

BOARD SUBCOMMITTEE ASSURANCE REPORT

Presented for:	Information/Escalation
Committee Name:	People and Culture
Presented by:	Beverley Shears, Non-Executive Director (Committee Chair)
Date of Committee Meeting:	29 th March 2022

Items received by the committee for assurance:

Agenda Item	Level of Assurance	Board Action Required? <small>(double click to select)</small>
Gender Pay Gap	Reasonable Assurance	<input type="checkbox"/>
Recruitment update	Reasonable Assurance	<input type="checkbox"/>
Employment Related case overview/employment tribunals	Reasonable Assurance	<input type="checkbox"/>
Non-medical workforce update	Substantial Assurance	<input type="checkbox"/>
Medical Workforce Update	Reasonable Assurance	<input type="checkbox"/>
Health Safety and security report	Reasonable Assurance	<input type="checkbox"/>
Board Assurance Framework	Reasonable Assurance	
Workforce Performance Information	Reasonable Assurance	

POINTS OF ESCALATION

People and Culture Strategy the Committee approved the strategy for Board sign off on the 12th April. It noted that the new Strategy for 2022-2025 is aligned to the new Trust Strategy, the NHS People Plan and Promise and the emerging priorities of the ICS. The Committee welcomed the inclusive development of the Strategy through extensive engagement of staff through a variety of channels.

Talent Management Strategy the Committee approved the Talent Management Strategy noting it supported our People and Culture Strategy. It also reflected the national model and that our Deputy Chief People Officer was a member of the team that developed that model. The Committee endorsed the development of career conversations and the modernisation of our appraisal system. The Committee also identified the need to ensure Doctors appraisals were included in the overall picture. This Strategy is also for Board sign off.

KEY ISSUES

Interim NHS staff survey results. It was noted the results would be published on 30th March and a paper would go to Board sharing results and outlining next steps. Because of timing i.e., results published day after meeting the Committee resolved to discuss in more depth at April meeting.

Gender Pay Gap the Committee approved the Gender Pay Gap report for publication on 30th March and noted the actions to be put in place to improve/narrow the gap. The mean Gender Pay Gap for the Trust has reduced slightly from 29.23% to 28.53% the median however has increased from to 16.24% with a significant widening from 12.77% in 2019. The Committee noted that agenda for change staff mean is 6.28% and for Medical and Dental Group 10.14% The Committee noted that the higher the pay grade

the greater the gap becomes and there are professional groups where the pay gap is higher likely attributable to more men in senior roles. In some groups which are predominantly female noticeably nurses and midwives the pay gap is more favourable to women.

ER cases and tribunals the Committee was assured that all cases are closely managed to reduce timescales and personal adverse impact for individuals. The Committee noted that additional coaching had been put in place to support line managers in some instances and that all sickness management is back with the divisions. Stress anxiety and depression remains a significant theme.

Recruitment update the Committee noted an attraction and recruitment strategy was being developed with sign off end May. New branding options under development with a revamp of careers pages to be more compelling. Recruitment strategy produced for maternity including enhanced social media presence and new microsite to support campaign. 15 international midwives due to arrive between May and July and 3 further dates planned. Welcome bonus introduced for nurses and midwives. The Committee acknowledge the highly competitive recruitment market.

Medical Workforce job planning agreement and control remains an issue with the associated risk of over and under payments for the year. The policy and has been reviewed and updated for this year with tighter controls and It is hoped that many of the plans can be rolled over for 2022/23.

Non-medical Workforce the Committee noted new SPC charts for Divisional breakdown of utilisation to help assess for acuity and dependency trends. Bank requests down 8.43% and 54 wte overseas nurses arrived in February. Safe care census compliance has reduced – being addressed through QIP. Data consistently shows B14 as area of concern – EMED action plan to be identified. Assistant Director for AHPs joined in February aligned to regional and national expectations. The Committee noted potential financial implications of using tool re staffing acuity and dependency. It also noted the introduction of an ED tool based on national model.

Health Safety Security and Environment update The Committee received a report of the Health Safety and Security incidents that have taken place in the Trust for the reporting period 1st January to 28th February 2022. Discussion included environmental risk and impact on patients including flooring, locks, ligature points.

Workforce Performance Information. Non-medical appraisal has decreased slightly again from last month. All divisions have been asked to restart appraisals to achieve Trusts target of 95%. The Committee noted that the good conversations that should be happening to support talent management were vital and felt it was timely in the light of the TM strategy to overhaul system and processes to enable more effective appraisal

BOARD ASSURANCE FRAMEWORK & RISKS	<p>The Board Assurance Framework and Risks were reviewed with good risk-based discussion taking place throughout the meeting. Out of date risk 54 WTE overseas nurses arrived in February with more in the pipeline.</p> <p>People and Culture Strategy for 2022-2025 challenged and updates requested for next meeting</p>
CELEBRATING OUTSTANDING PRACTICE & INNOVATION	<p>54 WTE overseas nurses arrived in February with more in the pipeline.</p> <p>People and Culture Strategy for 2022-2025</p>

LEVELS OF ASSURANCE

Level	Description of Level of Assurance
Substantial Assurance	The report highlighted a sound system of control, designed to address the relevant risks with controls being consistently applied. Highly unlikely to impair the achievement of both system and strategic objectives.
Reasonable Assurance	The report did not highlight any material weaknesses in the system of internal control that would present material risks to the achievement of both system and strategic objectives.
Partial Assurance	The report highlighted some material weaknesses in the system of internal control that would present material risks to the achievement of system objectives. May also impair achievement of strategic objectives.
Limited Assurance	The report highlighted significant material weaknesses in the system of internal control that would present material risks to the achievement of both system and strategic objectives.