

Meeting Title	Board of Directors		
Date	11/07/2019	Agenda item	Bo.7.19.21

## A report from the Chair of the Workforce Committee

Presented by	Selina Ullah, Non-Executive Director
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Lead Directors	Pat Campbell, Director of Human Resources
Purpose of the paper	This paper is to provide the Board of Directors with an overview of the work of the Workforce Committee in May and June 2019.
Key control	This paper is a key control for the strategic objective to be in the top 20% of NHS employers
Action required	To note
<b>Background</b>	
The purpose of the Workforce Committee is to provide the Foundation Trust Board with an objective and independent review (including relevant strategic risks and associated assurance) of the effectiveness of the workforce management arrangements for the Trust.	
<b>Key Matters Discussed</b>	
<b>1. Strategic Objective 3: To be in the top 20% of NHS Employers</b>	
<b>1.1 Risk: Strategic risks relevant to the Committee</b>	
<p>The Committee reviewed strategic risks related to the strategic objective for which it has an assuring role at both meetings and has considered the strategic risk profile and the assurances received in the course of its business, the Committee confirmed that it was assured that the mitigations described were proportionate and appropriate. In particular a risk relating to the microbiology service was discussed and assurance sought in relation to the effectiveness of the mitigation in place.</p>	
<b>1.2 Workforce Dashboard</b>	
<p>The Workforce Dashboard is reviewed at every meeting and the Committee considers specific areas of workforce performance and risk. Metrics regarding cultural improvement and maturity, specific to the Workforce Committee, will be included when the data is available later in the year.</p> <p>In particular the Committee considered appraisal rates and was provided with assurance on progress relating to measure being taken to improve and sustain the appraisal rate position. The Committee considered the quality of the appraisals themselves and explored different methods of assuring their effectiveness, for instance through staff survey scores.</p> <p>The Committee received specific assurance in relation to the achievement of Equality Indicators and noted the improvement being made in relation to senior leaders.</p> <p>In addition the Committee reviewed the Staff Friends and Family indicator, sickness indicator, nursing fill rates and agency and turnover indicators. The Committee noted the general overall improvement in the indicators it reviews and assures.</p>	
<b>1.3 Risk: Nurse Staffing Data Publication Report</b>	
<p>The Committee received updates relating to Nurse Staffing at each meeting, and received assurance in relation to how risk is being understood (through the use of the heat-map) and mitigated. The Committee was informed that any specific risk related to a ward or department which was not being effectively mitigated at a Care Group level would be escalated to the Integrated Governance and Risk Committee.</p>	
<b>1.4 Key Control: Workforce Disability Equality Standard Compliance (WDES)</b>	

Meeting Title	Board of Directors		
Date	11/07/2019	Agenda item	Bo.7.19.21

The Committee received a suite of evidence in relation to the Trust's compliance with the WDES. The Committee were concerned about the WDES metrics. The Committee aimed to achieve the target in 2025 and encouraged the implementation of a robust action plan.

### 1.5 Key Control: Workforce Race Equality Standard

The Committee received a suite of evidence in relation to the Trust's compliance with the WRES and were concerned in the areas around perceptions of inequality of opportunity and harassment & bullying. The Committee aimed to achieve the target in 2025 and encouraged the implementation of a robust action plan.

### 1.6 Key Control: 7 day service Board Assurance Framework

The Committee received assurance associated with the requirements of the mandated 7 day Board Assurance Framework, which will be submitted to NHS Improvement.

### 1.7 Committee Business

At the meeting in March the Committee confirmed changes to the overall risk appetite with regard to the strategic objective from 'cautious' to 'seeking'. The revised risk appetite statement was approved by the Board of Directors.

In April the committee confirmed revised measures/KPIs to be consider in relation to the understanding the effectiveness of actions being taken to achieve the strategic objective to be in the top 20% of NHS Employers. The number of measures has been reduced and aligned to the Trust's People Strategy, Strategic objectives and will serve to underpin the Board Assurance Framework.

The Committee noted that since last year they had made significant progress in appraisal targets, improved nursing vacancy rates, improved the apprenticeship position and perception indicators on the staff survey. The Committee agreed to make a proposal to the Board of a green RAG rating in this highlight report, but recognised the reality of industrial action across the Trust's Estates and Facilities function as a result of the establishment of a wholly owned subsidiary.

### Recommendation

The Board of Directors is requested to note the work of the Workforce Committee in scrutinising the Trust's relevant strategic risks and associated assurance with respect to the effectiveness of the workforce management arrangements for the Trust.

It is also asked to consider and approve the assurance level and statement agreed by the Committee which is provided on the Board Assurance Framework.

Risk assessment						
Strategic Objective	Appetite (G)					
	Avoid	Minimal	Cautious	Open	Seek	Mature
To provide outstanding care for patients			g			
To deliver our financial plan and key performance targets			g			
To be in the top 20% of NHS employers					g	
To be a continually learning organisation				g		
To collaborate effectively with local and regional partners					g	
The level of risk against each objective should be indicated.	Low		Moderate	High	Significant	

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Where more than one option is available the level of risk of each option against each element should be indicated by numbering each option and showing numbers in the boxes.	Risk (*)
Explanation of variance from Board of Directors Agreed General risk appetite (G)	

<b>Risk Implications (see section 4 for details)</b>	<b>Yes</b>	<b>No</b>
Strategic Risk register and/or Board Assurance Framework Amendments	▪	
Quality implications	▪	
Resource implications	▪	
Legal/regulatory implications	▪	
Diversity and Inclusion implications		▪

<b>Regulation, Legislation and Compliance relevance</b>
<b>NHS Improvement:</b> Risk assessment framework, quality governance framework, code of governance , annual reporting manual
<b>Care Quality Commission Domain:</b> <i>Safe, caring, effective, responsive, well led</i>
<b>Care Quality Commission Fundamental Standard:</b>
<b>Other (please state):</b>

<b>Relevance to other Board of Director's Committee:</b>					
Workforce	Quality	Finance & Performance	Partnerships	Major Projects	Other (please state)
	▪				