

**AGENDA ITEM 12 – REPORT OF THE PEOPLE & CULTURE COMMITTEE
BOARD OF DIRECTORS 4 APRIL 2019**

Report title	Report from the people & culture committee
Report from	Sumita Singha, chair, people & culture committee
Prepared by	Helen Essex, company secretary
Previously discussed at	N/A
Attachments	N/A
Link to strategic objectives	We will attract, retain and develop great people

Executive summary				
Attached is a summary of the people and culture committee meeting that took place on 12 March 2019.				
Action Required/Recommendation				
The board is asked to receive the report for assurance and to approve the recommendation that Tessa Green will take on the role of WRES champion and that Sumita Singha will take on the role of WDES champion.				
For Assurance	✓	For decision	✓	For discussion
				To note

PEOPLE & CULTURE COMMITTEE SUMMARY REPORT

12 MARCH 2019

Committee Governance	<ul style="list-style-type: none"> • Quorate – Yes • Attendance (membership) – 60% • Agenda completed – Yes
Current activity	<p>Matters arising</p> <ul style="list-style-type: none"> • Assurances about Brexit preparedness received at the previous Board meeting. • Strengthening of governance around EDHR will be discussed at the next meeting along with WRES report. • In relation to the appointment of a non-executive champion for WRES and WDES, it was agreed that this should be thought out in terms of what the responsibilities are for the role as well as areas where the board is required to have a NED lead as opposed to where it would helpful to do so. A recommendation will be made to the board in April. <p>Workforce strategy and planning</p> <ul style="list-style-type: none"> • The Trust is working on workforce profile issues, what changes might be required for Oriel and building capacity in the department to undertake workforce planning. • Need to explore some of the strategic questions such as what the workforce looks like in terms of profiling and does it grow its own talent or does it look to establish a post-professional workforce. • A discussion took place around the impact of AI on workforce and the evidence-base around digitisation, which is that it changes the way people work rather removing posts from the establishment. • Focus groups have been established that will focus on the expectations of different elements of the workforce. • The national pension scheme changes will also have an impact as this is a key driver, particularly for those in higher pay brackets. • Flexible working- Discussion took place about flexibility in relation to weekend working, part-time working, etc. • Flexible working is being reviewed in the South division and moving into the contractual model rather than focusing on bank staff. Trust policies and contracts don't yet support this model so need to be reviewed. • Staff often like the flexibility and it is important to utilise all the opportunities we have for our workforce, particularly in relation to location. It was acknowledged that this requires effective planning within teams. However, flexibility is core to the employment offer. • The workforce strategy will come back to the board for final approval in May. <p>Workforce Race Equality Standards (WRES)</p> <ul style="list-style-type: none"> • Four elements of the national benchmarking data are not yet available so this item was deferred until the next meeting in May. • A session has been established in April to get together key stakeholders to discuss a new EDHR strategy. The strategy will have both staff and patient objectives which will be monitored by the PC and QSC respectively. • Additional resource is required, both external support and internal project resource which would come in as part of the restructure of department. • The appointment of a non-executive champion for WRES was approved <p>Staff survey</p> <ul style="list-style-type: none"> • 1008 staff had participated, at under a 50% response rate and that the survey

had been completed between October/December 2018.

- Although the question base is the same as in previous years the report used to contain 'key findings'. There is now some thematic analysis available which makes it easier to compare organisations.
- The committee had a discussion about comparisons to other acute specialist trusts and particular areas in which they performed particularly well where we might want to link with them to understand their narrative.
- Overall the trust has done well on staff engagement, the quality of appraisal, quality of care and safe environment and pay.
- Improvement is still required in staff health and wellbeing, E&D and bullying and harassment. Concerns regarding discrimination based on religious beliefs needs to be looked at
- The North division has higher levels of staff engagement, and is better in terms of E&D, leadership and management and safety culture. City Road is average across the board and the South does well for health and wellbeing but is poor for bullying and harassment.
- Key hotspots are private patients, access and corporate departments around the quality of care. Work needs to be done on the narrative for corporate services in how they assist with the provision of quality care.
- Staff breakdowns are also not as clear as in previous years but clinical support services are an outlier. It was noted that they have been through considerable change over the last year.
- The bullying and harassment pathway has been rolled out across the trust with a few exceptions and has been well received. Work has also been done around support required for the pathways such as mediation and facilitation training. It is still a challenge to understand how to measure and assess the impact of the pathway.
- It would be a good idea to establish a success story, where staff have come out with a good working relationship, as a positive way of selling the pathway.
- Once people start to feel comfortable in challenging behaviours then hopefully issues raised will start to take more informal routes unless cases are more serious.
- Two key areas are consistently good for the trust and these are quality of care and staff engagement.
- Discrimination by patients and relatives is a particular issue with the trust although there has been a worsening position nationally.
- The trust has a diverse workforce and vulnerable patient group, also representing the poorest and most deprived areas of London which are all contributing factors. There are also cultural challenges, such as particular ethnic groups not having the same culture of speaking up. It is important to encourage staff to report and provide support when they do report.
- Although the trust has a lot of excellent role models there are proportionally fewer roles at band 8 and above for people to move into, which can be seen as a lack of opportunity.
- There are challenges across London in this area so the trust needs to tap in to the relevant networks and work collaboratively to try and address.
- Discussion took place about how to get more people to complete the survey and whether a more representative sample is needed.
- It was agreed that half the workforce is a good representation although it is likely that there a slight bias towards admin staff who are more likely to complete because they are in front of a computer most of the time.
- The committee also discussed The Moorfields Way which is not currently being promoted and advised that the Trust should take a look at this again and decide

	<p>whether to rebrand or relaunch.</p> <ul style="list-style-type: none"> It was acknowledged that the quality of work delivered and culture is good but there needs to be a focus on inclusivity and that it is time for a refresh. <p>Workforce metrics</p> <ul style="list-style-type: none"> SS mentioned that there is still a high turnover of some staff who have started within a year. Pay costs of sickness are high for admin and clerical and the three top reasons given are coughs and cold, stress and anxiety and injury which is a very common pattern of sickness. There has historically been a poor performance management and sickness absence management culture in the trust and this will link to the leadership development that needs to take place. In terms of long term sickness management we now have a system (ESR) that can assist. We need to start coaching managers through performance management and supporting them, allowing the challenge of unacceptable behaviour and developing leaders and appraisal processes. Although there are a number of people in formal performance management there is still a lot of work to do. It will also be important to develop and shift performance management culture to make it more positive. <p>AOB</p> <ul style="list-style-type: none"> Overview on the apprenticeship programme to come to the next meeting. The committee commented on the board presentation about the nursing strategy and wanted assurance that there are similar strategies for AHPs and medical workforce. The capability and capacity work stream of the workforce strategy will need to pull together the link between all the professions in terms of workforce but this will take some time.
Key concerns	<ul style="list-style-type: none"> WRES is an area that needs more of an organisational focus and that this focus should look to drive the improvement of some of the staff survey indicators. EDI needs to be a key focus, as staff are reporting the worst experience even though the trust has the most diverse workforce. Concern has been raised via a recent SI that there is a culture of acceptance about some behaviours and a lack of escalation where it should have taken place. The trust has to communicate to staff that they will be supported if they speak up.
Key learning	<ul style="list-style-type: none"> The way workforce metric measures are presented needs to be improved, particularly so that the format works on all devices. The trust needs to be better at coaching and supporting managers through performance management allowing the challenge of unacceptable behaviour and developing leaders and appraisal processes.
For discussion outside committee	<ul style="list-style-type: none"> Additional resource is required for WRES and EDHR and this would comprise both external support and internal project resource. Each directorate will now develop its own staff survey action plan although the previous agreement was that the trust would look at a three-year approach and some overall themes and measures for review.
Date of next meeting	<ul style="list-style-type: none"> 14 May 2019