# Annual Report from the People, Culture & Improvement Committee

# **Summary**

This report provides a summary of People, Culture and Improvement Committee activities and assurance that the Committee has carried out its obligations in accordance with its Terms of Reference and work programme for 2021.

The time period is aligned to the annual governance timetable to enable consideration by the Board of Directors.

This report provides an overview of activities undertaken throughout the Trust and a summary of the work undertaken within the People, Culture and Improvement Committee activities from January to December 2021.

#### Background

The People, Culture and Improvement Committee meets 6 times per year and reports to the Board of Directors. Its Terms of Reference establish the following purposes:

- Review the BAF risks associated with workforce, culture and improvement and provide assurance to the Board that those risks are being effectively mitigated or managed in a controlled way.
- Provide the Board with assurance concerning all aspects of the Trusts workforce strategy and annual implementation plan, both in relation to delivery and impact.
- Where necessary, seek assurance into any areas of work related to workforce and culture on behalf of the Board.
- Assure the Board that the structures, systems and processes are in place and functioning to support the workforce in the provision and delivery of high quality patient care.
- Contribute to, oversight of and assurance from an SFH perspective, the People, Culture and Improvement Plan and plans of the ICS/ICP.
- In fulfilling its obligations, the Committee will be mindful of the need to improve the diversity of the workforce so that it better reflects the population which the Trust serves.
- The Committee shall review the Freedom to Speak Up agenda via quarterly assurance reports.

# The Committee's membership is set out below:

- Non-Executive Director (Chair)
- Non-Executive Director
- Non-Executive Director
- Director of People
- Director of Culture & Improvement
- Medical Director
- Chief Nurse

#### In routine attendance:

- Head of Learning & OD
- Deputy Director of People
- Acting Head of Communications
- Head of Medical Workforce
- Head of Corporate Nursing
- Community Involvement Manager
- Head of Resourcing
- Associate Director of Service Improvement
- Head of Workforce Information
- Associate Director of Transformation
- Head of Operational Human Resources
- Equality, Diversity & Inclusion Lead
- Risk and Assurance Manager
- Workforce Analytics Manager
- Operational Development and Network Manager

#### 2 Staff governors are also invited to attend as observers.

Other Directors and Managers have attended meetings in accordance with the People, Culture and Improvement Committee work programme and/or in response particular work being identified.

#### Meetings

Meetings shall be held not less than four times a year and where appropriate should coincide with key dates in the quarterly reporting cycle. A development session shall also be held not less than annually.

Attendance of core members (or a nominated deputy) at meetings during the period covered by this report is detailed below:

| Non- Executive Director (Chair)     | 6/6 |
|-------------------------------------|-----|
| Non-Executive Director              | 6/6 |
| Non-Executive Director              | 5/6 |
| Director of People                  | 5/6 |
| Director of Culture and Improvement | 6/6 |
| Medical Director                    | 4/6 |

Chief Nurse 4/6

#### Attendance of officers in routine attendance

| Deputy Director of Training, Education, Development | 3/4 |
|---|-----|
| Deputy Director of Human Resources                  | 4/6 |
| Acting Head of Communications                       | 3/6 |
| Head of Medical Workforce                           | 6/6 |
| Head of Corporate Nursing                           | 1/6 |
| Community Involvement Manager                       | 5/6 |
| Head of Resourcing                                  | 5/6 |
| Associate Director of Service Improvement           | 3/6 |
| Head of Operational Human Resources                 | 6/6 |
| Risk and Assurance Manager                          | 6/6 |

One staff governor attended 4 out of the 5 meetings and further staff governor attended 2 out of 5 of the People, Culture and Improvement Committee during the year as an observer.

#### Work Programme

The Committee has received regular reports throughout the year in accordance with its agreed Annual Work Programme. Reports are received at each meeting from the Director of People, Director of Culture and Improvement, Medical Director and Chief Nurse in relation to workforce risks and the Workforce Board Assurance Framework. In addition, assurance and highlight reports are provided on an ad hoc basis.

The Committee has also received reports on other specific risk-related matters, including:

- Nursing Safe Staffing Report
- Staff Safe Staffing Medical Staffing Report
- Communications Report
- Volunteer Report
- Employee Relations Assurance Report
- Leadership and Culture Update
- Training, Education and Development Update
- Raising Concerns Update
- Medical Education Update
- Flu Campaign
- Equality and Diversity Assurance Report

#### **Horizon Scanning**

The People, Culture and Improvement Committee identify and review any risks and work plans which are on the horizon. The following are the main areas identified:

- NHS People Plan
- WRES and WDES data and national reporting

- Written statement of employment particulars
- COVID-19 Vaccinations
- NHS Pension Scheme changes and implications of the Annual and Lifetime allowance.

All of the above have been added to the appropriate action plans and any risks, mitigation plans are in place.

# Positive Stories

At the beginning of each People, Culture and Improvement Committee meeting positive stories and achievements are shared and identified. Throughout the year these have included:

- The Trust recruited to a dedicated Equality, Diversity & Inclusivity (EDI) Lead.
- The national network Proud2bOps won the HSJ Partnership 'Workforce Innovation' Award.
- SFH Colleague Welfare and Wellbeing offer was shortlisted in the 2021 HSJ Patient Safety Awards in the category 'Mental Health Initiative' of the year.
- Nottingham and Nottinghamshire ICS: Mass Vaccination Team was shortlisted for a Healthcare People Management Association (HPMA) Award in the category for 'Cross-sector Working'.
- SFH was shortlisted for the Culture Pioneers award following the Trust's collaborative approach around wellbeing and welfare over the past 12 months and the Trust's approach to continuous improvement.
- SFH's Rostering Team were finalists in the Allocate awards.
- SFH was a finalist and came second place in the Healthcare People Management Association (HPMA) awards which took place in September 2021 for the collaborative work regarding vaccinations.
- SFH had two entries in the 2021 Health Service Journal (HSJ) National awards. These entries relate to work undertaken by Proud2bOps and the work undertaken by the Climate Action Team which aligns to SFH's culture.
- SFH was shortlisted for three Nursing Times awards, these awards relate to the real time management of oxygen during Covid-19, high volume service-user services, and the development of an End of Life (EOL) ward during the pandemic.

A summary report developed and presented to the Board of Directors

# **Board Assurance Framework Risks**

The People, Culture and Improvement Committee monitors the Board Assurance Framework (BAF) workforce and improvement risks.

The principal risks on the BAF reviewed by the People, Culture and Improvement Committee are;

Workforce capacity and capability

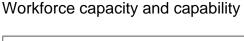
Inability to attract and retain staff

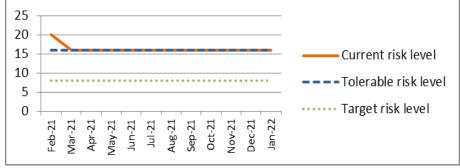
 A significant loss of workforce productivity arising from short-term reduction in staff availability or a reduction in effort above and beyond contractual requirements

# Improvement and innovation

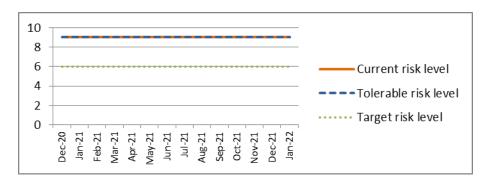
 Lack of understanding and agility resulting in reduced efficiency and effectiveness around how we provide care for patients

The below graphs identify the current risk level, tolerable risk level and target risk level for each of the BAF risks.





#### Improvement and innovation



#### People Culture and Improvement Plan

The Trust had introduced a 1-year People, Culture and Improvement Plan capturing 2021/22 and was implemented with effect from April 2021.

The plan was developed to enable to support the recovery from the global COVID-19 pandemic and an opportunity for any further strategy to be aligned to the NHS People Plan that's publication was delayed.

The focus of the Plan was to develop and introduce aspects of high impact under the themes and topics that are aligned

People Health Wellbeing and Welfare

- People Practices
- People Development
- People Equality Inclusion and Diversity
- People Resourcing and Retention
- Culture and Engagement
- Improvement and Learning

Over the last quarter of 2021/22 the Committee has focused on developing a 3 year People, Culture and Improvement Plan, that will be underpinned by the NHS People Plan, and the NHS People Promise.

# Safe Staffing Nursing and Medical

#### Nursing

The Chief Nurse has presented bi-monthly staffing report to provide an overview for Nursing, Midwifery and Allied Health Professional staffing and compliance within the Trust with the National Institute for Clinical Excellence (NICE) Safe Staffing, National Quality Board (NQB) Standards and the NHS Improvement Workforce Safeguards guidance.

The reports presented provided assurance of the staffing availability over the previous six months and process with assessing acuity and dependency for patients on ward areas. The information and data presented will support the review of the Nursing and Midwifery establishment reviews for 2021/2022.

The Chief Nurse will present the Nursing and Midwifery establishment review to the Committee and will continue to present reports to provide an overview and assurance regarding the staffing and safety compliance of the Nursing, Midwifery and Allied Health Professional workforce.

#### Medical

The Medical Director's provides bi-monthly Medical Staffing Report which highlights the main challenges and difficulties experienced during the ongoing challenges associated with COVID-19 surge.

In order to respond to the challenges new rotas have been designed for all grades of doctors to ensure that there is sufficient support in the Trust to manage the situation. Assurance has been provided to the Committee in terms of number of doctors, the escalation process in place where there are concerns and the support that is in place for junior doctors in respect of the guardian of Safe Working and the Leadership Registrars.

The reports have presented external factors relating to COVID-19, including restrictions on international travel etc. have impacted on the availability of doctors, particularly related to the Trust's successful Clinical Fellow programme. This has resulted in increased usage of Bank and Agency locum Doctors.

The Committee has also received quarterly reports providing assurance on the Doctor's appraisal and revalidation process and compliance.

Overall, the reports from the Medical Director have provided assurance the work being undertaken in relation to the Medical Workforce provides safe and effective care to patients while supporting and maintaining the well-being of the Trust's medical staff.

Across 2021 the Medical Director also presented reports to the Committee with the aim of providing assurance regarding the work undertaken to support the Medical Workforce and confirm compliance with GMC, Health Education England and NHS England/Improvement guidance and standards.

# Equality and Diversity

The People, Culture and Improvement Committee has received regular reports with an update on the achievements, progress and developments in relation to the Equality, Diversity and Inclusivity agenda at Sherwood Forest Hospitals NHS Foundation Trust.

The Committee has had assurance the Trust has met its statutory duties as outlined in the Equality Act 2010. The Committee has also been presented with the following information prior to being published in line with statutory requirements

- Diversity and Inclusivity Report
- Workforce Race Equality Standards (WRES)
- Workforce Disability Equality Standard (WDES)
- Gender Pay Gap Report

Over the past year the Trust has celebrated some key Equality and Diversity events including the Trust's PRIDE march in July 2021 Black History Month in October 2021 and Disability History Month in November.

The Trust has really focused on our inclusion agenda as part of ensuring Sherwood is a Great Place to Work for everyone.

While assurance was obtained from the reports and evidence presented to the Committee in 2021, it is recognised there is still significant work to be taken forward in relation to this agenda.

Key actions include increasing diversity reporting amongst staff, continuing to ensure compliance with reporting duties, and increasing knowledge of the Diversity agenda across the Trust.

#### Volunteer Services

Across the reporting period the Committee were provided with regular updates regarding the invaluable support to a variety of clinical and non-clinical services across all of our three sites. Each of the reports demonstrated how our volunteering

service play an important role and part in the variety of services that are delivered across the Trust.

#### Strategic Workforce Plan

The Committee received the overarching Strategic Workforce Plan identifying a workforce baseline as at 2021 and how through workforce assumptions the workforce profile across the Trust will change across the next 3-5 years. The baseline has informed future strategy and how through collaboration known workforce challenges can be mitigated.

# Freedom to Speaking Up

Effective speaking up arrangements protect patients and improve the experience of NHS Workers. All staff, but specifically all executive directors have a responsibility for creating a safe culture and an environment which workers are able to highlight problems and make suggestions for improvement.

The Trust's Freedom to Speak Up Guardian has provided assurance reports to the Committee which highlighted additional uptake in 2021 compared to 2020, there has been an increase in the number of concerns raised. The increasing number of concerns is positive and provides assurance about the effectiveness of the Freedom to Speak Up Guardian role and the Freedom to Speak Up Champions.

The most prevalent findings from the reports presented is that 'bullying and harassment' and bullying type behaviours from line managers or senior managers within departments was the most common concern raised by staff. As a result of this the Committee has received reports and evidence from the Director of Culture and Improvement about focused work which has been facilitated to support the reduction of bullying and harassment within the Trust.

A Freedom to Speak Up strategy has been developed; this has been developed in line with the Trust Objective and Strategies and in line with the NHS People Plan. The objectives of the Freedom to Speak Up strategy are;

- Create the right conditions for all our staff to speak up
- Enabling our leaders to connect with staff and be responsive
- Take learning and improve the quality of services for staff and patients.

The People, Culture and Improvement Committee has received assurance throughout the year in relation to the Freedom to Speak Up agenda and also supported the development and implementation of the strategy.

# People and Inclusion

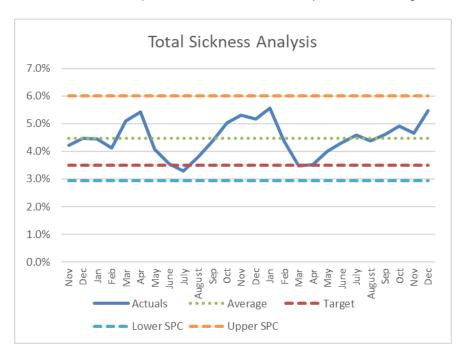
At each meeting the Director of People has presented an assurance paper on the people and inclusion agenda.

The papers presented have provided assurance that all Human Resources Policies are compliant with best practice and employment law.

In addition, the Committee has been kept up-to-date regarding the COVID-19 pandemic and measures the government has announced to support the reduction in the spread of the virus and also protect those who are extremely clinically vulnerable. This has included the implementation of self-isolation and self-shielding.

It has been recognised as a result of these national measures the Trust has experienced an increase in workforce loss related to sickness and COVID-19 related absences. The Committee have been assured the Trust has implemented all national measures which have been implemented in response to the pandemic and associated workforce loss and have also implemented support mechanism for staff who have absence.

The below graph highlights the sickness absence analysis which show the increased in sickness corresponds to the COVID-19 pandemic surge.



The Trust's annual flu campaign continues to be a tangible success for the Trust. In 2020/21 86.7% of front-line workers had the vaccine. In 2021/22 figure was 75.6%. The Committee had significant assurance in relation to the annual flu campaign.

The =Committee also received updates regarding the implementation of the Trust's Employee Assistant Provision (EAP), the completion of COVID-19 risk assessments and resourcing and were assured by the work facilitated to support the people and inclusion agenda.

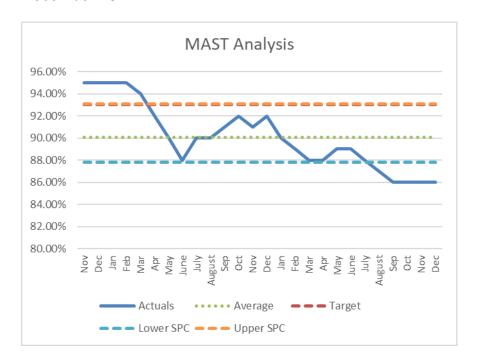
#### Culture and Improvement

The Committee has received regular reports and evidence from the Director of Culture and Improvement and Director of People regarding culture, improvement and organisational development. These reports have given assurance to the Committee

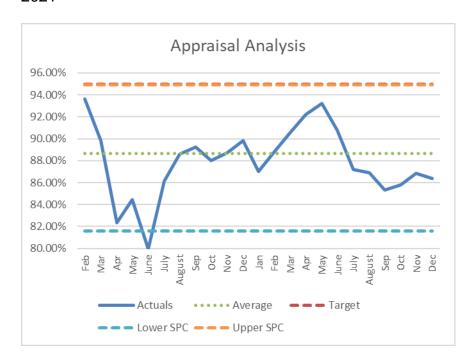
on key culture and improvement metrics and provided narrative on the actions which have been undertaken.

During the COVID-19 pandemic, some of the performance matrix have slipped, including appraisals and mandatory and statutory training, this is as a result of pausing elements of these matrix within the Trust to ensure core services and care to patients remains safe.

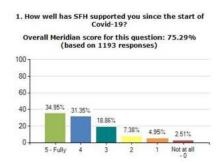
The below graph outlines mandatory training compliance from November 2019 to December 2021



The below graph outlines appraisal compliance from November 2019 to December 2021



The Committee have been provided evidence of the welfare and well-being initiatives and programmes which have been implemented to support staff during the pandemic. This has included food provisions, a well-being den, the appointment of a Welfare and Wellbeing Specialist, Psychological Support via Nottinghamshire Healthcare NHS Foundation Trust etc. The effectiveness of these initiatives has been measured via pulse surveys and the results have shown a positive response to the support offered by the trust as outlined below.



75.29% of colleagues registering a positive response to the question 'How well has SFH supported you since the start of Covid-19'?

It is important to note the effects of the COVID-19 pandemic will be significant and therefore the focus on the welfare and well-being agenda will have an emphasis on physical health, healthy behaviours and mental and psychological well-being and support.

During 2021 the Committee has gained assurance in relation to the culture and improvement agenda and noted the work which has been undertaken and achieved.

In 2022 the People, Culture and Improvement Committee will continue to be provided with updates on the following areas related to culture and improvement;

- Training, Education and Development including Mandatory and Statutory Training and Appraisals
- Welfare and Well-being
- Improvement and transformation
- Engagement, leadership and recognition
- Colleague recognition
- National NHS Staff Survey

#### Conclusions

The Committee has a challenging and substantial work plan and agenda seeking assurance regarding the development, delivery and impact of the Trust's workforce strategy and plan. In addition, the Committee also seeks assurance concerning organisational development activity undertaken to promote and embed effective organisation culture.

Although 2021 has been demanding and tough, the Committee has gained assurance in relation to the work undertaken in relation to the workforce agenda.