

Workforce Committee

Key summary points from the Workforce Committee held on Wednesday 14th February 2018:

1. **Board Assurance Framework**

The Workforce Committee had a focused discussion on the Board Assurance Framework, and agreed that key metrics are needed to provide a format for measurable items so that progress can be monitored. Sustainability of services and the pressures the hospital has been experiencing was acknowledged and it was agreed that the Workforce Committee will give this more focus.

Risk 1: 423 If we do not get good levels of staff engagement to get a culture of continuous improvement then staff morale & patient outcomes may not improve. The Committee agreed that this would remain amber.

Risk 2: 859 Risk to sustainability of clinical services due to potential shortages of key clinical staff particularly in Critical Care, ED and Emergency Medicine, nursing. The Committee agreed that this would remain red.

2. **Certificates of Sponsorships (COS)**

The Workforce Committee were notified that the Certificates of Sponsorships had been allocated for the year and there would be no more available until the new financial year. This in turn will restrict the appointment of overseas doctors who require these certificates to work in the United Kingdom and therefore add additional challenges to the recruitment of medics. This issue has been raised outside of the Trust by the Workforce Director through the HR Directors network group.

3. **Disclosure Barring Service (DBS) Checks**

The Committee received an update on the DBS Check Assurance Statement and were asked to agree an extension to 30th April 2018 for nursing staff. The Committee agreed to this extension after receiving reassurance that compliance would be achieved by this date and that the Trust had a robust risk assessment process in place. In addition the Committee received an update on the Automatic DBS Update Service and agreed that they would not recommend the Trust implementing this system.

4. **Recruitment / Retention and Resilience of staff**

The Committee received updates from the Workforce Business Partners and recognised that there were recruitment challenges in several areas. A retention strategy is being developed and the Committee will receive an update on recruitment and retention at the March meeting. Workforce plans are being developed using different roles like ACPs and Physician Associates along with Nurse Associate roles.

5. **Winter**

The Director of Nursing and Quality shared with the Committee the difficulty experienced over the winter. Staffing have been under pressure due to increased beds and higher activity of patients. The Committee asked to receive further updates.

Workforce Committee

Key summary points from the Workforce Committee held on Monday 19th March 2018:

1. Staff Survey – engagement and pace of response

The Committee received a presentation on the Staff Survey results. The Committee was informed that 2,366 (42%) employees completed the survey which was a 5% increase on last year but remains slightly under the average response rate of 44% for acute trusts in England. The survey was discussed, and it was agreed that the overall indicator of staff engagement for the Trust (3.73) was concerning as it compared unfavourably with trusts of a similar type. The Committee will receive a more detailed paper at the April meeting providing departmental breakdown data and a thematic analysis of the free text section of the survey. The Committee emphasised the importance of taking speedy appropriate action in response to staff feedback.

2. Board Assurance Framework and ED Workforce

Sustainability of clinical services due to shortages of key clinical staff is on the Board Assurance Framework and the Workforce Committee discusses this along with a risk around staff engagement at each Committee. The Committee agreed that these rag ratings would remain Red and Amber. The Committee received a presentation on the Workforce Sustainability for the Emergency Department and discussed the future actions which include a recruitment campaign, engagement with agencies for short term locums and the use of new roles. Contingency and business continuity plans are in place but the service remains fragile.

3. Workforce development

The Committee received updates from the Workforce Business Partners with a particular focus on the new workforce plans that have been approved for the non-consultant workforce. The Committee emphasised the importance of this development taking place at pace.

4. Gender Pay Gap

The Committee were presented with the Gender Pay Gap Report which covers the period from 2016 – 2017. The report shows a pay gap in favour of male employees of just over 30%, heavily skewed by the medical workforce and the award of “bonuses” (Clinical Excellence Awards). Action has already been taken to encourage more applications for these awards from female staff and further work will be carried out to identify actions to continue to reduce inequalities.

5. Healthy food and CQUIN

The Committee received an update on the Healthy Food for NHS staff, visitors and patients which is a CQUIN requirement for the Trust and a key element of the Health and Wellbeing Plan. The catering teams were congratulated on the improvements and progress to date. The Committee noted the report and the positive improvements made.