

# Report to the Meeting of the

# Oxford Health NHS Foundation Trust

**BOD 33(iii)/2023**

(Agenda item: 12)

# Board of Directors

**24 May 2023**

**Report from People, Leadership and Culture Committee**

**on matters to Alert, Assure or Advise**

**Executive Summary**

The **People, Leadership and Culture** Committee continues to meet four times a year. The last meeting took place on 27 April 2023, minutes are attached.

**For Alert**

1. Improving Quality Reducing Agency Programme. The Committee were alerted to the progress and lessons learnt in relation to the IQRA Programme for the 2022/23 year. This included the progress made across a range of commercial contracts (5 in total) which are already in operation or soon to come online, which will reduce the unit costs for agency spend both for nursing agency and for medical locums. Looking forward the Committee agreed that further work was needed to consider how we reduce the “demand” for agency staff and that will require careful considerations in relation to patient safety. Looking forward to the 2023-24 year, the Committee were assured that the planned savings would allow us to meet the NHSE/I targets and that there would be a focus on corporate activity in relation to retention and employer branding. The Chair signalled the programme of work along with key milestones and KPIs for 2023-24 should come to a future Board meeting and/or Board seminar.

**For Assurance**

The Committee wish to assure the Board that:

1. The Committee followed the Board’s consideration of the overall Staff Survey with seeking assurance that a segmented analysis had been completed, allowing the Trust to identify and address issues raised by staff groups where survey results were below those of the Trust and comparator averages. The Committee was advised of analyses by protected characteristic, work role, team, and location. The Committee was informed that there is a plan of action in relation to supporting teams with lower than average scores. It was agreed that the Committee should receive follow up assurance of the actions being taken for other lower reporting staff groups, including Pharmacy operations and Medics. The Chair also asked if work can be done to identify if and how we can conduct intersectional analyses to further target improvement plans; this is not currently available via the national tool so would need to be escalated to the national team to understand what is possible.
2. Guardian of Safe Working Hours Report. The Committee received assurances that the Trust is actively monitoring the adherence to safe working hours practices and that the CMO is actively involved with this. Whilst there were higher than normal numbers of exceptions in Vaughan Thomas and Wintle wards, the Committee was informed that that had been discussed in the Junior Doctor Forum and it was unlikely to be an ongoing situation. The Committee agreed that a priority was implementing changes to estates to adhere to the BMA Fatigue and Facilities Charter and to develop a planned approach to offering food to staff. The Committee was also advised that there may be some under-reporting of excess hours and that some work to change the culture around the reporting and receipt of such information is valued and legitimate.
3. Medical Education Report. The Committee was also updated on the current position of Medical Education scope and structure; the fact that OHFT is the largest placement provider for doctors in the system and that we now provide 2 x fully funded Fellows in Medical Education (FME) to support undergraduates. Of particular note was the developments made in relation to simulation based learning. The Committee agreed that any issues related to Trainer “burnout” should be looked at as part of the overall Medical engagement and wellbeing work that is due to come back to July PLC.

**To Advise**

The Committee wish to advise the Board that:

1. Trust People Priorities. The Committee is working to secure a Trust-wide view of People Priorities that includes the perspectives of Directorates, HR, the CMO and Director of Nursing. The Committee was alerted to the Directorate People Priorities in relation to the Primary, Community and Dental Care Directorates and the Mental Health and Learning Disabilities Directorate. In the Community Directorate there is a focus on making management systems and rotas more efficient and focus on recruitment for hard to source roles such as Podiatrists and Speech and Language Therapists. The focus in the Mental Health and LD directorate remained on in-patient settings and the need for more substantive staff working in innovative ways. It was acknowledged that there were some potential duplications and interdependencies e.g. with the IQRA programme and rostering, medical engagement and workforce planning. It was agreed that a high level monitoring document encapsulating the key priorities across HR and Directorates would be developed in order for the Committee to focus and gain assurance on these priorities.
2. Recruitment End to End Process. At the April PLC, the Committee received assurances that the time to hire timescales had been reduced. This was a follow up report that looked at the processes that fall outside of “recruitment”, specifically job evaluation and onboarding. The Committee agreed that it would be beneficial to review the full end to end process to understand how this could be made more efficient.
3. It was also agreed that going forward, HR Policies will be signed off at Executive level by the Chief People Officer, with assurances going to the Committee in relation to the principles that are being adopted. Additionally an annual summary of policies that have been approved will come to PLC for assurance.

**Review of risks**

The Committee agreed the final wording for three separate risks – Mandatory Training (1166); Supervision (1167) and Appraisals (1168). It was agreed that that the next meeting should examine more closely the risk around RESUS Training compliance rates and the organisation of how this mandatory training is delivered.

**Recommendation**

The Board is asked to confirm that it is assured with progress and actions taken.

The Committee noted the progress made on the IQRA targets for 2023/23 and recommends that the programme of work for IQRA for 2023/24 is reviewed at a future Board meeting following on from the reports that were considered at this April PLC meeting.

**Author and Title:**

**Mindy Sawhney**

**Chair of People Leadership and Culture Committee**

1. ***Strategic Objectives/Priorities and strategic Board Assurance Framework (BAF) risk themes*** *– this report relates to or provides assurance and evidence against the following Strategic Objective(s)/Priority(ies) of the Trust [OR N/A – no Strategic Objectives/Priorities apply] (****please delete as appropriate****):*

*1) Quality - Deliver the best possible care and health outcomes*

*Strategic risk themes: triangulating data and learning to drive Quality Improvement; Demand and Capacity (Mental Health inpatient and Learning Disabilities); and Demand and Capacity (Community Oxfordshire).*

*2) People - Be a great place to work*

*Strategic risk themes: Workforce Planning; Recruitment; Succession Planning, Organisational and Leadership Development; Culture; and Retention.*

*3) Sustainability – Make best use of our resources and protect the environment*

*Strategic risk themes: planning and decision-making at System and Place level and collaborative working with Partners; governance of external Partners; Financial Sustainability; Governance and decision-making arrangements; Business Planning; Information Governance & Cyber Security; Single Data Centre; Business Continuity and Emergency Planning; Environmental Impact; and Major Capital Projects.*

*4) Research and Education – Become a leader in healthcare research and education*

*Strategic risk themes: failure to realise Research and Development potential.*