

**Minutes of the Workforce Committee  
Thursday 8 August 2024 at 1pm via Teams**

**Present:** Ms Zoe Burns-Shore, Non-executive Director (Chair of the Committee)  
Mrs Joanna Forster Adams, Chief Operating Officer  
Mrs Kaneez Khan, Non-executive Director  
Mr Darren Skinner, Director of People and Organisational Development

**In attendance:** Ms Rose Cooper, Deputy Head of Corporate Governance (meeting support)  
Ms Tessa Denham, Appointed Governor (observing)  
Mrs Clare Edwards, Associate Director for Corporate Governance  
Ms Nicola Lister, Public Governor (observing)  
Ms Vickie Lovett, Head of Medical Development and Operations (deputising for Chris Hosker)  
Ms Tracey Needham, Head of People Engagement (for item 12)  
Mr Peter Ongley, Carer Governor (observing)  
Ms Rebecca Power, HR Business Partner (deputising for Holly Tetley)  
Ms Claire Powis, HR Manager (for item 10)  
Mrs Fiona Sherburn, Associate Director for People Resourcing and Organisational Development  
Ms Victoria Small, Head of Wellbeing  
Ms Jo Third, Workforce Planning & Retention Lead (for item 9)  
Ms Marie-Clare Trevett, Deputy Director for Allied Health Professions, Social Workers and Clinical Workforce Development (deputising for Nichola Sanderson)  
Ms Sarah Turner, People Engagement Lead (for item 12)

**Action**

**Welcome and Introduction**

Ms Burns-Shore opened the meeting at 1pm and welcomed everyone.

**24/057 Apologies for absence (agenda item 1)**

Apologies from members of the Committee had been received from Dr Chris Hosker, Medical Director, and Ms Nichola Sanderson, Director of Nursing and Professions. Apologies from attendees of the Committee had been received from Mr Andrew McNichol, Head of People Analytics and Temporary Staffing, and Ms Holly Tetley, Associate Director of Employment.

The Committee was quorate.

**24/058 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.

**24/059 Minutes of the meeting held on the 6 June 2024 (agenda item 3)**

The Committee **agreed** that the minutes of the Workforce Committee meeting held on the 6 June 2024 were a true record.

**24/060 Approval for the minutes of the meeting held on the 6 June 2024 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 6 June 2024 were suitable to be uploaded to the Trust's external website.

**24/061 Matters Arising** (agenda item 4)

There were no matters arising.

**24/062 Cumulative Action Log** (agenda item 5)

The Committee noted that actions 234 and 239 were items on the agenda and could therefore be marked as complete. Ms Burns-Shore drew the Committee's attention to those actions which had been referred from other Board subcommittees or the Board of Directors and advised that the scheduling of these updates would be considered with Mr Skinner outside of the meeting.

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

**24/063 Board Assurance Framework** (agenda item 6)

Mrs Edwards introduced the Board Assurance Framework (BAF) in its new format, which was now aligned to the organisational priorities and objectives and had been updated to reflect the recommendations of the recent follow-up internal audit into the BAF. The Committee was then asked to consider if the overall risk score for Strategic Risk (SR) 3 could be reduced from a level 16 to a level 12 risk on the basis that the appropriate mitigations were in place and given the current financial restrictions on recruitment, as proposed by the People and Organisational Development governance groups and leadership team. The Committee supported the proposed reduction in risk score for SR3 and noted that this new position would be reported to the September Board of Directors' meeting for its endorsement.

The Committee **reviewed** the BAF, in its amended format, so that it could be mindful of its responsibility to assure that SR3 was being adequately controlled through the course of the meeting. The Committee was **assured** that SR3 was being adequately controlled; **considered** whether it was receiving assurance on any gaps through the reports it was already receiving; and **agreed** that it did not require any further assurance on the way in which SR3 was being managed. The Committee also **considered** the overall risk rating for SR3 and **agreed** to recommend that it was decreased from a level 16 to a level 12 risk.

**24/064 People and Organisational Development (POD) Governance Group Chair's Report** (agenda item 7)

The Committee received the report and praised the new triple AAA (alert, advise, assure) format, noting that there were no issues to be alerted to, and there were several points to be advised of and for assurance. The Committee also received the evaluation report from the West Yorkshire Health and Care Partnership's Inclusive Recruitment Project undertaken jointly with Touchstone which it praised as an excellent report; the Leeds One Workforce Strategy 2030 Consultation which Mr Skinner invited Committee members to give feedback on; and an overview of the Trust's delivery against its 2024/25 financial trajectories which indicated that good progress was being made with workforce related efficiencies; however, medical locum spend was still a significant challenge which needed to be addressed. The Committee also received a summary of the findings from the Occupational Therapists workforce planning process and agreed to invite Chris Tissiman, Head of Workforce Planning at the Leeds Health and Care Academy, to a future meeting to discuss strategic workforce planning at a collaborative level and how this could be utilised within the Trust.

RC

The Committee then discussed the update on Mental Health Act Managers (MHAMs) and noted that the Trust had sought legal advice and was satisfied that its MHAMs were independent contractors, and that this was reflected in their contractual arrangements. The Committee noted that MHAMs were not Trust employees and therefore had no employment rights but were paid expenses. Mr Skinner reassured the Committee that this classification did not put MHAMs at a disadvantage in terms of being able to discharge their duties.

The Committee also noted the positive uptake from staff with regard to the Reward and Recognition Scheme and was pleased to note that approval had been given by the Financial Planning Group to utilise the cashback funding which sat within the Spotlight platform. The Committee asked what the process for distributing this would be and how it would be governed and heard that the People Engagement Team were developing reward schemes to administer this additional funding. The Committee also noted that there had been issues with recruiting Cultural Inclusion Ambassadors and heard about the impact of this and how it was being addressed.

The Committee **noted** the updates and assurance provided.

**24/065 Update on national, regional, and local networking** (agenda item 7.1)

The Committee did not receive any additional updates on networking.

**24/066 Workforce Performance Report** (agenda item 8)

The Committee received the update on performance against the Trust's high-level metrics and mandated standards up to the end of June 2024. The Committee noted compliance across the key areas all of which had maintained a positive position, with personal development reviews on target at 85%, mandatory training compliance above target at 87%, clinical supervision compliance at 73%, sickness

absence within normal levels of variation at 5.6%, and staff attrition currently at around 8%.

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

#### **24/067 Workforce Mobilisation Plan 2024-25** (agenda item 9)

The Committee received the report which provided an overview of the Trust's workforce mobilisation plans for 2024/25 as well as actions to achieve the identified growth and mitigate slippage. The Committee was mindful that the Trust must not expand its workforce and noted that penalties were in place for workforce growth except when it related to the development of services and had been approved, for example the Perinatal ward expansion. Mrs Forster Adams provided assurance that services continued to grow with investment such as the Mental Health Investment Standard but were being modelled in different ways and often in partnership with the third sector. Mr Skinner added that the report did not include ongoing recruitment to vacancies that were already established as this was a separate piece of work. The Committee also noted that services hosted by the Trust but funded separately would still show as growth if their numbers increased but would not be a cost to the Trust's run rate.

The Committee noted that the workforce mobilisation plan projected additional recruitment of 80.5 whole time equivalent (WTE) staff over 2024/25 which included 23 WTE activity from 2023/24 that had been carried over due to slippage. Ms Burns-Shore highlighted this slippage and asked how likely it was that these additional roles would be recruited to this year. Ms Third responded that the majority of the roles sat within the Perinatal service, and this was a popular service to recruit to and therefore she was more confident in being able to fill those posts; however, she informed the Committee that managers were adopting a flexible approach to filling roles using different skill mixes if required. Ms Burn-Shore was pleased to note that managers were taking this approach which she highlighted as being important in addressing workforce challenges more broadly and looked forward to hearing more about this at a future meeting. Mrs Sherburn added that a policy and procedure relating to development roles had been finalised to support managers to think differently about using these roles to fill hard to recruit to posts and therefore help mitigate further slippage.

The Committee **noted** the Trust's workforce expansion plans for 2024/25 which included the slippage activity from last financial year. The Committee **noted** that actions to achieve the identified growth and mitigate slippage throughout the year were identified in the Growing for the Future section of the People Plan.

#### **24/068 Sickness Absence Interim Report** (agenda item 10)

The Committee received the report which provided an interim update on absence rates within the Trust in respect of the target to reduce sickness absence by 1% by the end of 2024/25. Ms Burns-Shore reminded the Committee that its role in relation to this was to seek assurance on the work being undertaken to reduce sickness absence in the Trust by focusing on understanding and improving

colleague wellbeing. Ms Powis then provided an update on progress across each of the action areas.

The Committee discussed the action regarding the HR Operations team consulting with line managers to ensure a management intervention was in place for all employees whose absence flagged the need for a review indicator. Ms Burns-Shore was pleased to see that the HR function was supporting managers to have these conversations with colleagues and asked how this approach had been received by managers and if the process was being followed. The Committee heard that in the most part managers were having the conversations and the data showed where this was not the case and where further support was required. Ms Powis added that the HR Operations Team had established good relationships with managers and were taking a 'supporting not policing' role. Ms Burns-Shore thanked Ms Powis for the update provided and asked for a further update to come to a future meeting on how well this intervention was working and if managers were comfortable with the approach.

MA

The Committee **noted** the absence data provided and **identified** areas which required further assurance.

#### 24/069 Wellbeing Guardian Report (agenda item 11)

Ms Small introduced the Wellbeing Guardian Report and summarised the key points. She informed the Committee that there had been a good uptake of the line manager sessions provided by the Occupational Health (OH) service with more dates added for the coming year which reflected the need for these sessions. She also noted that there had been further media coverage on Health Assured, the Trust's Employee Assistance Programme (EAP), and heard that this had led to some staff feeling less confident in using the service. She informed the Committee that Health Assured had issued a further statement with reassurances and the decision had been taken, with guidance from the Communications Team, to not issue a Trustwide statement; however, an agreed response had been prepared for anyone who expressed concerns following the media coverage. She added that they were exploring the EAP service provided by other companies that the Trust already had contracts with ahead of Health Assured's contract ending in March 2026 and in preparation for a potential tender process.

Mrs Khan then noted that NHS England had created a new voluntary role of Domestic Abuse and Sexual Violence Ally and was concerned that this would be a difficult role for someone to undertake in addition to their day job and asked how they would be supported to do this. Ms Small responded that no further details had been issued yet but that once all the sexual safety resources had been published, they would review the information through the Sexual Safety Group and Health and Wellbeing Steering Group and look at developing a local adaptation for the Trust. The Committee asked to receive a further update on the role of the Domestic Abuse and Sexual Violence Ally at a future meeting once the proposal was clearer. The Committee also received an update on what additional support was being put in place for the Staff Network Chairs which included regular meetings with the Trust's Critical Incident Lead and looking at what support OH could offer in addition to the immediate support available from the EAP.

VS

Next, Ms Burns-Shore was concerned to note that the 'other' category was the highest reason for a referral to the OH service. She asked if it was possible to receive more information on what 'other' referred to or if it could be discontinued as a category. Ms Small noted the concerns and agreed to have a further conversation with OH about removing the 'other' category.

VS

The Committee then discussed the update on the Workforce Wellbeing Programme to support NHS staff across the UK, heard that Ms Small had provided feedback to NHS England in terms of how the funding should be allocated and looked forward to hearing more about this once the mechanism for trusts to receive the fund had been agreed. Finally, the Committee was pleased to note the pilot of Virtual Reality Mindfulness headsets, run through Leeds Recovery College, into some Trust services. The Committee heard that each member of staff would be given 30 minutes of protected time per week to engage in mindfulness activities using the headsets and that staff would be asked to complete a questionnaire at the beginning and the end of the process which would hopefully indicate a positive impact on mental wellbeing.

The Committee **received** the Wellbeing Guardian Report and was **assured** on the work that was taking place across the Trust to improve staff health and wellbeing.

#### **24/070 2023 Staff and Bank Staff Survey Intention Plans update** (agenda item 12)

The Committee received the report which provided an overview of the Intention Planning process, themes arising from Intention Plans and the commitments to support improvement in staff experience. Ms Turner also delivered a presentation providing further detail on the intentions grouped according to the 7 themes of the People Promise.

The Committee asked if Intention Planning should be mandated, and Ms Turner explained that currently it was being strongly encouraged rather than mandated and this was to avoid there being too much pressure associated with the process. She also confirmed that teams would be expected to complete a fresh Intention Plan each time, with support from the People Engagement Team, because the Staff Survey results varied year on year. The Committee also heard that there was a piece of work ongoing with the Continuous Improvement Team to link Staff Survey data into the Annual Quality Reports for each service line to help inform future planning. Ms Turner added that as part of the launch of the 2024 Staff Survey they planned to share case studies to advertise the process, share learning, and showcase successes to teams across the Trust, particularly those who had yet to take up the offer.

The Committee commended the simple approach which encouraged teams to take ownership of their results and praised the People Engagement Team on their efforts to support the implementation of this across the Trust, noting the highest number of Intention Plans had been completed to date. Ms Needham also thanked the service leads and managers across the Trust for their support of the process.

The Committee **noted** the findings and **received** assurance on the Intention Planning process.

## **24/071 Workforce Race and Disability Equality Standards and Gender Pay Gap Progress** (agenda item 13)

The Committee received the summary update on the Trust's progress against the Workforce Race Equality Standard (WRES) and Workforce Disability Equality Standard (WDES) for the period 2023/24, including details of progress against current priority areas and actions. The Committee also received the Gender Pay Gap report for 2023/24. The Committee noted the position in relation to WRES and WDES, was alert to the changes which were unfavourable and assured by those which were favourable.

Mrs Sherburn talked through the unfavourable changes in 3 out of the 9 WRES metrics. First the Committee discussed the likelihood of white staff being appointed following shortlisting which had increased from 1.46 to twice as likely to be appointed. The Committee heard what factors may be contributing to this and what work was ongoing to understand this further, including an audit sample of recruitment activities to identify themes, as well as what actions were being taken. The Committee also referenced the report on the Inclusive Recruitment Project discussed earlier in the meeting which could help to support some of this work. Ms Lovett then informed the Committee that the Good Medical Practice Oversight Group had received the WRES results and agreed to look at whether Black and Minority Ethnic (BME) doctors who were not shortlisted for a role had fulfilled the person specification. It was agreed that Ms Lovett would share the data with Mrs Sherburn to inform the broader WRES work, and Dr Hosker would update the Committee on the findings of the 'deep dive' at a future meeting.

**VL &  
CHos**

The Committee then discussed the increased likelihood of ethnically diverse staff entering the formal disciplinary process from a likelihood of 0.32 to 1.93. The Committee was concerned that the increase was statistically significant, and Mrs Sherburn provided reassurance that more data analysis would be undertaken to understand what was driving this and what the key themes were, in partnership with the Workforce Race Equality Network. The Committee was reminded that the percentages dealt with very small figures, in this case 16 people entered the formal disciplinary process during 2023/24 which had reduced from 25 people the year before. Mr Skinner attributed this reduction to the positive impact of the revised disciplinary process and the introduction of Decision-Making Groups, all of which included a Cultural Inclusion Ambassador, which meant that now the majority of cases were dealt with via an informal process and only the most serious cases went to disciplinary action. The Committee was pleased to note this reduction in the number of cases; however, it was mindful of the potential trauma of the disciplinary process on staff and highlighted the importance of ensuring there was a consistent approach to each case.

The Committee also noted the percentage difference between the organisation's Board voting membership and its overall workforce (BME representation) which showed an under-representation that could increase year on year if the number of ethnically diverse Board members remains the same. The Committee noted that there were no immediate actions to be taken at this point in time but that the recruitment of a more diverse Board was something that would need to be considered as members leave or come to the end of their term of office.

Next, Mrs Sherburn summarised the WDES results and noted there had been an unfavourable change in only 1 out of the ten WDES metrics, which the Committee acknowledged was a positive result. The Committee noted there had been an unfavourable reduction of 2.5% in the percentage of staff satisfied with the extent to which the organisation values their work. The Committee heard that this area would be explored in more detail with the Disability and Wellbeing Staff Network to understand this further and inform appropriate action.

Finally, the Committee noted the positive position in relation to the Gender Pay Gap (GPG) reporting data for 2023/24 which showed that on average women within the Trust now earned 2.3% less than men when comparing median hourly pay, which was a 3.6% reduction since 2020/21. The Committee noted that further detail on the ethnicity breakdown of GPG data would come to a future meeting, as per action log number 246 from the Board of Directors.

The Committee was assured by the overarching objectives to progress the WRES and WDES work and thanked Mrs Sherburn for the update.

The Committee **noted** the 2023/24 WRES and WDES results; **received** assurance that the data was submitted in May 2024 in line with submission requirements and would be published on the Trust's website by the end of September 2024 to meet statutory reporting requirements; **noted** that appropriate action plans would be developed to address areas where performance fell short of expectations; and **noted** the GPG figures for 2023/24 and **received** assurance that the GPG data was submitted in-line with reporting requirements.

#### **24/072 Trust Values and Behaviours Charter (agenda item 14)**

The Committee received the Trust's refreshed Values and Behaviours Charter which was designed to be helpful guide to staff on what the Trust expects in terms of their behaviour and what staff can expect in return. The Committee noted that the Charter now included the Trust's commitment to civility and respect to ensure staff feel able to raise concerns and speak out when something is wrong.

The Committee praised the Charter, in particular the 'I will' statements and the new corporate branding. The Committee noted the consultation process that had taken place with Staff Side and other networks so far and the next steps for embedding the Charter into the employee journey and key policies and procedures. Ms Burns-Shore then shared a few areas of feedback. She queried some of the terminology used in the Charter and asked that a plain English check was done before its launch. As a minor grammatical point, she also highlighted that there was an inconsistent use of contractions in the document and asked that this was addressed. Mrs Sherburn thanked the Committee for the feedback and agreed to review as suggested.

**FS**

The Committee **received** and **approved** the refreshed Values and Behaviours Charter subject to the above suggestions.



#### **24/073 Any other business (agenda item 17)**

Mr Skinner provided an update on the Trust's response to the recent incidents of community unrest and public disorder. He informed the Committee that they had reached out to affected colleagues to ask how they could best be supported and were working to ensure clear and considered Trustwide communications which reminded staff of the Trust's values, relevant policies, and the support available. In terms of staff safety, the Committee noted that dynamic risk assessments were being undertaken for staff travelling to and from work and for those working in community settings. Mr Skinner reassured the Committee that they were working hard to source verified information and intelligence via the Integrated Care Board and the police to be able to update staff on a regular basis. The Committee noted that the Trust had triggered its incident response arrangements in order to best coordinate its activities and was taking a proportionate, measured and evidence-led response to the situation whilst awaiting further guidance from NHS England.

The Committee was assured by the Trust's approach to maintaining staff and service user safety and supporting those affected during this difficult time. Mrs Khan talked about her and her community's experiences of Islamophobia and civil unrest and highlighted the increased risk for the safety of staff who were visibly Muslim and working in the community. She felt it was positive that staff were being contacted about what support they needed. Ms Burns-Shore thanked Mrs Khan for sharing her thoughts and experiences and thanked Mr Skinner and Mrs Forster Adams for the information and assurance provided.

The Committee **noted** the update provided and was **assured** by the Trust's response.

#### **24/074 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 26 September 2024.

#### **24/075 Any actions agreed today that ameliorate the strategic risks for which the Committee is assurance lead (agenda item 16)**

The Committee **considered** if any actions agreed in the meeting ameliorated the strategic risk for which it is assurance lead. The Committee **agreed** that there were no new actions linked to Strategic Risk 3.