

Board of Directors

Report

Subject: OD & WF COMMITTEE UPDATE

Date: 17th March 2016

Author: Lee Radford – Deputy Director TED

Lead Director: Graham Briggs/Julie Bacon – Director HR

Executive Summary

HEE Workforce Investment and Consultant recruitment:

A paper was presented to the Committee on the current consultant recruitment process and identified a number of hard to recruit areas such as ED, HCOP and Stroke consultants. The HEE Workforce Investment Plan also identified a lower than expected number of regional posts being recruited in paediatric nurses, midwives, sonographers and radiographers which is of a concern to the Trust recruitment strategies. The Deputy Director of TED has raised these concerns with HEE directly.

QIP:

The Committee received a presentation on how a multi-professional approach had been developed to take the new Staff Engagement Strategy forward as part of the Engagement QIP. A paper was also presented on an approach to develop a new talent management model across the Trust, currently being piloted in D&O and PCS, which also forms part of the Leadership QIP. Evidence was presented to Karen Fisher and Eric Morton on the HR led elements of the Recruitment, Leadership and Engagement QIP work streams which were turned blue.

ED Workforce Plan and OD Intervention

The Committee received a briefing from the external HR consultant who is currently working with ED on a number of workforce and workforce planning challenges. Key successes of this work include the development of a sustainable ED workforce plan, the appointment of a lead ED consultant, agreement and implementation of a new job planning and a rota policy to ensure effective staffing cover, development of the CESR programme, the appointment of a clinical governance lead. New junior doctor forums are also working well with positive feedback being received. Further areas of development are still required on improving the cultural workings within the consultant workforce, increasing the nursing workforce and the development of an agreed RATING process. An action plan to address these areas was also submitted.

DME Update

The DME presented the Committee with an overview of current medical education issues. HEEM have confirmed that they are very happy with the work that has been undertaken in T&O and Ophthalmology. Locum cover and providing clinical supervision for trainees in O&G and ED remain a challenge. HEEM are providing the majority of funding to develop a new pilot junior doctors e-induction package which is also being developed in conjunction with colleagues at NUH and Leicester for launch in August 2016. If this is successful then it could be rolled out across the East Midlands. VitalPac are trailing VitalPac doctor package with some junior doctors which should help provide early identification through an electronic

communication of any deteriorating patients and to provide early intervention. New consultant job plans in Cardiology are currently being tested to allow consultants to undertake more effective ward rounds with junior doctors.

Practice Learning:

The paper received a quarterly update on the experience of student nurses working at the Trust. The overwhelming majority of students received an extremely positive experience whilst undertaking their placements at the Trust and the biggest ‘criticism’ was that placements were not long enough as they enjoyed their experience so much.

Fit and Proper Persons:

One of the NEDs from the Committee has carried out an audit of Executive Director and NEDs files in February 2016 and confirmed that full compliance of all files was demonstrated. The CQC also carried and FPP check in February 2016 and the Trust is currently awaiting its report.

Diversity:

The Trust is working with the Head of Equality at NUH to align the Trust’s Diversity priorities and EDS2 reporting framework.

Raising Concerns/Whistleblowing:

The Committee approved the raising concerns/whistleblowing template and flowchart. It was also agreed that the Committee would receive the annual monitoring information regarding raising concerns at a future meeting and would become part of the Committees annual work plan.

Recommendation

The board are invited to note the contents of this paper

Relevant Strategic Priorities (please mark in bold)

To consistently deliver a high quality patient experience safely and effectively	To develop extended clinical networks that benefit the patients we serve
To eliminate the variability of access to and outcomes from our acute services	To provide efficient and cost-effective services and deliver better value healthcare
To reduce demand on hospital services and deliver care closer to home	

How has organisational learning been disseminated	
Links to the BAF and Corporate Risk Register	
Details of additional risks associated with this paper <i>(may include CQC Essential Standards, NHSLA, NHS Constitution)</i>	
Links to NHS Constitution	
Financial Implications/Impact	

Legal Implications/Impact	
Partnership working & Public Engagement Implications/Impact	
Committees/groups where this item has been presented before	
Monitoring and Review	
Is a QIA required/been completed? If yes provide brief details	