of retire and returns to the Trust, even if on 12 / 24 month basis; S Allan, agreed to follow up to check ESR capability.</p> <p>C Griffiths advised that a letter had recently been sent out to all leavers which included an exit questionnaire and also offered the opportunity to discuss the possibility of returning to the Trust, but very few returns had been received. She advised that the plan was to send this out on a quarterly basis. She advised that the launch of the electronic exit questionnaire was imminent and would provide further update when available.</p> | <p>18/022 S Allan</p> <p>18/023 C Griffiths</p> |

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| | R Dunshea requested that end dates should be included when reporting action plans to provide clear indication of and end date and completion. | 18/024 All |
| | K Shaw and S Mahmud left the meeting at this point. | |
| 9. | Review Trends, Issues and progress in Relation to Employment Relations | |
| 9.1 | <p>J Shillingford highlighted the key issues within the report submitted.</p> <ul style="list-style-type: none"> • As reported previously, with the abolition of the fee regime for employment tribunals, the number of Tribunal cases continues to rise. • The number of suspensions had reduced and it is hoped that the introduction of the 'fair blame' policy has had some impact in supporting managers and staff. • Sickness absence had fluctuated during the winter, following normal trends. • The Dispute Resolution Policy had been launched at the beginning of April, which combines the Grievance policy and the Bullying & Harassment policy. This policy takes a new approach and training dates have been provided for managers, J Shillingford requested the operational leads to encourage senior staff to attend. <p>J Hemans queried whether it was feasible, with the rise in Employment Tribunals, to assess the costs in defending the Trust's position, J Shillingford to follow up.</p> | <p>18/025 All</p> <p>18/026 J Shillingford</p> |
| | S Allan left the meeting at this point. | |
| Education and Training | | |
| 10. | Review Progress on Plans/Actions to Improve Mandatory Training Compliance & Performance | |
| 10.1 | <p>L Nickell provided highlights from the report submitted. To note:</p> <ul style="list-style-type: none"> • No new items of risk based on the previous report. • The Training Needs Analysis had been approved and was now in place from the beginning of April. The new profile of training requirements would be reflected in the end of April report. • The SMEs, the Subject Matter Experts, for the mandatory topics were aware of areas of hotspots and plans were in place to support areas around improved compliance. • ESR rollout - it is hoped that this will assist in improving compliance because once the hierarchies have been formed and email addresses are input into the system correctly, all staff and managers will receive reminders for every topic. | |

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| | <ul style="list-style-type: none"> Local Induction – compliance in this area has always been an issue experience by all Trust, but ESR again should help in sending out reminders. An on-line form is also under development. | |
| 11. | RWT Strategic Plan for Apprentices (Action 18/008) | |
| 11.1 | <p>L Nickell advised that this is the Trust's proposed strategic approach to apprenticeships, the draft had been brought to the previous meeting and had also been consulted on widely. The strategy sets out the vision, strategic objectives around developing staff and recruiting young people, and details the model and approach used, the expected outcomes and the governance arrangements within the three year implementation plan.</p> <p>The Strategic Plan for Apprentices was approved.</p> | |
| 11.2 | T Powell proposed that any vacancy within the Division should be reviewed and assessed by the Apprenticeship team as a possible apprentice post before being reviewed by the Divisional VCP team; L Nickell welcomed the proposal and would ask C Young and team to follow up. | 18/027 L Nickell |
| | L Grant and T Powell left the meeting at this point. | |
| Workforce Planning, Intelligence and Productivity | | |
| 12. | Review of Workforce Performance Data | |
| 12.1 | C Griffiths presented the standard report to the Committee, a further metric had been added to the report on retention and stability rate. | |
| 13. | 2018/19 Workforce Plan – Baseline Report (Action 17/092) | |
| 13.1 | C Griffiths advised that this is the initial draft report submitted to the Committee for information and this predates a fuller plan scheduled for June 2018. | |
| Occupational Health & Wellbeing | | |
| 14. | Update on the Delivery of the Work Around the Health and Wellbeing Agenda (Action 17/101) | |
| 14.1 | <p>C Griffiths provided an update on the report submitted on the delivery of the work around the Health and Wellbeing Agenda which supports the wellbeing of RWT staff led by the Health and Wellbeing Steering Group. Phase one, in delivering the requirements of the Workplace Wellbeing Standards at the New Cross site had been completed; phase two had commenced and this will ensure that the requirements of the standards are delivered across all RWT sites. The group will also focus on bringing together four strands of work ongoing across the whole of the organisation, looking at physical health and wellbeing, mental health, spiritual health and financial health.</p> <p>C Griffiths reported that, in addition, L Nickell is leading some work around the Eight High Impact Actions for Junior Doctors that the NHSI had circulated with the Faculty of Medical leadership and Management. However, the work around these improvements would also apply to all staff.</p> | |

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| | <p>L Nickell advised that the eight high impact actions were a number of initiatives that had been proven to support junior doctors in training, in terms of supporting them to be more resilient and healthy at work. The actions focus on a number of the same areas that had already been discussed by the Health and Wellbeing Steering Group, therefore, the Group had been able to use some its targeted work to promote and progress some of those actions. For example:</p> <ul style="list-style-type: none"> • the group had secured a free trial of sleep pods and recliner chairs to ensure appropriate rest areas were available to staff after long shift work. • disposable cups have been made available in all kitchens in clinical areas to discourage water bottles being taken from ward to wards, as there is an IP risk associated with this, and this would ensure staff keep hydrated • there have been a number of sessions held around mental health wellbeing provided to the junior doctors and there is also an e-learning training package available on this. The Trust is also adopting the mental first aid training, train the trainer approach. <p>J Hemans noted that a number of positive initiatives were in progress in moving forward this agenda.</p> | |
| Underpinning Work & Assurance | | |
| 15. | <p>BAF/CRR Risks</p> <p>A Duffell presented the updated the report for information, two additional actions had been added in relation to the difficulties around the Certificate of Sponsorships. A Duffell advised that a full overview would be carried out since moving into the new financial year.</p> | 18/028 A Duffell |
| 16. | Analysis Report on Sickness Absence Position | |
| 16.1 | <p>C Griffiths presented an update on the report which provided the current position across the Trust. She advised that the Trust had never met the current target of 3.24%, which had been set following the release of the Boorman report of 2009. The proposal is to introduce a stretch improvement of 0.5% which would bring the Trust into the first quartile of the model hospital, if achieved. If the committee agreed, this would be applied to the performance target across all of the service areas which would mean that each would have a differential performance target. C Griffiths advised that she would follow up with each Divisional Manager to ensure they were in agreement with this proposal and if approved, this would be embedded by June but would apply from April.</p> <p>R Baker commented that, particularly within nursing, the message of the change would need to be managed, particularly around headroom, as there was no increase in this.</p> <p>J Hemans requested further update following discussions with the Divisional leads.</p> | 18/029 C Griffiths |
| | R Baker left the meeting at the point. | |

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| 17. | Annual Schwartz Round Report | |
| 17.1 | <p>L Nickell presented the annual report on the progress of the Schwartz Rounds since inception. She reported that there had been 17 rounds presented with an average attendance of 37 individuals and feedback and evaluation had been good with 81% of attendees recommending Schwartz rounds. L Nickell advised that the funding for membership to the Point of Care Foundation had been approved the next two years.</p> <p>L Nickell reported that the Steering Group was having some issues in sourcing and engaging panels to present and she, C Griffiths and J Shillingford were reviewing to consider how this can be addressed. L Nickell agreed to provide further update at the next meeting.</p> | 18/030 L Nickell |
| 18. | Workplan for 2018-2019 | |
| 18.1 | A Duffell presented the updated work plan for the current financial year 2018-19; the plan was agreed. | |
| Papers for Information | | |
| 19. | Mandatory Training Performance | |
| 20. | Expenditure on Training (Action 18/007) | |
| 20.1 | <p>L Nickell provided a brief update on the report submitted around the breakdown on costs per head in terms of training expenditure. She advised that the costing was difficult to calculate because there is both external and internal funding for training and, because some of the external funding is ring-fenced for particular staff groups, it was difficult to reach an average by putting the two factors together.</p> <p>A Duffell queried the costings for development training for staff; L Nickell agreed to review and provide further update.</p> <p>R Dunshea suggested a future agenda discussion item around learning and development funding mechanisms, it was agreed to note and L Nickell to provide a presentation on this.</p> <p>L Nickell advised that an electronic study leave form had been devised and discussions were ongoing on how this would update the training records in ESR. A Duffell suggested that, as the current KITE system is reaching its end of life, this action is linked into the update around the ESR Steering Group action around the new pay deal.</p> | 18/031 L Nickell 18/032 L Nickell Link into Action 18/016 |
| 21. | Policy Adoption – No policies submitted this month. | |
| 22. | Minutes of the Attraction & Retention Group | |
| 23. | Minutes of the Academy Steering Group | |

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| 24. | Minutes of the Workforce Wellbeing Steering Group | |
| 25. | Action Notes of the ESR Steering Group | |
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| 26. | Any Other Business | |
| 26.1 | <p>Communications Function</p> <p>A Duffell commented that the Terms of Reference refer to staff engagement and communications and therefore, as the Communications Function does not currently report directly to any committee, he proposed that the Head of Communications is invited to join the Committee to feedback on those aspects.</p> <p>The proposal was agreed.</p> | 18/033 A Duffell |
| 26.1 | <p>Attendance at the Meeting</p> <p>A Duffell proposed that a reminder is sent out to all Committee members that the WODC is scheduled for two hours, as the number of members in attendance had depleted during the meeting; J Hemans proposed an assessment of members meeting commitments.</p> | 18/034 M Dent |
| 26.2 | <p>Leadership Development Strategy</p> <p>R Dunshea proposed a future agenda item on leadership and development of first and second line managers, particularly around consistency of responsibilities.</p> <p>A Duffell advised that he and L Nickell had had discussions around the different leadership mechanisms across the Trust and had agreed to draft an overarching leadership development strategy and the first draft would be brought to a future meeting.</p> | 18/035 A Duffell/ L Nickell |
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| 27. | <p>Date and time of Next Meeting</p> <p>10:30am-12:30pm, 22nd June 2018</p> <p>Conference Room, Hollybush House</p> | |