

PEOPLE ACADEMY MINUTES

Date:	26 th October 2022	Time:	1100 - 1300
Venue:	Microsoft Teams meeting	Chair:	Mr Jon Prashar, Deputy Chair & Non-Executive Director (JP)
Present:	<p>Non-Executive Directors:</p> <ul style="list-style-type: none"> - Mr Altaf Sadique, Non-Executive Director (ASa) - Ms Sughra Nazir, Non-Executive Director (SN) <p>Executive Directors:</p> <ul style="list-style-type: none"> - Ms Karen Dawber, Chief Nurse (KD) - Ms Pat Campbell, Director of Human Resources (PC) - Dr Ray Smith, Chief Medical Officer (RS) - Ms Abbie Wild, Chair of Staff LGBT Network (AW) – attended from 1230 - Ms Adele Hartley-Spencer, Director of Nursing (Operations) (AH-S) - Ms Amanda Grice, Workplace & Health Well-being Centre Manager (AG) - Ms Amanda Hudson, Head of Education (AH) - Ms Catherine Shutt, Head of Organisational Development (CS) - Mr David Smith, Director Of Pharmacy (DS) - Ms Jane Kingsley, Lead Allied Health Professional (JK) - Ms Katie Shepherd, Corporate Governance Manager (KS) - Mr Kez Hayat, Head of Equality, Diversity and Inclusion (KH) - Ms Laura Parsons, Associate Director of Corporate Governance/Board Secretary (LP) - Ms Sara Shiroda, Enable Staff Network Representative (SS) 		
Observing	<ul style="list-style-type: none"> - Ms Ruth Dunlop – NED Insight Placement (RD) 		
In Attendance:	<ul style="list-style-type: none"> - Ms Ifra Ahmed-Younis, Advanced Clinical Practitioner (IA-Y) for agenda item PA.10.22.5 - Ms Ruth Haigh, Equality, Diversity & Inclusion Manager (RH) for agenda item PA.10.22.8 - Ms Shahida Begum, Trainee Advanced Clinical Practitioner (SB) for agenda item PA.10.22.5 - Ms Tamsin Memery, Advanced Clinical Practitioner (TM) for agenda item PA.10.22.5 - Ms Linda Preston, Executive Assistant (LAP) (minutes) 		

Agenda Ref	Agenda Item	Actions
PA.10.22.1	Apologies for Absence	
	<ul style="list-style-type: none"> - Ms Karen Walker, Chair & Non-Executive Director (KW) - Mr Mark Holloway, Director of Estates & Facilities (MH) - Ms Amy Ilsley, Clinical Lead for Medical Workforce (AI) - Mr Amandeep Singh, Partnership Lead (AS) - Mr Faeem Lal, Deputy Director of HR (FL) - Mr James Taylor, Deputy Chief Operating Officer (JT) - Ms Joanne Hilton, Assistant Chief Nurse (JH) 	

	<p>Absent</p> <ul style="list-style-type: none"> - Ms Jacqui Maurice, Head of Corporate Governance (JM) - Ms Rukeya Miah, Chair of Staff RESIN Network (RM) <p>JP formally welcomed RD to the meeting.</p>	
PA.10.22.2	Declarations of Interest	
	There were no interests declared.	
PA.10.22.3	Draft Minutes of the Meeting Held on 28th September 2022	
	The minutes of the meeting held on 28 th September 2022 were approved as an accurate record.	
PA.10.22.4	Matters Arising	
	There were no matters arising to be discussed.	
PA.10.22.5	Staff Story	
	<p>AH provided background regarding the ACPs attending the meeting.</p> <p>SB shared details of her professional journey, aspirations of her nursing career, career development, and move into an ACP role since joining the Trust 20 years ago. She provided details of a Quality Improvement Project she has conducted, and a clinical care pathway she is currently developing to enable ACPs within the Trust to carry out their roles safely and competently, which will enhance the workforce skill mix in addition to improving patient experiences.</p> <p>IA-Y then gave details of her professional background in Urology and of her new ACP Urology role, of which she is the first and only incumbent in the Trust. She acknowledged the value of the peer support guidance she has received, particularly during the pandemic, and provided information in relation to the audits she is currently involved in to improve outcomes and assess practices. She also mentioned other opportunities she is currently undertaking such as the development of pathways available on Thrive.</p> <p>ASa asked if there was anything additional the Trust could have done to help smooth the pathway during their careers, and if there are any cultural barriers or challenges they have faced during their professional career journeys. Both IA-Y and SB confirmed the issues they had experienced in their training eg the amount of time allocated in the programme to being in practice and at university, have now all been dealt with, and excellent feedback is now being received from the new recruits undertaking the training. With regard to barriers SB noted other staff members have approached and discussed with her how they can undertake similar career development, and this may be an area they can expand and act as mentors for others.</p> <p>KD asked SB and IA-Y if they have considered reciprocal mentoring as the next stage in their careers. SB confirmed she is part of the Reciprocal Mentoring Scheme which she is finding a really positive experience. IA-Y said she is not currently part of the scheme.</p> <p>Thanks were given to the presenters, the contents of their</p>	

	presentations were noted, and it was agreed relevant points would be followed up as appropriate.	
PA.10.22.6	Workforce Growth and Transformation Sub-Group Update	
	<p>AH referred to the circulated papers explaining these have been refreshed based on the priorities across the Bradford District & Craven Health and Care Partnership workforce groups and priorities.</p> <p>The Academy approved the Terms of Reference and Work Plan.</p>	
PA.10.22.7	NHS People Plan / Strategy Work Plan	
	<p>PC referred to the papers and explained due to how the plan overlaps with the Staff Survey Action Plan, People Promise work and the WRES and WDES Action Plans a review of how reporting is undertaken will be carried out to avoid duplication.</p> <p>PC highlighted the following key areas:</p> <ul style="list-style-type: none"> • Work had progressed well in relation to civility in the workplace with the formation of a Project Board and Advisory Panel which is overseeing the delivery of a number of key objectives. • Progress in relation to looking after our people includes the new staff change facilities and improvements already made to staff rest facilities with further improvements planned. • In terms of health and wellbeing, following the appointment of a new Gym Manager, there will be a focus on physical activity for colleagues. <p>SN sought assurance on the recording of health and wellbeing conversations and how this could be improved. PC advised that the Trust appraisal paperwork had been revised to include wellbeing questions. CS added a one-to-one template is also being developed which will see health and wellbeing at the heart of the content. Appraisal training has now returned to face-to-face sessions with an increased number of sessions being held. Health and wellbeing is also now a key feature of the leadership programmes, and staff are encouraged to undertake regular informal wellbeing conversations and are signposted to Thrive appropriately.</p> <p>KD suggested managers be asked for feedback on how they undertake health and wellbeing conversations in order to identify when they are taking place, and enable the sharing more widely of the different ways that these can be done on a regular basis and the resources available.</p> <p>The Academy noted the update.</p>	
PA.10.22.8	Workforce Race Equality Standards (WRES) and Workforce Disability Equality Standards (WDES) / EDI Update Report / Action Plans	
	KH advised that following receipt of a national report, analyses have been undertaken of the existing WRES and WDES action plans focussing on improving overall performance, and raising the profile of equality, diversity and inclusion across the Trust for both patients	

	<p>and staff. Key areas of focus were:</p> <ul style="list-style-type: none"> • Increasing representation at Board level • Career development for clinical roles • Disparity ratio data for nursing and midwifery staff. <p>KH confirmed clear actions around these areas have been included in the action plans.</p> <p>KH also highlighted the key achievements in terms of WRES and WDES as shown in the circulated report. These include:</p> <ul style="list-style-type: none"> • Embedding and advancing EDI across the organisation by reviewing, refreshing and relaunching the work of the staff equality networks. • Focus on recruitment and selection ensuring the training includes the key requirements around ED&I. • Work undertaken in conjunction with Organisation Development (OD) around alignment of ED&I and civility in the workplace. • Development of an internal mediation service with benefits already being realised. • Disability Innovation Fund – Development of a staff video where six members of staff share their positive lived experiences of disability and how they are supported by the Trust. Positive feedback has been received on the video which is assisting in raising the profile of disability equality through the use and power of lived stories. • Launched the Reciprocal Mentoring Scheme targeting ethnic minority staff and staff with a disability or long-term health condition. • Meeting our 35% target of having a representative overall workforce. • The use of pronouns on email signatures which has been influenced by the LGBT network. <p>KH then discussed the changes made to the action plans and areas of focus going forward in conjunction with other departments as detailed in the circulated papers.</p> <p>In closing KH thanked colleagues in the Chief Nurse's, education, IT, HR and OD teams for their contributions to the collaborative work in reviewing and updating the action plans.</p> <p>SN asked if the work being done around civility will be enough to address the issue of bullying or harassment in the workplace which 30% of staff have reported they have experienced, or if more needs to be done. KH confirmed work is underway around informal conversations, mediation and facilitated discussions, and it is becoming evident staff are now making more approaches to the</p>	
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	<p>Equality, Diversity & Inclusion unit for initial guidance, advice and support.</p> <p>SN also mentioned a number of actions rely on the success of the staff networks and some of the feedback received suggests staff are having difficulty in contributing to these. KH gave assurance that work is being undertaken with managers to ensure staff would be supported to attend and contribute to the networks, and SS advised she will be contacting the members of the core network groups individually to encourage membership and attendance at meetings.</p> <p>AH-S reiterated the importance of empowering staff to declare their disability or long term health condition. KH advised in addition to the staff video an equality census leaflet has also been developed which includes FAQs covering the reasoning behind and importance of collecting equality data. Following a question from SN, PC confirmed the Trust is signed up as a Disability Confident Employer at level 2 and work being done towards level 3 status is captured in the action plan.</p> <p>The Academy noted and agreed the contents of the action plans and agreed to receive regular updates.</p>	
PA.10.22.9	Board Assurance Framework for Nurse Safe Staffing	
	<p>KD gave an overview of the circulated papers and noted:</p> <ul style="list-style-type: none"> • Following a recent successful recruitment event 160+ HCAs have been recruited which should fill the HCA vacancies going into the winter. • There are a number of student nurses and midwives joining the Trust over the next few months. Due to the pandemic some of these will have had less clinical experience than is the norm so ways of supporting them are being looked into, and AH provided further information in relation to this. • Following a recruitment exercise for overseas midwives, there has been interest from Philippines recruits and we have six suitable candidates. • To reduce the number of nursing staff being moved frequently to cover areas with gaps, a week-long trial was undertaken to cease this and allow wards to manage their own staffing, which should result in staff only moving to different areas under extreme circumstances. This has proved successful and will continue for the foreseeable future. RS commented the response from the wards has been very positive and assists with covering extra bank shifts. AH-S also noted the new arrangement empowers the ward managers to utilise the safer care data and E-Roster much more effectively, and manages any anxiety or fears staff had when asked to work in a different area. <p>The Academy noted the update.</p>	

PA.10.22.10	People Academy Dashboard	
	<p>PC referred to the circulated Dashboard and highlighted the following:</p> <ul style="list-style-type: none"> • There is no change in the overall rating. • For 2023, the equality metrics will be amended in line with the Equality Diversity and Inclusion Reports so reporting will happen at the same time. • There was an increase in the number of Freedom to Speak Up concerns raised during quarter 2 2022/23. • The non-medical appraisal rate for September 2022 was static at 75%. Targeted action will be undertaken for those departments and CSUs whose rates are low. • The core mandatory training compliance rate has recovered and is above target. • Staff turnover had seen a reduction for the second month in a row and there has been a slight increase in nurse bank and agency fill rate. • For the second month in a row the rolling year to date staff sickness absence rate has reduced, with a more substantial reduction in the in-month absence also seen. • There is a new metric included relating to e-Job Planning data which will be reported each quarter to the Academy. e-Job plans have been implemented for medical staff, Allied Health Professionals and non-ward based nursing staff. <p>The Academy noted the updated Dashboard.</p>	
PA.10.22.11	Workforce Report	
	<p>PC referred to the circulated quarterly report which builds on some of the data contained in the Dashboard. Highlights of the report are:</p> <ul style="list-style-type: none"> • There has been an overall increase in the number of nurses including those who have started as HCAs pending registration since the last report, giving a slightly positive position as opposed to a negative one. • Regular recruitment activity continues in Pharmacy. • AHP recruitment and retention is looking positive with the pressures in this area being around specialist posts. • The Trust continues to attract Consultants; however difficulties are still being faced with regard to specialities where it is known there is a national shortage. To assist with this the use of agencies or through joint recruitment via WYAAT is being looked into. 	

	<ul style="list-style-type: none"> Junior Doctor fill is very good however there are still some pressures being seen in particular specialties. 21% of medical trainees are now part-time or on a flexible working pathway which creates some rota pressures when placed into a full-time position. This seems to be an increasing trend and more planning is therefore required for this. A detailed summary of OD activity was provided in the report. <p>Following a question from SN, AH gave assurance that plans are in place to increase the compliance against level 4 safeguarding training.</p> <p>SN also asked given the nature of the allegations in the employee relations section, if referrals to professional regulators had been made where applicable. PC advised that of the cases currently under investigation, the referral to a professional body is not made until the investigation is complete and allegations are proven.</p> <p>The Academy noted the report.</p>	
PA.10.22.12	High Level Risks Relevant to the Academy	
	<p>PC advised there are no new risks aligned to the Academy, no closed risks and no risks have changed in score since the previous report.</p> <p>The nurse staffing risks also remain the same in terms of score notwithstanding the small recruitment gains and reductions in sickness absence now starting to be seen.</p> <p>The Academy noted the update.</p>	
PA.10.22.13	Board Assurance Framework – Strategic Risks Relevant to the Academy	
	<p>LP clarified the circulated papers detail the Trust's three high level risks in relation to achievement of the Trust's Strategic Objective no 3 and explained:</p> <ul style="list-style-type: none"> Ref 3.1. relates to the Trust being unable to recruit to vacancies and the ability to provide safe staffing levels. Ref 3.2. relates to maintaining a healthy workforce in order to reduce sickness absence and turnover rates. Ref 3.3. relates to the Trust being unable to recruit, retain and develop a workforce at all levels that is representative of the population it serves. <p>There have been no changes to the risk ratings and all are above the target level with identified actions in place to address any gaps as detailed in the papers.</p> <p>The overall assurance level is amber.</p> <p>The Academy was assured that the risks are recognised appropriately with actions being taken as necessary.</p>	

PA.10.22.14	Healthcare Worker Flu Vaccination Best Practice Assurance	
	<p>PC discussed the circulated paper in relation to the annual checklist and assurance the Trust needs to do and then present to the Board of Directors. The paper includes a review of last year which was atypical from a vaccination perspective due to the pandemic and the Vaccination as a Condition of Deployment (VCOD) process. An operational group has been set up which feeds into the place based steering group.</p> <p>PC added in terms of the best practice management checklist some areas have been marked as 'partially confident' due to the number of peer vaccinators available which currently do not cover all clinical areas, however numbers of these are increasing. The reduced number of vaccinators also affects the Trust's ability to offer 24 hour mobile vaccinations, however it is hoped this will improve over the next few weeks.</p> <p>AG added that the pop-up clinics for the flu vaccinations mirror the Covid booster vaccination clinics and are in place on the concourse at Bradford Royal Infirmary, and at St Luke's on Fridays.</p> <p>AG continued that current data shows 10.5% uptake however this is expected to increase over the next week when the data inputting backlog is cleared.</p> <p>In closing PC said there is confidence that the Trust will have an improvement on last year's position, and early indications are that staff are taking up the offer of the flu vaccine.</p> <p>The Academy noted the information provided.</p>	
PA.10.22.15	Guardian of Safe Working Hours Quarterly Report	
	<p>RS gave an overview of the circulated paper. In addition he highlighted:</p> <ul style="list-style-type: none"> • There was a 20% reduction in the number of exception reports in the quarter, the period of which covers the changeover period for Junior Doctors and is therefore consistent with expectations. • Additional hours worked will be recompensed either via time back or additional pay. • There is a general lack of Junior Doctor staff across all organisations with the main shortages being in A&E and medicine. <p>The Academy took assurance from the information provided.</p>	
PA.10.22.16	Freedom to Speak Up (FTSU) Quarterly Report	
	<p>KD referred to the circulated paper covering quarter 2.</p> <p>She noted there was an increase in the number of issues raised during the quarter, which have predominantly come from maternity. KD advised that we have been proactively looking at ways of raising awareness of FTSU in maternity services and have recently appointed two Guardians within the service. Assurance was</p>	

	<p>provided that the issues have been dealt with, and two of the staff involved confirmed they would be happy to speak up again in the future if needed.</p> <p>The app is still active which allows staff to raise an issue anonymously, and they continue to do so.</p> <p>The Academy took assurance from the update.</p>	
PA.10.22.17	Midwifery Staffing Review	
	<p>KD referenced the circulated report and the recommendations contained therein.</p> <p>The Academy noted that the Trust would continue with its ambition to recruit to the full complement of maternity staff following the receipt of funding in 2021. It is expected staffing levels will increase incrementally over the next six to twelve months.</p> <p>Bradford has a high proportion of women who are diabetic or who develop Gestational Diabetes Mellitus during pregnancy and therefore the Trust are looking to recruit to a Specialist Midwife post for Diabetes which will be funded internally from within the maternity service. This was approved by the Academy, prior to submission to Board for final approval.</p> <p>KD also discussed the occurrences when staff self-declare that there are issues around their own safety or staffing. She noted that one to one care in labour has increased from 60% to consistently over 85-90% for the last three years; however this did drop to 85% in September. This can be attributed as a direct consequence of activity in September when there were occasional bed blocks which could not be diverted out.</p> <p>This therefore meant that technically they would not have had one to one care in labour for the full amount of time that they were in labour.</p>	
PA.10.22.18	Winter Plan: Workforce Actions	
	<p>PC referred the Academy to the circulated presentation which had recently been given at the Board Development session. This is a live document and will be updated in response to demand and capacity pressures. Attention was drawn specifically to section 6 which relates to workforce and will continually be reviewed and updated throughout the winter period.</p> <p>The Academy was assured that an action plan was in place.</p>	
PA.10.22.19	Bradford District & Craven People Committee Update	
	<p>PC advised the People Committee met on 19th October 2022 and the minutes will be circulated to the Academy for information once approved.</p> <p>Points of note in relation to the Committee meeting are:</p> <ul style="list-style-type: none"> There are four Leadership groups which feed into the Committee: Looking after our People, Inclusion and Belonging, New Ways of Working, and Growing our Workforce. The group will build on 	

	<p>outcomes and priorities from a workshop held on 30th September with the wider place based membership. KH is a member of the Inclusion and Belonging group.</p> <ul style="list-style-type: none"> It was agreed that the programmes of work under each group would be firmed up and approved at the December People Committee meeting. PC will share the bi-monthly pillar highlight reports with the Academy together with the minutes, which will assist in avoiding duplication of work at Trust level, and recognise the different footprints under which pieces of work are being undertaken. Karen Walker, Non-Executive Director and Chair of the Trust's People Academy, is the Deputy Chair of the place based People Committee. <p>The Academy noted the update.</p>	
PA.10.22.20	People Academy Work Plan	
	<p>PC advised the Work Plan has been shared with the Academy for information. PC and KH are to review the EDI reports to identify the best months for the metrics to be reported.</p> <p>The update was noted by the Academy.</p>	<p>Director of HR / Head of Equality, Diversity and Inclusion PA22036</p>
PA.10.22.21	Any Other Business	
	There was no other business to discuss.	
PA.10.22.22	Matters to Share with Other Academies	
	There were no matters to share with other Academies.	
PA.10.22.23	Matters to Escalate to the Board of Directors	
	<p>There were no matters for escalation to the Board, however it was noted that the following items would be highlighted to the Board at its November 2022 meeting:</p> <ul style="list-style-type: none"> Healthcare Worker Flu Best Practice Management Checklist. Annual Equality Update. <p>The following item would be annexed to the Board for information in November 2022:</p> <ul style="list-style-type: none"> Compliance statement regarding medical appraisals. 	
PA.10.22.24	Date and Time of Next Meeting	
	30 th November 2022 1100-1300 via MS Teams.	
PA.10.22.25	Medical Appraisal Annual Board Report	
	<p>RS noted the report is a formal statement of compliance relating to appraisals and links to the annual organisational audit which has previously been presented to the Academy.</p> <p>The Academy took assurance from the report provided.</p>	

PA.10.22.26	Internal Audit Report: Recruitment, Practice and Process	
	JP confirmed the report has been provided for information and asked for any queries to be addressed to PC outside of the meeting.	

ACTIONS FROM PEOPLE ACADEMY – 26th October 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 (MM), the Chair of the Trust at the next NED meeting with him.	Non-Executive Director	30.11.22	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. 26.10.22 – discussed at NED meeting 25.10.22 and agreed this will be monitored. MM will arrange for an email to be circulated to the NEDs prior to each Academy meeting so any attendance gaps can be filled where possible. Closed.

Action ID	Date of meeting	Agenda item	Required Action	Lead	Timescale	Comments/Progress
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	30.11.22	26.10.22 – LP updated the Academy on behalf of MH that a new Violence and Aggression Standard Charter has been put together in conjunction with the Trust's Safeguarding Team to ensure that the correct and appropriate assessment, review, recording and improvement actions are progressed. Closed.

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	30.11.22	26.10.22 – LP updated the Academy on behalf of MH that this has been reviewed by the Trust's Fire Safety Manager, and the recent changes to the Fire Alarm SOP have ensured that the 'Fire Response Team' includes a cohort of five emergency attendees, including a Patient Movement Team Leader and Security Lead, to help support fire and evacuation processes. Closed.
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	30.11.22	26.10.22 – KH advised members of the Enable Staff Equality Network have been contacted to ask if they wish to attend the Health & Safety Committee meetings. Responses are awaited.

Action ID	Date of meeting	Agenda item	Required Action	Lead	Timescale	Comments/Progress
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	30.11.22	26.10.22 – LP advised the Risk Assessment template has been shared with KH and she will discuss further with him regarding reflecting EDI within the Risk Assessment guidance rather than the form itself.
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	
PA22036	26.10.22	PA.10.22.20	People Academy Work Plan PC and KH are to review the EDI reports to identify the best months for the metrics to be reported.	Director of HR / Head of Equality, Diversity and Inclusion	30.11.22	