

<b>Meeting Title</b>	<b>Board of Directors</b>		
<b>Date</b>	<b>8.11.18</b>	<b>Agenda item</b>	<b>Bo.11.18.37</b>

## CONFIRMED MINUTES OF WORKFORCE COMMITTEE MEETING 25 July 2018

Presented by	Chair of the Workforce Committee		
Author	N/A		
Lead Director	Pat Campbell, Director of HR		
Purpose of the paper	To present the Board with the confirmed minutes of the Workforce Committee 25 July 2018		
Key control	This paper provides minutes of the meeting of a Board Committee that assures the strategic objective to  - Be in the top 20% of employers in the NHS		
Action required	To receive		
Previously discussed at/ informed by	Workforce Committee		
Previously approved at:	Committee/Group	Date	
	Workforce Committee	25 July	
Recommendation			
The Board of Directors is requested to note the content of the minutes and the escalations and actions identified			

**WORKFORCE COMMITTEE MEETING  
MINUTES, ACTIONS & DECISIONS**

<b>Date:</b>	Wednesday 25 July 2018	<b>Time:</b>	11:00-13:00
<b>Venue:</b>	Conference Room, Field House, Bradford Royal Infirmary	<b>Chair:</b>	Selina Ullah, Non-Executive Director
<b>Present:</b>	<p><b>Non-Executive Directors:</b></p> <ul style="list-style-type: none"> <li>- Ms Selina Ullah, Non-Executive Director (SU)</li> <li>- Mr Jon Prashar, Non-Executive Director (JP)</li> </ul> <p><b>Executive Directors:</b></p> <ul style="list-style-type: none"> <li>- Mr Bryan Gill, Medical Director (BG)</li> <li>- Ms Pat Campbell, Director of Human Resources (PC)</li> <li>- Ms Karen Dawber, Chief Nurse (KD)</li> <li>- Mrs Sandra Shannon, Chief Operating Officer (SSh)</li> </ul>		
<b>In Attendance:</b>	<ul style="list-style-type: none"> <li>- Professor Clive Kay, Chief Executive (CLK)</li> <li>- Tanya Claridge, Director of Governance and Corporate Affairs (TC) for item W.7.18.5</li> <li>- Mark Pitkethley, Consultant Clinical Psychologist (MP) for item W.7.18.6</li> <li>- Mary Hill, Consultant Clinical Psychologist and Lead for Cancer Care (MH) for item W.7.18.8</li> <li>- Mr Paul Pallister, Trust Secretary</li> <li>- Ms Jacqui Maurice, Head of Corporate Governance – Minutes.</li> </ul>		

No.	Agenda Item	Action
<b>W.7.18.1</b>	<b>Apologies for Absence</b> Pauline Vickers	
<b>W.7.18.2</b>	<b>Declarations of Interest</b> There were no interests declared.	
<b>W.7.18.3</b>	<b>Unconfirmed Minutes of the meeting held on 30 May 2018</b> The minutes were accepted as an accurate record.	
<b>W.7.18.4</b>	<p><b>Matters Arising</b> The Committee noted that the following actions were now closed.</p> <ol style="list-style-type: none"> <li>1. W.3.18.5 Board Assurance Framework: The BAF has been reviewed and updated. The report is included on the agenda.</li> <li>2. W.1.18.3 Future Staff Roles: A verbal update is included on the agenda.</li> <li>3. W.5.18.8 People Strategy Annual Plans 2018/19: This item links with the action W.1.18.3. A verbal update is included on the agenda.</li> </ol>	
<b>W.7.18.5</b>	<p><b>Assurance, the Way Forward</b> TC delivered an in depth presentation on the development of an assurance framework for the Foundation Trust. She advised on those areas that the Committee should focus on; referred to the risk management strategy and, the balance between risk control and the appetite for risk which should frame the discussions held by the Committee about assurance and the level of assurance required. TC advised that the Committees should be working with the Executives to define what assurance they require and in what form. The Committee noted that it should also consider if there were times when it would</p>	

No.	Agenda Item	Action
	<p>need to seek independent assurance. The Committee discussed in detail how it sought assurance and if there were any gaps that needed to be covered. The Committee noted that it should work to be clear on 'what success looks like'. The Committee noted that it had agreed what metrics it should be considering with regard to assurance. TC closed by referencing the work underway to both identify and develop tools to support the evaluation of the value of assurance.</p> <p>SU thanked TC for the insightful presentation. SU added that the Committee was aware of the issues and would ensure that it continued to highlight them.</p>	
<b>W.7.18.6</b>	<p><b>Schwartz Rounds</b></p> <p>SU welcomed MP and MH to the meeting. BG stated that an important part of engagement with the workforce is understanding the emotional pressures staff go through in delivering health care. He stated that MP and MH would describe the work underway in the lead up to the launch of the Schwartz Rounds.</p> <p>MP played a video which provided a comprehensive overview of the key benefits related to the adoption of Schwarz Rounds. Following the screening the Committee discussed the plans in place to encourage staff to participate within the initiative. The Committee noted that a small steering group had been established which was developing a communications plan to support the launch in mid-September. CLK requested that consideration be given to staff not on the BRI site. MP and MH outlined in detail their plans to ensure that staff were given every possible opportunity to attend. SU referenced the need for sensitivity around the issues that might be raised and MP and MH assured the Committee that as psychologists, the fear of 'opening the box and not being able to put the lid back on' is very real but often what people needed was an opportunity to tell their story, to be heard and not be judged and where staff may need support, they were attuned to this.</p> <p>The Committee noted that an arrangement was in place with a Point of Care organisation to deliver the sessions, the first of which would take place in October with the second being delivered in January 2019; thereafter they would be delivered on a monthly basis.</p> <p>SU stated that, from the video screening and the discussion held, the benefits were evident. She extended an invitation to MP and MH to provide an updated in 12 months. It was agreed that the invitation would be extended to Virginia Beckett, Trust Lead for the Schwarz Rounds.</p> <p>MP requested that a Non-Executive might be interested in becoming more involved through attendance at the steering group. SU agreed that this would be discussed with the Chairman.</p>	
<b>W.7.18.7</b>	<p><b>Workforce Committee Dashboard</b></p> <p>PC advised that she would reference the key items from the dashboard and then pick up any further issues under agenda item W.7.18.8 Workforce Report.</p> <p>The Committee noted that, in summary the overall workforce indicator for Appraisal was red as performance had dropped slightly below 75%. The other indicators have remained the same. The following key items from the dashboard were discussed in detail and the Committee noted the following:</p>	

No.	Agenda Item	Action
	<ul style="list-style-type: none"> <li>- <u>Appraisals:</u> Performance at the end of June remained static. In response to a question raised by JP; PC confirmed that the appraisals are staggered throughout the year. A paper was agreed at EMT (Executive Management Team) with a target set to achieve 95% performance by the end of December 2018. The committee noted the measures that had been enacted to support the achievement of the 95% target. The Committee also noted that an appraisal season would be put in place for 2019 onwards.</li> <li>- <u>Staff Friends and Family; treatment and work.</u> The Committee noted that the NHS England benchmark chart would not be available until the end of August. PC advised that as could be seen from the dashboard, in comparison to Q4 (2017/18), results were improved in Q1 (2018/19) with 398 staff completing questionnaires.</li> <li>- <u>Staff Sickness.</u> When considering the year to date, the Trust has hovered around the 4.6% mark. With regard to in-month sickness there are low rates of 4.18% for both April and May. In June there was an increase to 4.62% which impacted on the year to date figure. The June increase has been on both long term and short term sickness. A review is being undertaken of the role of Attendance Advisors ensuring appropriate support is provided to those Divisions most in need and to make sure that sickness is promptly managed.</li> <li>- <u>Nursing Shifts:</u> The Committee discussed the steady increase in the percentage of fill rates over the last two months and noted that there had been some success with recruitment but in small numbers. KD advised that over the last two months there had also been a corresponding decrease in the number of shifts filled by HCAs. This was not a deteriorating position rather this was a return to where it should be.</li> <li>- <u>Staff in Post:</u> PC asked the Committee to note that this was relatively stable adding that, the Committee will see from the Workforce report, that we are at time of year when the Trust generally experiences more nurse leavers as a build up to newly qualified starters taking place in September and October.</li> <li>- <u>Use of Agency Staff:</u> Compared to the previous year, the Trust is managing use of agency staff well and the Trust is below planned expenditure for the first three months this year. The Trust has managed to fill a significant number of Consultant vacancies and anticipates this trend to continue. PC added that the Trust had received correspondence from NHSI stating that BTHFT was an outlier in terms of 'administrative agency spend'. PC asked the Committee to note that this was anticipated as a result of the EPR implementation in 2017/18 and Informatics spend.</li> <li>- <u>Staff Turnover:</u> Has reduced slightly but overall remains stable at a Trust wide level.</li> </ul> <p>In summing up; SU stated that this was a positive report on the whole however performance with regard to Appraisals was disappointing. From the detailed discussion it was clear that there was a robust programme in place to address the issues and of particular note is the potential afforded by performance management and addressing behaviours through OD (Organisational Development). If the Trust could get that right along with the staff training then the expectation was that we should be seeing an upward trajectory moving forward. SU asked about PC's expectations in terms of seeing tangible results. PC stated that if improvements were not evident by the end of September then further actions would need to be considered.</p>	

No.	Agenda Item	Action
W.7.18.8	<p><b>Workforce Report</b></p> <p>The Committee noted that a large part of the report had been covered within the detailed discussion that took place with regard to the Workforce dashboard earlier in the meeting. . The Committee discussed and noted the following:</p> <ul style="list-style-type: none"> <li>- <u>Consultant Recruitment</u>: SU referred to the Consultant Geriatrician post which was currently on hold. BG advised that a number of trainees were expected to complete the training programme in 2019 and the Trust would be going out to advert six months ahead of the training completion date. The Committee discussed the pressures in Dermatology and BG advised that a workshop was planned for September to consider the plan for Dermatology services across the district.</li> <li>- <u>Junior Dr Recruitment</u>: PC stated that the fill rates for August were positive. With regard to the issue of restricted certificates and sponsorship previously raised at Committee, the Home Officer had made changes and the Trust had been successful in the applications submitted.</li> <li>- <u>Training</u>: BG reported that core training compliance for existing staff is high and fully meeting the standard. There were issues with regard to how the Trust counted induction. There were some national issues with the ESR interface and difficulties had been experienced in extracting information. The dashboard did reflect significant improvement in core and high priority training. Staff engagement has been more positive that previously.</li> </ul> <p>SU commented on the areas such as Division of Medicine and Division of Women and Children's which were rated red. BG stated that the core compliance areas they had performed well in and these were the areas which were a focus of the CQC. The next step is to target performance in those outstanding areas and which individuals that relates to.</p> <p>The Committee held a detailed discussion regarding their satisfaction with the information presented on the level of assurance provided and at what point it would escalate concerns held to the Board. CLK stated that it might be useful for the Committee to consider what it would deem to be acceptable margins with regard to each of the areas under review and clearly articulate what they would expect with regard to any trajectories for improvements and if the plans in place were adequate.</p> <p>SU confirmed the assurances sought from the Executives regarding the data provided and the considerations the Committee makes in relation to the Trust's Strategic Objectives. KD commented that the staffing report produced monthly focussed on the fill rate and there is significant assurance that the wards are being managed and that mitigations are in place to provide safe patient care. This position is tracked on a live basis. What is not available stated KD is the framing of that information with local and national data.</p> <p>PC and KD agreed to produce a paper covering nurse vacancies over the next 12 months utilising the benchmarking information available. KD agreed that the report would include a review of the nurse vacancy rates for 16/17 and 17/18 which would support the Committee in adopting a clear position on how and when it would escalate to the Board. BG stated that it would be useful to understand how other elements of the workforce are aligned such as nursing associates and apprenticeships.</p> <p>SU added that at the development session to be included at the next Committee it would be useful to include a discussion on the types of roles the</p>	<p>Director of HR / Chief Nurse</p>

No.	Agenda Item	Action
	<p>Trust needs, where it needs them and to incorporate best practice from other Trusts. SU asked that the Committee consider if BTHFT was able to push the boundaries by considering innovative responses to the roles required in the future. SU also requested that the planned session had a strategic rather than operational focus. PC added that this links into the wider workforce strategy and directed attention to the appendix circulated that provided an update on the West Yorkshire and Harrogate health and Care Partnership Strategy.</p> <p>The Committee noted the workforce report.</p>	<p>Director of HR and Chief Nurse</p>
<p><b>W.7.18.9</b></p>	<p><b>Annual Reported Physical Assaults</b></p> <p>SU stated that this report had been presented to the Quality Committee and she was keen for the Workforce Committee to be sighted on it as the Trust had a duty of care towards staff. The Committee discussed the actions in place and noted the report.</p>	
<p><b>W.7.18.10</b></p>	<p><b>Workforce Race Equality Standard (WRES) and Equality &amp; Diversity Update</b></p> <p>The Committee established that going forward this report would be presented to the Workforce Committee for review with any relevant commentary from the Committee included in the Executive Summary presented to the Board as part of the paper for discussion. The Committee discussed the report in detail.</p> <p>SU noted her concern at issues raised with regard to performance within the Women and Children's Division in relation to a number of the key workforce metrics reviewed earlier in the meeting with regard to Appraisal but also during this discussion of the Race Equality report. The Committee noted the initiatives that had been put in place in Women and Children's during the last 12 months to address the issues highlighted however, the Committee agreed that it would be paying close attention to all performance metrics within the Division going forward.</p> <p>JP stated that at the last joint session between the Governors and the NEDs, the Governors were sighted on this and he wanted to make sure that the Committee was aware of that.</p> <p>SU stated that she had attended the BAME staff network sessions on a number of occasions and had heard concerns raised by the network on their experience that some managers and team leaders do not apply policies fairly or consistently. It was noted that it would be good to present to the network some of the outcomes from the changes that the Trust has initiated which may help to address some of the concerns raised. PC informed the Committee that she and the Chief Executive would be attending the next BAME network session to discuss with the network progress in relation to the WRES.</p> <p>SU commented on the good progress being made in certain areas with regard to senior BAME appointments such as those in Pharmacy and Medicine however, overall there was still some work to be done. SU requested a 'Closing the Gap' action plan to be developed with regard to Bands 8a and above. SU added that it was also concerning that BTHFT did not have a representative BAME leadership at Executive level given that BTHFT was one of the largest employers.</p> <p>SU referred to a question raised by Professor Laura Stroud at a previous Board</p>	<p>Director of HR</p>



No.	Agenda Item	Action
	<p>of Directors Meeting. She had asked if, with regard to the systems in place, and if, in being equal to some groups this disadvantaged other groups. The Committee noted that this would be considered when undertaking impact assessments and, the Committee also noted that the question would also be considered as part of the review of the Recruitment Policy currently taking place.</p>	
<b>W.7.18.11</b>	<p><b>Annual Report on Medical Appraisal and Revalidation 2017/18</b> BG presented the report. He asked the Committee to note that there was only one non- appraisal in last 12 months which means that the Trust had improved its performance on the previous year where there three non-appraisals. He advised that with regard to national benchmarking, BTHFT featured in the top 10% of Trusts and was the best performer in West Yorkshire. In Yorkshire and Humber the Trust is in the top 5. SU thanked BG for the positive report.</p>	
<b>W.7.18.12</b>	<p><b>Recruitment and Retention action plan</b> KD advised that the report provided an update on the plan first devised in 2017. She reminded the Committee of the challenge from NHSI around the content and what the Trust was doing to improve rates. KD referred to the two main objectives highlighted with the report with regard to improving and maintaining retention rates and, recruiting to vacancies. The Committee noted progress in relation to the areas that had now become business as usual.</p> <p>KD advised that what needed to be determined was what would be included in the monthly reporting. She added that in the light of the earlier discussion it would be appropriate to included AHP staff. SU added that, with regard to the report it would be useful to receive an update at a future committee with the evidence column completed and the addition of an impact column. She added that the Committee should then review the rag rating again. SU thanked KD for the report.</p>	Chief Nurse
<b>W.7.18.13</b>	<p><b>Nurse Staffing Data Publication Report May &amp; June 2018</b> KD asked the committee to note the following key points drawn from the report:</p> <ul style="list-style-type: none"> <li>- AMU has been split into wards 1 and 4. Have seen a decrease in harms and complaints and improvements in the ward and accreditation score.</li> <li>- Maternity. There have been a high number of incidents reported in Maternity which were all no harm.</li> <li>- Ward 28. The patient day rate is similar to other wards of a similar type however KD stated she was not overly worried as could be seen from 'any harms', relatively no harm in those areas.</li> </ul> <p>SU commented on an earlier discussion with regard to Maternity, the increased acuity of patients and the impact this was having on their wards. SU stated that if this pattern should continue would there be a need for a different skill mix. KD confirmed that there would and explained that the staffing review considered the birth rate plus. KD further provided assurance with regard to the actions taken in response.</p> <p>SU commented on Ward 6 and asked when the Committee could expect to see a change and improvement in the metrics. KD stated that what they were seeing at present on the ward were Pressure Ulcers and Falls with low or moderate harm. She stated that the indicators were improving and the Trust was seeing a reduction in complaints. Monthly monitoring was in place. Changes had been made to working patterns. The ward had been subject to a</p>	

No.	Agenda Item	Action
	large number of vacancies however the Committee was asked to note that new staff would be starting in September along with new nursing associates.	
<b>W.7.18.14</b>	<b>Guardian of Safe Working Hours Quarterly Report</b> The Committee discussed and noted the report.	
<b>W.7.18.15</b>	<b>Workforce Roles</b> The Committee noted that at the next meeting this would be delivered as a development session with participation from HR staff and staff from the Chief Nurses team.	Director of HR/Chief Nurse
<b>W.7.18.16</b>	<b>Board Assurance Framework</b>  The Committee agreed that it was comfortable with what had been discussed. Limited confidence still seemed right in relation to the Strategic Objective 'to be in the top 20% of employers in the NHS'. The Committee acknowledged that the evidence presented shows significant progress and assurance in a number of areas. However, there were some gaps in assurance that have been identified.  SU referred to the action under W.7.18.8 that the Committee receives a report that demonstrates the nurse/vacancy staffing position over the last 12 months so they could clearly see if any improvements had been made. It was expected that the report would include a review of the nurse vacancy rates for 16/17 and 17/18 which would help support the Committee in adopting a clear position on its expectations with regard to the level of vacancies the Trust should carry and the point at which any concerns should be escalated to the Board.  The Committee also recognised the need for the Board to think proactively about the Workforce of the Future. SU referred to the earlier action under the previous item on Workforce Roles and proposals going forward.	
<b>W.7.18.17</b>	<b>Any Other Business</b> There was no other business discussed.	
<b>W.7.18.18</b>	<b>Matters to share with other committees</b> There were no matters to share.	
<b>W.7.18.19</b>	<b>Matters to Escalate to the Corporate Risk Register</b> There were no matters to escalate.	
<b>W.7.18.20</b>	<b>Matters to Escalate to the Board of Directors</b> Nothing to escalate to the Board	
<b>W.7.18.21</b>	<b>Items for Corporate Communications</b> The Committee recommended articles related to progress with regard to the WRES as part of ongoing communications which should include a showcase of new appointees.	Head of Corporate Governance
<b>W.7.18.22</b>	<b>Date and time of next meeting</b> 26 September 2018 - 11:00-13:00	





Bradford Teaching Hospitals  
NHS Foundation Trust

**BRADFORD TEACHING HOSPITALS NHS FOUNDATION TRUST**  
**ACTIONS FROM WORKFORCE COMMITTEE – 28<sup>th</sup> March 2018**

Date of Meeting	Agenda Item	Required Action	Lead	Timescale	Comments/Progress
30.05.18	W.5.18.5	<b>Workforce Committee Dashboard:</b> Arrange meeting with JP to discuss impairment related sickness	Director of HR	Workforce Committee 26 September 2018	JP to contact PC when he is available to attend a meeting.
26.07.18	W.7.18.8	<b>Workforce Report (Nursing Vacancies):</b> PC and KD agreed to produce a paper covering nurse vacancies over the next 12 months utilising the benchmarking information available. KD agreed that the report would include a review of the nurse vacancy rates for 16/17 and 17/18 which would support the Committee in adopting a clear position on how and when it would escalate to the Board. BG stated that it would be useful to understand how other elements of the workforce are aligned such as nursing associates and apprenticeships.	Director of HR/Chief Nurse	Workforce Committee 26 September 2008	Added to the agenda for 26 September 2018. <u>Action concluded.</u>
26.07.18	W.7.18.10	<b>Workforce Race Equality Standard (WRES)</b> SU requested a 'Closing the Gap' action plan to be developed with regard to Bands 8a and above.	Director of HR	Workforce Committee 26 September 2018	Added to the agenda for 26 September 2018. <u>Action concluded</u>
26.07.18	W.7.18.15	<b>Workforce Roles</b> The Committee noted that at the next meeting this would be delivered as a development session with participation from HR staff and staff from the Chief Nurses team.  <u>W.7.18.8 Workforce Report:</u> SU added that at the development session to be included at the next Committee meeting it would be useful to include a	Director of HR/Chief Nurse	Workforce Committee 26 September 2018	Added to the agenda for 26 September 2018. <u>Action concluded</u>



Bradford Teaching Hospitals  
NHS Foundation Trust

Date of Meeting	Agenda Item	Required Action	Lead	Timescale	Comments/Progress
		discussion on the types of roles the Trust needs, where it needs them and to incorporate best practice from other Trusts. SU asked that the Committee consider if BTHFT was able to push the boundaries by considering innovative responses to the roles required in the future. SU also requested that the planned session had a strategic rather than operational focus.			
26.07.18	W.7.18.21	<b>Items for Corporate Communications</b> The Committee recommended articles related to progress with regard to the WRES as part of ongoing communications which should include a showcase of new appointees.	Head of Corporate Governance	Workforce Committee 26 September 2018	Communications team advised and feature article requested for publication to coincide with report being presented at next open board. <u>Action concluded.</u>
30.05.18	W.5.18.9	<b>Annual Staff Survey Action Plan:</b> BG proposed that a presentation be delivered to the Committee from the Head of Organisational Development with regard to the staff engagement plan.	Director of HR	Workforce Committee 28 November 2018	Annual Staff Survey Action Plan is deferred from 26 September to November and will be delivered as a development session which will also incorporate a presentation on the staff engagement plan.
30.05.18	W.3.18.4	<b>Matters Arising: 'Harassment and Bullying' dashboard indicator.</b> PC suggested that the indicator could include the number of <ul style="list-style-type: none"> <li>- complaints logged</li> <li>- complaints resolved informally</li> <li>- formal investigations and outcomes.</li> </ul> Due to the small number of complaints it would be appropriate to include within the dashboard on a six monthly cycle.	Director of HR	Workforce Committee 28 November 2018	



**Bradford Teaching Hospitals**

NHS Foundation Trust

Date of Meeting	Agenda Item	Required Action	Lead	Timescale	Comments/Progress
26.07.18	W.7.18.12	<b>Recruitment and Retention action plan</b> SU added that, with regard to the report it would be useful to receive an update at a future committee with the evidence column completed and the addition of an impact column. She added that the Committee should then review the rag rating again.	Chief Nurse	Workforce Committee 30 January 2019	