

**Board of Directors – 13<sup>th</sup> July 2023**

**Agenda Item:**

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## **Introduction**

The last Workforce report was presented to People Academy in April 2023. This report picks up key workforce themes and trends since then and is presented in the format previously used to report to the People Academy.

This report will continue to be presented to the People Academy on a quarterly basis as agreed at the July 2021 meeting.

### Trust Data as at 31<sup>st</sup> May 2023

	DIVISION						
	Unplanned Services	Planned Services	Diagnostic & Corporate Operational Services	Corporate Services	Estates & Facilities	Research	Whole Trust
Staff in Post (Headcount)	1,927	2,038	1,364	700	554	216	6,799
Staff in Post (FTE)	1,679.32	1,819.57	1,201.93	638.06	453.05	188.14	5,980.07
Establishment	2016.05	2071.58	1352.10	755.68	597.52	211.73	7004.66
Agency Usage (FTE)	18.93	24.13	42.59	0	62.84	0	148.49
Bank Usage (FTE)	238.80	148.61	105.35	4.16	85.60	1.39	583.91
Turnover	12.09%	10.64%	12.79%	12.54%	8.19%	9.84%	11.43%
Leavers within 12 months/Joiners	54/238	33/291	31/162	10/71	3/63	0/0	131/825
Monthly Sickness %**	5.23%	6.09%	5.65%	3.70%	5.09%	1.27%	5.28%
YTD Sickness %**	6.91%	6.05%	7.08%	3.61%	9.13%	2.36%	6.36%
Jnr Dr Sickness (Monthly) %	4.51%	3.85%	2.60%	6.00%	0.00%	0.00%	4.58%
Jnr Dr Sickness (YTD) %	5.19%	2.66%	2.91%	3.36%	0.00%	0.00%	3.81%

	STAFF GROUP								
	Add Prof Scientific & Technic	Additional Clinical Services	Admin & Clerical	Allied Health Professionals	Estates and Ancillary	Healthcare Scientists	Medical & Dental	Nursing & Midwifery Registered	Whole Trust
Staff in Post (Headcount)	156	1,218	1,585	481	527	108	926	1,798	6,799
Staff in Post (FTE)	128.20	1,071.63	1,396.07	422.49	418.63	98.66	870.56	1,573.84	5,980.07
Establishment	162.17	1224.33	1582.36	470.26	584.68	96.09	918.81	1965.66	7004.66
Agency Usage (FTE)	9.15	13.50	1.80	11.81	61.04	2.81	7.05	41.33	148.49
Bank Usage (FTE)	0	280.26	8.83	23.24	86.68	0	45.94	138.96	583.91
Turnover	16.67%	13.90%	11.98%	12.13%	6.68%	9.00%	6.58%	11.27%	11.43%
Leavers within 12 months/Joiners	2/15	62/318	23/183	5/71	2/55	0/11	3/21	34/151	131/825
Monthly Sickness %**	3.27%	7.42%	4.07%	4.30%	5.96%	3.43%	3.45%	6.25%	5.28%
YTD Sickness %**	4.83%	9.68%	5.26%	4.78%	10.17%	3.70%	2.92%	6.73%	6.36%

\* ODP's/Theatre Nurses are split out into the relevant staff groups for the staff in post figures but not for the Establishment figures.

\*\* The above Sickness figures are an indicative figure as at the end of May 23

\*\*\* Includes usage for centralised budget code for COVID-19

NOTE - Establishment, agency and bank usage data is supplied by Finance. The Establishment figures for Research staff are included within the overall Research Division, however where staff are line managed in Clinical Divisions the rest of the figures include them under the relevant Division. Therefore, there is a mismatch between the Establishment data and the rest of the data for Research staff only.

### Staff in post at the start and end of each month

Month	1/6/22	30/6/22	1/7/22	31/7/22	1/8/22	31/8/22	1/9/22	30/9/22	1/10/22	31/10/22	1/11/22	30/11/22
Headcount	6515	6508	6503	6489	6486	6525	6514	6603	6588	6655	6657	6662
Month	1/12/22	31/12/22	1/1/23	31/1/23	1/2/23	28/2/23	1/3/23	31/3/23	1/4/23	30/4/23	1/5/23	31/5/23
Headcount	6659	6674	6663	6717	6713	6778	6765	6779	6737	6776	6768	6799

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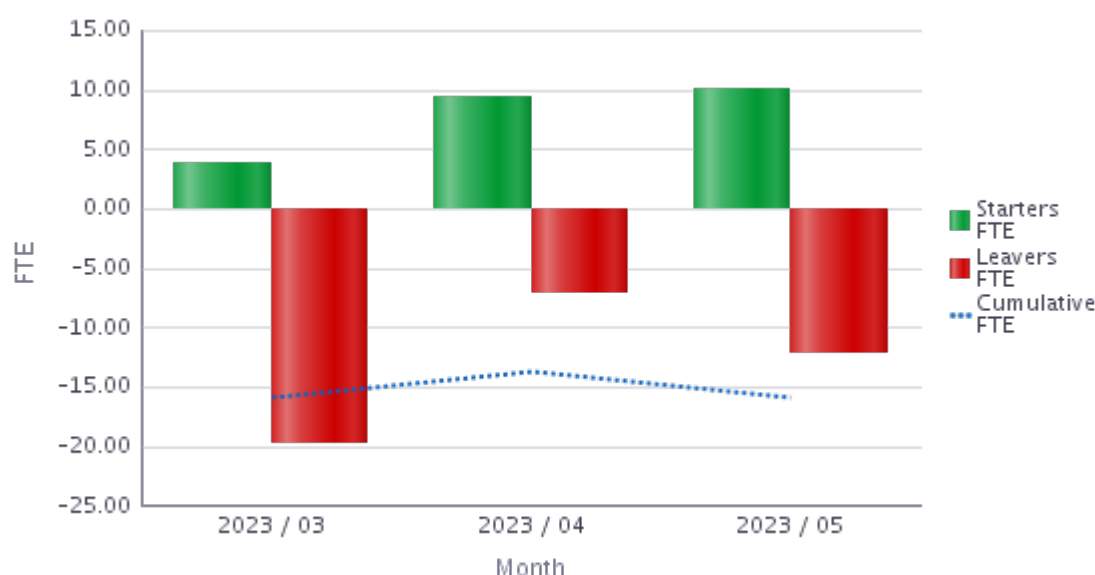
#### Staff in Post

Since the last report staff in post FTE has increased from 5,969.42 in March 2023 to 5,980.07 in May 2023 representing an overall increase across all staff groups of 10.65 FTE.

The largest increase in FTE over the period was in the Estates & Ancillary Staff Group (9.53 FTE) followed by the Medical & Dental Staff Group (6.48 FTE). The increase in the Medical & Dental staff group is linked to LinkMedics pilot in Medicine & Surgery.

The largest reduction in FTE over the last two months was in the Admin & Clerical Staff Group (10.29 FTE).

The table below shows the position with respect of qualified nursing / midwifery starters and leavers which demonstrates the position over the last three months. The cumulative position for the 3 months is -15.82 FTE with 23.34 FTE registered nurses / midwives joining the Trust and 39.16 FTE leaving.



#### e-Job Planning and e-Rostering

e-roster has been implemented for over 90% of the clinical workforce. Electronic Job Planning is now in BAU phase with some early implementers starting their second year of using the system.

Progress has been made on the outstanding objectives required to achieve Level 2 of the 4 Levels set out in the NHS Long Term Plan. In both electronic job planning and e-rostering we have developed KPIs in order to give Trust wide awareness of how our workforce activity is recorded. We have also been selected as an Exemplar site by NHSE to work with them on supporting the Trust to move towards flexible working through rostering. 5 areas have been selected as early adopters.

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**Agency and Bank Usage****Nursing Bank Fill Rate**

In May the total number of requests sent to bank was 12465 compared with April's requests of 12022, an increase of 443 requests. This is split as 5615 requests for registered staff and 6850 requests for unregistered staff. Of those 12465 requests a total of 7578 were filled by bank staff which is 60.79% compared with 62.36% in April – a decrease of 1.57%. 2,590 are filled by registered and 4988 filled by unregistered staff. Out of the 5615 requests for registered staff, the filled shifts were 2590 (46.1%) and for the 6850 requests for unregistered staff the filled shifts were 4988 (72.8%). Compared with April, fill rates decreased by 3.30% for registered and decreased by 0.6% for unregistered. Out of the 2590 filled registered shifts, 441 were filled by registered Theatre staff.

**Nursing Agency Fill Rate**

Agency staff filled 1052 shifts in the month of May. This is split 842 registered staff and 210 unregistered. Out of the 842 filled registered shifts, 160 were filled by registered Theatre staff. In May Agency fill rates increased by 2.4% for Registered and increased by 1.4% for unregistered. The biggest difference was found in filled registered shifts where the fill rates were decreased by 3.30% despite 101 extra requests compared to April.

**Turnover**

Turnover has continued to decrease to 11.43% in May 2023 from 11.80% in March 2023 2022. Turnover has reduced slightly across all staff groups apart from Additional Professional, Technical & Scientific and Healthcare Scientists where it has increased slightly.

## Nursing and Midwifery

### Background

Data from the Model Hospital Portal can be used to Benchmark against peer organisations, locally and nationally. Our Nursing and Midwifery Vacancy Rate as reported via Model Hospital is 20.6% (May 2023) compared to a median of 10% with Peers. This places us within the upper quartile of Trusts within the Northern and Yorkshire region (Figure 1 and 2).

Registered Nurses: Vacancy rate, National Distribution

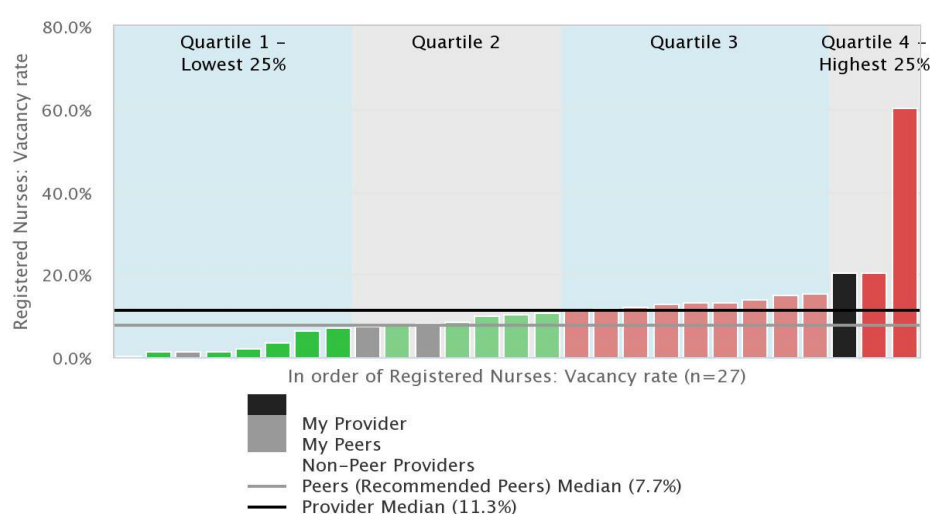


Figure 1

### Registered Nurse Vacancy position

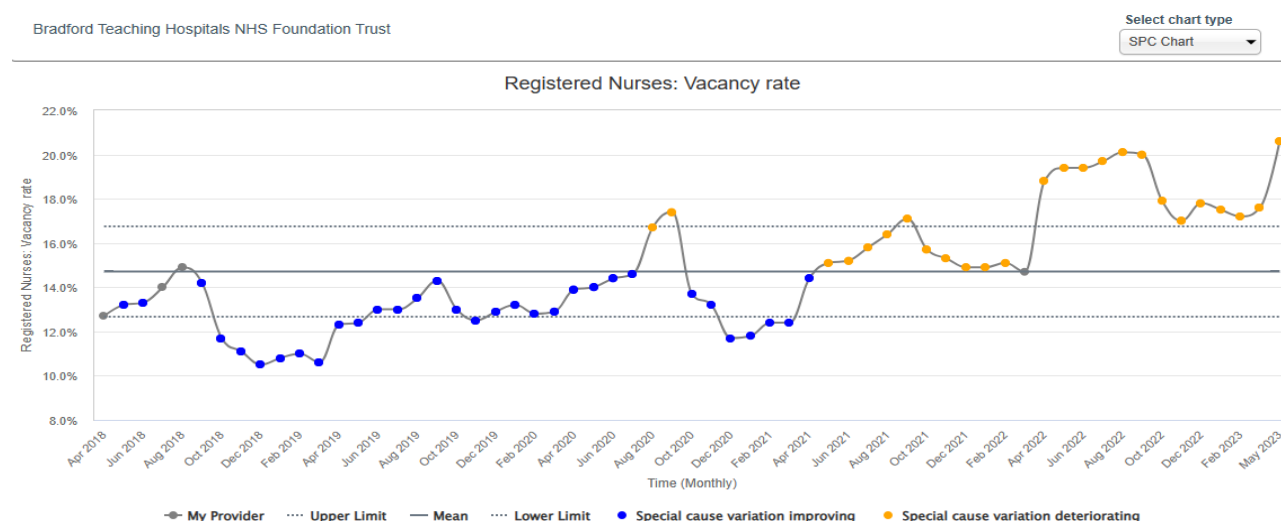


Figure 2

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Although we have a higher number of vacancies than other organisations, our registered nurse turnover rate continues to decrease (Figure 3).

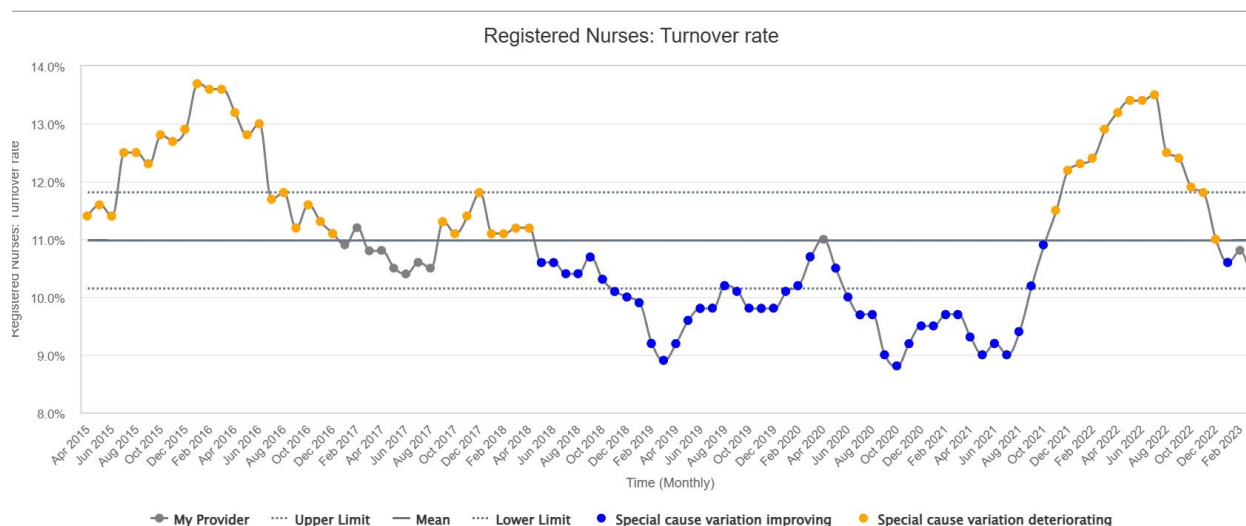


Figure 3

## Risks and Recruitment

In view of the vacancy position Nursing and Midwifery staffing remains on the Chief Nurse Risk Register (Risk ID 3732) as 5x4 (Reviewed 13th April 2023). Our Nurse and midwifery Staffing Fill Rates at a ward level remain unchanged with an average fill rate of 77% for Registrants and 92% for Healthcare support workers. We currently have 300 vacant Band 5 nursing posts and 178 Band 2 Healthcare Assistant posts. Our aim is to reduce our vacancy position to 10% by March 2023 (Figure 4). To address this we undertaking a range of actions and measures including;

### Band 5 Recruitment Events

From the January and May (2023) open days we are expecting 130, Band 5 newly qualified nurses/Midwives to start in September/October 2023. Another open day is planned for October 2023.

### Recruitment of Internationally Educated Nurses and Midwives

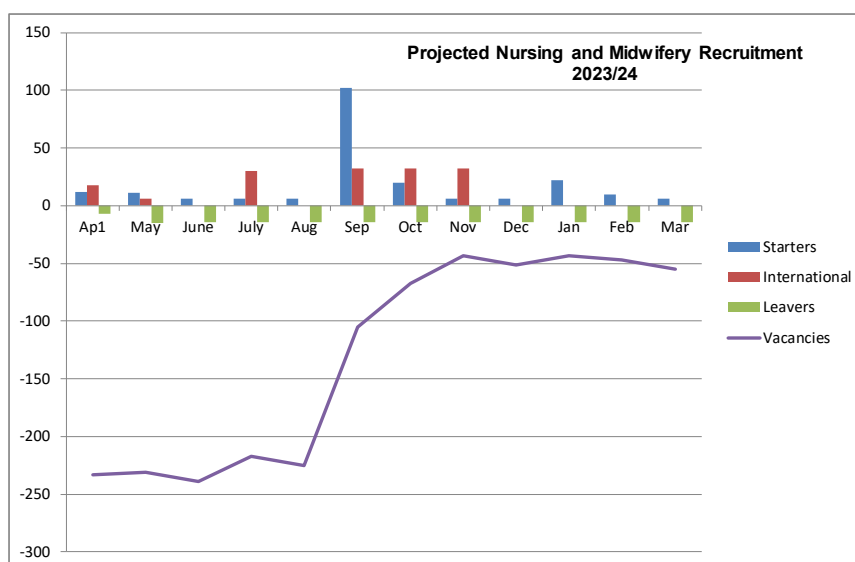
Since October 2022, we have welcomed 94 international staff to BTHFT, and we are in the process of appointing a further 150 internationally trained staff into the organisation. Since April 2023, 17 have started OSCE Bootcamp to prepare them to register with the Nursing and Midwifery Council. We have a further 30 planned to arrive in July 2023.

To date, all staff have passed their NMC OSCE, however we are seeing a higher percentage pass on the second or third attempt. The first attempt pass rates have reduced from 80% to 44% which is a trend which has been seen across the region and is being monitored by NHS England.

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In recognition of the support we provide to our international staff, we have submitted evidence to NHS England for their Pastoral Care Award Accreditation Scheme.



**Figure 4**

### Band 2 Recruitment

We currently have 178 Band 2 Healthcare Assistant vacancies within the organisation, and we have ongoing recruitment plans. Since May 2023 we have offered posts to 62 Healthcare Assistants and have plans to recruit additional staff in July 2023 onto our new “Step into Care” programme.

The Step into Care programme is to encourage the recruitment of trainee Health Care Assistants with minimal qualifications or experience of care. Once in post, we will support them with enrolment via local colleges and in-house training to start their career with BTHFT. At the end of a 12-18 month training period they will have achieved the care certificate and the necessary qualifications to progress to a Health Care Assistant Role and for some the potential to consider further career options, such as trainee ODP or Nursing Associate. This is part of our ongoing “Grow your own” workforce agenda.

Although we have vacancies, our turnover rate within the support to nursing staff group remains one of the lowest in the region (Figure 5)



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Support to Nurses: Turnover rate, National Distribution

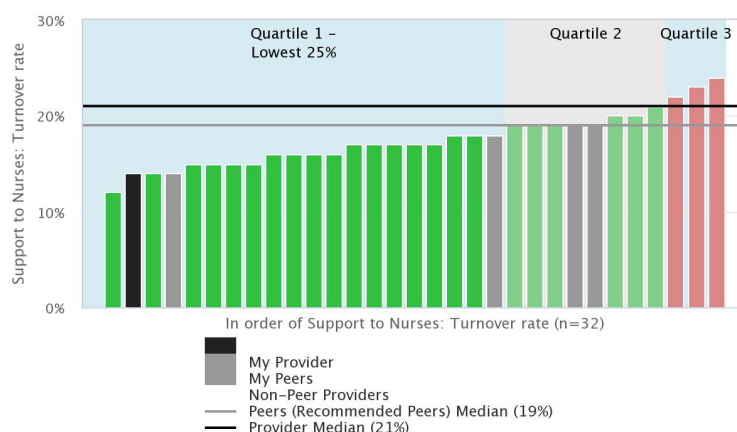
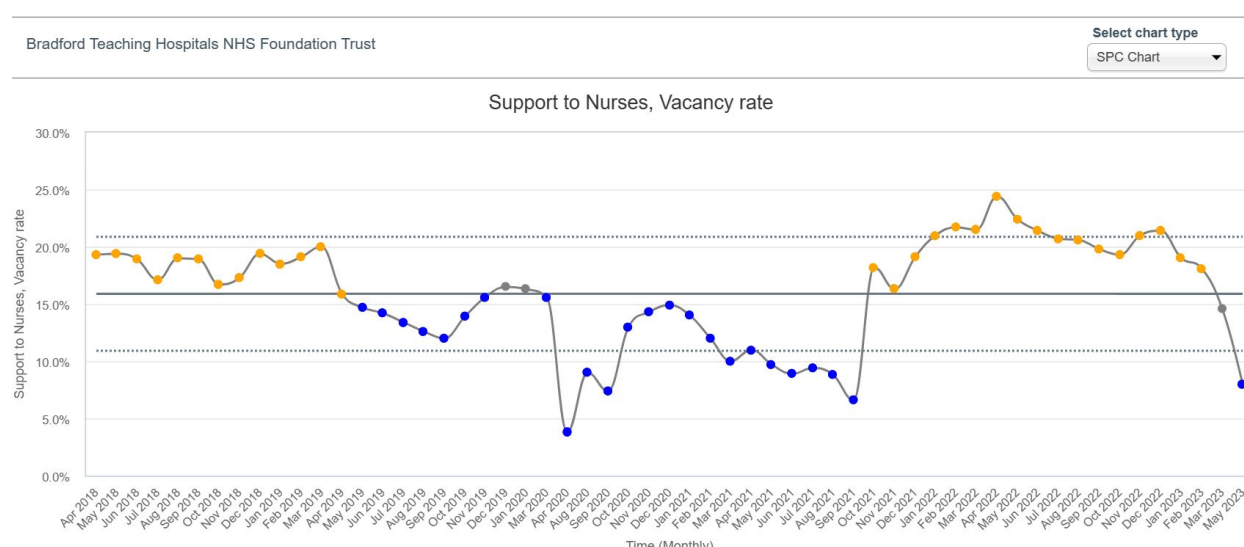


Figure 5

Our support to nursing vacancy rates continue to improve (figure 6)



(Figure 6)

In addition to the work outlined above, several other initiatives are ongoing to improve our vacancy position and reduce our reliance upon bank and agency. These include;

- **Bradford St Luke's, Day Case Unit:** Specific recruitment events are planned to support the opening of this unit in April 2024. The first event is in July 2023.
- **Changes to NMC English Language Requirements:** From February 2023, the NMC changed the English language requirements for internationally educated registrants. We are supporting several staff within the organisation to make this transition. We predict we will support 10 staff per year through this programme.

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- **Promoting BTHFT as the place to work:** We continue to work with Just R, our recruitment marketing company to attract staff to come and work in Bradford. We are in the process of developing a recruitment website which will be live in September 2023.
- **Trainee Nurse Associates:** We have appointed 30 Trainee Nursing Associates to start in October and December 2023, (Course length 20 months, Bolton, Bradford).
- **Top up Nurse Associate to Degree:** We have appointed 10 Nursing Associates to Top up to become a Registered Nurse, the course starts in September 2023, (Course length 20 month Open University).
- **Engagement events Universities:** We are now proactively engaged with University partners to develop a career pathway for Dual Qualified Registrants, (Adult/Child and Mental Health) and to develop new approaches to offer posts to 3<sup>rd</sup> year student nurses.

**Advanced Clinical Practitioners**

Within the organisation we currently have approximately 37 Advanced Practitioners with a further 17 due to qualify over the next 18 months. We have appointed 16 Trainee ACP's across a range of specialities and expect them to start in September 2023.

**Midwifery**

Midwifery are reporting a 16% staff vacancy rate, or 39 WTE, work is ongoing with Midwifery recruitment events, although the recruitment of international midwives is not currently prioritised. Our Midwifery leaver's rates continues to be one of the lowest in the region (Figure 7)

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## Midwives: NHS Leavers rate, National Distribution

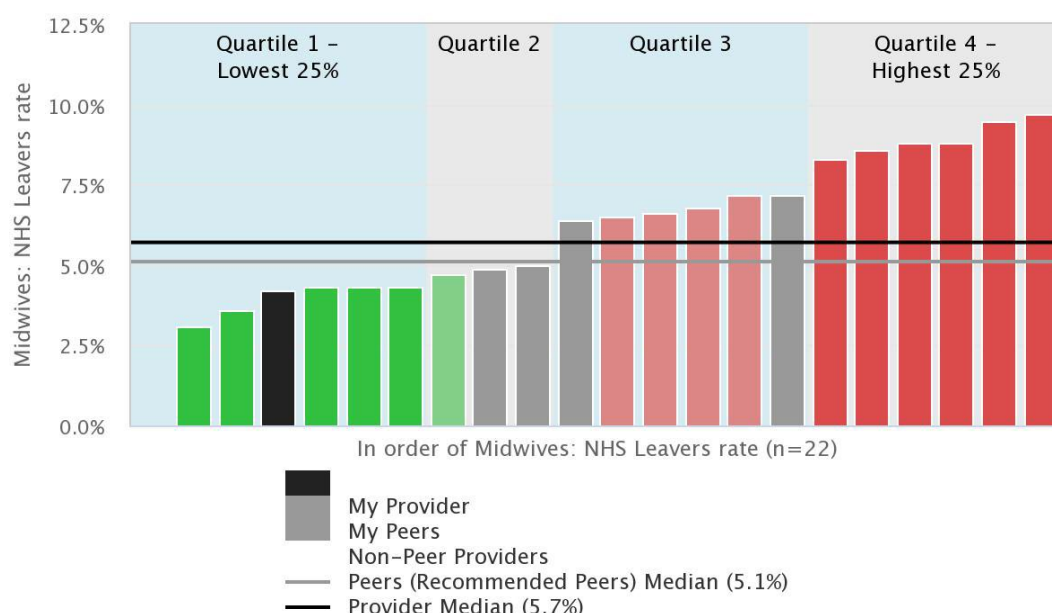


Figure 7

## Retention

The retention of staff is a key objective of the NHS People Promise and an important step in providing safe staffing. We continue to be engaged in a number of initiatives to improve recruitment including;

- Embedding the Professional Nurse Advocate role and Legacy mentor.
- Learning from exit interviews and career conversations.
- Recognition of staff via Daisy and NHS England's Chief Nurse Awards.
- Embedding Self Rostering.
- Revisiting E-roster principles in line with NHS England's best practice guidance.
- Retaining staff on Bank when they leave the organisation. Currently we only retain 5% of staff on bank when they leave BTHFT; work is therefore ongoing to understand the barriers to retaining experienced staff on our bank.

## Allied Health Professionals

### Therapies

Overall **SLT** vacancies (including the Listening for Life team) are 9.7% but within Therapies SALT vacancies are 14.5%. There is a new B7 post for stroke following a successful business case, but it has been difficult to recruit into this post – it has been out to advert twice so looking at advertising again but for a B6 to B7 development post.

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**Physio** – Vacancies are low at 2.5%. Turnover is highest for B5s, as staff leave to take up senior posts in other organisations. In an attempt to retain some of these staff, converting some B5 posts to B6 is being explored.

**OT** – vacancy rate currently high at 9% but there are a number of appointed staff undergoing pre-employment checks.

Stroke Early Supported Discharge (ESD) – 5.0 Physio/ OT posts that were funded out of nursing underspend will cease. The staff in post will be redeployed into the therapy establishment.

Successful recruitment of 3 apprentices to start degree apprenticeship in September – 2 x Physio and 1 x OT.

The Trust has been successful in a bid for funding in 2023/24 to pilot an **AHP Legacy Mentor** post to work predominantly in Therapies & Dietetics. A secondment is being advertised for suitable AHP/s to undertake a project with newly qualified staff and students to optimise retention.

**Radiographers** - the trust is in the process of undertaking International Recruitment of Diagnostic Radiographers. Offers have been made to 8 HCPC registered Radiographers in total, four of which have arrived with the remainder anticipated to start by July. Overall Radiography vacancies are not a cause for concern, although Sonographer vacancy rates are high.

### **Healthcare Scientists**

**Audiology** - nationally there is a 9% vacancy rate but locally the position is better. There are some staffing challenges due to current and upcoming maternity leave. There are also workforce challenges to resolve arising from several staff planning on retiring as well as the need, following national recommendation, for clinical peer review.

**Neurophysiology** has some issues with recruitment - contributory factors include being a small team which is unable take on training posts and being a single Consultant team which creates limitations on diagnostic capacity. The age profile of the clinical workforce is also of concern.

It has been difficult to recruit to B7 Maternity cover and although we have managed to find staff in employment elsewhere who can work on a Bank basis, significant delays in recruitment of these B7 staff have caused a waiting list backlog.

### **Other Clinical Professions**

**Optometry** has no vacancies currently. Generally applicants for adverts rarely have hospital experience, only high street practice. Pay for optometrists is higher outside the NHS and in private hospitals and as a result, applicants are only looking for part-time posts (often no more than 2 days/wk). However, NHS work is regarded as more varied and interesting.

### **Pharmacy**

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The Outstanding Pharmacy Services (OPS) Programme is now underway with work stream leads identified, work stream charters being finalised and work programmes beginning.

Pharmacy vacancy issues continue to be a challenge locally, regionally and nationally although the team have successfully recruited to some band 6 and 7 pharmacist roles as well as a new teacher practitioner pharmacist role split 50:50 with the University of Bradford. In addition to this role the team are also finalising the details of a teacher practitioner role which will be split 50:50 with the University of Huddersfield. Both universities offer Pharmacy degrees so it is hoped this will help draw new pharmacists into the team.

The service is carefully reviewing its training in order to ensure that colleagues are more aware of the training and development available. This is a key element of the work Pharmacy's Education and Training lead supported by the new lead technician for training is undertaking. In addition to this we are looking to upskilling the Pharmacy Technicians by providing NVQ level 4 courses with the first cohort starting later this year. Three pharmacists are allocated time every six months to undertake the non-medical prescribing course. Leadership and management development opportunities are also being made available to ensure managers have sufficient knowledge and skills relating to their management role through Trust led modules which in turn supports the needs of their team. In addition to this we have bid for a further £100k of funding from NHSE to cover additional courses including but not limited to:-

- Final accuracy checking for Pharmacy Technicians
- BTEC Level 4 professional diploma in Pharmacy Clinical Services
- Level 4 enhanced practice programme
- Level 4 enhanced practice programme Aseptic Services Pathway
- MSc Pharmaceutical Technology and Quality Assurance

These courses will offer pharmacy colleagues interesting and challenging development opportunities whilst also helping the department meet current and future workforce needs.

Vacant posts are continuing to be recruited to on a regular basis and these are actively promoted on social media networks and within the Pharmacy professional networks. Where roles do not attract suitable applicants, the roles are reviewed in an attempt to make them more attractive to potential applicants, and flexible working is actively offered where possible.

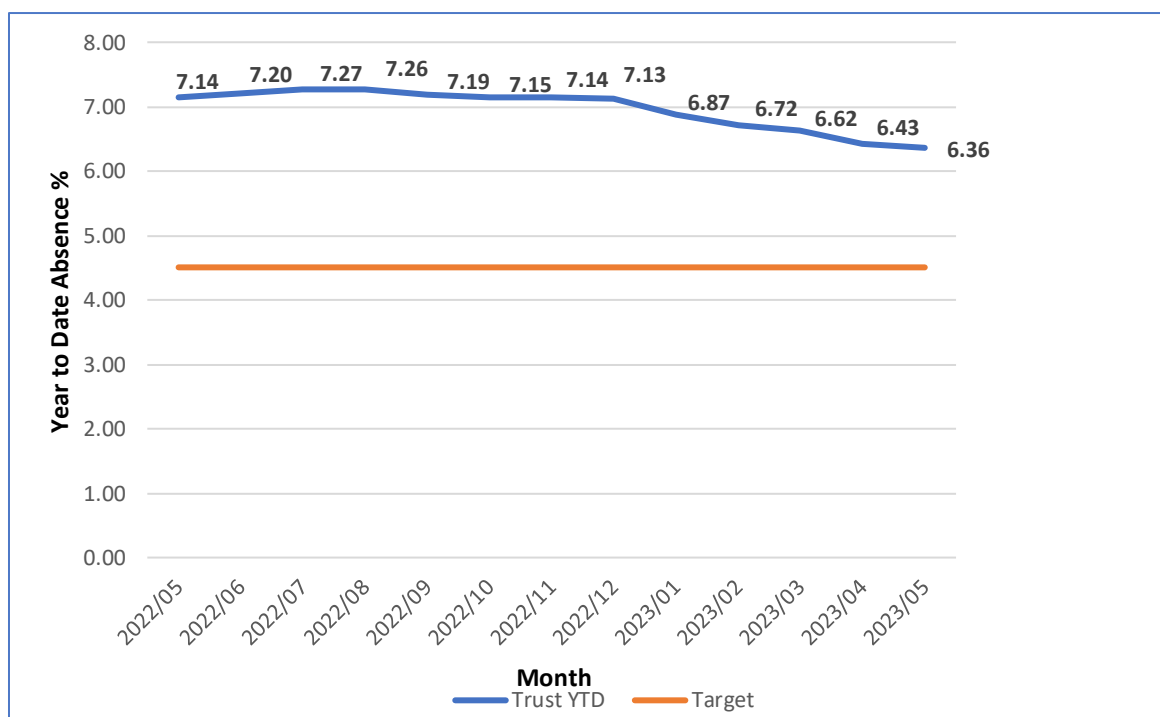
The service is looking to increase the number of pre-registration pharmacy technicians this September to account for the national shortage of qualified hospital pharmacy technicians and are opening up this opportunity to internal staff, supported by a different provider, to enable our current staff to explore opportunities to further their careers as a pharmacy technician.

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**Sickness Absence**

**Absence Timeline – Year to Date Absence % Rate – Table 1**



The year to date absence percentage rate in May 2023 is 6.36%. The absence rate has showed a peak in July 2022 and then a continuous steady reduction through to May. At this time last year the year to date absence rate was 7.14%. The graph above also shows Year to Date sickness absence (%) up to May 2023. The target set for 2023/2024 is 5.5% with the aim of sickness rates being reduced to this target rate by the end of the financial year.

**Top 5 Absence Reasons by FTE Lost – Table 2**

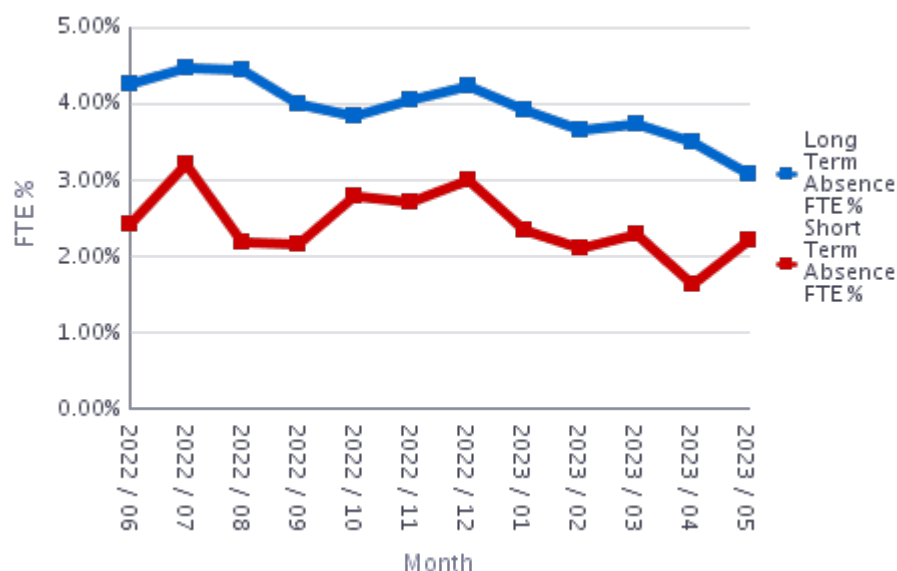
Absence Reason	%
S10 Anxiety/stress/depression/other psychiatric illnesses	24.4
S98 Other known causes – not elsewhere classified	13.8
S27 Infectious Diseases	12.9
S13 Cold, Cough, Flu – Influenza	6.7
S12 Other musculoskeletal problems	6.4

Anxiety / stress / depression are the most common reasons for absence. This is followed by other known causes.

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### Absence Long Term / Short Term – Table 3



This table shows the long-term and short-term sickness trend. Long-term sickness has showed a steady decrease since December. Short-term sickness decreased in April but has shown an increase in May.

### Wellbeing

#### • Health and Wellbeing (HWB) Group

A HWB group has been set up with colleagues from around the Trust all passionate about wellbeing. There have been 3 meetings to date with the group focusing on support for managers and promoting wellbeing across the trust.

A recent meeting of the group saw the objectives being pulled together to ascertain direction and priorities of the group.

Throughout the months of July, August and September the Organisational Development team will be focusing on wellbeing, this will include showcasing some useful resources and information from services inside and outside the Trust throughout the quarter including:

- Menopause
- Andy's Man Club
- The Library
- The importance of Sun protection measures
- Sleep - habits/hygiene etc
- Psychology
- Financial Wellbeing – including how to make your money go further over the summer holidays

A dedicated email is now available for all wellbeing related enquiries/ideas and feedback  
[Wellbeing@bthft.nhs.uk](mailto:Wellbeing@bthft.nhs.uk)

### Wellbeing Areas

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Our estates team had a sum of money to spend on the development of welfare areas for staff. 3 areas were selected; A&E, Maternity and a room off the main concourse at BRI. The OD team worked with the Estates Team and members of staff who use the areas to understand what they wanted in these spaces. This involved suggestion boxes, posters and meetings with staff.

The redevelopment of the Welfare Rooms has been a fantastic opportunity to listen to staff about what they want in a space that is going to support their wellbeing at work. Suggestions included comfy seating, bright colours, computers for staff to use when they don't usually get the chance to, greenery and a space that felt different to the rest of the workplace. Initial designs were then produced and shared with staff areas for further feedback before work took place.

The areas have been completed and are being we'll used by staff. Noticeboards have also been added to the rooms for sharing resources and information about Thrive.

This project also involved the redevelopment of a space outside Costa at BRI. A member of the estates team designed a garden space including lots of greenery and accessible picnic tables. This space is for the use of both staff and service users. The garden will also be the home to artwork created by staff to represent and celebrate the diversity at BTHFT and the sessions to produce the artwork will take place over the next few months.



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## **Organisational Development (OD) update**

### **Development**

#### **Leadership Pathways**

We have delivered 7 cohorts of face to face Leadership Pathways to 67 leaders and have over 90 leaders booked onto future programmes.

We are continuing to deliver 1 cohort of each pathway per quarter. Full details on numbers can be seen below;

Pathway	Cohorts delivered	Completions	Booked on future cohorts	Total
Aspiring Leaders	2	21	25	46
Developing Leaders	3	31	39	70
Progressing Leaders	2	15	28	43
<b>Total</b>	<b>7</b>	<b>67</b>	<b>92</b>	<b>159</b>

Advancing leaders; design work on this has been paused whilst we explore with Bradford University a Level 7 Management and Leadership Apprenticeship offer. We are supporting colleagues from Education to explore this option further.

#### **Action Learning facilitation training**

Due to organisational pressures and industrial action, we have postponed cohort 1 of training until Q3. We have a total of 10 funded places and plan to embed Action Learning Sets with the leadership development offer and across other appropriate organisational offers. Expressions of interests are still being collected.

### **Appraisals**

As of May 2023 the appraisal rate is 75.42% which has increased from 75.11% in March.

### **Coaching**

The process for accessing coaching has been updated within BTHFT. Coaching as previously is accessible through Thrive. We are now accessing the shared West Yorkshire Health and Care Partnership and Humber and North Yorkshire Health and Care Partnership Coach net platform. This will give all colleagues access to a wider pool of coaches across the region and will enable our coaches increased access to Continuing Professional Development Offers and to Coaching Supervision (an essential requirement for all coaches to maintain standards of practice).

It also enables us to report on coaching activity and relationships. Coaching Lead (Senior OD Manager) and the OD Practitioner have administrative rights to access for BTHFT. We have excellent support from the West Yorkshire team who have been responsive to our needs and requests for improvements. We will continue to review and acknowledge that during a period of transition, data will be skewed until all users register.

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Current Data shows:

Activity	Numbers recorded
BTHFT Coaches registered	7
BTHFT Coaches in active relationships	2
BTHFT Coaches registered	12
BTHFT Coaches in active relationships	3

We are aware that relationships commenced before the use of the platform will not be reflected in these numbers. All coaches have been asked to register and follow up communications will be circulated in the coming months. If a coach has reached their capacity, they will not be visible on the system and will not receive unnecessary correspondence from the system.

**Rostering Optimisation and Flexibility Programme**

As part of the People Promise programme of work, BTHFT has been selected as 1 of 3 Trusts to take part in a programme supported by NHS England. The programme will utilise the roster to promote flexible working via the Team Based roster model, ensuring fairness, consistency and transparency. This programme commenced in late March, and 5 departments are taking part: Neonatal Services, Renal, AMU 1&4, ENT / Ophthalmology Outpatients and Endoscopy. Each area has a bespoke project action plan and support measures in place. After an initial evaluation and in consultation with the colleagues in each area, a number of support mechanisms have been put in place including advanced training support on the use of the roster, bespoke roles to ensure safe staffing, and engagement sessions.

**Financial Wellbeing Update**

Activity	Update
Salary Finance	£121,775 funded loans to date
Salary Finance (% APR compared with High Street Lending)	£4532 saving
63 Salary Finance Pay advances	£41 Average amount
Free wills provided to staff	159 to date
12 Financial Wellbeing webinars	146 attendees

**Reward and Recognition**

**Team of the month and Greatix**

The relaunch of Employee and Team of the Month commenced in May and continues to be promoted allowing for teams and individuals to be recognised for going above and beyond. To further enhance our recognition of colleagues, the OD Team has relaunched Greatix (previously monitored by the QI team) which allows for all colleagues to thank each other in the moment. Since its relaunch in late April, Greatix has issued 150 certificates on behalf of colleagues who have recognised another individual or team. The next step for Greatix is to make recommendations to a judging panel for exceptional nominations to be considered for employee / team of the month or for a Values badge.

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## **Talent Management – Scope for Growth (S4G) – Career Conversations Pilot**

The S4G community of Practice at a national level is a space for sharing and learning. It is through this route that we have been given the opportunity to build on work undertaken in Norfolk, which has adapted the S4G materials into a light format to increase usability. This essentially was done to meet individual needs against a backdrop of high service pressures. BTHFT have permission to utilise these resources within our pilot at a time when service pressures limit the opportunity to use the full menu of S4G resources.

### **Voice**

### **Listening and Voice**

In February 2023 an ask through the People promise work was to write a 'Listening plan'. It was decided after challenge to the ask and scope that in order to meet the needs of BTHFT, this should incorporate Voice and a first draft of a case for change document was written titled 'Listening and Voice'. Subsequently there have been many discussions around Civility, Culture, Just Culture and PSIRF which are all interlinked. Following the most recent discussions with a small but wider audience about this work and the connections and links, 2 key themes have emerged:

1. Creating Psychologically safe teams and building trust
2. Learning and demonstrating how we learn

Exploration regarding the work that is emerging about creating psychological safety within organisations will be undertaken and fed into the wider organisational piece around PSIRF and Just Culture.

## **Thrive Conference 2023 – For the Leader in Everyone**

We were proud to be able to deliver another great Leadership Conference which was enjoyed by a total of 476 colleagues, full details on numbers can be seen below. The conference provided us with the opportunity to have some "you time" to learn, to touch base with existing colleagues and to meet new ones, and it was the perfect opportunity for us to celebrate our journey and story of the past 12 months.

The two keynote speakers, Yetunde Hofmann and Prof Paul McGee aka the SUMO guy, were absolutely amazing and so inspirational, giving us the tools to develop the leaders within us, to motivate us to thrive together.

Venue	Total attending
LIFE Centre events	294
SLT – Live	119
SLT - Screening	63
Total	476

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## **NHS Staff Survey 2022**

The Staff survey action plan has been created by the OD Team following engagement with staff and key stakeholders since the results were shared in March 2023. This action plan focuses on the top priorities that have been identified through engagement and after intensive analysis of the results. It also includes actions carried over from the 2021 plan which are currently being developed or delivered.

Engagement has resulted in the identification of the following high level priority areas for the next 12 months:

- We each have a voice that counts;
- We are safe and healthy;
- We are always learning;
- Morale;
- We are recognised and rewarded.

At BTHFT 2,365 staff (37%) took part in the 2022 survey; this is a reduction of 10.2% from the 2021 response rate of 47.2%.

The 2023 survey will run from September to November. We would like to see an improvement of last year's response rate. A manager's guide has been produced which can be found on Thrive it has lots of information and support for managers to get ready for the staff survey and to communicate out to their staff.

## **The Quarterly NHS Pulse survey**

In the last Pulse we completed in April we had an increase in responses with nearly 300 staff taking part compared to the 69 in January.

As in previous quarters, work to highlight the importance of completing the survey was communicated through screen savers, and invitations were sent out directly to new starters, bank staff, General Managers and Staff Engagers. Promotion also took place in the Thrive Bulletin, Let's Talk and Twitter.

The highest responding staff groups were:

- Clerical and Administrative
- Nurse or Midwife
- Health Care Assistants
- Facilities

Our quarterly People Pulse survey scores are higher than the NHS overall scores. Our overall engagement score has increased, mirroring our 2022 Staff Survey results which saw an increase (from the 2021 results) across all 7 People Promise themes as well as staff engagement and morale. Significant key aspects of engagement which have improved are:

- I look forward to going to work
- Recommend organisation as a place to work
- There are frequent opportunities to show initiative in my role

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- Care of patients / service users is the organisations top priority
- If a friend or relative needed care they would be happy with the standard of care
- I am able to make suggestions to improve the work of my team/department

Themes that were highlighted for improvement remain the same as January, these include better communication, better management and we are understaffed and need more resources.

**Reach In, Reach Out**

Executive Management Team have approved a proposal to pilot 'Reach In, Reach Out', which is a new, co-ordinated approach to both volunteering externally to the organisation, and internally within services. A pilot is due to commence with senior leaders in early July which will last for 6 months.

**Culture**

**Thriving Together (NHS Culture and Leadership Programme)**

The 'Thriving Together' programme was launched at the Thrive Leadership Conference. There has been a lot of positive interest in the programme and the window for colleagues to declare an expression of interest in being part of the change team are now open. The change team will be a 'diagonal slice' of colleagues in the organisation who will bring varied experiences, knowledge and skills to this programme. Ideally there should be around 15-20 colleagues involved, and all have been asked, with the permission of their line manager, to give up to 1 day a month to the programme.

The change team will lead the next stage of the programme which includes a series of 'diagnostics' such as Board interviews, talking to patients, running focus groups and a leadership behaviours survey, in order to assess what the culture of the Trust currently is. The OD team will co-ordinate the change team and in return for their support, will offer a range of development opportunities – both as a group and as individuals. Nobody will be asked to do anything they feel unable to do and we also have support from NHS England in completing these diagnostic activities.

To raise awareness of the change team and encourage participation, many walk-rounds at all sites have been completed, a global email has been sent, a page on Thrive has been created and we have also held a drop in session for colleagues to find out more and ask any questions they may have. As of 27 June, over 15 have been received with more expected. The deadline is the end of June 2023 and there will also be some colleagues who bring very specific skills that are being approached separately (e.g. HR, Project Management). We are really pleased at the level of interest shown and the colleagues who have already come forward as they are people that we haven't had the opportunity to work with before and already represent a range of bands and professions. We have also received interest from colleagues who feel they could mentor the Change Team and it has been fantastic to have really positive conversations about this programme.

Realistically, it is anticipated that Thriving Together will be at least a two year programme. Mel Pickup will be SRO for the programme.

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## **Civility / Just Culture**

### **Workplace Civility development session (all staff)**

The 'Civility in the Workplace' development session which is for all staff has been refreshed and is now live. Sessions have been run with teams in ED and Audiology. The ED sessions have been a collaboration between OD and the Staff Psychology Team and in addition to Civility, also cover trauma, the impact of incivility from patients and exercises to reduce extreme emotions and practice more self-compassion.

### **Safe to Care Conference**

Civility was one of the workshops at the BTHFT Safe to Care Conference. The team ran short sessions covering what is civility / incivility, the impact it has, what tools can be used when people witness / experience / are accused of incivility, and compassion.

### **Manager support**

Three videos have been created which will be used in induction and other development sessions to highlight the importance of civility. They can also be used by teams in their own meetings when exploring incivility. The videos have been created using real life BTHFT scenarios which colleagues have experienced.

In May, the videos were brought to life via a Live Action Event for managers, where we were visited by the actors who play two of the characters - 'Emma' and 'Pauline'. They acted out their scenario and the audience were encouraged to stop the scenario and change the narrative based on what they would do or what could lead to a better outcome. The session was well attended by almost 100 managers with very positive feedback received.

### **Localised Offer**

We recognise that different services / departments are at different points with civility and their approach to tackling incivility and poor behaviours. We have developed an offer which has been made available to CSUs / Services for them to pick and choose which interventions will help them on their civility journey.

The first cohort we are currently working with include:

- Ward 9
- Ward 4
- Ward 2
- ED
- ENT Outpatients

### **Civility and Respect Toolkit**

Edition 1 of this toolkit of resources for those who witness or experience incivility has been launched. This also contains resources for those who have been accused of poor behaviour. To date, hundreds of copies have been printed and distributed. Feedback has been positive and it is expected that the toolkit will grow to include more resources in further editions.

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## **Equality, Diversity and Inclusion**

The Trust's new EDI strategy was formally launched on 10<sup>th</sup> May 2023. The strategy sets out the Trust's ambitions and plan of actions to promote and advance equality of opportunity, with sharp focus on belonging and inclusion.

The EDI team are in the process of planning attendance at CSU/Department management meetings to provide an overview of the EDI Strategy, along with the role and remit of managers in its' implementation and delivery.

A half day EDI training course for managers has been launched, with a pilot session in May which has had positive feedback. The training is now available to book on ESR. We also provided a live action 'Workplace Civility' training event for managers with video's developed showing examples of incivility in the workplace with focus on empowering managers to 'nip things in the bud' in a timely manner. The videos will be incorporated into EDI training for managers and a programme will be developed to ensure there are a sufficient number of colleagues trained to deliver the training.

The Trust Harassment & Bullying policy is currently under review with greater focus on informal conflict resolution. The policy will align to the introduction of a workplace mediation service in the Trust and the refresh of the Staff Advocacy Service. There are also plans to develop training for line managers around 'informal conflict resolution' (specifically facilitated conversations). The policy title will be replaced to Civility, Respect and Resolution Policy and is currently out for consultation with our Trade Unions and other stakeholders.

## **Recommendation**

The People Academy is asked to note the contents of this report.

## Glossary - Appendix 1

Indicator	Description	Source
Staff in post WTE	The number of whole time equivalent staff in post at that point in time.	HR Department via ESR (Electronic staff record).
Mandatory Training	The proportion of staff who have undertaken the statutory and mandatory training for the rolling year. The threshold is now 100%.	HR Department – via ESR
Appraisals	The proportion of staff who have undertaken an annual appraisal. The threshold is equal to or greater than 75% of staff.	HR Department – via ESR
Sickness	The proportion of staff that are absent due to sickness. The threshold is less than or equal to 4.50%.	HR Department – via ESR
Friends and Family Test	% of patients who complete a friends and family questionnaire following an inpatient admission.	Picker Services
Staff Group	Staff are coded to one of a national set of Staff Groups as follows: <b>Add Prof Scientific and Technic</b> – Pharmacists, Psychologists, Counsellors, Chaplains <b>Additional Clinical Services</b> – All clinical staff who don't need to be Professionally registered i.e. Bands 1-4 <b>Administrative and Clerical</b> – All Admin staff inc Managers who aren't Clinical <b>Allied Health Professionals</b> – OT, Physio, Dieticians, Radiographers <b>Estates and Ancillary</b> – Estates Officers, Porters, Cleaners, Catering <b>Healthcare Scientists</b> – Audiologists, Clinical Scientists, Physiologists <b>Medical and Dental</b> – All Medical & Dental Staff <b>Nursing and Midwifery Registered</b> – All Registered Nurses and Midwives.	HR Department – via ESR
Workforce Planning	NQB (2013) <i>How to ensure the right people, with the right skills, are in the right place at the right time – A guide to nursing, midwifery and care staffing capacity and capability.</i> <a href="https://www.england.nhs.uk/wp-content/uploads/2013/11/nqb-how-to-guid.pdf">https://www.england.nhs.uk/wp-content/uploads/2013/11/nqb-how-to-guid.pdf</a>	NHS England