

## MINUTES - WORKFORCE COMMITTEE

|               |                                   |               |   |
|---------------|-----------------------------------|---------------|---|
| <b>Date:</b>  | Thursday 7 November 2019          | <b>Time:</b>  | 09:00 – 10:00                           |
| <b>Venue:</b> | Conference Room, Field House, BRI | <b>Chair:</b> | Ms Selina Ullah, Non-Executive Director |

|                       |   |
|-----------------------|---|
| <b>Present:</b>       | <b>Non-Executive Directors:</b> <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> <b>Executive Directors:</b> <ul style="list-style-type: none"> <li>- Ms Pat Campbell, Director of Human Resources (PC)</li> <li>- Ms Karen Dawber, Chief Nurse (KD)</li> <li>- Dr Bryan Gill, Chief Medical Officer (BG)</li> </ul> |
| <b>In Attendance:</b> | <ul style="list-style-type: none"> <li>- Ms Tanya Claridge, Director of Governance and Corporate Affairs (TC) (from 09.15)</li> <li>- Ms Jacqui Maurice, Head of Corporate Governance (JM) (up to 09.15am)</li> </ul>   |

| No.       | Agenda Item  | ACTIONS |
|-----------|--|---------|
| W.11.19.1 | <b>Apologies for Absence</b><br>Mr Amjad Pervez, Non-Executive Director  |         |
| W.11.19.2 | <b>Declarations of Interest</b><br>There were no interests declared.   |         |
| W.11.19.3 | <b>Unconfirmed Minutes of the meeting held on 25 September 2019</b><br>PC requested the following amendment to page 3 under item W.9.19.9.<br><i>"AHPs and Pharmacy – New issue since report written re occupational therapy who have experienced staff leaving and problems with new starters staying. There appears to be a number of staff leaving to go to Leeds. This may affect how quickly the trust can discharge patients."</i><br>To be replaced with:<br><i>"AHPs – A new issue has arisen since the report was authored regarding a rise in staff leavers within Occupational Therapy and Speech and Language Therapy which may have an effect on patient discharge."</i><br>The Committee agreed that subject to this amendment being made the minutes of the meeting held on 25 September were approved as a correct record. | JM      |
| W.11.19.4 | <b>Matters Arising</b><br>The Committee confirmed that the following actions were closed. <ol style="list-style-type: none"> <li>1. <u>W.9.19.5 - Strategic Risks relevant to the Committee. ID 3378.</u> This has been reviewed at IGRC.</li> <li>2. <u>W.9.19.20 - Draft Use of Resources.</u> Regarding feedback on the paper.</li> <li>3. <u>W.9.19.7 - Workforce Committee Dashboard.</u> Staff advocacy metrics included on the dashboard.</li> <li>4. <u>W.9.19.7 - Workforce Committee Dashboard SFF.</u> Rating reviewed.</li> <li>5. <u>W.9.19.17 - Nurse Staffing Data Publication Reports.</u> Updated ratings information circulated following the meeting.</li> </ol>  |         |

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|-------------|---|---------|
| W.11.19.4.1 | <b>Matters Arising from the Board of Directors</b><br>There were no matters arising.  |         |
| W.11.19.4.2 | <b>Matters Escalated from the Sub Committee</b><br>There were no matters escalated.   |         |
| W.11.19.5   | <b>Strategic Risks relevant to the Committee</b><br>SU drew attention to the risks specific to this Committee as highlighted within the Strategic Risks document and all agreed to remain sighted on the risks during discussions.  |         |
| W.11.19.6   | <b>Proposal to close Risk ID 3378: De-escalation of Patients</b><br>KD presented the paper. The Committee noted the closure of risk 3378 on the Strategic Risk Register and the opening of two new risks on the Chief Nurses risk register to reflect the risk assessments. In particular the Committee took note of the impact on the workforce as detailed in the risk assessments.   |         |
| W.11.19.7   | <b>Board Assurance Framework</b><br>The Committee agreed to review whether they were assured or not after all reports had been heard at the end of this agenda - W.11.19.15   |         |
| W.11.19.8   | <b>Workforce Committee Dashboard</b><br>The Committee discussed the dashboard in detail. The following key points were noted. PC reported that: <ul style="list-style-type: none"> <li>- Engagement metrics had been revised from red to amber as a result of Yorkshire and Humber benchmarking data and Staff Friends and Family work.</li> <li>- A new metric for 'Vacancies' has been added to the dashboard that reports the percentage of vacancies against the funded establishment.</li> <li>- The Trust continues to face challenges with staff sickness rates. The summer's industrial action coincided with an increase in sickness rates within facilities. At staff group level, the Trust is performing better than some of its peers although still an outlier in the Yorkshire and Humber region overall. Work has been done to ensure staff report to a manager when off sick and not a colleague. PC stated that she was assured the Trust is managing long term sickness well but that more could be done over short term absences. KD stated that there is an impact on staff when agency or bank staff phone in at late notice and staff have to be moved as a result.</li> <li>- More work was needed to increase the rate of improvement for BAME Senior Leaders across the Trust.</li> <li>- Appraisal rates were above 90%. Advocacy and Harassment &amp; Bullying Outcomes have been revised which more clearly shows that an uptake in the advocacy service is resulting in more complaints being resolved informally. Context was provided to the New Starter Training data as a small number of staff not completing training can result in a large percentage drop below the 100% target.</li> </ul> |         |

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|------------|---|---------|
|            | The Committee noted the dashboard report and approved the new Vacancies metric.   |         |
| W.11.19.9  | <p><b>7 Day Service Self-Assessment Board Assurance Update</b><br/>BG presented the paper and in particular highlighted the following:</p> <ul style="list-style-type: none"> <li>- The Trust achieved 87.5% compliance against a target of 90% for Standard 2 of the 7DS standards. This demonstrates a high level of Consultant presence over the 7 day period.</li> <li>- Acute admissions are 100% covered and the Trust was amongst the top 10 in the country for this standard when last checked.</li> <li>- BG stated that once more evaluation had taken place, it might be good as a Trust to make a decision the 85% to 90% is an extremely good standard.</li> <li>- Using existing Trust resources to achieve 90% cover may have unintentional detrimental impact on other services such as outpatients. The Trust is not benchmarked on this standard and there is no evidence of harm to patients for not achieving 90%. Further work is needed to review those specialties that are below target and report back to the Workforce Committee with recommendations such as using EPR to remotely review new patients coming in at 5pm and what the impact might be.</li> </ul> <p>The Committee noted the work to achieve the high level of performance against the 7DS standards.</p> | BG      |
| W.11.19.10 | <p><b>Nurse Staffing Data Publication Reports – September 2019</b><br/>KD presented the report. She informed the Committee that staff still perceived a risk around staffing levels of qualified nurses but that is not backed up by the data. Discussions and analysis between the matrons concluded that the problem was not that staffing levels were unsafe, but that moving staff around has a negative impact and introduces disruption. A full risk assessment has been completed and will be included in next month's reports. Staff have been moved around to comply with a BTHFT standard of always having at least two registered nurses on duty at all times. KD noted that the Trust benchmarks well in all nurse staffing indicators</p> <p>KD added that there is a need across the Trust to communicate the positive stories about how well the Trust is doing at recruiting and retaining staff as well as the high levels of staffing the Trust achieves compared to other Trusts.</p> <p>The Committee noted the contents of the report and confirmed that they were assured.</p>  |         |
| W.11.19.11 | <p><b>Freedom to Speak Up - Index Report 2019</b><br/>In presenting the report KD asked the Committee to note that the National Guardians Office use data from the national Staff Survey to look at Trusts' culture of Freedom To Speak Up. KD stated that the data available shows an improving staff culture and that the Trust now benchmarks in the middle. She also highlighted that 80% of Trusts saw an increase in staff engagement scores over the last three years during the speak up campaign except for one Trust who had industrial action relating to their Wholly Owned Subsidiary.</p>   |         |

| No.        | Agenda Item  | ACTIONS |
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|            | <p>KD assured the Committee that the Trust's active OD team were proactively working on communicating messages related to the promotion of a Speak Up culture. Staff are reporting an improved culture and feel confident to speak up and raise concerns.</p> <p>The Committee noted the contents of the report and confirmed it was assured that the freedom to speak up is being adopted.</p>  |         |
| W.11.19.12 | <p><b>Our People Strategy – Annual Plan 6 monthly update</b></p> <p>PC referred to the detailed report, stating that most actions on the plan were on track but that some actions linked to the CBU roll-out in respect of leadership development had slipped and now have revised timescales. Discussions with the Chief Operating Officer led to agreed delivery of the Leadership Development Plan in Quarter 4.</p> <p>PC also highlighted that the Trust was a finalist in the HSJ staff engagement awards.</p> <p>The Committee noted the report presented and confirmed it was assured by the action plan and the progress made against it.</p>   |         |
| W.11.19.13 | <p><b>Equality &amp; Diversity Update: Reciprocal Mentoring Scheme</b></p> <p>PC brought to the attention of the Committee an action from the Workforce Race Equality Standard (WRES) action plan to introduce a Reciprocal Mentoring Scheme. Initially, BAME staff and staff with long term health conditions and disabilities would be treated as priority. The initial step would be to hold a one hour training session which could take place either on 11 and 12 December while the Well Led review is taking place at the same time as the World Café.</p> <p>The Committee noted the contents of the report and approved the introduction of the reciprocal mentoring scheme with initial priority being given to BAME staff and staff with a disability/long term condition. It was agreed to take this item to the Board of Directors meeting 7 November 2019.</p> |         |
| W.11.19.14 | <p><b>Confirmed minutes of the Education and Workforce subcommittee – September 2019</b></p> <p>The Committee noted the minutes and were assured by the positive engagement and attendance, the depth of discussion and the issues that are being discussed.</p>   |         |
| W.11.19.15 | <p><b>Board Assurance Framework</b></p> <p>The Committee noted and approved the BAF. The Committee confirmed that it was assured that the associated risks are being appropriately controlled and agreed the following narrative for a rationale statement:</p> <p>The Committee further confirmed that it was assured that there are effective controls in place, there are no additional gaps in controls or assurance and the Trust is delivering to time and target.</p>   |         |

| No.        | Agenda Item  | ACTIONS      |
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| W.11.19.16 | <b>Any Other Business</b><br>There was no other business discussed.  |              |
| W.11.19.17 | <b>Matters to share with other Committees</b><br>There were no matters to share with other Committees  |              |
| W.11.19.18 | <b>Matters to Escalate to the Strategic Risk Register</b><br>The Committee agreed to make sure that the Wholly Owned Subsidiary was in the Strategic Risk Register.  |              |
| W.11.19.19 | <b>Matters to Escalate to the Board of Directors</b><br>The Reciprocal Mentoring proposal was approved to go to the Board of Directors.<br><br>SU would discuss at closed Board how the Wholly Owned Subsidiary would be reflected in the Board Assurance Framework. | PC<br><br>SU |
| W.11.19.20 | <b>Items for Corporate Communications</b><br>There were no items for Corporate Communications.   |              |
| W.11.19.21 | <b>Agenda items for the Workforce Committee scheduled 18 December 2019</b><br>The agenda was reviewed and accepted by the Committee.   |              |
| W.11.19.22 | <b>Date and time of next meeting</b><br>18 December 2019 11:00-12:30   |              |



Bradford Teaching Hospitals  
NHS Foundation Trust

**BRADFORD TEACHING HOSPITALS NHS FOUNDATION TRUST**  
**ACTIONS FROM WORKFORCE COMMITTEE – November 2019.**

| Date of Meeting | Agenda Item | Required Action  | Lead   | Timescale                               | Comments/Progress  |
|-----------------|-------------|--|--|---|--|
| 25.9.19         | W.9.19.6    | <b>BAF Pensions update</b><br>SU asked for an update in November of the impact the pensions letters going out in October will have had on the workforce.   | Director of HR                               | Workforce Committee<br>27 November 2019 | November Committee meetings cancelled. Included within the December Workforce Report. <u>Action closed.</u>  |
| 7.11.19         | W.11.19.19  | <b>Matters to Escalate to the Board of Directors</b><br>PC would present the Reciprocal Mentoring proposal to the Board of Directors   | Director of HR                               | Workforce Committee<br>18 December 2019 | This item was presented to the Board of Directors 7.11.19. <u>Action closed.</u>   |
| 7.11.19         | W.11.19.19  | <b>Items for Corporate Communications</b><br>SU to discuss how the Wholly Owned Subsidiary will be reflected in the Board Assurance Framework at the Closed Board meeting  | Ms Selina Ullah,<br>Non-Executive Director   | Workforce Committee<br>18 December 2019 | Board of Directors confirmed on 22 November that it would not be proceeding with the WOS. <u>Action closed.</u>  |
| 7.11.19         | W.11.19.18  | <b>Matters to Escalate to the Strategic Risk Register</b><br>Ensure the Wholly Owned Subsidiary is on the Strategic Risk Register  | Director of Governance and Corporate Affairs | Workforce Committee<br>18 December 2019 | To be discussed at IGRC. Verbal update to be provided.   |
| 27.03.19        | W.3.19.17   | <b>Committee Review</b><br>The following should be noted and form part of the review.<br><ul style="list-style-type: none"> <li>- The necessity of having monthly meetings of the Workforce Committee</li> <li>- The disproportionate level of detail contained within papers for monthly meetings – given the level of update provided.</li> <li>- If meetings remain monthly - should consideration be given to holding one longer meeting, then one shorter meeting the following month?</li> <li>- Committee might also like to consider holding quarterly transactional meetings and then have</li> </ul> | Head of Corporate Governance                 | Workforce Committee<br>29 January 2020  | 26.6.19 – Board Committee reviews being considered by the Chair and Director of Governance & CA. Verbal update to be provided to August meeting<br><br>New Chair in post early May. <u>Update to Committee 29 May 2019:</u> Date for all Board Committee Reviews being considered by the Chair and Director of Governance and Corporate Affairs. Committee to note that further update will be |

| Date of Meeting | Agenda Item | Required Action   | Lead                  | Timescale                              | Comments/Progress   |
|-----------------|-------------|---|-----------------------|--|---|
|                 |             | <p>a 'subject-based' approach for additional monthly meetings.</p> <ul style="list-style-type: none"> <li>- Committee would benefit from wider membership. It would be beneficial for deputies to attend and present particular items</li> </ul> <p>These points would be shared with the Director of Governance and Corporate Affairs and the BTHFT Chair to support the review when it takes place.</p> |                       |  | <p>provided to Workforce Committee in June 2019.</p> <p>Feedback gathered from Committee in July regarding terms of reference. The review of all Board Committees to be scheduled once new CEO in post. Action to be revisited in January 2020.</p> |
| 25.9.19         | W.9.19.5    | <p><b>Risk ID 3263 Medical Devices H&amp;S Training</b></p> <p>There is further action to be completed.</p>   | Chief Nurse           | Workforce Committee<br>29 January 2020 |   |
| 7.11.19         | W.11.19.9   | <p><b>7 Day Service Self-Assessment Board Assurance Update</b></p> <p>Further work is needed to review those specialties below the 90% target and report back to the Workforce Committee on achievability and impact assessment.</p>  | Chief Medical Officer | Workforce Committee<br>27 May 2020     |   |