

**UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST****MINUTES OF THE PEOPLE AND CULTURE COMMITTEE (PCC) MEETING HELD ON THURSDAY  
25 AUGUST 2022 AT 11.30AM – VIRTUAL MEETING VIA MICROSOFT TEAMS****Voting Members Present:**

Mr B Patel – Non-Executive Director (Chair)  
 Ms V Bailey - Non-Executive Director  
 Dr A Haynes – Non-Executive Director  
 Ms J Hogg - Chief Nurse  
 Ms C Teeney – Chief People Officer

**In Attendance:**

Dr R Abeyratne – Director of Health Equality and Inclusion  
 Ms B Cassidy – Director of Corporate and Legal Affairs  
 Ms K Ceesay - Associate Director of People Services and Transformation (For Minute 34/22/2)  
 Ms E Concannon - Freedom to Speak Up Guardian (For Minute 34/22/6)  
 Mr A Carruthers – Chief Information Officer  
 Mr J Jameson – Consultant Surgeon, Deputy Medical Director (29/22)  
 Mr R Manton – Head of Risk and Assurance (For Minute 34/22/1)  
 Ms L Milnes – Head of Health and Well-being and Staff Experience (For Minutes 34/22/3 and 34/22/4)  
 Mrs N Patel – Corporate and Committee Services Officer  
 Dr G Sharma – Associate Non-Executive Director  
 Ms S Zavery – Head of Equality and Diversity and Inclusion (For Minute 34/22/5)

		<b><u>ACTION</u></b>
	<b><u>RECOMMENDED ITEMS</u></b>	
<b>29/22</b>	<b>ANNUAL ORGANISATIONAL AUDIT AND BOARD REPORT</b>	
	<p>Paper I was presented to PCC by Mr Jameson, Deputy Medical Director to provide assurance of the relevant governance structures in place for the Trust to meet statutory requirements under the Responsible Officers Regulation 2013, and to seek approval for the Trust Chairman to sign the Statement of Compliance. It was noted that for the second year of the succession, the Annual Organisational Audit had been cancelled. The Deputy Medical Director noted that the number of appraisers to appraisees was higher than previous years, but he provided assurance to PCC that levels were in line with the Responsible Officer Regulations. Within the report, the Deputy Medical Director highlighted there were no non-engagement recommendations, and the concerns are escalated with the relevant revalidation recommendations. It was also noted that the medical governance for active cases is handled with appropriate confidentiality. PCC was also assured that the work will be continued and controlled by Mr D Barnes, Deputy Medical Director from January 2023. Dr A Haynes, Non-Executive Director, asked about employment checks for short term locums and the Trust's level of potential risk, to which Deputy Medical Director assured PCC that the risk has significantly been improved due to the management of the pre-employment checks and agreed to explore how further assurance could be provided on this issue. The Chief People Officer noted that the transactional services provide assurance and compliance checks were made during the pre-employment checks.</p> <p>PCC endorsed the Annual Organisational Audit and Board Report as presented and recommended it for Trust Board approval.</p>	<b>DMD</b>
	<p><b><u>Recommended</u> – that (A) the Annual Organisational Audit and Board Report be endorsed and recommended for Trust Board approval, and</b></p> <p><b>(B) it be explored how to provide additional assurance on employment checks for short term locums.</b></p>	<b>PCC NED Chair</b>  <b>DMD</b>
	<b><u>RESOLVED ITEMS</u></b>	

<b>30/22</b>	<b>APOLOGIES FOR ABSENCE</b>	
	Apologies for absence were received from Ms G Collins- Punter, Associate Non-Executive Director; Mr J Melbourne, Chief Operating Officer; Mr M Simpson, Interim Estates and Facilities Director.	
<b>31/22</b>	<b>DECLARATIONS OF INTERESTS</b>	
	There were no declarations of interests made at this meeting.	
<b>32/22</b>	<b>MINUTES</b>	
	<b>Resolved</b> – that the Minutes of the meeting of the People and Culture Committee (PCC) on 30 June 2022 be confirmed as a correct record.	
<b>33/22</b>	<b>MATTERS ARISING</b>	
	Paper B updated members on the position of actions from previous PCC meetings. The PCC Non - Executive Director Chair confirmed the need for a date for the National Allied Health Professions Workforce Supply Strategy Implementation Project report to come to PCC.	<b>CN</b>
	<b>Resolved</b> – that the report be noted and any updates be taken forward by the named leads.	<b>Named Leads</b>
<b>34/22</b>	<b>KEY ISSUES FOR ASSURANCE</b>	
34/22/1	<u>Board Assessment Framework</u>	
	The Head of Risk and Assurance presented paper C which was the second iteration of the refreshed BAF framework 2022/23 for assurance and endorsement. The report captured and presented the assurance that strategic risks were being managed effectively. The full BAF will be presented to Trust Board on 1 <sup>st</sup> September 2022 for approval. The KLOEs were attached at Appendix B of the report. The PCC Non- Executive Director Chair explained that this was a work in progress and would be reviewed throughout the year.	
	<b>Resolved-</b> that the BAF be received and noted.	
34/22/2	<u>Transactional Services and Audits and Future Programme Board Delivery and Outcomes</u>	
	The Associate Director of People Services and Transformation presented paper D updated PCC on the findings from recently completed audits/reviews across transactional People Services and provided assurance in terms of the onward plan for the development of a transformational programme of work with delivery via a Programme Board governance structure. The key themes that were mentioned: <ul style="list-style-type: none"> <li>- Underutilisation of systems</li> <li>- Required change around assurance and governance</li> <li>- Stabilise the current position and work on solutions</li> <li>- Remove the amount of paper was to reduce the amount of paper forms especially the usage within HR and medical teams and minimizing the process of forms.</li> </ul> <p>The Associate Director of People Services and Transformation noted the challenges that are faced with the current structures and assured the current programme of work is robust and developed via an agreed governance channel. The Associate Director of People Services and Transformation also noted the issues around ESR and was working with the regional team to ensure the system's functionality was used appropriately. The Chief People Officer added the team were continuing the transformation collaboration work to mitigate risks that may occur for winter, this included investment in staff to strengthen the temporary staffing team. Dr G Sharma, Associate Non- Executive Director and Ms V. Bailey, Non- Executive Director, noted some challenges around staff being paid on time and sought assurance that issues were being escalated at an appropriate level and the Chief People Officer provided assurance that by reducing the paper forms, it would make improvements more streamlined, and arrangements around pay incentives would be paid correctly especially around Winter.</p>	<b>CPO</b>
	<b>Resolved</b> – that regular updates be provided to PCC and Audit Committee.	<b>CPO</b>

34/22/3	<u>Staff Survey Commitments Update</u>	
	The Head of Health and Well- Being and Staff Experience presented paper E on the thirteen commitments made and presented improvements from the response to the last staff survey. Some of the examples highlighted of the improvements were around car parking, travel discounts, improving the Wi-Fi, in-house poverty support and launching the Admin and Clerical Award. The Head of Health and Well- Being and Staff Experience noted the next steps for the coming three months to improve staff experience and further updates will be provided. Ms V. Bailey, Non-Executive Director noted it was helpful to see the progress with the commitments being made. PCC Chair agreed with the comments and took assurance from the work on the staff survey commitments.	CPO
	<b><u>Resolved</u> – that regular updates be provided to PCC.</b>	CPO
34/22/4	<u>NHS Staff Survey 2022</u>	
	The Head of Health and Well- Being and Staff Experience presented paper F to inform PCC on the plans for the next NHS Staff Survey. It was noted that the survey provider was to be the same as previous years (Picker) and the costings were noted in the paper. The Head of Health and Well- Being and Staff Experience noted that this year it would be 80% electronic and 20% paper to include estates and facilities. The promotion of the survey would include drop-in sessions at the site restaurants, QR codes to ensure all staff are sighted to the survey. Dr G Sharma, Associate Non- Executive Director asked about including the volunteer workforce to which the Chief People Officer responded that she would confirm outside the meeting whether the volunteer service undertook any surveys itself of its volunteers.  The PCC Non – Executive Director Chair was fully supportive and welcomed the availability of paper copies for staff unable to complete the survey online and looked forward to seeing the results.	CPO
	<b><u>Resolved</u> – that confirmation of whether the volunteer service undertook any surveys itself of its volunteers, be provided outside the meeting.</b>	CPO
34/22/5	<u>WRES and WDES Data Sets</u>	
	The Head of Equality Diversity and Inclusion presented paper G which provided an initial oversight of the Workforce Race Equality Standard (WRES) and Workforce Disability Equality Standard (WDES). It was noted the WRES report were to focus on 9 indicators and the split included workforce data set from ESR and the national staff survey. The paper focused on minimising differential experiences of BAME and white staff and ensuring that that the Trust was addressing the gaps. The Head of Equality Diversity and Inclusion was noted to be working with the Head of Health and Wellbeing and Staff Experience to improve the experience of staff through developing diversity programmes. Dr G. Sharma, Associate Non- Executive Director queried whether there was an under representation of ethnic minorities at senior level management and queried if the Trust was looking at culture competency and representation. The Director Of Health, Equality and Inclusion noted cost of living challenges and barriers to career progression and voiced her support for meaningful interventions. The Chief Nurse noted that under representation came largely from Nursing and Midwifery and there were leadership programmes available and more 1:1 support for band 5s/6s/7s. The Chief People Officer added comments around representation on interview panels and concentrating on the concerns around the management of sickness policy.	CPO
	<b><u>Resolved</u> – that PCC receive regular progress on updates on the WRES/WDES.</b>	CPO
34/22/6	<u>Freedom to Speak Up (F2SU) Q1 Report</u>	
	The Freedom to Speak Up Guardian introduced paper H with an update on F2SU activity during Q1 2022/23 and provided assurance on the progress made by the F2SU Service in continuing to improve the scope to speak up within the Trust. The report highlighted that in Quarter 1, 63 concerns were raised via four reporting mechanisms with a summary of improvements that were made by meeting with the executive team. It was noted that the change to the reporting and data development in line with the national F2SU Guardian's office and the feedback from classification and theming from CMGs would be more coherent. Work and wellbeing and safety were persistent themes, excessive workload and issues around redeployment and this quarter over discrimination. Attitudes and behaviours seemed to be recurrent which had now resulted in creating Civility and Respect training; this had been	

	<p>introduced within Women's and Children's as part of mandatory training and was well-received by staff. Concerns were also noted re: delays in transactional services and the resolution policies and breaches in service delivery times, the Chief People Officer would be tackling this together with the F2SUGs.</p> <p>It was noted that more work was required with the Alliance and an update would be provided to the next PCC. The report acknowledged building awareness freedom to speak up training with new staff and with Health Care Assistants and Nurses. The Chief People Officer noted that there would be triangulated feedback from a strategic perspective on key themes.</p> <p>The Chief Nurse asked about escalation of patient safety concerns to which F2SUG explained any patient safety concerns would be escalated appropriately through relevant management routes and were offered support via coaching and drop-in sessions. The most concerns were from medical and nursing, admin and clerical staff which the F2SU Guardians were working alongside the Director of Estates and Facilities and the Chief Nurse. The F2SUG had developed Civility and Respect Training in response to persistent themes. The Junior Doctor's Gripe Tool was used to communicate any concerns by postgraduate doctors and key themes were escalated to the Medical Director. 44 themes were still open and the Chief Executive was fully supportive of the need for timely responses. A longer-term F2SU Plan would be developed once the Trust's wider overarching strategic plan was in place, but the Director of Corporate and Legal Affairs, advised there would be a holding plan in the interim and PCC would have oversight of this. PCC would receive an update in October 2022 and every quarter from then. It was noted that the F2SU Guardians would continue to monitor progress and offer additional support to colleagues where required.</p>	DCLA
	<p><b>Resolved – that (A) a F2SU interim work plan for the next 12 months be presented to the next PCC, and</b></p> <p><b>(B) an update regarding the Alliance be provided to the next PCC.</b></p>	DCLA
34/22/7	<u>Workforce return to NHSE/I</u>	
	The Chief People Officer provided a verbal update and advised of a requirement to submit a regional workforce return in respect of services that may potentially be adversely affected by winter. A further update would come to the next PCC or to the September 2022 Quality Committee if more urgent.	CPO
	<b>Resolved –</b> Update to be provided in October 2022 PCC.	CPO
34/22/8	<u>Pathway to Excellence Programme and Our Plans for Accreditation</u>	
	<p>The Chief Nurse provided context on the Pathway to Excellence accreditation programme which was built around six standards. The programme would enable the identification of areas of excellence and quality within Nursing, Midwifery, and Allied Health Professionals (AHP) and provide the best service care to patients and community. The roll out will be starting at the Glenfield Hospital in September 2023, followed by the other two sites thereafter. Ms V. Bailey, Non- Executive Director, queried whether the Alliance was included in the roll out and emphasized the need to provide a clear narrative of the programme.</p> <p>PCC supported the commencement of the Pathway to Excellence Programme and the proposed timings.</p>	CN
	<p><b>Resolved - that (A) regular updates be provided to PCC, and</b></p> <p><b>(B) the Chief Nurse be requested to:</b></p> <p><b>(1) confirm whether the Alliance was included in the LGH roll-out phase, and</b></p> <p><b>(2) develop a clear narrative explaining the programme.</b></p>	CN
34/22/9	<u>Update of the NHS Annual Pay Awards</u>	

	The Chief People Officer presented paper L as an overview of the current national pay awards to staff and provided updated communication to staff. The paper was presented to PCC for noting the current detail of the annual pay award. Dr A. Haynes, Non- Executive Director, asked whether the Trust would offer advice on practical options for specific staff, to which Chief People Officer noted work underway to understand the implications for individual staff. The Director of Health, Equality and Inclusion requester further clarity on whether the pay award applied to Junior Doctors under the new terms and conditions – the Chief People Officer would investigate this further and provide clarity.	CPO
	<b>Resolved – that further clarity be provided on whether the regarding pay awards applied to Junior Doctors.</b>	CPO
34/22/10	<u>Programme for Cold and Flu Vaccinations for Colleagues</u>	
	<p>The Chief People Officer noted the current programme for the Cold and Flu Vaccinations for Colleagues that provided arrangements for flu and vaccination to colleagues via the hubs, this included monkeypox vaccination. The programme included campaigns and incentives for colleagues. The paper was to provide assurance that were to be reported back to PCC on progress. The Chief People Officer recognised the gap on reporting anomalies when identifying staff who had received their vaccination elsewhere and was working on resolving this.</p> <p>Ms V. Bailey, Non- Executive Director sought assurance that vaccinators were being allocated shifts and being paid on time to which Chief People Officer provided assurance that vaccinators would be paid on time and that staff were available for the programme. Dr G. Sharma, Associate Non- Executive Director, queried the reporting system being used, and in response the Chief People Officer advised that UHL had previously used the NIMS system to which access is no longer available and commented that she was seeking advice further on reporting. Dr G. Sharma, Associate Non- Executive Director, asked further questions about the dual vaccine being implemented in the Trust and training, to which Chief People Officer provided assurance that standardised national training was provided and delivered locally. The Chief People Officer agreed to seek an update from Dr C Goss, Occupational Health Consultant, on whether the dual vaccine would be provided. The Chief Information Officer commented around changes to clinical system and added there was a required need to address the information governance aspects re: reporting on vaccinations.</p> <p>PCC was assured by the paper and the overview of the current plans and strategy.</p>	CPO
	<b>Resolved – that PCC be updated on the availability of the dual vaccine.</b>	CPO
35/22	<b>ITEMS FOR NOTING</b>	
	<b>Resolved – that the following reports be received and noted:</b> <b>(1) Workforce and OD dataset (paper N refers), and</b> <b>(2) Volunteers Annual Report (paper O refers) – noting comments from the PCC Non-Executive Director Chair on the good work evidenced within this report, and his wish to highlight this to the Trust Board.</b>	
36/22	<b>ANY OTHER BUSINESS</b>	
36/22/1	<u><b>UHL Support for Forthcoming Events</b></u>	
	The Chief People Officer noted that UHL would be supporting Pride Leicester 3 <sup>rd</sup> September 2022, Black History month October 2022 and Disability History month November 2022.	
	<b>Resolved – that the position be noted.</b>	
37/22	<b>IDENTIFICATION OF ANY KEY ISSUES FOR THE ATTENTION OF THE TRUST BOARD</b>	
	<b>Resolved- that (A) the item in Minute 29/22 above be recommended for Trust Board approval, and</b>  <b>(B) the Volunteer Services annual report 21/22 be highlighted to the Trust Board for information.</b>	PCC NED CHAIR

38/22	DATE OF THE NEXT MEETING	
	<b>Resolved – that the next meeting of the People and Culture Committee be held on Thursday 27 October 2022 from 11.30am until 1.30pm.</b>	

The meeting closed at 13.35pm.

Ninakshi Patel– Corporate and Committee Services Officer

**Cumulative Record of Members' Attendance (2022-23 to date)**

*Members*

<i>Name</i>	<i>Possible</i>	<i>Actual</i>	<i>% Attendance</i>
<i>Mr B Patel (Chair)</i>	3	2	67
<i>Ms V Bailey</i>	3	3	100
<i>Mr A Carruthers</i>	3	3	100
<i>Ms G Collins-Punter</i>	2	1	50
<i>Dr G Sharma</i>	3	2	67
<i>Dr A Haynes</i>	3	3	100
<i>Ms J Hogg (From June 2022)</i>	2	1	50
<i>Ms J Melbourne</i>	3	2	67
<i>Ms E Meldrum (until May 2022)</i>	1	0	0
<i>Prof T Robinson</i>	3	1	33
<i>Mr M Simpson</i>	3	1	33
<i>Ms C Teeney</i>	2	2	100
<i>Ms J Tyler-Fantom (until May 2022)</i>	1	1	100