

**Minutes of the Workforce Committee
Tuesday 5 December 2023 at 1pm via Teams**

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

In attendance: Ms Rose Cooper, Deputy Head of Corporate Governance (meeting support)
Dr Frances Dodd, Associate Director for People Experience
Mrs Angela Earnshaw, Associate Director for People Resourcing and Organisational Development
Mrs Clare Edwards, Associate Director for Corporate Governance
Mr Andrew McNichol, Head of People Analytics and Temporary Staffing
Mr Peter Ongley, Carer Governor (observing)
Ms Holly Tetley, Associate Director of Employment
Ms Victoria Small, Head of Wellbeing

Action

Welcome and Introduction

Mrs Khan opened the meeting at 1pm and welcomed everyone.

23/099 Apologies for absence (agenda item 1)

Apologies from members of the Committee had been received from Ms Zoe Burns-Shore, Non-executive Director. Mrs Khan was chairing the meeting on her behalf.

The Committee was quorate.

23/100 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.

23/101 Minutes of the meeting held on the 5 October 2023 (agenda item 3)

The Committee **agreed** that the minutes of the Workforce Committee meeting held on the 5 October 2023 were a true record.

23/102 Approval for the minutes of the meeting held on the 5 October 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 5 October 2023 were suitable to be uploaded to the Trust's external website.

23/103 Matters Arising (agenda item 4)

There were no matters arising.

23/104 Cumulative Action Log (agenda item 5)

The Committee confirmed that actions 203, 211, 214, 213, 216, 218, and 221 were complete and could be removed from the log. The Committee noted that action 61 would be addressed later in the meeting as part of agenda item 7. The Committee then discussed the open actions and received the following updates:

Action 207: Mr Skinner informed the Committee that he had met with Mr Carl Money and Mr McNichol, and they had agreed that the work to integrate the clinical and non-clinical data into one report for Board subcommittees would begin in January 2024. He added that they were seeking input from one of the non-clinical staff governors who was championing this way of reporting. The Committee noted the progress and timescale for this work.

Action 199: the Committee noted that the Board Assurance Framework (BAF) was currently undergoing a refresh and as part of this, Mrs Sherburn was updating the workforce risks and controls on the BAF and Datix. Mr Skinner reassured the Committee that the risk score for workforce had not significantly changed as a result of this exercise. The Committee noted that the updated BAF was scheduled for the February 2024 Committee meeting.

Action 204: Mrs Forster Adams informed the Committee that a process had been established to ensure that the impact of workforce challenges in Care Services would be reported to this Committee via the POD Governance Group from January 2024. The Committee noted the progress and provisional timescale for this work.

Action 201: Mr Skinner informed the Committee that his team had recently attended a People Plan refresh day where the actions from the Board and governor sessions in April and September had been considered. He noted that the updated People Plan would be socialised more widely across the Trust in the new year. The Committee agreed that this action could be closed.

Action 217: the Committee noted that Mr McNichol would provide the latest starters and leavers data as part of his performance report item later on the agenda. It was then agreed that actions 217, 207, and 61 would be closed and superseded by a new action to develop the workforce dataset for this Committee. This encompasses the culture dashboard work and the development of the performance report to include non-clinical workforce data as well as the number of staff leavers and joiners each month.

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Action 219: the Committee heard that the work to integrate the wellbeing criteria into the People Plan had been undertaken at the recent People Plan refresh day. The Committee agreed that this action could be closed.

Action 220: Mr Skinner provided an update on the recruitment process for the new Head of Health and Safety and informed the Committee that once appointed, this person would be invited to the Committee as a regular attendee to present a standing item on health and safety. The Committee agreed that this action could be closed.

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

23/105 People and Organisational Development (POD) Governance Group Chair's Report (agenda item 6)

The Committee received the POD Governance Group Chair's Report which included updates on efficiency and productivity; the work being undertaken in response to the NHS Long Term Workforce Plan; and the Collective Leadership programme, which had progressed into its second phase. The Committee noted the positive news regarding Staff Survey response rates which were higher than this time last year for both substantive and Bank staff. Mr Skinner informed the Committee that they planned to utilise the learning from the survey results as part of the People Plan refresh work.

Next, Mr Skinner highlighted that the POD Governance Group had agreed to withdraw the Trust's current retirement policy given the significant changes to the NHS Pension Scheme, and the rules on retire and return and flexible retirement. He explained that instead they planned to develop a set of principles and guidance for staff which would include a reduced break in service for retire and return which was consistent with other trusts. The Committee noted that the new twenty-four-hour break was a positive step forward in terms of expediting staff returning to work; however, it was not compulsory, and staff retained the option to take a longer break if preferred. Mr Skinner added that they were planning detailed communications for staff around this change.

The Committee then discussed the roll-out of the 360 Manager programme across the Trust and noted that it was open to all managers and aspiring managers, across a range of professions and was not grade dependant. The Committee was also pleased to note the launch of a new exit interview process as part of the Trust's Retention Strategy which included an easily accessible survey link for staff. The Committee recognised the value of this exit data and was assured to hear that it would be analysed to identify profession and / or service trends and inform appropriate action.

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

23/106 Update on national, regional, and local networking (agenda item 6.1)

The Committee received the latest update on industrial action by the British Medical Association. The Committee noted that action by consultants and

specialist doctors had been suspended while negotiation talks were ongoing; however, Mrs Forster Adams informed the Committee that junior doctors were expected to announce strike days in the lead up to Christmas and early January. She assured the Committee that she would be liaising with colleagues to verify this information and put appropriate plans in place.

The Committee also received an update on the Leeds Health and Care Academy's One Workforce Programme which had supported 651 candidates across Leeds in the last quarter. Mr Skinner noted that 134 candidates had secured paid employment with 91% maintaining employment after 12 months. He added that 49% of the candidates were from an ethnic minority background. He then explained that the majority of appointments had been made at Leeds Teaching Hospitals NHS Trust with a smaller number made at LYPFT.

Mr Skinner also discussed winter workforce pressures and informed the Committee that a plan was in place for moving registered general nurses around the city if required. He explained that this was mainly utilised by primary care and acute trusts.

The Committee **noted** the updates provided.

23/107 Culture Dashboard (agenda item 7)

The Committee received a verbal update on the development of a culture dashboard specifically for workforce related metrics, which was being led by Dr Claire Kenwood, Director for Collaborative Working. Dr Dodd explained that progress was currently in phase one which focused on the development of a testable draft containing measures that were currently available from existing datasets which would enable learning and analysis about the Trust's culture. The Committee noted that the build phase was due to start in January 2024.

The Committee **noted** the progress update and timescale for development.

23/108 Workforce Performance Report (agenda item 8)

The Committee received an update on performance against the Trust's high-level metrics and mandated standards, including reports that sickness absence was at 5.9% and remained within normal levels of variation. The Committee was pleased to note that compulsory training compliance had stayed at 86% despite additional training requirements being introduced for some frontline staff. The Committee was also pleased to note that Personal Development Review (PDR) compliance was at a record high of 83%. Mr McNichol assured the Committee that spot checks had been undertaken using the audit facility on Learn which showed that good quality appraisals were taking place. Mr McNichol added that targeted interventions were taking place in areas with consistently low PDR compliance.

The Committee also received an update on vacancies and noted that band 5 nursing and healthcare support worker (HCSW) vacancies had been steadily reducing over recent months. The Committee also heard that the fill rate for nurses and HCSW duties was higher for the month of October which meant there was

increased coverage of staff across inpatient areas during this period. Mr McNichol explained that this had resulted in less available shifts for Bank staff; however, the Committee heard that engagement in career development was starting to increase amongst Bank staff which could lead to more transferring to substantive roles.

Mr McNichol also shared the number of staff leavers (278) and new starters (525) over the last 12 months which addressed action 217 on the cumulative log. He explained that this data evidenced that the Trust's retention rate was improving and supported the vacancy reduction data. The Committee was assured by the update provided.

The Committee **received** the report, **noted** the latest performance data, and was **assured** by the progress being made.

23/109 Update on integrating the non-clinical dataset (agenda item 8.1)

The Committee **received** this update earlier in the meeting under agenda item 5.

23/110 Update on the Leeds One Workforce (agenda item 9)

The Committee **received** this update earlier in the meeting under agenda item 6.1.

23/111 Wellbeing Guardian Report (agenda item 10)

Dr Dodd discussed the recent changes to the Health and Wellbeing Guardian guidance from NHS England which coincided with the appointment of the new Chair of this Committee, who is the Wellbeing Guardian, as well as the new Head of Wellbeing for the Trust, Ms Victoria Small. Taking this into consideration, the Committee supported the proposal that further discussions should take place outside of this meeting to determine the format of the Wellbeing Guardian Report going forward.

Ms Small then introduced herself to the Committee and outlined her previous role at NHS England where she had worked on the NHS Health and Wellbeing Framework and the Growing Occupational Health and Wellbeing Together Strategy, with a particular focus on the Wellbeing Guardian Policy for managers and leaders. Mrs Khan welcomed Ms Small to the Committee.

The Committee **received** the report for information and assurance and **endorsed** the actions and progress undertaken within the report.

23/112 Draft Violence Prevention and Reduction Strategy and self-assessment against the Violence Prevention and Reduction Standard (agenda item 11)

The Committee received the report and understood that the Trust was required to review and self-assess its status against the Violence Prevention and Reduction

(VPR) Standard twice a year and provide assurance to the Board. The Committee noted that the latest iteration of the VPR strategy now incorporated recent Trust workforce priorities on incidents of hate and domestic violence and sexual safety.

The Committee noted that as of November 2023, the Trust was rated partially compliant when self-assessed against the Standard. The Committee received assurance on progress with the action plan to achieve compliance and noted that all outstanding actions were on track. The Committee asked which areas required further development and heard that trials were being undertaken in some services to strengthen the processes around reporting incidents before being implemented more widely.

Dr Hosker asked if the VPR strategy included seclusion capacity as part of the work to create safer environments and Dr Dodd explained that this strategy focused on reducing instances of violence towards staff. However, the Committee received assurance that data on restrictive interventions was monitored by the Positive and Safe Working Group and regularly reviewed by the Quality Committee. The Committee also noted that the Trust's Professional Practice Lead (Emma Oldham-Fox) sat on the Violence and Reduction Steering Group, providing a link between the two workstreams.

The Committee **reviewed** and **agreed** the Violence Prevention and Reduction Strategy, including the objectives for VPR, as well as the self-assessment against the VPR Standard.

23/113 Health and Safety update (agenda item 12)

Mr Skinner shared an update on how health and safety was being progressed in the Trust. He informed the Committee that he was meeting with the Chief Financial Officer the following week to review the action plan to address the low assurance audit report into the Trust's security management arrangements. He noted that the Health and Safety Committee would be overseeing the progression of this action plan, and that health and safety updates would be reported to this Committee via the new Head of Health and Safety, once appointed.

The Committee **noted** the update provided.

23/114 e-Rostering Internal Audit finding of "Limited Assurance" Report (agenda item 13)

The Committee received the report which detailed the findings, recommendations and action planning that is underway to address Internal Audit's opinion of limited assurance in relation to how effectively the e-Rostering system is being used across the Trust. The Committee noted that both substantive and Bank staff shifts had been included, and only inpatient areas had been audited on this occasion due to the variety and complexity of rostering shift patterns for this staff group, compared to corporate areas. The Committee noted that the audit recommendations had been categorised into 'cultural' recommendations, which were linked to how the rostering system is utilised by the wards, roster creators and managers some of which involved longer pieces of work; and 'technical'

recommendations, which were linked to system configuration, rules, and general governance and included some quick wins, most of which were complete.

The Committee discussed some of the factors which had contributed to the finding of limited assurance. These included the impact of Covid-19 over recent years on the e-Rostering Team's capacity to train staff and monitor their use of the system, as well as increased pressure on managers as a result of high vacancy levels, business continuity arrangements during Covid-19, and episodes of industrial action. Mr McNichol assured the Committee that the system was fit for purpose, but that guidance and best practice needed to be reiterated to staff to ensure the most effective allocation of shifts. He explained that this was being delivered via increased communications with users and a Rostering in Partnership programme with the inpatient wards. Mrs Forster Adams suggested that the e-Rostering Team should regularly test whether the method of increased communication with users of the system was resulting in improved practice as intended.

The Committee then discussed in detail some of the areas identified by the audit as requiring further action and improvement. Firstly, the Committee discussed the roster rule breaks, linked to the auto-roster function, and understood why it was sometimes necessary for these breaks to occur due to the manual creation of the rosters to accommodate shift requests, annual leave, and sickness. Mr McNichol emphasised that evidence of rule breaks did not mean that wards were unsafe, or that working time directive had been affected. He explained that, with agreement from the Deputy Director of Operations, they planned to de-prioritise the auto roster function and associated rules in order to provide more visibility around safety rules on rosters. The Committee also highlighted that the volume of under-utilised hours was an area of concern and heard that changes were being made to the system to flag excessive accrual and under-utilisation of contracted hours to roster creators and ward managers.

The Committee also noted that the use of agency staff to fill some premium rate shifts was high on some wards and heard that Mr McNichol and Mr Saj Madathil, Temporary Staffing Manager, were undertaking a piece of work to transition incumbent agency staff out of those roles in order to free up shifts for available Bank staff. The Committee noted that the importance of continuity of care had to be balanced with the financial pressure caused by using agency staff to fill premium rate shifts when Bank staff were available.

Mrs Khan then discussed some concerns, shared with her through her networks in the community, regarding the rostering of shifts which negatively affected some Bank staff. Mr McNichol acknowledged that this was concerning but reassured the Committee that this was not the norm. He agreed on the importance of challenging some established behaviour and work arounds that had developed in recent years, which would be picked up as part of the 'cultural' recommendations. He also highlighted that the Bank Forum provided a space for Bank staff to share any issues or concerns which could then be acted on by the team.

The Committee **reviewed** the report in detail and was **assured** by the good progress being made to address the findings of the report ahead of the follow up audit in August 2024.

23/115 Workforce Committee Cycle of Business for 2024 (agenda item 14.1)

The Committee considered its cycle of business for 2024 and noted the items that had been added and removed since it was last reported to the Committee. The Committee also agreed to receive updates on Collective Leadership on a six-monthly basis at the April and October meetings. Ms Cooper would update the cycle of business accordingly.

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The Committee **approved** its Cycle of Business for 2024.

23/116 Meeting dates for 2024 (agenda item 14.2)

The Committee **noted** the meeting dates for 2024.

23/117 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 25 January 2024.

23/118 Any other business (agenda item 16)

The Committee did not discuss any other business.