

Cover report to the Trust Board meeting to be held on 7 April 2022

	Trust Board paper E5
Report Title:	People and Culture Committee (PCC) – Committee Chair’s Report
Author:	Alison Moss – Corporate and Committee Services Officer

Reporting Committee:	People and Culture Committee (PCC)
Chaired by:	Mr B Patel – PCC Chair and Non-Executive Director
Lead Executive Director(s):	Joanne Tyler-Fantom – Acting Chief People Officer
Date of last meeting:	24 February 2022

Summary of key public matters considered:

This report provides a summary of the following key public issues considered at the People and Culture Committee virtual meeting held on 24 February 2022: - *(involving Mr B Patel, PCC Chair and Non-Executive Director, Ms V Bailey, Non-Executive Director, Dr A Haynes, Non-Executive Director, Ms J Tyler-Fantom, Acting Chief People Officer, Mr J Melbourne, Chief Operating Officer, Ms Eleanor Meldrum, Acting Chief Nurse, and Mr A Carruthers, Chief Information Officer.)*

Recommended for Approval

- **Junior Doctors Guardian of Safe Working Quarterly Update**

PCC received the quarterly report of the Guardian of Safe Working. It was reported that for Quarter 3 2021/22 204 exceptions reports had been recorded, an increase of 57 from the previous quarter. Some of these exceptions were raised at a time of significant medical workforce pressures across many clinical areas, and included higher levels of absence due to Covid-19. There were 12 immediate safety concerns, which were being addressed.

The Junior Doctors Contract Guardian of Safe Working Quarterly Report, which would be updated after the meeting, was recommended to the Trust Board for approval and presented as a stand-alone report to the meeting on 5 May 2022.

Other Agenda Items

- **Looking After Our People - UHL People Strategy**

PCC considered an update on the UHL People Strategy. The Acting Chief People reported that the recent focus had been, in response to staff feedback, on health and wellbeing and the day-to-day issues that affected working lives, for example, refreshments and car parking security. There had been work undertaken to improve the offer for staff to retire and return although further work was needed to ensure consistency of approach. There had been work to digitalise and simplify people processes.

- **National Staff Survey Overview**

PCC noted the high-level report on results for UHL’s NHS National Staff Survey 2021. The full benchmarking data had yet to be received although data from the 60 trusts using the same provider was available. The free text had been circulated and further thematic reports and data for individual CMG/Directorates would be made available. The results were embargoed until 30 March 2022.

- **Nursing and Midwifery Safe Staffing and Workforce Report**

PCC received assurance that nursing and midwifery staffing levels were safe, continuously assessed and shortfalls mitigated in order to provide the delivery of safe care to patients. The report noted that the number of vacancies in December 2021 had increased, however, this was due to an increase in the funded establishment and the underlying rate was fairly stable and underpinned by international recruitment. The challenge to recruit and retain health care assistants was noted. The Acting Chief Nurse noted that the Trust had a threshold of 90% fill rate for registered nurses and that for December 2021 the Trust had been unable to meet the threshold. This had largely been due to the high level of sickness caused by Covid-19 and the additional capacity created to alleviate winter pressures. It was

noted that approximately 80 beds had been opened to support the winter plan and that this meant staffing resource was spread more thinly.

The report considered the link between staffing levels and safety incidents. There had been 22 hospital acquired pressure ulcers where staffing levels may have been a contributory factor in the 72 hours prior to the discovery of the pressure ulcer. There were four moderate or above harms due to a fall where staffing levels may have been a contributory factor. The approach of triangulating patient safety data and staffing levels appeared to be unique to the Trust.

The Acting Chief Nurse noted the plans for nurse and health care worker recruitment adding the need to consider different career pathways for the latter group.

- **Any Other Business**

It was agreed that PCC would consider resuming face to face meetings.

The following reports were noted: -

- **Workforce and OD Data Set**
- **Agile and Flexible Working/Working from Home Considerations**
- **Transactional Transformation Update**
- **SAS Doctor Contract**

Matters requiring Trust Board consideration and/or approval:

Recommendations for approval:

- Junior Doctors Guardian of Safe Working Quarterly Update

Items highlighted to the Trust Board for information: None

Matters referred to other Committees:

None.

Date of Next Virtual PCC Meeting:

Thursday 28 April 2022 at 11.30am via MS Teams