

# Cover report to the Trust Board meeting to be held on 3 May 2018

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Report Title:	People, Process and Performance Committee – Committee Chair's
	Report (formal Minutes will be presented to the next Trust Board
	meeting)
Author:	Gill Belton, Corporate and Committee Services Officer
	Andrew Johnson, Chair, People, Process and Performance Committee

Reporting Committee:	People, Process and Performance Committee
Chaired by:	Andrew Johnson, Non-Executive Director
Lead Executive Director(s):	Eileen Doyle, Interim Chief Operating Officer
	Joanne Tyler-Fantom / Bina Kotecha – Joint Acting Directors of
	Workforce and Organisational Development
Date of last meeting:	26 April 2018

### Summary of key matters considered by the Committee and any related decisions made:

This report provides a summary of the following key issues considered at the People, Process and Performance Committee on 26 April 2018:

## • Emergency Performance and Organisation of Care Report

This report provided an update on performance against the NHSI trajectory for emergency care, which remained below NHSI trajectory and acceptable levels, resulting in a poor experience for patients and failure to achieve a key national performance standard. The report provided an update on the actions to improve the current position and progression towards achieving the objective of balancing demand and capacity for 2018/19.

Specific discussion took place regarding:-

- The revised "bottom up" methods of preparation of the key metrics and targets for UHL ED
  performance (to be agreed with NHSI) and subsequent communication of these with members of the
  Committee;
- The methods which the Trust intends to implement to allow it to cope with the anticipated demand through 2018-19 and the implications arising (this had been discussed in more detail at the F&I Committee immediately preceding the PPP Committee meeting);
- The timetable for preparation of the Annual Operations Plan incorporating these initiatives and subsequent review at the May PPP Committee meeting;
- The subsequent monitoring process for actions which were being implemented (these were monitored via a series of performance metrics) and
- Means of addressing staff morale and maintaining energy and momentum when, despite everyone's
  best efforts, performance remained below target due to the high demand being experienced the
  Chief Executive explained plans under discussion for Winter 2018/19 to flex the Trust's elective
  workload in a planned way in order to absorb changes in emergency demand this specific item
  would be covered in the Emergency Performance and Organisation of Care report to be submitted to
  the May 2018 People, Process and Performance Committee meeting.

In conclusion, the People, Process and Performance Committee noted the recent improvement in 4 hour wait performance but could not assure the Trust Board of the Trust's achievement of its performance targets, however the Committee acknowledged the continued focus and efforts underway to address the position and the improvements which were starting to be observed.

#### Assurance of CMG Management Processes and Performance, incorporating:-

### - Progress Update on the Review of CMG Capacity and Capability

This report from the Chief Executive updated the Committee on progress with the review of CMG capacity and capability and next steps. The review had four main components: 1. Structure (to be completed by 30.4.18), 2. Capacity (to be completed by 30.11.18), 3. Capability (to be completed by 31.12.18) and Governance (to be completed by 30.6.18). The outcome of the structural review, now completed, was that no changes were to be made to the overall structure or composition of CMGs for the reasons documented within the report. The Committee received and noted the progress made to date as outlined within the report.

#### - Performance Dashboard (utilising the CHUGGS CMG Performance Review Dashboard)

The Chairman acknowledged the enhancements made to this further iteration of the CMG Performance Review dashboard, however considered that two elements remained outstanding: (1) the absence of 'targeting' information within the visual slides (e.g. the inclusion of targeted projects with timescales to achieve an overarching objective) and (2) an executive overview or précis, which the PPP Chairman suggested could potentially be provided via the submission of the Minutes of the CMG Performance Management meetings to the PPP Committee, in order not to generate the requirement to produce a separate report for the purpose of the PPP Committee only. In light of the fact that the CMG Performance Management meetings were not formally Minuted (action logs were produced from these meetings) the Chief Executive undertook to consider how best to provide this information to the next and future PPP Committee meetings. Note was also made, in discussion, of the need for capture of more qualitative issues relating to each CMG, such as those highlighted through the results of the Staff Survey.

#### IM&T Capital Plan Briefing

As this report, detailing the IM&T Capital Plan for 2018/19, pre-dated the outputs of the Star Chamber meeting held on 24 April 2018, the Chief Executive requested that this report was withdrawn and submitted to the next (May 2018) PPP meeting with the updated figures included.

#### • UHL People Capability and Talent Management Approach

This report outlined ideas, recommendations and actions to be considered to formulate an effective talent management strategy aligned to organisational priorities and national expectations. The PPP Committee was requested to comment on the proposed strategic talent management approach outlined. The Committee received and noted the contents of this report and, in discussion, the PPP Chairman suggested that additional CMG / Corporate-specific measures of adoption might prove helpful as part of the targeting and further clarity was considered to be required such that actions were SMART, with the potential inclusion of a time-phased GANTT chart relevant to specific CMG and management groups.

#### • National Changes to Agenda for Change Terms and Conditions

This report provided an update on the changes to national terms and conditions of service for Agenda for Change (AFC) staff. It summarised the key implications and proposed how these changes would be implemented within the Trust. It also captured changes required to the local clinical excellence award process required as part of a national agreement and necessary next steps. Members received and noted the contents of this report, highlighting the need to ensure that staff were fully aware of the changes and their implications. Assurance was provided that a communications plan would be developed upon conclusion of the consultation and confirmation of formal ratification at national level. Specific discussion also took place with regard to the funding requirements to facilitate implementation of the proposed changes.

### • Nurse Recruitment, Retention and the Future Nursing Workforce

This report provided an overview of the work around recruitment and retention and the initiative relating to increasing the flexibility of clinical ward teams to deliver care through different roles. The report focussed on the need for a system-wide approach to recruitment. The report concluded that the Trust needed to identify the gap between nurse supply demand and the best way to address the gap over the next five years (i.e. potentially through Nursing Associate / Apprentice Nursing degrees etc.). It was too early to conclude if the loss of the NHS Bursary would have a long-term impact upon nursing numbers but the Trust (and LLR as a whole) must have a 'Plan B' to ensure a future supply. It was noted that the Trust must work as a system with local universities to support and influence recruitment of older applicants and applicants from BME backgrounds. Success had been

seen with some recruitment initiatives, however a system-wide recruitment and retention plan was required. In discussion relating to the need for the Committee to see a 3-5 year plan which identified and mapped the staffing requirement including the gaps and potential means of filling such, it was noted that a 5 year workforce plan was due to be submitted to the PPP Committee in June 2018 which would include this detail and an overview of actions. It was also agreed, in discussion, that the multi-professional workforce plan due for submission to the Trust Board in August 2018, would be submitted to the July 2018 PPP Committee.

#### Reports for Information

The following reports were received and noted for information:-

- a further report on the results of the Staff Survey 2017 (following discussion of this item at the March 2018 PPP meeting) work is required to understand and correct the Trust's drop in the league table;
- Workforce and Organisational Plan Update (some elements of which would be the focus of 'deep dives' at future PPP meetings), and
- Interpreting and Translation Service Quarterly Monitoring Report.

#### Minutes for Information

The Committee received the following Minutes for information:

- Executive Performance Board (20 March 2018);
- Executive Workforce Board it was noted that the action notes from the EWB meeting held on 17 April 2018 would be presented at the May 2018 meeting of the PPP Committee.

#### **Joint PPPC and QOC session:**

#### Quality and Performance Report – Month 12

This report detailed the quality and performance metrics as at month 12. Particular discussion took place relating to performance against RTT, 52 week breaches, cancelled operations, performance against the 2 week, 31 day and 62 day cancer standards and performance in relation to ambulance handovers, single sex accommodation breaches and 12 hour trolley waits. Specific discussion also took place regarding a planned initiative between UHL and Derby Teaching Hospitals to treat a number of urology patients. The QOC Chairman considered that a report relating to infection prevention was overdue at the Quality and Outcomes Committee with no date yet assigned for the receipt of such and he undertook to raise this in discussion under the QOC work plan at the QOC meeting to be held later that afternoon, in order that such a report could be scheduled for an imminent QOC meeting.

# Matters requiring Trust Board consideration and/or approval:

None.

## Matters referred to other Committees:

The Quality and Outcomes Committee to discuss at the Quality and Outcomes meeting to be held on the afternoon of 26 April 2018, the imminent scheduling of a report relating to infection prevention within their work plan.

Date of next meeting:	24 May 2018
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