

**Minutes of the Workforce Committee
Thursday 3 August 2023 at 1pm via Teams**

Present: Miss Helen Grantham, Non-executive Director (Chair of the Committee)
Mrs Joanna Forster Adams, Chief Operating Officer
Mrs Kaneez Khan, Non-executive Director
Ms Nichola Sanderson, Director of Nursing and Professions
Mr Darren Skinner, Director of People and Organisational Development

In attendance: Ms Morium Akter, Human Resources Advisor (observing)
Dr Lyndsey Charles, Clinical Director for Learning Disability and Older Peoples Services (agenda item 10)
Ms Rose Cooper, Deputy Head of Corporate Governance (meeting support)
Ms Alex Cowman, Head of Wellbeing (agenda item 9)
Dr Frances Dodd, Associate Director for People Experience
Ms Amy Harker, People Engagement Practitioner (agenda item 11)
Mr Andrew McNichol, Head of People Analytics and Temporary Staffing
Ms Tracey Needham, Head of People Engagement (agenda item 11)
Ms Gabriella Obeng Nyarko, Appointed Governor (observing)
Ms Holly Tetley, Associate Director of Employment

Action

Welcome and Introduction

Miss Grantham opened the meeting at 1pm and welcomed everyone.

23/060 Apologies for absence (agenda item 1)

Apologies from members of the Committee had been received from Dr Chris Hosker, Medical Director. Apologies from attendees had been received from Mrs Fiona Sherburn, Associate Director for People Resourcing and Organisational Development.

The Committee was quorate.

23/061 Declaration of any conflicts of interest in respect of agenda items (agenda item 2)

No one present declared any conflicts of interest in respect of agenda items.

23/062 Minutes of the meeting held on the 8 June 2023 (agenda item 3)

The Committee **agreed** that the minutes of the Workforce Committee meeting held on the 8 June 2023 were a true record.

23/063 Approval for the minutes of the meeting held on the 8 June 2023 to be uploaded to the Trust's external website (agenda item 3.1)

The Committee **agreed** that the minutes of the Workforce Committee meeting on 8 June 2023 were suitable to be uploaded to the Trust's external website.

23/064 Matters Arising (agenda item 4)

Miss Grantham noted a request from Mrs Khan for staff sickness absence to be analysed by protected characteristics and asked that this was discussed further as part of agenda item 8.1.

It was agreed that Mr Skinner would follow up on the actions from the Board Strategic Discussion on workforce which took place in April 2023 in preparation for the workforce session with governors at the Board to Board in September.

Miss Grantham also thanked staff involved in the Big Thank You Campaign and noted the success of the Big Thank You Carnival.

The Committee **noted** the matters arising.

23/065 Cumulative Action Log (agenda item 5)

The Committee confirmed that actions 190, 194, 196, 197, and 198 were complete and could be removed from the log and noted that action 181 related to an item on the agenda and could be marked as complete. The Committee then discussed the open actions and received the following updates:

Action 166: the Committee asked to receive the update from Mr Skinner as part of agenda item 7.

Action 193: the Committee agreed to revisit this under agenda item 9 and asked for a summary of the discussion to be included in the Chair's Report to Board.

Action 195: Mr Skinner advised the Committee that this action required further consideration by the executive directors, and it was agreed that an update would be provided at the October meeting.

Action 192: the Committee agreed that this action could be closed on the basis that the Reducing Vacancies Group would continue to monitor nursing vacancies going forward and learn from best practice in terms of recruitment.

Action 200: the Committee noted the update provided and agreed that this action could be closed.

Action 194: Dr Dodd provided some additional assurance on behalf of the Critical Incident Lead in terms of the support offered via the Critical Incident Staff Support Pathway and the timing of debrief sessions. The Committee confirmed that this action could be removed from the log.

DS

The Committee **received** the action log and **noted** the updates provided.

23/066 Board Assurance Framework (agenda item 6)

Mr Skinner noted that the Board Assurance Framework included in this meeting's paperwork was not the most up to date version of the document and agreed to circulate the correct version to Committee members outside of the meeting.

DS

The Committee **received** the Board Assurance Framework.

Ms Obeng Nyarko left the meeting.

23/067 People and Organisational Development (POD) Governance Group Chair's Report (agenda item 7)

The Committee noted that an internal audit into the use of the e-Rostering system had been returned with limited assurance. Mr Skinner outlined some of the issues which had affected the audit opinion such as the underutilisation of hours in some areas and referred to the ongoing work to incorporate medical staff rostering which was previously managed separately. The Committee recognised that fully utilising the system was key to managing staff capacity and resource effectively and emphasised the importance of having a consistent approach to rostering across the Trust. The Committee agreed that a report would come to a future meeting which provided assurance on the actions being taken to address the weaknesses identified by the audit alongside a copy of the limited assurance report. The Committee also noted that the limited assurance report would need to be listed as a potential gap in the BAF as per action 199 on the cumulative log.

AMc

Mr Skinner then referred to the proposed Oliver McGowan Training on Learning Disability and Autism which was due to become mandatory for all CQC registered organisations. The Committee noted that considerable resource would be required to deliver the proposals and the team were currently assessing what work needed to be undertaken as well as looking at opportunities for collaboration across the West Yorkshire Mental Health, Learning Disabilities and Autism Collaborative.

Next, the Committee discussed the development of a Hate Crime Pathway and supported the proposed zero-tolerance approach to hate crimes. The Committee also received an update on the ongoing work to progress the violence prevention and reduction standard.

The Committee then considered if it was receiving sufficient assurance on performance information relating to staff vacancies. Mrs Forster Adams assured the Committee that the operational impact of vacancies was reviewed in detail at the Quality, Delivery and Performance (QDAP) meetings, and it was agreed that Mrs Forster Adams and Mr Skinner would look at how the outputs from the QDAP meetings could be reported to this Committee for further assurance. Miss Grantham suggested this information could be integrated into the new workforce performance dashboard when it was finalised. The Committee also noted that it was next due to receive its annual workforce planning update from Ms Good in

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December and asked Mr Skinner to consider if this report needed to be presented to the Committee on a more frequent basis.

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Finally, the Committee was concerned to note the rise in the number of Employee Relations cases across the Trust and requested that a report which provided analysis of this increase was scheduled for the October Part B meeting.

HT

The Committee was **assured** by the updates provided.

23/068 Update on national, regional, and local networking (agenda item 7.1)

See above.

Ms Sanderson joined the meeting.

23/069 Workforce Performance Report (agenda item 8)

Mr McNichol provided an update on performance against the Trust's high-level metrics and mandated standards. This included reports that:

- Staff sickness was on a downward trajectory based on a 12-month rolling average, with stress and anxiety consistently the largest category at 33%.
- Compulsory training compliance was at a record high of 86%, which indicated that the new Learn system was making a positive impact.
- Both Personal Development Review (PDR) and clinical supervision compliance were at 70%. The Committee was pleased to note the month-on-month incremental progress towards target levels and thanked the team for working hard to improve compliance in these areas.

Miss Grantham advised the Committee that the findings of a recent benchmarking exercise, led by Dr Hosker, to review the starting salaries for consultants had been presented to a recent Board of Directors' meeting. This exercise had been undertaken to ensure that the Trust's offer was competitive in order to attract newly qualified consultants to work for the organisation.

The Committee **received** the report and **noted** the latest performance data.

Ms Cowman joined the meeting.

23/070 Non-clinical workforce data request (agenda item 8.1)

Miss Grantham introduced the item and explained that it had been scheduled for discussion at this meeting in response to requests from governors for non-clinical workforce data to be provided at their Council meetings for information and assurance. Mr McNichol informed the Committee that the reporting process for non-clinical workforce data was not yet automated as it was for clinical staff data.

He added that the Informatics Team were aware of the request, which would need to be factored into their work schedule. It was agreed that Mr Skinner would provide a timeframe at the next Council of Governors' meeting for when reporting on non-clinical workforce data was likely to become automated and integrated into the main workforce performance report. Miss Grantham also requested that Mr Skinner keep Dr Sara Munro updated on this issue.

DS

The Committee then discussed Mrs Khan's request for staff absence to be broken down by protected characteristics. Mr McNichol explained that the People and Organisational Development directorate had access to shared dashboards which provided detailed information on sickness absence. He added that a piece of work had recently been undertaken to allow the data to be analysed by specific protected characteristics and he advised the Committee that staff with protected characteristics did not appear to have experienced disproportionate levels of sickness relating to stress and anxiety in the last 12 months. Ms Tetley added that sickness absence data was reviewed in detail by the Absence Improvement Group which included representatives from operational management. The Committee was assured by the update provided.

Mrs Khan then asked about the support arrangements in place for Bank and agency staff and Mr Skinner provided some assurance on the support available to these groups of staff and outlined some of the reasons why they often chose to remain on the Bank or with an agency.

The Committee **discussed** how to proceed with reporting on non-clinical workforce data.

23/071 Wellbeing Guardian Report (agenda item 9)

Ms Cowman presented the Wellbeing Guardian Report to the Committee and provided some additional information not covered in the report including the introduction of menopause training sessions for staff; being nominated for the Chartered Institute of Personnel Development (CIPD) wellbeing initiative award; and an update on the recruitment process for Ms Cowman's replacement.

The Committee then discussed Principle Five of the nine Board principles which stated that the death by suicide of any member of staff or learner working with the Trust must be independently examined and the findings reported through the Board to the Wellbeing Guardian. Ms Sanderson asked if this process was adhered to across the West Yorkshire Integrated Care System and Ms Cowman explained that it was mandated at a national level by NHS England rather than at a local system level and agreed to inquire if other organisations in the region were following the same framework. Miss Grantham asked that an update on this was provided at the next meeting.

FD

Next, the Committee discussed sickness absence due to stress and anxiety and the mechanisms in place for analysing hotspot areas. Ms Tetley informed the Committee that sickness absence was looked at in detail by the Absence Improvement Group and the Committee was assured that the POD governance arrangements had sufficient oversight of this area. The Committee also noted the key role of the Wellbeing Team and wider People Experience Team in gathering

intelligence directly from staff about their wellbeing and offering support and escalating issues where required.

The Committee then considered the Trust's approach to the management of staff absence and Ms Tetley provided some assurance on the new Employee Wellbeing and Managing Attendance Procedure which was designed to be adapted to an individual's health needs. She explained that managers had access to training, linked to the wider management development programme, to support them to implement the new approach and processes but she felt that more could be done to make this training accessible to staff. Ms Cowman suggested linking this in with existing wellbeing in-reach at a team level. Miss Grantham was pleased to note the development of the new Employee Wellbeing and Managing Attendance Procedure and suggested that an evaluation of the procedure was presented to a future Workforce Committee meeting.

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Finally, Mr McNichol informed the Committee that the Trust was not an outlier in terms of sickness absence when benchmarked against other organisations using Model Hospital data. He referred to the ongoing issues with comparing the Trust's Electronic Staff Record (ESR) data with other organisations in the region as discussed at the previous Workforce Committee meeting and Miss Grantham reiterated the importance of having a consistent approach to reporting on metrics across 'Place' to support accurate benchmarking.

The Committee **received** the report for information and assurance. The Committee **noted** that it was Ms Cowman's last Workforce Committee meeting and thanked her for the significant contribution she had made in terms of forwarding the Trust's wellbeing agenda.

Ms Cowman left the meeting. Dr Charles, Ms Harker, and Ms Needham joined the meeting.

23/072 Developing Formal Clinical Leadership: Summary update (agenda item 10)

Dr Charles introduced the report, outlined the sequence of work undertaken, and explained how the research and feedback had been used to drive leadership development initiatives and formalise the role of clinical leaders in connection with the wider workforce development taking place in the Trust.

Dr Charles also provided some background as to why the project had first been initiated and explained they had identified a need to formalise the clinical leadership role by calculating the required resource for each service line and creating consistent job descriptions. She explained that in order to do this they had undertaken a review of the evidence base to better understand what effective, high quality clinical leadership is.

The Committee then discussed the possibility of expanding this work into a dyad with the nursing leadership, and beyond that a triumvirate with the senior operational leadership. Dr Charles updated the Committee on the outputs of a recent clinical leadership development event where they had shared feedback on the evaluation of the project and identified baseline outcome measures, with a view to considering how the learning could be shared as part of the dyad relationship in order to develop a consistent understanding of clinical leadership.

The Committee asked how the clinical leadership work linked to existing initiatives such as the Trust's Collective Leadership offer, and Dr Charles confirmed that she was working with Mrs Sherburn to ensure that the clinical leadership work was consistent with the wider management development work taking place in the POD directorate.

The Committee recognised the importance of the clinical leadership work in terms of improving staff culture through relational coordination, addressing personal and professional boundaries, championing 'soft' leadership skills as supported by the findings of the Corporate Leadership Council, and identifying the qualities and attributes of a good leader to enable the Trust to achieve its values and goals.

The Committee was significantly **assured** on the rigour with which processes were followed to improve formal clinical leadership within the organisation and with the evidence base used; **agreed** that this was an accomplished piece of work; and **thanked** Dr Charles for updating the Committee on progress.

Dr Charles left the meeting.

23/073 2022 LYPFT Staff Survey Intention Planning Report (agenda item 11)

The Committee received the report and noted that feedback from services on the intention planning process had been positive with actions largely focused on team working, shared objectives, and raising concerns. The Committee noted there had been a slight reduction in the number of intention plans received for 2022 which could lead to a decline in 2023 Staff Survey response rates.

Ms Harker and Ms Needham outlined some of the ways they hoped to increase Staff Survey response rates for 2023 and improve the uptake of intention plans next year. The Committee was encouraged by the suggestions but noted that ongoing staffing pressures and clinical demands could affect staff capacity to engage in the process. Mrs Forster Adams also queried if it was necessary for services to have separate intention plans over and above existing action plans, and Ms Harker confirmed that key actions from existing plans could be extracted to create an intention plan.

Ms Harker and Ms Needham then discussed some of the barriers to presenting the survey results directly to frontline staff and the Committee recognised there was a need to review the process for delivering the results to staff and establish a clear route for escalating any blockages in the system. It was agreed that Mrs Forster Adams and Ms Needham would consider how the process for sharing results with Care Services staff could be improved.

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The Committee **noted** the findings and **received** assurance on the intention planning process.

Ms Harker and Ms Needham left the meeting.

23/074 Action plan to tackle bullying and harassment towards Bank colleagues
(agenda item 12)

Mr McNichol summarised the approach taken in response to the 2021 Bank Survey which showed that the experience of the Trust's Bank colleagues was consistently worse than that of their substantive colleagues, particularly in terms of experiencing bullying, harassment and abuse at work. The Committee reviewed the detailed action plan and was assured that the 2022 Bank Staff Survey results had shown improvement across all nine People Promise themes.

The Committee then discussed ways of raising awareness of the Bank Survey findings with substantive staff which they felt was key to making further progress. Ms Sanderson suggested that Mr McNichol discussed the results with staff at the Unified Clinical Governance Group and Safer Staffing Group meetings.

Finally, the Committee was pleased to note that the National Bank Staff Survey would become mandatory for all trusts with a bank of over 200 people from next year and commended the Trust's efforts in raising the profile of the Bank Staff Survey at a national level.

The Committee **discussed** the findings of the report, **supported** the ongoing action plan, and **noted** the progress to date.

23/075 Workforce Race and Disability Standard Progress Update (agenda item 13)

The Committee received the report which provided an update on the Trust's Workforce Race Equality Standard (WRES), Workforce Disability Equality Standard (WDES) data for the reporting period 2022-23 and subsequent priority action areas and a summary of the gender pay gap figures for 2022-23.

The Committee noted the encouraging improvements in this year's data, with favourable changes in 79% of areas. The Committee noted that the uptake of the Reciprocal Mentoring Programme was lower this year which it felt was disappointing given the value of the programme and suggested some ways of raising awareness of the benefits of being involved.

Miss Grantham then discussed some ways to develop the report further. She suggested that the title of the report was changed to the Trust's Annual Equality, Diversity and Inclusion Report and included WRES and WDES benchmarking data with partners at a West Yorkshire 'Place' level. She also asked that the pay information was broken down by all protected characteristics, not just gender. Dr Dodd noted these suggestions and agreed to discuss them with Ms Bamford. She added that they already had plans to introduce Rainbow Alliance data into the report.

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The Committee **noted** the 2023 WRES and WDES results and progress against priorities; **received** assurance that the data had been submitted in May 2023 in line with revised submission requirements and that actions would be published on the Trust's website by the end of September 2023 to meet statutory reporting requirements; and **noted** the gender pay gap figures for 2022-23.

23/076 Review of the Workforce Committee Terms of Reference (agenda item 14)

The Committee **reviewed** and **approved** its updated Terms of Reference.

23/077 Key messages and/or any matters to be escalated to the Board of Directors or other Board subcommittees (agenda item 15)

The Committee **agreed** the items to be included in the Chair's Report to the next public Board of Directors' Meeting on the 28 September 2023.

23/078 Any other business (agenda item 16)

The Committee did not discuss any other business.