

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:	31 st May 2022

Items received by the committee for assurance:

Agenda Item	Level of Assurance	Board Action Required? <small>(double click to select)</small>
Annual Health and Safety Report	Reasonable Assurance	X
Bi monthly health safety and security environment report	Reasonable Assurance	
People and Culture strategy 2022/25 delivery plan	Reasonable Assurance	<input type="checkbox"/>
Staff survey 2021 key themes and action plan	Reasonable Assurance	<input type="checkbox"/>
Guardian of safe working annual report	Reasonable assurance	<input type="checkbox"/>
Medical Pay action plan and progress report	Partial Assurance	
Non-medical workforce update	Reasonable Assurance	<input type="checkbox"/>
Appraisal compliance	Reasonable Assurance	
e-rostering compliance	Partial Assurance	
Workforce Risk register	Reasonable Assurance	
Workforce Performance Information	Reasonable Assurance	

<p>POINTS OF ESCALATION</p>	<p>Annual Health and Safety Report- the committee received the report and approved it for consideration at Trust Board before prior to publication on Trust Website.</p>
	<p>EDI annual reports 2019/20 and 2020/22 the committee approved for submission to Trust Board and noted the good progress and achievements against the legislative and equality standards in the NHS. The further work that needs to be done to tackle inequalities and improve diversity and inclusion for both staff and patients and communities was discussed</p>
<p>KEY ISSUES</p>	<p>Bi Monthly Health Safety and Security and Environment Report Comprehensive report was reviewed and discussed. Noted that an issue regarding persistent violence and aggression (14 Datix incidents including assaults on 3 members of staff) from a patient with capacity, had highlighted the need for a clearer escalation policy and a formal process regarding more robust clinically informed health safety and security decisions.</p>
	<p>Staff Survey 2021 and Action Plans The Action Plans for the key themes for the Trust linked to the NHS people promise were reviewed and next steps to implementation and engagement and achieving the required cultural shift were discussed.</p>

Workforce Race Equality Standard the 2020/21 data was reviewed as part of the annual reporting requirement. Areas of best performance and areas for improvement were discussed as well specific actions already in progress such as BAME staff on recruitment panels, unconscious bias training and allyship. Noted that next steps included refreshing focus with targeted actions to drive change and improve staff experience.

People and Culture Strategy 2022/25 – The 7 pillars to deliver and alignment to NHS people promise noted and the plan on a page for 22/23 noted. The next steps regarding producing a clear 3-year plan and detailed plans for delivery under each pillar programme and alignment with other plans and inter-dependencies were noted.

Attraction and Recruitment Plan – The final plan was approved.

Guardian of Safe Working Annual Report 2021/22 Junior Doctors. The committee were able to reasonably assure themselves regarding the report. Due to annual leave, there were one or two more routine questions for further clarity which could not be answered immediately.

Appraisals (MPAs) The committee received an update on MPA compliance and developing a new approach to appraisal – celebration appreciation and ambition. Good to see the inclusive coproduction and key areas of focus that aligned nationally with the people promise.

Medical Pay Action Plan and progress report. The committee were updated on the plan put in place following the poor audit. The Committee did not feel at this stage that it could have given anything more than partial assurance as progress as compliance was still an issue and progress against deadline was still not good. The committee was pleased to see HR and Finance business partners involved.

Medical Workforce The committee endorsed and supported not including consultants employed on bank and agency in the payment for Local Clinical Excellence Awards as they have flexible arrangements, may work for other Trusts as well or are working to suit their individual requirements and receive enhanced pay.

Non-medical Workforce update The committee noted the increase in sickness absence in the Trust, but it was still in first quartile within the peer model hospital benchmarking group and was second quartile in recruitment and retention.

E rostering Second month of scrutinising KPIs and there are still concerns regarding compliance and progress being made regarding slow rate of implementation. The committee felt it could only partially assure itself. This is a multifaceted issue a lot of which is about culture and the committee will continue to pay attention to the KPIs monthly.

Workforce Performance information Was reviewed mandatory training is maintaining above the Trust target of 90% and the committee was assured that the right actions are being taken to address any pockets of noncompliance. High vacancy rates in maternity, HCAs admin and clerical remain a concern. Sickness has increased to 5.09% over the reporting month but there are early signs that it will begin to reduce.

Risks were reviewed with good risk-based discussion taking place throughout the meeting. Out of date risk challenged and updates requested for next meeting. Good to see CCTV security cameras finally commissioned in full. Board Assurance Framework was postponed to next meeting pending confirmation of strategic priorities and risks allocated to Committee.

Good to see coproduction happening in EDI and Appraisal development.

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.