Agenda Item 9c

The Queen Elizabeth Hospital King's Lynn NHS Foundation Trust

Committee Chair's Assurance Report

Report to:	Board of Directors (in Public)
Date of meeting:	**4 October 2022**
Title of Report:	Assurance Report from the People Committee
Recommendation:	For assurance
Chair:	Simon Roberts, Non-Executive Director
Purpose:	The report summarises the assurances received, approvals, recommendations and decisions made by the Trust's People Committee at its meeting on **21 September 2022.**
Background:	The Committee meets monthly and provides assurance on the overarching strategy for People, workforce activity, staff experience and engagement, recruitment and retention strategy, culture and organisational development strategy, leadership, training and development within the hospital.
Item for Assurance	**Staff Story – School of Nursing Studies (College of West Anglia)** The Committee heard how a high quality learning environment which combines blended and flexible learning opportunities has been established through an excellent example of partnership working with the College and West Norfolk Borough Council. In addition to the two cohorts of Trainee Nurse Associates within the School of Nursing, the Committee were assured that the facilities are also hosting developmental programmes for existing staff groups at the QEH and are actively engaged in the development of simulation environments to support learning from Serious Incidents. Looking forward, there are further programmes of work relating to Human Factors in the Workplace and Patient Safety.
Item for Assurance **Item for Escalation** **Item for Assurance**	**Divisional Presentation – Women & Children** The Committee heard a comprehensive and compelling update from the Women's and Children's Divisional Leadership team and were assured that the Division is making significant progress in relation to staff morale, safe and healthy staff and flexible working as a result of staff feedback and the culture improvement programme. The Committee was concerned that due to data availability issues, the report contained out of date workforce data relating to July instead of August and therefore improvements in staff absenteeism during August were not reflected. The Committee was assured that actions in relation to the high number of vacancies were in place and acknowledged the

	significant achievement of attracting the highest number of newly qualified midwives in the region. The Division has developed a "grow our own" programme which should yield a further 3 qualified midwives within 18 months and has a comprehensive timetable of international and local recruitment to reduce the vacancy rate from 30WTE to 9WTE. It was noted that the new requirements from the Ockenden report creates the need for a further 8WTE so ongoing focus is still required in this area.
Item for Assurance **Item for Escalation**	**Annual Norwich Student Teaching Report** The Committee received an interesting and detailed report outlining the high volume, high flow training in place for students and which received full assurance by the Quality Assurance Board of Norwich Medical School in February 2022. As was the case for the other education items on the agenda, the Committee identified the need for a clearer overall Trust Strategy in relation to Education. This was taken as an action of the meeting. Whilst it was noted that the overall experience of Y1 and Y2 students was rated positively, that of Y3 students needs to be improved. This may be due to the general levels of disruption through COVID, RAAC and service changes resulting in reduced capacity for teaching. However, it was noted that there had been an increase in consultant engagement with the teaching programme, new clinical educators identified and increased confidence in delivering an excellent training service.
Item for Assurance **Item for Escalation**	**Annual Cambridge Student Teaching Report** The Committee noted the overall positive feedback from students and the alignment of issues with those raised by students of Norwich. The Committee was informed of space concerns in relation to the teaching environment, exacerbated by the increasing numbers of students from Norwich, and also concerns relating to consultant engagement in the teaching programme. This was noted in particular for the Medicine Division where the higher numbers of locum Doctors currently employed has reduced the teaching opportunities for students. This is being addressed by the Education team and the Division. As per the Norwich report, it was noted that there is an absence of a clear Trust Education Strategy.
Item for Assurance **Item for Escalation**	**Bi-Annual Foundation Programme Director's Report** The Committee heard the Trust has its highest ever number of Foundation Doctors and that the only gaps remaining in the programme were caused by applicants exiting post recruitment. The Committee noted concerns that the Foundation Doctors may not be fully accessing the Guardian for Safe Working (GFSW) speak up opportunity where there are working time concerns. The GFSW and Freedom to Speak Up access routes are embedded within the induction programme for all staff and Junior Doctors and are regularly promoted at the Junior Doctors Forum. An

	action was taken to review how these two critical staff support services could work better together.
Item for Assurance	**a) GMC NTS Results and Action Plan** The Committee noted the solidity and detailed nature of the plan and approved the submission of the action plan by 26 September 2022. As is the case with the National Staff Survey Action Plan, the Committee advised it would like to see this document recognised as an important document to action and monitor for assurance that improvements planned are actually occurring throughout the year. **b) HEE Self-Assessment Process** The Committee noted the comprehensive set of measures that we would expect to see which are aligned to the action plan and feedback received on the student learning experience. Approval was given for the self-assessment document to be submitted to HEE which will be used by them in the event of any future audit activity. **c) Annual Responsible Officers and Revalidation Statement of Compliance Report (Annex D)** The Committee was assured regarding the revalidation and appraisal report and approved its National submission.
Item for Assurance **Item for Escalation**	**Equality, Diversity and Inclusion (EDI)** The Committee heard a comprehensive update on the EDI actions and how a clear line of sight can now be made with the delivery of the People Plan objective of ensuring inclusion and belonging for all and how the actions contribute to the risk mitigation and management of this objective. The 2021 WRES/WDES summary data submitted to NHSEI was reviewed. This data has previously only been seen as part of the overall 2021 staff survey results and has been used throughout the year to date to inform the EDI strategy and action plan. Whilst it was acknowledged that this data was recorded by staff almost 1-year ago, the deterioration in performance from prior years has not been sufficiently recognised at the People Committee. As such, in order to provide greater assurance to the Board it is necessary to provide alternative metrics to evidence the plan is delivering the anticipated improvements prior to the next annual survey.
Item for Assurance **Item for Escalation**	**Staff Experience and Wellbeing including Staff Survey Action Plan and Pulse Surveys** The Committee noted the extensive preparatory work in place for the NSS which is currently scheduled to open on 3 October 2022, not September as previously advised. The Committee noted the ongoing difficulties in the Trust which are likely to drive lower levels of staff engagement, notably working conditions in relation to the RAAC programme of work and disruption to working conditions around the failsafe programme. It was also noted that the July pulse survey continued to show disappointingly low levels of staff advocacy and satisfaction with the levels of patient care. The Committee were advised that the focus of attention would be on increasing

	the response rates across the organisation for the next 2 months in order to see a greater representation of staff experiences to guide further action plans in this area.
Item for Assurance **Item for Escalation**	**Workforce Integrated Performance Report** The Committee noted that whilst the sickness absence performance remains below target, improvements are continuing in line with the trajectories agreed earlier in the year. The Committee again expressed its concerns regarding the ongoing issues with the timeliness of data reporting which, due to a combination of factors this month, led to a reduced opportunity to scrutinise workforce performance metrics and provide assurances thereof. Non-medical appraisal rates remain a concern in particular the seriously overdue appraisals. The Committee noted the trajectory for improvement plans are monitored in Divisional and Directorate Performance Review Meetings but look to see a significant reduction in the next reporting period.
Item to Note	**Bi-Annual External Education Review Action Plan** The Committee noted the recommendation to create a Faculty of Education in September 2021 which has been incorporated into the Strategic Objective (SO3) deliverables. The development of this work is ongoing and links with the previous education agenda items. The Committee requested a review of this and other educational items in the informal 19 October 2022 People Committee meeting.
Item for Assurance	**Workforce Planning: Nursing and Midwifery Skill Mix Review** The Committee noted the report and confirmed it takes into account the recent ward changes. It was assured that this will continue to be developed to take into account patient acuity and dependency and be a foundation for the full business planning establishment review planned throughout Q3.
Item to Note	**People Executive Group (PEG) Assurance Report** The Committee noted the report.
Item for Assurance	**Significant Risks and BAF Report and Action 281** The Committee reviewed and approved a proposal to better align the risks associated with the successful delivery of the People Plan which will now lead to a refresh of the BAF for SO3 and part of S06.
Item to Note	**Compliance Report** The Committee noted the report and requested that additional information was provided in the form of RAG indicators of progress towards achieving the objectives. This will be included in reports going forward.
Item to Note	**Internal Audit Action Plan** The Committee noted the report and the recent completion of a revised Recruitment policy to address a number of issues identified in the recent audit.

Risks to refer to risk register	**None**
Other items of business	**None**

Attendance record:

Attendees:
S Roberts – Non-Executive Director and Committee Chair
S Hayter – Non-Executive Director (Sub for J Schneider)
J Humphries – Director of People
L Skaife-Knight – Deputy CEO
A Webster – Chief Nurse (until 15:30)
L Notley – Director of Patient Safety

Invitees:
C Castleton – Deputy Director of People (until 16:00)
D Pomfret – Principle/Chief Executive College of West Anglia (item 3)
A Debney – Head of Clinical Education, School of Nursing (item 3)
M Catling – Women & Children DGM (item 4)
K Owens – Deputy Head of Midwifery (item 4)
C Matthews – HR Business Partner – W&C (item 4)
M Kouroupis – Norwich Sub-Dean (item 5 &6)
J Richardson – Medical Education Manager (item 6)
R Duehmke – Co-Director Foundation Training Programme (item 7)
G Raghuraman – Acting Medical Director (item 8)
C Kirk – Head of Equality, Diversity & Inclusion (item 12)
AJ Weir – Head of Staff Experience & Wellbeing (item 13)

Apologies:
J Schneider – Non-Executive Director
J Dossetor – Governor
A Brown – Non-Executive Director
C Shaw – CEO
G Ward – Acting Trust Chairman

Observers:
P Hipkin – Governor (until 16:15)
C West-Burnham – Director of Strategy & Integration (until 16:00)

Minute taker:
L Preston – Board/Committee Administrator