

MINUTES - WORKFORCE COMMITTEE

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| Date: | Thursday 29 January 2020 | Time: | 11:00 – 13:00 |
| Venue: | Conference Room, Field House, BRI | Chair: | Ms Selina Ullah, Non-Executive Director |

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| Present: | Non-Executive Directors: <ul style="list-style-type: none"> - Mr Jon Prashar, Non-Executive Director (JP) - Mr Amjad Parvez, Non-Executive Director (AP) - Ms Selina Ullah, Non-Executive Director (SU) Executive Directors: <ul style="list-style-type: none"> - Ms Pat Campbell, Director of Human Resources (PC) - Ms Karen Dawber, Chief Nurse (KD) - Dr Bryan Gill, Chief Medical Officer (BG) |
| In Attendance: | <ul style="list-style-type: none"> - Ms Tanya Claridge, Director of Governance and Corporate Affairs (TC) - Ms Sara Hollins, Head of Midwifery (SH), for W.1.20.10 - Ms Lily Hurford, Assistant Director of HR/Head of OD (LH) for W.1.20.11 |
| Observers | <ul style="list-style-type: none"> - Mr David Wilmshurst, Non-Executive Director (Observer) - Mr Barrie Senior, Non-Executive Director (Observer) |

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| W.1.20.1 | Apologies for Absence There were no apologies. | |
| W.1.20.2 | Declarations of Interest There were no interests declared. | |
| W.1.20.3 | Unconfirmed Minutes of the meeting held on 18 December 2019 The minutes were accepted as an accurate record of the 18 December 2019 meeting. | |
| W.1.20.4 | Matters Arising The following actions were closed: <ul style="list-style-type: none"> - W.12.19.13 Board Assurance Framework completed. - W.12.19.19 Workforce Committee Terms of Reference discussed by SU, PC and TC and completed. It was noted some issues were raised at the Council of Governors pre-meeting which will be picked up outside of this meeting. | PC |
| W.1.20.4.1 | Matters Arising from the Board of Directors There were no matters arising. | |
| W.1.20.4.2 | Matters Escalated from the Sub Committee There were no matters escalated. | |
| W.1.20.4.3 | Closure of Risk ID 3263 Medical Devices H&S Training KD advised this item was added to agenda for information as the Committee was made aware of the Risk previously by the Health & Safety Committee. The Committee was advised the Risk was reviewed at the last IGRC | |

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| | meeting where it was agreed sufficient plans and training are in place to enable the Risk is closed on the Strategic Risk Register. | |
| W.1.20.5 | Strategic Risks relevant to the Committee The Committee noted that 3350 and 3349 (WOS) were still showing on the register. TC confirmed that it was agreed at IGRC that these risks were closed. She advised that the system will be updated before the next IGRC and Committee meetings to remove the risks. | |
| W.1.20.6 | Board Assurance Framework It was agreed that overall it would appear that the position is positive and moving in the right direction. The confirmed position would be considered at the end of the meeting following consideration of the agenda items. | |
| W.1.20.7 | Workforce Committee Dashboard PC presented the Dashboard and advised the full Workforce report will be provided at the next meeting. The Committee discussed and noted the following: <ul style="list-style-type: none"> - <u>Junior Doctors' Rota</u> - changes were discussed in length at the recent Education & Workforce Sub-Committee meeting in light of the contractual changes required from February and August. The rotas where there are potential compliance issues in relation to frequency of weekend working will be covered in the workforce report provided at the next meeting. PC also advised the Education & Workforce Sub-Committee did not feel this was a significant enough issue to be included on the Corporate Risk Register at this stage but asked the Committee to note that it will be reviewed at the next Education & Workforce Sub-Committee in February. - <u>Staff Friends and Family</u> - There is no update to this data as this is not run in Q3 due to the NHS Staff Survey. - <u>Staff Survey Results</u> - The benchmark report which will pick up the indicators for Q3 will be received under embargo on 31st January 2020 with the results being released publically on 18th February 2020. A full report will be provided to the Committee in March 2020 with verbal headlines provided at the February meeting. - Appraisals - The Trust fell short of the 95% target for completed appraisals by 51. All areas with the exception of Unplanned Care met the target of 95%. A formal review of the appraisal process is being undertaken with a paper going to SLT in March containing proposals for the process going forward, and part of this will focus on the timings within the process. New for this year applicable to new starters only is in relation to automatic pay progression under the Agenda for Change where people can only progress if their Manager has undertaken a Step Change meeting and review. The onus on it being the member of staff's responsibility for ensuring they have an appraisal was discussed. - <u>Maternity 'One to One Care'</u> - Discussion took place around maternity patients receiving 1:1 care and it was agreed that BTHFT needed to be clear about the definition as it was currently open to interpretation. The Committee noted that this would be discussed in detail under agenda item W.1.20.10 Bi-annual midwifery staffing review - <u>Use of Agency Staff</u> – This remains stable and spend continues to be under the ceiling cap. - <u>Staff Turnover/Vacancies</u> - Both staff turnover and vacancies saw an increase in December, however the Trust does normally see a higher | PC |

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| | <p>number of leavers than starters in December. BTHFT also had the TUPE transfer of pharmacy staff to Bradford District Care Trust in December 2019. This is an area to be kept under review to see if the trend continues upwards in January. There have already been a high number of new starters this month.</p> <ul style="list-style-type: none"> - <u>Sickness Absence</u> - Short-term sickness absence continues to increase slightly month on month, however Unplanned Care and Corporate Services are under the 4.5% sickness target. Planned Care and Estates and Facilities are over target. The highest sickness level was seen in the Health Care Assistants and Therapy Assistants group. Focussed work will be undertaken in relation to this and reported back to the Committee in three months' time. - <u>Flu Vaccinations</u> - The most up to date figure is 71.4%. It is becoming very challenging to get compliance from the remaining staff and a letter has been sent to staff from KD and BG. PC advised that she understood the target for 2020/21 is 90% which will be very difficult to achieve. The most common reason for declining the vaccination is concern about side effects. PC also advised there will be a big focus on flu during the Work as One week targeting the low uptake areas which are Estates and Facilities staff and some other areas within Planned and Unplanned Care. <p>The Committee noted the report and discussions.</p> | PC |
| W.1.20.8 | <p>Nurse Staffing Data Publication Reports – November & December</p> <p>KD advised the Committee that she would default to the December report which provided the current position. The Committee's discussion focussed on the following:</p> <ul style="list-style-type: none"> - The increasing trends in incidents reported as 'nil or more harm' cited in relation to the level of staffing and also; a trend in the increasing number of falls on wards 25 and 31, areas that have always had a high number of falls due to the patient profile. KD advised that two exception reports will be considered by the Patient Safety Committee – one with regard to Patient Safety Incidents and one with regard to falls on wards 25 and 31. KD added that in response safety huddles have already been established and she was in discussions with the Assistant Chief Nurses to drill down on the analysis of the data presented. She asked the committee to note that additional pressures have also resulted from the opening of an additional Ward in January which has caused a pull on resources. - KD referred to the focus being placed on recruitment in particular which will be picked up in the next agenda item in more detail. The Committee noted that the Trust has seen an increase month on month in nursing staff turnover although the Trust still benchmarks well with regard to retention rates. - HCA vacancy rates are rising. This has been reviewed and it has been concluded that, in line with the apprenticeship routes the entry requirements for HCAs is quite high. This is also resulting in less applications being received for Associate Nurse training. KD stated that the Trust is seeking to address this by supporting potential applicants in achieving the requisite Maths and English qualifications to allow them to | |

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| | <p>move on to the next element of training.</p> <ul style="list-style-type: none"> - The Trust is also looking at international recruitment with the University which is keen to encourage applications from international students due to the benefits available. - A partial bursary will be reinstated from September 2020 for student nurses and midwives which was particularly good news. <p>SU stated that clearly a number of issues had been identified with regard to incident reporting. She noted the further detailed analysis to be undertaken and it was agreed that the Committee would review further reports to see if the interventions put in place would reflect improvements to the figures. SU asked the Chief Nurse when the Committee could expect a report on the outcomes from the 'deep dives' undertaken. KD confirmed this was going to the Patient Safety Committee.</p> <p>The committee noted the report.</p> | KD |
| W.1.20.9 | <p>Nursing Recruitment & Retention action plan</p> <p>KD provided a comprehensive overview of the report and asked the Committee to note the large volume of work underway with regard to retention. The key points noted were:</p> <ul style="list-style-type: none"> - The retention position is positive when considered in relation to the benchmarking data. - With regard to recruitment the Trust has recognised that a step change is required and the Trust is considering an international recruitment drive. A report will be presented to the Executive Team at the end of February with particular consideration of the cost implications. NHS Employers have also recently issued new guidance with regard to international recruitment which the Trust is also taking note of. <p>SU referred to the exit interviews undertaken and the themes that seemed prevalent which were that a number of staff were leaving the Trust due to 'a lack of career options'. The Committee discussed in detail the exit interview questions and agreed that staff might benefit from having the option of the interview being conducted by an independent person so that they have the opportunity to raise any concerns that they might not wish to share directly with their line manager. The Committee noted that this option was available however it was not overtly stated within the standard leaver's letter. PC agreed that the letter would be reviewed to make it explicit that the option was available to conduct an exit interview with a member of staff in HR if required.</p> <p>The Committee noted the report, recommendations and the actions in place.</p> | PC |
| W.1.20.10 | <p>Bi-annual midwifery staffing review</p> <p>SU welcomed SH to the meeting. She advised that the annual midwifery staffing review was required as a condition of the Maternity Incentive Scheme. The format of the report is prescribed which does make it difficult to read. SH explained that there was a set formula with regard to the reporting to meet the standard to demonstrate that the Trust has a systematic process in place to calculate Midwifery Staffing and, that the</p> | |

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| | <p>Maternity Unit meets best practice on deploying its workforce.</p> <p>SH advised the Committee that the timing of the writing of the report coincided with the CQC inspection. Two key areas of concern were raised by the CQC regarding staffing and 'one to one care' in labour. What was presented in the PIR (a staffing ratio of 1 to 25) seemed to conflict with the outcomes from the conversations the CQC held with Midwives who had reported that they were short staffed and routinely needed to redeploy staff from other areas to make the service safe. SH explained the requirements for reporting with regard to the 'midwife to birth ratio' adding that the ratio did not require reporting with regard to absence and sickness amongst staff.</p> <p>KD stated that the second concern raised by the CQC related to 'one to one care in labour'. SH explained that the methodology used is derived from 'birthrate plus' which is the only midwifery staffing acuity tool available. The Trust commissioned the full tool in 2017 which involved the team undertaking a full analysis of risk factors, data calculations and determining what the establishment should be. All recommendations were implemented and achieved over the following year. The tool has not been used in full since that time. Presently the team utilises; the table top methodology available from birthrate plus, professional judgement and also 'red flag indicators with regard to measuring 'harm across the service in direct response to staffing levels'.</p> <p>KD stated that there was acknowledgement and acceptance of what the CQC has said particularly with regard to 'one to one care' in labour. SH stated that the service has again undertaken the birthrate plus table top exercise which has reflected the same results as previously. However, in applying professional judgement it has been determined that the service would benefit from having one additional midwife per shift on the intrapartum areas. SH also advised that a piece of work has been undertaken to review the consistency of midwives applying 'one to one care' in labour. SH commented that it has become apparent that there is some confusion amongst midwives with regard to 'continuity of care' and 'one to one care'. She described the focussed work taking place to establish clarity on what 'one to one care' means, being clear about the information that is recorded and, reaching a consensus as to which data reporting system should be used to provide the most reliable position. SH added that a notes audit will be undertaken in March 2020 to review the position following these interventions.</p> <p>KD directed attention to appendix three of the report which provided detailed information with regard to the Midwifery Funded Establishment and the roster configuration which reflected the number of staff within Maternity Services at any given point in time - including additional staff rostered with regard to theatres.</p> <p>The committee further discussed</p> <ul style="list-style-type: none"> - the daily birth rate - Plans to address environmental factors to improve the care of women, many of whom fell into high risk groups. - The focus on reducing long term sickness absence and the success in this area, however noting that short term sickness absence was beginning to rise. The Committee noted that with regard to | |

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| | <p>benchmarking information from the Model Hospital BTHFT was not an outlier with regard to sickness absence and appeared within one of the better quartiles.</p> <ul style="list-style-type: none"> - The work planned in February with HR and the Royal College of Midwives which would focus on the concerns of midwives and the actions that could be put in place to address with the outcomes from this expected to be available in July 2020. <p>BG stated that the focus over the last few years has been on Midwifery staffing and not Medical staffing however the two groups do work in partnership. The consequences of increased acuity levels meant that there is a need for more doctors. He informed the Committee that a review was currently underway with regard to increasing the Medical establishment. The recommendations from the review would shortly be presented to the Executive Management Team. He further referenced a key piece of work underway with regard to the longer term vision for Maternity which would be brought to the Board.</p> <p>The Committee confirmed its support for the recommendations presented within the report and further confirmed that it derived assurance from the report received.</p> <p>SU thanked SH for her report and SH left the meeting.</p> | |
| W.1.20.11 | <p>CBU Development Programme update</p> <p>SU welcomed LH to the meeting. LH advised that the CBU programme was commissioned by the Chief Operating Officer who had requested the development of a programme that would consider requirements with regard to the skills, knowledge and capabilities of staff to enable the CBU structure to work and support the development of a high performing culture.</p> <p>LH delivered the presentation to the committee.</p> <p>In response to questions raised LH explained that the programme sought to offer something tangible and real to participants and as such the programme incorporated experiential learning. With regard to Talent Management this was linked to the appraisals and the training will cover how staff would engage in career development discussions as part of the programme. The outcomes from these will inform what the Trust does in terms of its investment in people. This would be undertaken in a more structured and considered manner.</p> <p>The Committee noted the schedule for the delivery of the programme, the elements that have already been delivered, the gathering of feedback and the inclusion of corporate services within the roll out programme.</p> <p>BG commented that this was impressive and a credit to LH and the organisational development team. He added that the feedback from the new consultants' development programme has been immensely positive.</p> <p>LH stated that new members of the organisational development team had been appointed which increased capacity to do more. She asked the Committee to note that with regard to the CBU programme; it was not</p> | |

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| | <p>mandatory however they sought to ensure that the required staff were strongly encouraged to participate. PC confirmed that new managers would be required to go on the programme. She added that as a priority the programme is working through staff within both Planned and Unplanned Care and ensuring that the places are filled.</p> <p>SU thanked LH for the comprehensive update. LH left the meeting.</p> | |
| W.1.20.12 | <p>Confirmed minutes of the Education and Workforce sub-committee October 2019</p> <p>SU stated that the minutes provided assurance with regard to the items that had been discussed and considered in detail. The Committee noted and accepted the minutes.</p> | |
| W.1.20.13 | <p>Board Assurance Framework</p> <p>SU stated that the Committee had discussed in detail the items contained within the BAF for the Committee, had reviewed the strategic risk register and considered in detail all items presented on the agenda. The Committee confirmed that it had derived assurance from the reports received and discussions held with regard to the:</p> <ul style="list-style-type: none"> - Bi-annual Midwifery Staffing Review - CBU leadership programme <p>The Committee noted the overall position with regard to Nurse Staffing. Whilst the position with regard to retention was positive the position with regard to recruitment was of concern. The Committee was in agreement that a step change was needed and noted the actions to be taken with regard to international recruitment. The Committee was sighted on the actions and would review again at the next meeting.</p> | |
| W.1.20.14 | <p>Draft Chair's Report to AAC - The Conduct and Function of the Workforce Committee January 2019 - January 2020</p> <p>The Committee discussed the content of the report. It was noted that the report would be presented to the Audit and Assurance Committee (AAC) on 4 February 2020. Following that meeting feedback would be from the AAC with the final version of the report presented to the AAC at its meeting scheduled in April 2020.</p> | |
| W.1.20.15 | <p>Any Other Business</p> <p>There was no other business discussed.</p> | |
| W.1.20.16 | <p>Matters to share with other Committees</p> <p>There were no other matters to share with other committees.</p> | |
| W.1.20.17 | <p>Matters to Escalate to the Strategic Risk Register</p> <p>No matters were raised for escalation to the Strategic Risk Register.</p> | |
| W.1.20.18 | <p>Matters to Escalate to the Board of Directors</p> <p>There were no other matters to share with the Board.</p> | |
| W.1.20.19 | <p>Items for Corporate Communications</p> <p>There were no items for Corporate Communications.</p> | |
| W.1.20.20 | <p>Agenda items for the Workforce Committee scheduled 26 February</p> | |

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| | 2020 The agenda was reviewed and accepted by the Committee. | |
| W.1.20.21 | Date and time of next meeting 26 February 2020 11:00-12:30 | |



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

| Date of Meeting | Agenda Item | Required Action | Lead | Timescale | Comments/Progress |
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| 27.03.19 | W.3.19.17 | <p>Committee Review</p> <p>The following should be noted and form part of the review.</p> <ul style="list-style-type: none"> - The necessity of having monthly meetings of the Workforce Committee - The disproportionate level of detail contained within papers for monthly meetings – given the level of update provided. - If meetings remain monthly - should consideration be given to holding one longer meeting, then one shorter meeting the following month? - Committee might also like to consider holding quarterly transactional meetings and then have a 'subject-based' approach for additional monthly meetings. - Committee would benefit from wider membership. It would be beneficial for deputies to attend and present particular items <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> | Director of Governance and Corporate Affairs | 26 February 2020 | <ul style="list-style-type: none"> - <u>26.6.19</u> – Board Committee reviews being considered by the Chair and Director of Governance & CA. Verbal update to be provided to August meeting. - New Chair in post early May. - <u>Update to Committee 29 May 2019:</u> 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 provided to Workforce Committee in June 2019. - 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. - <u>29 Jan update.</u> Board Committee review to begin on 27 January. Outcomes to be reported to Committee at end of February and to Board in March 2020. TORs and Workplan to be updated in line with outcomes from review. - <u>26 February 2020.</u> Committee self-assessment added to the agenda. |
| 29.01.20 | W.1.20.4 | <p>Matters Arising: Issues raised by Governors</p> <p>It was noted some issues were raised at the Council of Governors pre-meeting which will be picked up outside of this meeting.</p> | Director of Human Resources | 26 February 2020 | |

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| 29.01.20 | W.1.20.7 | Workforce Committee Dashboard: Staff Survey Results A full report will be provided to the Committee in March 2020 with verbal headlines on outcomes from the Staff Survey provided at the February meeting. | Director of Human Resources | 26 February 2020 | Report brought forward to February Committee |
| 29.01.20 | W.1.20.9 | Nursing Recruitment & Retention action plan PC agreed that the letter would be reviewed to make it explicit that the option was available to conduct an exit interview with a member of staff in HR if required. | Director of HR | 26 February 2020 | |
| 18.12.19 | W.12.19.9 | Equality & Diversity Update To consider how we work with other organisations to raise the profile of the BAME work undertaken at BTHFT. | Director of Human Resources | 29 April 2020 | To be taken forward with the new Head of Equality and Diversity |
| 29.01.20 | W.1.20.7 | Workforce Committee Dashboard: Sickness Absence - The highest sickness level was seen in the Health Care Assistants and Therapy Assistants group. Focussed work will be undertaken in relation to short term sickness absence and reported back to the Committee in three months' time. | Director of Human Resources | 29 April 2020 | |
| 29.01.20 | W.1.20.8 | Nurse Staffing Data Publication Reports – November & December Detailed analysis to be undertaken with regard to rise in incident reporting. The Committee to receive a report to see if the interventions put in place reflect improvements to the figures. Reporting to Patient Safety Committee | Chief Nurse | 25 March 2020 | |



Bradford Teaching Hospitals
NHS Foundation Trust

| Date of Meeting | Agenda Item | Required Action | Lead | Timescale | Comments/Progress |
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| 7.11.19 | W.11.19.9 | 7 Day Service Self-Assessment Board Assurance Update Further work is needed to review those specialties below the 90% target and report back to the Workforce Committee on achievability and impact assessment. | Chief Medical Officer | 27 May 2020 | |