

COUNCIL OF GOVERNORS 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:	26 th July 2022

Items received by the committee for assurance:

Agenda Item	Level of Assurance	Board Action Required? <small>(double click to select)</small>
P&C Strategy pillar: Recruitment and Attraction	Substantial Assurance	<input type="checkbox"/>
P&C Strategy pillar: Equality Diversity and Inclusion	Reasonable Assurance	<input type="checkbox"/>
Non-medical workforce update	Reasonable Assurance	<input type="checkbox"/>
Appraisal progress	Reasonable Assurance	<input type="checkbox"/>
Medical Pay	Reasonable Assurance	<input type="checkbox"/>
E Rostering Compliance	Reasonable Assurance	<input type="checkbox"/>
Workforce Board Assurance Framework	Reasonable Assurance	
Workforce Risk Register	Reasonable Assurance	
Workforce Performance Information	Reasonable Assurance	

<p>POINTS OF ESCALATION</p>	
<p>KEY ISSUES</p>	<p>Recruitment and Attraction The committee received and discussed a presentation on this pillar of the People and Culture Strategy covering progress against plan, finalisation of branding options and procurement of delivery partner for career pages. A talent acquisition lead to continue work and focus on hard to fill roles has been appointed and will start in September. The Committee were pleased to see the excellent work in this area, and to note robust next steps. It was good to receive very positive news that all current nursing vacancies were filled.</p> <p>Equality Diversity and Inclusion. The committee received and discussed an update on the EDI pillar covering progress on co-production, health inequalities and anti-racism. The committee noted the progress on policy development on disciplinary, resolution and zero tolerance on racism. The committee welcomed the development of our cultural intelligence programme to inform and educate leaders on diversity and cultural differences and noted the launch was on hold due to the ICS developing a combined approach.</p> <p>Creating a positive Culture – This presentation provided the committee an overview of the work currently taking place to develop our culture and to improve staff experience and the staff survey results year on year.</p>

Workforce Race Equality Standards (WRES) Summary and Plan 21/22.

The committee reviewed the data required for submission to NHS improvement as part of the Annual WRES programme and the programme of work to be developed to support improving the Trusts position in relation to the data. It noted that compared to 2011 census data of 9.5% identified themselves as part of the BAME community over 25% of Trust staff are from the BAME communities but were underrepresented in strategic or decision-making roles. This was untapped opportunity for lived experience to inform service development. The committee approved the publication of the plan as per NHSI requirements

Workforce Disability and Equality Standard (WDES) 21/22 The Committee reviewed the data required to be submitted to NHSI and the programme of work set out. The committee discussed the reluctance of people to inform employers of any disability and how we could better communicate and the good work that was underway to improve work experience for employees and schemes to encourage provide internships for work experience. The Committee approved publication of data and plan as required by NHSI

Coaching Strategy 2022-25 The Committee approved the new coaching strategy to start to embed coaching principles at all levels across the Trust. This includes expanding coaching skills through a development programme and create a pool of coaches to support career conversations, performance and leadership coaching and Quality Improvement coaching

Non-medical Workforce update the committee noted the challenges on staffing census data which needs to be uploaded 3 times a day in busy hospitals and noted the work done to improve compliance and mitigate inaccurate utilisation data. NHSI safer staffing requirements on ED are now being implemented. The committee noted that hospital benchmarks on safer staffing had changed, and we were no longer being benchmarked with similar acute hospitals of similar size but against all providers within the East of England region. The committee noted high vacancies in paediatrics and challenges in midwifery, which continue at regional and national level.

Appraisals The committee received an update on progress of the proposed new appraisal approach and content. Pilots were being implemented in a few areas to test the approach. The committee noted that compliance with existing system for non-medical staff had improved slightly in June to 83.84%

Medical Pay Action Plan and progress report. This remains challenging but the committee was assured that processes were now more robust, and progress was being made.

E Rostering compliance the committee was assured that processes, including check and challenge, were sufficiently robust to move from Amber assurance to green. The work programme continued to focus on improved compliance and productivity, as well as helping to reduce reliance on bank and agency workers.

People and OD Services Overview – noted for information.

Workforce Performance information was reviewed. Sickness absence increased slightly to 5.17% (12 month average) and mandatory training is maintaining above the Trust target at 92.9%, although there are still some areas of lower compliance for some subjects, which are being addressed. Vacancy rate improved by 1.08% to 6.83%

Good progress on BAF. Risks were reviewed with good risk-based discussion taking place throughout the meeting,

**CELEBRATING
OUTSTANDING
PRACTICE &
INNOVATION**

Excellent high calibre work on recruitment and attraction.
Good news on nursing vacancies with some great role modelling at executive level and the committee recognised and appreciated hard work from teams.

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.