Agenda item 16

KEY STRATEGIC OBJECTIVE 3 – ENGAGEMENT

EXECUTIVE OWNER: **Deputy CEO**
RESPONSIBLE COMMITTEE: **People Committee**

DATE LAST REVIEWED: **October 2020**
NEXT REVIEW SCHEDULED: **November 2020**

Strategic Objective
To strengthen staff engagement to create an open culture with trust at its centre

Risk Appetite
We have a **MODERATE** risk appetite for decisions taken in relation to workforce.

Initial Risk Rating: 4(C) x 3(L)= 12
Current Risk Rating:
4(C) x 3(L) = 12
Target Risk Rating: 12-16
Risk Behaviour: CAUTIOUS

Principal Risk – 2758 (12)
There is a risk that Trust leaders may be unable to strengthen staff engagement and trust impacting on the development of an open culture at the Trust

Aligned Significant Risks
No Significant Risks currently aligned to this principal risk

Rationale for Current Risk Score
- No significant risks currently aligned to the achievement of this objective
- 2019 National staff survey - only Trust in region to show improvement in all areas
- Quarterly Pulse checks showing some improvements
- Freedom to Speak up arrangements strengthened including recruitment of 18 Freedom to Speak up champions
- Culture transformation and behaviour programme in place
- Strengthened health and wellbeing programme

Emergent Risks
- Medical engagement
- Medical leadership capacity to deliver improvements
- Staff morale and well-being relating to COVID-19 particularly amongst BAME staff group
- Organisational culture

Controls in Place and Assurance
- 12 month Board Development programme commenced
- Leadership Strategy developed, including Divisional Leadership Programme and Senior Leadership programme (for Bands 5, 6 and 7s)
- Medical engagement score and survey being repeated and commencing end of November 2020
- Trust-wide culture transformation under development
- Board capacity and succession planning in place – 90% substantive Board, NED recruitment complete
- CEO and Executives undertaking monthly forums, listening events and targeted briefings for different staff groups including junior doctors, consultants
- People work plan approved and launched October 2020
- Annual Staff Engagement programme for 20/21 in place, with 3 priority work-streams – Culture & Learning, Reward & Recognition, and Health & Well-being. Financial support to deliver programme also agreed
- Strengthened emotional wellness support in place for staff with dedicated clinical psychology and PTSD posts for staff
- Staff survey action plan in place at Trust and Divisional level – strong start with 25% response rate (half of target) by end of week 2
- Pulse checks carried out quarterly
- Staff ideas scheme funded for remainder of 2020/21
- Full-time Head of Staff Engagement seconded to the Trust & substantive Head of Comms & Engagement appointed
- Strengthened reward and recognition programme in place
- Senior Head of Culture started in post in September 2020 and recruitment underway for a Band 7 OD Lead and Equality, Diversity and Inclusion Manager
- Civility saves lives training started September 2020 with two further sessions planned November 2020
- New BAME and LGBTQ staff networks in place (chaired by CEO and Deputy CEO) and reverse mentoring has commenced for Trust Board
- Successful Patient Safety Learning Event – 8 September 2020 – and quarterly thereafter

Future Opportunities
- Local workforce and community engagement
- Culture transformation programme

Gaps in Control and Assurance
- Medical leadership not robust
- Medical engagement in improvement activities not evidenced
- Employee relations KPIs to be further developed
- Mechanisms for engagement with some staff groups e.g. junior doctors to be further developed
- Improved mechanisms for engagement with staff side to be agreed
- Majority of workforce indicators below target

KEY STRATEGIC OBJECTIVE 4 – ENGAGEMENT

EXECUTIVE OWNER: Finance Director
RESPONSIBLE COMMITTEE: Finance & Activity Committee
DATE LAST REVIEWED: October 2020
NEXT REVIEW SCHEDULED: November 2020

Strategic Objective
To work with patients and system partners to improve patient pathways and ensure clinical and financial sustainability

Risk Appetite: We have a **HIGH** risk appetite for partnerships which may support and benefit the people we serve
We have a **HIGH** risk appetite for commercial gain whilst ensuring quality and sustainability for our service users.
We have a **MODERATE** risk appetite for financial/vfm risks which may grow the size of the organisation whilst ensuring we minimise the possibility of financial loss and comply with statutory requirements.

Initial Risk Rating: 4(C) x 3(L) = 12
Current Risk Rating: 4(C) x 4(L) = 16
Target Risk Rating: 8-12
Risk Behaviour: CAUTIOUS - OPEN (INFORMED)

Principal Risk – 2759 (16)
There is a risk that the Trust is unable to work effectively with patients and system partners to improve patient pathways. This could impact the Trust's ability to ensure clinical and financial sustainability

Rationale for Current Risk Score
- No Significant Risks currently aligned to the achievement of this objective
- Year on year improvement in Trust's financial position achieved
- Surplus position delivered for 2019/20 with full delivery of CIP and high level of recurrent schemes.
- Month 6 2020/21 position breakeven and in line with national guidance.
- Positive cash flow based on national process.
- Capital envelope across the STP with prioritisation process across the system in place.

Aligned Significant Risks
No Significant Risks currently aligned to this principal risk

Emergent Risks
- Robust monitoring is required to ensure the recovery from COVID at a specialty level is aligned with the wider system response.
- Significant operational pressures being experienced due to a high number of 'medically fit for discharge' patients within the Trust's bed-base. A wider system response is required to assist with these pressures

Future Opportunities
- Model Hospital / GIRFT and opportunity to be assimilated
- Trust is active partner in STP and able to influence system-wide decisions with financial and clinical impact
- Clinical strategy development between 3 Norfolk Trusts
- National confirmation required for financial architecture for the remaining months of 2020/21.

Controls in Place and Assurance
- Actively engaged in the Hospital Services Strategy for Norfolk and Waveney working alongside NNUH and JPUH to deliver the key workstreams including specialty review and redesign and alignment of policies and procedures in light of COVID. This is in line with the principles of the Acute Services Integration programme whilst developing Phase 2 / 3 COVID response.
- Monthly STP updates to Board.
- Regular Board to Board meetings with CCG and acute partners.
- Development and progression of Committees in Common.
- SFIs and associated policies and procedures in place.
- National guidance being followed in the absence of in-year control totals and national suspension of contracting and annual planning process. Monthly updates provided to Finance and Activity Committee on national guidance and the Trust's response.
- Month 6 2020/21 financial reporting in line with national guidance and remainder of financial year (m7-12) submitted through the STP.
- CIPs programme in place that have been assessed against any potential COVID impacts. All schemes have been assessed against the current national guidance and requirements and fully assessed for quality impact.
- Positive cash flows due to national process.
- Capital expenditure envelope is based on STP allocation with prioritisation process in place.

Gaps in Control and Assurance
- A Refresh is required of the Long Term Financial Model and 5 year business plan.
- National guidance published for the first six months of 2020/21. The remaining months of m7-12 have been submitted via STP submission with final organisational submission due 22 October 2020.
- Significant work still to do to drive productivity within Trust and wider STP.
- Operational pressures require escalation and formalised through a 'Board to Board' with relevant system partners.