

<b>Meeting Title</b>	<b>Board of Directors</b>		
<b>Date</b>	<b>10 March 2022</b>	<b>Agenda item:</b>	<b>Bo.3.22.12</b>

## Report from the Chair of the People Academy

<b>Presented by</b>	Karen Walker, Non-Executive Director, Chair of the Academy		
<b>Author</b>	Katie Shepherd, Corporate Governance Manager		
<b>Lead Director</b>	Pat Campbell, Director of Human Resources		
<b>Purpose of the paper</b>	To provide a summary of the discussions and outcomes from the People Academy briefing meeting held on 26 January 2022		
<b>Key control</b>	This report is relevant to Strategic Objective 3: To be in the top 20% of Employers in the NHS.		
<b>Action required</b>	To note		
<b>Previously discussed at/ informed by</b>	People Academy 26 January 2022		
<b>Previously approved at:</b>	<b>Committee/Group</b>	<b>Date</b>	
	N/A		

Key Matters Discussed
<p><b>Due to operational pressures being experienced at the time and in line with the ‘reducing burden’ guidance received from NHS England and Improvement, the Academy held a briefing meeting in January 2022 with a shortened agenda and a limited audience.</b></p> <p><b>1. Staff Sickness Absence</b></p> <p>The highlights of the report were:</p> <ul style="list-style-type: none"> <li>The daily absence report indicated that there had been an increase in COVID-19 related staff absence since December 2021, and although the levels seen weren’t as high as previous COVID-19 waves, the rate wasn’t reducing as quickly as seen in previous waves.</li> <li>COVID-19 related staff absence had been present since the start of the COVID-19 pandemic in March 2020.</li> <li>The Trust reported that on 25 January 2022, 572 staff were absent from work due to sickness, 232 of which were COVID-19 related; therefore it was reported that the Trust continued to see a high number of non-COVID-19 related absence.</li> <li>The rolling sickness absence for 2021/22 had not dipped lower than 6%. Two years ago the Trust reported a rolling average of 5% sickness absence.</li> <li>Long-term sickness absence (absence over 28 days) is continuing to reduce.</li> <li>Short-term sickness absence had increased significantly since November 2021. There had been a recent change in sickness absence self-certification requirements which meant that staff were only required to provide a ‘fit note’ from a doctor from day 28 of any period of sickness absence. Previously the requirement had been from day 8 of any period of sickness absence. Reasons for increase in short-term sickness were discussed.</li> <li>The top three reasons for absence were anxiety/stress/depression/other psychiatric illness, following by infectious diseases and other known causes.</li> <li>The Trust reported 7.45% sickness absence for December 2021. The year-to-date position was 6.42%.</li> <li>The highest sickness absence rates were seen within the ‘Additional Clinical Services’ staff group, although it was noted that there had also been high sickness absence rates from registered nurses.</li> <li>It was noted that in addition to sickness absence leave, there was also the impact of</li> </ul>

Meeting Title	Board of Directors		
Date	10 March 2022	Agenda item:	Bo.3.22.12

maternity leave and carers leave to consider when looking at available staff.

- Assurance was provided that monthly reports were sent to matrons on the number of hours worked by staff to ensure compliance with working time regulations.

The Academy noted the update.

## 2. Looking after our People

The highlights of the report were:

- The Trust continued to provide health and wellbeing support to colleagues as a key strand of the NHS People Plan, aimed at retaining the workforce and ensuring colleagues were supported and have the best experience as possible at work.
- It was advised that the Management of Attendance Policy would be reviewed.
- The Trust reported that 50% of the workforce had received the flu vaccination, a reduction on the previous year's uptake. It was anticipated that the reluctance was due to colleagues prioritising the COVID-19 vaccination over the flu vaccination due to the low reports of flu over the winter period.
- The West Yorkshire Health and Wellbeing Hub had seen 325 referrals in the previous year, however only 17% of those were from Bradford (BTHFT and BDCT).
- A counselling service was available for colleagues through the employee assistance programme.
- Colleagues had access to Occupational Therapy, a Psychologist and a Cognitive-Behavioural Therapy (CBT) Therapist on site.
- It was agreed that the report from the Improvement Academy would be presented to the People Academy at the February 2022 meeting, titled: Beyond Demoralised Listening and responding to NHS frontline staff in everyone's business. **Post meeting note: deferred to March meeting.**

The Academy noted the update.

## 3. Vaccine as a Condition of Deployment (VCOD)

The Academy received an update on VCOD. The highlights of the report were:

- Regulations will take effect from 1 April 2022, however all 'in-scope' workers would be required to have received their first COVID-19 vaccination by 3 February 2022 in order to have received the second COVID-19 vaccination by 31 March 2022.
- Workers that are exempt from receiving the COVID-19 vaccination must provide evidence of this by 31 March 2022.
- There had been data challenges due to the different places that colleagues could attend to receive the COVID-19 vaccination and how this was recorded.
- The latest national data indicated that 95% of Trust staff had received their first COVID-19 vaccination, and 91% of Trust staff had received their second COVID-19 vaccination. There were c. 450 members of staff that it was either unknown if they had received a COVID-19 vaccination, or were unvaccinated. Areas where we had high numbers of unvaccinated staff or unknowns were discussed.

The Academy noted the update.

## 4. Staffing Assurance Framework for Winter 2021 Preparedness

- NHSE/I had published guidance on nursing and midwifery safer staffing, which requires Trust's to provide evidence of preparedness, decision-making and escalation process to

<b>Meeting Title</b>	<b>Board of Directors</b>		
<b>Date</b>	<b>10 March 2022</b>	<b>Agenda item:</b>	<b>Bo.3.22.12</b>

support safer nursing and midwifery staffing.

- The Trust continued to review the guidance received, and as part of this had reviewed the staffing related risk which included recompleting the risk assessment using key information from the framework.
- The two risks relating to staffing: Risk ID 3489: a risk that staff will have a poor experience; and, Risk ID 3404: a risk that patient safety could be impacted due to staffing; would be closed. A new risk would be added that would reflect the revised risk assessment and mitigations.
- Staffing huddles continue to take place three-times each day, chaired by the Associate Director of Nursing to monitor staffing levels against acuity continually.
- Colleagues had been redeployed to support clinical areas.
- Oversight of staffing was provided externally to CQC and at a system level.
- During the last month, senior nursing support has been increased in areas to provide support, assurance and to mitigate any identified risk.
- It was expected that the Trust had in place all that was expected as part of the recommendations; however work continued to confirm this, against the four categories of recommendations. The categories were: staffing escalation/surge and super surge plans, operational delivery, daily governance and board oversight and assurance.
- Prior to the COVID-19 pandemic, work was undertaken to identify what were safe levels of staffing. It was advised that currently, wards were staffed at the minimum requirement to provide safe levels of care.
- It was reported that there was an increase in grade-2 hospital acquired pressure ulcers during December 2021, and there had been an increase seen in falls on the care of the elderly ward. These were environmental related challenges due to the movement of wards due to COVID-19. It was noted however that there had not been an increase in harms and that the Trust was providing safe care; although the pressures were impacting on patient experience.
- The use of volunteers had been helpful in providing support to patients.

The Academy noted the update.

## 5. High Level Risks to the Academy

The Academy received the high level risks relevant to the Academy. These were:

- Risk ID 3489: a risk that staff will have a poor experience.
- Risk ID 3171: a risk that children will deteriorate/come to harm due to a lack of staff capacity.
- Risk ID 3404: a risk that patient safety could be impacted due to staffing; would be closed.

A new risk would be added to the risk register relating to VCOD.

## Items of Positive Assurance, Learning and/or Improvement

The Trust continued to provide health and wellbeing support to colleagues as a key strand of the NHS People Plan, aimed at retaining the workforce, and ensuring that colleagues were supported and have the best experience as possible at work.

## Matters escalated to the Board of Directors for consideration

It was agreed that the Board should be sighted on:

- The risks associated with staffing,
- The guidance published by NHSE/I on nursing and midwifery safer staffing levels,

<b>Meeting Title</b>	<b>Board of Directors</b>		
<b>Date</b>	<b>10 March 2022</b>	<b>Agenda item:</b>	<b>Bo.3.22.12</b>

- The risk to quality of care and patient experience due to staffing levels.

#### **New/emerging risks**

A new staffing related risk would be added to the risk register that would reflect the revised risk assessment and mitigations following the receipt of the guidance from NHSE/I on nursing and midwifery safer staffing.

Whilst not yet closed, the two risks relating to staffing: Risk ID 3489: a risk that staff will have a poor experience; and, Risk ID 3404: a risk that patient safety could be impacted due to staffing; would be closed once the above new risk was added to the risk register.

A new risk would be added to the risk register relating to the regulation for vaccination as a condition of deployment.

#### **Recommendation**

The Board of Directors is requested to note the discussions, actions and outcomes from the People Academy briefing session held on 26 January 2022.