

PEOPLE ACADEMY MINUTES

Date:	28 th September 2022	Time:	1100 - 1300
Venue:	Microsoft Teams meeting	Chair:	Ms Karen Walker, Chair & Non-Executive Director (KW)
Present:	<p>Non-Executive Directors:</p> <ul style="list-style-type: none"> - Mr Altaf Sadique, Non-Executive Director (ASa) - Mr Jon Prashar, Deputy Chair & Non-Executive Director (JP) - Ms Sughra Nazir, Non-Executive Director (SN) <p>Executive Directors:</p> <ul style="list-style-type: none"> - Ms Pat Campbell, Director of Human Resources (PC) - Dr Ray Smith, Chief Medical Officer (RS) - Ms Abbie Wild, Chair of Staff LGBT Network (AW) - Ms Amanda Hudson, Head of Education (AH) - Mr Amandeep Singh, Partnership Lead (AS) - Ms Catherine Shutt, Head of Organisational Development (CS) - Mr David Smith, Director Of Pharmacy (DS) - Mr Faeem Lal, Deputy Director of HR (FL) - Ms Jane Kingsley, Lead Allied Health Professional (JK) - Ms Joanne Hilton, Assistant Chief Nurse (JH) - Mr Kez Hayat, Head of Equality, Diversity and Inclusion (KH) - Ms Laura Parsons, Associate Director of Corporate Governance/Board Secretary (LP) - Ms Louise Robinson, Enable Staff Network Representative (LR) - Mr Mark Holloway, Director of Estates & Facilities (MH) - Ms Rachel Waddington, Deputy Director of Operations (RW) - Ms Rukeya Miah, Chair of Staff RESIN Network (RM) 		
Observing	- Mr Adrian Cresswell, Public Governor (AC)		
In Attendance:	<ul style="list-style-type: none"> - Ms Caroline Nicholson, Head of Non-Clinical Risk (CN) for agenda item PA.9.22.10 - Ms Fiona Purdie, Lead Psychologist for Staff Support (FP) for agenda item PA.9.22.12 - Ms Katie Shepherd, Corporate Governance Manager (KS) - Ms Linda Preston, Executive Assistant (LAP) (minutes) 		

Agenda Ref	Agenda Item	Actions
PA.9.22.1	Apologies for Absence	
	<ul style="list-style-type: none"> - Ms Karen Dawber, Chief Nurse (KD) - Ms Amanda Grice, Workplace & Health Well-being Centre Manager (AG) - Mr David Hollings, Deputy Chief Digital and Information Officer (DH) - Ms Sara Shiroda, Chair of Enable Staff Equality Network (SS) <p>Absent</p> <ul style="list-style-type: none"> - Mr Chris Smith, Deputy Director of Finance (CS) 	

	- Ms Jacqui Maurice, Head of Corporate Governance (JM) KW formally welcomed AC to observe the meeting.	
PA.9.22.2	Declarations of Interest	
	There were no interests declared.	
PA.9.22.3	Draft Minutes of the Meeting Held on 27th July 2022	
	The minutes of the meeting held on 27 th July 2022 were approved as an accurate record of the meeting.	
PA.9.22.4	Matters Arising	
	There were no matters arising to be discussed.	
PA.9.22.5	People Academy Dashboard	
	<p>PC brought the Academy's attention to the key areas of note in the updated circulated Dashboard in relation to medical appraisals, non-medical appraisals, core mandatory training, staff turnover, staffing and staff sickness absence.</p> <p>In relation to a query from SN regarding a new mandatory training requirement from CQC around interacting and communicating with people with learning disabilities and autism, AH said this is being worked on with the team to define what the training materials will be and how the results of the training will be included in the metrics being reported. AH explained any new requirements are given a six to twelve month lead time before being reported on.</p> <p>SN also asked what workaround is being used in relation to Moving and Handling training due to staff shortages because of sickness and vacancies still to be filled, and asked if we would consider external providers to deliver the training to ensure patient safety. AH advised the gaps in this training as a result of the pandemic are in relation to refresher/update training only and any new joiners to the Trust undertake it as part of their induction. External providers are not used to deliver this training and where there are gaps which cannot be filled internally, other options are used such as e-learning, leaflets and posters etc.</p> <p>JH also added that the Trust's Integrated Safeguarding Group is constantly monitoring the training levels and looking at ways of doing different types of activity which evidence Level 3 compliance. This can include inviting external speakers to deliver the training.</p> <p>The Academy noted the update.</p>	
PA.9.22.6	High Level Risks Relevant to the Academy	
	<p>PC referred to the Risk Register excerpt circulated and confirmed there are no new risks, no risks changed in score, and no closed risks aligned to the Academy.</p> <p>This agenda item was revisited later in the meeting when AS asked what the plan is in terms of mitigating some of the risks in relation to burnout and fatigue experienced by medical trainees. RS advised good communications exist with Health Education England (HEE), and therefore the Trust is aware of any trainees identified as having a particular need or mental health challenge in advance of their arrival, and individually tailored support packages are implemented</p>	

	<p>accordingly. There are also a number of Forums trainees can attend as groups such as the Guardian of Safe Working Hours Forum and Junior Doctors' Forum, and they also have representation at the Trust's Local Negotiating Committee (LNC).</p> <p>The Academy was assured by the updates provided.</p>	
PA.9.22.7	Internal Audit Report Action - Recruitment and Retention: NHS People Plan	
	<p>PC referred to the circulated Internal Audit report and advised that in relation to the high level recommendation the Workforce Growth and Transformation Group has recently reviewed its Terms of Reference and these were approved by the Academy. The Looking After Our People Group has also reviewed its Terms of Reference which the Academy hereby approved. PC confirmed the requirements of the Internal Audit recommendation are therefore satisfied.</p> <p>The Academy noted the update.</p>	
PA.9.22.8	Nursing Recruitment and Retention Plan incorporating Nursing and Midwifery Retention Staff Assessment Tool	
	<p>JH discussed the previously circulated paper and KW then mentioned other sessions taking place such as the Place based People Development sessions to help mitigate some of the issues being experienced.</p> <p>JH highlighted the Nursing and Midwifery Retention Staff Assessment Tool which had been published by NHS England. The toolkit was still to be completed and would be shared regionally and locally with Bradford District Care NHS FT and Airedale NHS FT. It was important to have a bundle of interventions in place to support retention rather than relying on a single approach.</p> <p>JP asked if there was anything further which can be done to enable the Trust to become a stronger employer of choice. PC said our recruitment practises need to be continually reviewed and work around attracting new recruits is being done at Place level as part of the Growing Our Workforce work plan.</p> <p>Further discussions took place around ensuring people feel valued and looked after in the workplace, creating a better work environment. ASa mentioned recruitment initiatives being undertaken in Leeds using the Halo programme, and AS commented on discussions with JNCC around pay, career progression and Personal Development Plans. RM conveyed her interest in cultivating and investing in the Trust's current workforce who will then remain and act as ambassadors. SN also shared feedback she has received in relation to HCA recruitment, the number of vacancies in that area and difficulties in filling them. AW also updated the Academy on a Workforce conference she recently attended and the work being undertaken by Helpforce, a volunteer to career organisation, and the midwife and associate apprentice roles. She also mentioned the Trust needs to have a larger presence at events such as Pride to encourage LGBT staff to join the Trust.</p> <p>In closing JH confirmed all the necessary processes are in place</p>	

	<p>around effective roster management for staff, and wellbeing checks at the beginning and end of the day. She continued new initiatives are welcomed and are looked into to support nursing recruitment and retention.</p> <p>The Academy noted the update.</p>	
PA.9.22.9	Review of People Academy Terms of Reference & Work Plan	
	<p>KW advised following the Academy effectiveness review held earlier in the year some changes have been made to the Terms of Reference, work plan and membership. LP then referenced the key changes made as detailed in the circulated paper.</p> <p>In relation to learning from other organisations, Employment Tribunals and Employment Relations, SN asked how we evidence in the work plan the learning from these. PC confirmed in relation to Employment Tribunals and Employment Relations we will pick this up through the quarterly Workforce Reports provided to the Academy. The learning from other organisations can be picked up when the staff survey results are reported on, however PC will consider how this can be considered across each area eg Workplace Civility, Nursing Recruitment and Retention etc to demonstrate these are being considered as an Academy. KW welcomed any examples of good practice to be fed in.</p> <p>The Academy noted the updates to the Terms of Reference and Work Plan.</p>	<p>Director of HR PA22029</p>
PA.9.22.10	Report / Minutes from Health & Safety Committee	
	<p>MH and CN gave a presentation and discussed the key points and highlights from the circulated papers, and in particular around the Risk Register work and the twice yearly Board updates in relation to the violence and aggression standards.</p> <p>KH shared his observations from an EDI perspective with regard to violence and aggression eg in relation to how staff are supported when they are victims of hate crime and how the information is recorded. It was agreed MH would ensure this information is being considered and noted correctly.</p> <p>KH also advised that an equality impact assessment has recently been undertaken with regard to evacuation procedures for staff requiring mobility support. MH stated he will have a discussion with the Fire Safety Manager to ensure the fire alarm action plan is implemented, and that it does sufficiently support disabled people in the event of an evacuation. JP suggested the assessment could be used as a case study for sharing so it can be seen how they can assist with impacting on safe working practises. He went on to say he is a member of the Health & Safety Committee and supports attendance from a staffing perspective, particularly around physical disability egress and risk assessment activity on a day to day basis. JP also asked for assurance that deaf colleagues have been considered in addition to those with physical disabilities in terms of fire alarms and evacuation. MH confirmed that all the fire alarm activations are visual as well as audible across the site and this is documented within the written procedures.</p>	<p>Director of Estates & Facilities PA22030</p> <p>Director of Estates & Facilities PA22031</p>

	<p>KH then asked if it would be beneficial for a representative of the Enable Staff Equality Network to attend the Health & Safety Committee meetings. MH confirmed this is welcomed and it was agreed KH will send MH a recommendation for consideration. KH queried if any EDI questions can be built into the Risk Assessment template and it was agreed LP would look into this.</p> <p>SN commented that the number of RIDDOR incidents seemed quite high though noted is less than reported in previous quarters. In relation to lone worker devices she asked if there was a target date for arrangements to be in place for staff. MH advised this is currently going through procurement however the delivery of the devices is being led by IT. This is an item being covered in the Exec to CSU meetings.</p> <p>The Academy noted the update.</p>	<p>Head of Equality, Diversity and Inclusion PA22032</p> <p>Associate Director of Corporate Governance/Board Secretary PA22033</p>
PA.9.22.11	Board Assurance Framework for Nurse Staffing	
	<p>JH confirmed nurse staffing is still included in the Risk Register and gave an overview of the circulated papers.</p> <p>She highlighted that whilst there has been an increase in Datix incidents and areas where there is only one Registrant on duty reported, it should also be noted that 97% of responses on the Quality and Safety Trigger Tool indicated that it was felt there was support in place for the teams.</p> <p>JH advised work continues to review processes in place and look for additional ways to improve, and additional roles such as discharge facilitation roles are being considered to support clinical areas.</p> <p>JH also asked for the Academy to consider the reporting of the safe staffing data and if this should be reported monthly.</p> <p>SN asked if the IQVIA report questions are pre-set and JH confirmed they are set by the Trust and can be changed if required. JH stated she will instigate a review of the questions as this is now due.</p> <p>The Academy took assurance from the update provided.</p>	<p>Director of Nursing PA22034</p>
PA.7.22.12	Looking After Our People – Occupational Health & Psychology Services for Staff and General Update on Looking After Our People Work Strands	
	<p>FP presented and expanded on the previously circulated slides, discussing how the in-house psychology service can offer unique and helpful staff support initiatives within the specific context of the impact of healthcare work on our people.</p> <p>FP explained that this support had been introduced in the context of the emotionally demanding work undertaken by healthcare staff which had been further compounded by the COVID pandemic, resulting in stress, mental health issues and burnout. The approach involved both preventative and response intervention measures, including an option for staff to have a 1:1 consultation and then further treatment if appropriate, and group based and 1:1</p>	

	<p>psychological first aid to support after traumatic events.</p> <p>Due to time constraints FP summarised that in terms of staff experience positive reactions, outcomes and high satisfaction have been seen with staff being seen within 10 days. FP has a transcript from a staff story available for those members of the Academy who wish to view it, and is happy to connect with Academy members individually if required.</p> <p>Due to AG being unable to attend the meeting, PC provided further information around the work being done by the Occupational Health service who work closely with staff psychology. PC will circulate further detail around the referral profile, timescales etc.</p> <p>The Academy noted the updates.</p>	<p>Director of HR PA22035</p>
PA.9.22.13	NHS Staff Survey Feedback Report	
	<p>In addition to the circulated paper CS confirmed good progress is being made.</p> <p>She highlighted that the Trust is involved with a national pilot for a career conversation tool called Scope for Growth, and train the trainer sessions are currently underway. The tool focusses on wellbeing and ongoing development being available to all in order to create a career progression plan, whilst recognising that this is not always linear.</p> <p>She also noted around 200 colleagues are now registered on the three leadership pathways with feedback received so far being very positive. The fourth and final leadership pathway for advancing leaders is currently in development.</p> <p>In relation to Thrive a lead has now been appointed which is bringing momentum and embedding the approach to Thrive into the Trust further. There have been over 60,000 visits to the portal since launch and planning for a celebratory Thrive Festival is underway.</p> <p>In consideration of financial wellbeing the Trust has partnered with Salary Finance which is a digital platform promoting financial wellness and offerings such as salary advance, affordable lending and advice on savings.</p> <p>CS also confirmed this year's staff survey has now been issued and asked the Academy members to encourage colleagues to complete it.</p> <p>The Academy noted the update.</p>	
PA.9.22.14	Workforce Civility Update	
	<p>CS reported good momentum is being gained on civility and the approach has now been approved. A launch will be held during week commencing 10th October in line with the Freedom to Speak Up for Civility week.</p> <p>The People Charter will be launched during week commencing 7th November.</p>	

	<p>Conversations have also commenced regarding how to get civility into simulation centre exercises with a view to this being piloted in A&E, and how to localise the charter eg through workshops.</p> <p>The Civility in the Workplace webinar is being refreshed and will also be accessible as a face to face offering early next year.</p> <p>A task and finish group led by KH has been set up with a focus on empowering managers. This work is focussing on developing tools for managers to deal with difficult situations or having difficult conversations.</p> <p>The Academy noted the update.</p>	
PA.9.22.15	AHP Strategic Workforce Plan	
	<p>JK referenced the previously circulated slides and confirmed there are 14 AHP professions in total, 8 of which are employed at Bradford Teaching Hospitals.</p> <p>Work funded by HEE has been undertaken looking at supply and demand of the AHP workforce to produce a Strategic Workforce Plan spanning the 18 months from April 2022 to October 2023. The key priorities have been determined as detailed on slide 4 of the presentation, with action plans and work now underway in relation to these.</p> <p>The Academy noted the update.</p>	
PA.9.22.16	Review of GMC Survey Feedback	
	<p>RS discussed the circulated paper highlighting key areas including the 80% response rate from post-graduate trainees in Bradford which signifies the results can be taken as representative.</p> <p>RS commended the education teams and those who deliver an educational experience to our trainees in very challenging circumstances, as evidenced by the ranking of Bradford Teaching Hospitals NHS Foundation Trust when looking at workloads.</p> <p>RS advised he has regular catch ups with the Trust's Employer Liaison Adviser from the GMC who made a point of being very complimentary on the survey results.</p> <p>The Academy noted the update.</p>	
PA.9.22.17	Any Other Business	
	There was no other business to discuss.	
PA.9.22.18	Matters to Share with Other Academies	
	There were no matters to share with other Academies.	
PA.9.22.19	Matters to Escalate to the Board of Directors	
	There were no matters to escalate to the Board of Directors.	
PA.9.22.20	Date and Time of Next Meeting	
	26 th October 2022, 1100–1300.	

PA.9.22.21	Internal Audit Reports	
	<ul style="list-style-type: none"> • Medical Revalidation • Board Assurance Framework for Nurse Staffing <p>The Academy took assurance from the reports provided.</p>	

ACTIONS FROM PEOPLE ACADEMY – 28th September 2022

Action ID	Date of meeting	Agenda item	Required Action	Lead	Timescale	Comments/Progress
PA22027	29.06.22	PA.6.22.16	Any Other Business JP suggested Non-Executive Director (NED) attendance at the Academy needs consideration. It was agreed KW and JP discuss this with Max McLean, the Chair of the Trust at the next NED meeting with him.	Non-Executive Director	27.07.22	JP advised this is in hand for discussion with Max McLean at the next NED discussion forum. 28.09.22 – to be discussed at the October NED discussion forum.
PA22029	28.09.22	PA.9.22.9	Review of People Academy Terms of Reference & Work Plan The learning from other organisations can be picked up when the staff survey results are reported on, however PC will consider how this can be considered across each area eg Workplace Civility, Nursing Recruitment and Retention etc to demonstrate these are being considered as an Academy.	Director of HR	26.10.22	Report authors to include learning from other organisations as appropriate in their regular reports. Closed.
PA22030	28.09.22	PA.9.22.10	Report / Minutes from Health & Safety Committee It was agreed MH would ensure information with regard to violence and aggression eg in relation to how staff are supported when they are victims of hate crime is being considered and noted correctly.	Director of Estates & Facilities	26.10.22	

Action ID	Date of meeting	Agenda item	Required Action	Lead	Timescale	Comments/Progress
PA22031	28.09.22	PA.9.22.10	Report / Minutes from Health & Safety Committee MH stated he will have a discussion with the Fire Safety Manager to ensure the fire alarm action plan is implemented, and that it does sufficiently support disabled people in the event of an evacuation.	Director of Estates & Facilities	26.10.22	
PA22032	28.09.22	PA.9.22.10	Report / Minutes from Health & Safety Committee KH then asked if it would be beneficial for a representative of the Enable Staff Equality Network to attend the Health & Safety Committee meetings. MH confirmed this is welcomed and it was agreed KH will send MH a recommendation for consideration.	Head of Equality, Diversity and Inclusion	26.10.22	
PA22033	28.09.22	PA.9.22.10	Report / Minutes from Health & Safety Committee KH queried if any EDI questions can be built into the Risk Assessment template and it was agreed LP would look into this.	Associate Director of Corporate Governance / Board Secretary	26.10.22	

Action ID	Date of meeting	Agenda item	Required Action	Lead	Timescale	Comments/Progress
PA22035	28.09.22	PA.9.22.12	Looking After Our People – Occupational Health & Psychology Services for Staff and General Update on Looking After Our People Work Strands Due to AG being unable to attend the meeting, PC provided further information around the work being done by the Occupational Health service who work closely with staff psychology. PC will circulate further detail around the referral profile, timescales etc.	Director of HR	26.10.22	The information is appended to these minutes at appendix 1. Action completed.
PA22034	28.09.22	PA.9.22.11	Board Assurance Framework for Nurse Staffing SN asked if the IQVIA report questions are pre-set and JH confirmed they are set by the Trust and can be changed if required. JH stated she will instigate a review of the questions as this is now due.	Director of Nursing	30.11.22	

Appendix 1

2022 Occupational Health Management Referral Activity and Mental Health Support Activity

Data Capture Period 01/03/2022 – 31/08/2022 for BTHFT staff

Data was obtained from the Occupational Health database focusing on BTHFT staff who had been assessed within the Occupational Health Service following formal referral by their manager or self-referral. These referrals were made to support staff who were either absent from work due to health reasons or were experiencing difficulties at work due to a health condition. Assessments are completed via telephone or face to face within the department.

Total Number of **Management Referral** appointments offered: **1001**

Total Number of appointments attended/completed: **878**

20% (174) of these cases were considered to be **work related**

67% (590) of these cases were considered **not to be work related**

114 cases were not coded

DNA rate 11.5%

Mental Health Referrals Received:

32% of all Management Referral Assessments were for **mental health** (MH) reasons (Total 279), these have been divided into work related (Fig 1) and non-work related (Fig 2) case types.

Fig 1

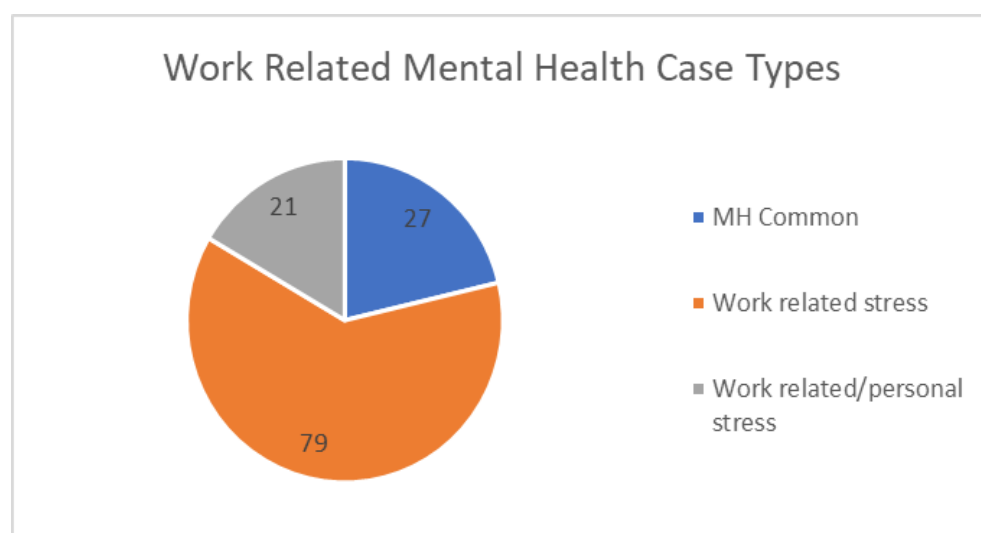
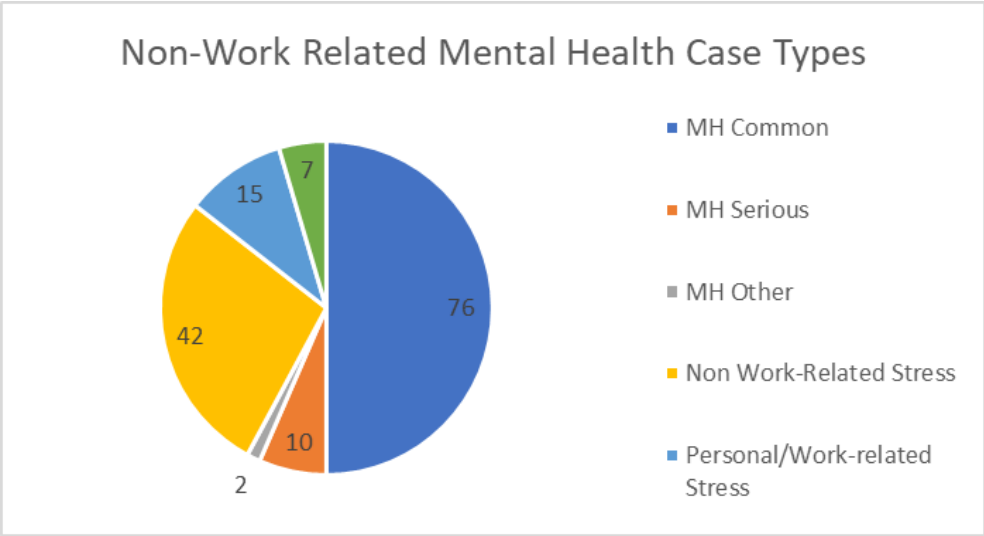
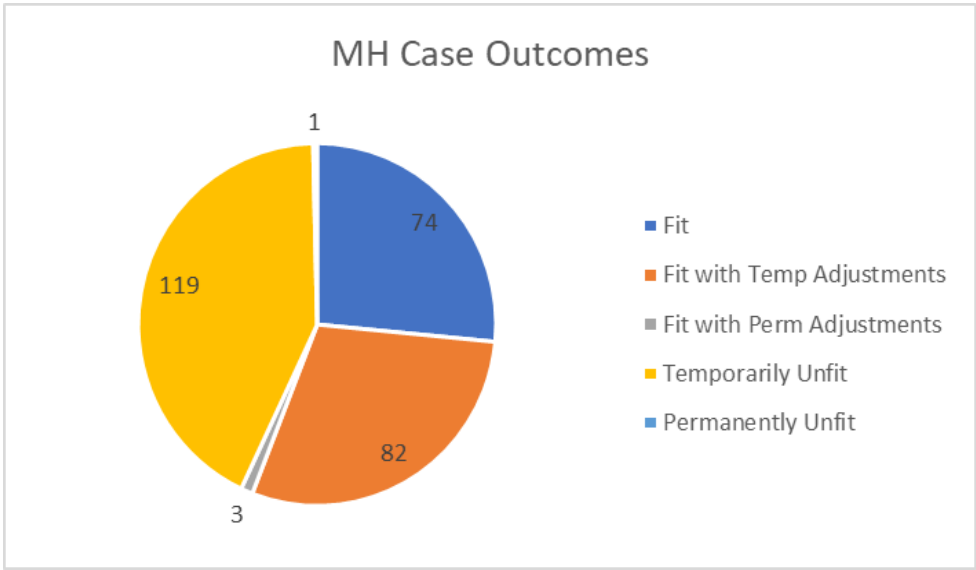


Fig 2



Outcomes from the mental health cases shows that over half of staff assessed were provided with advice/support that enabled OH to recommended them as being fit for work:

Fig 3



Current appointment availability for management referral assessments is 21 working days following receipt of referral. This is beyond our target of 7-10 working days but is based on existing resource. Urgent referrals are always prioritised and accommodated.

Additional mental health/wellbeing support in OH

Clinical Psychologists are based within the Occupational Health department offering assessment and on-going supportive therapy for staff with complex mental health issues. During the last six months **217** psychology appointments have been offered including **30** initial assessments. The average time to psychological assessment from point of referral by OH practitioner is 2 weeks.

A Specialist Occupational Therapist offers one to one assessments and interventions for staff members. Support includes activity diary planning, energy conversation, anxiety and stress education and

management, work-life balance advice and mindfulness-based work including breathing practices. During the last six months **107** OT appointments have been offered including **59** initial assessments.

TIME2PAUSE sessions have been delivered virtually, offering staff short, practical, focussed techniques and strategies to prevent build-up of stress, or minimise a stress response, in the workplace. Audio files have been added to THRIVE so staff can access these techniques at a time that suits them. The clinical psychologists have delivered 2 training sessions to clinical staff on well-being topics.