

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST**MINUTES OF THE PEOPLE AND CULTURE COMMITTEE (PCC)**
MEETING HELD ON THURSDAY 24 FEBRUARY 2022 AT 11.30AM, VIRTUAL MEETING VIA
MICROSOFT TEAMS**Present:**

Mr B Patel - PCC Chair, Non-Executive Director
 Ms V Bailey - Non-Executive Director
 Mr A Carruthers - Chief Information Officer (non-voting)
 Dr A Haynes - Non-Executive Director
 Mr J Melbourne – Chief Operating Officer
 Ms E Meldrum - Acting Chief Nurse
 Ms J Tyler-Fantom - Acting Chief People Officer (non-voting)

In Attendance:

Ms A Moss - Corporate and Committee Services Officer

RECOMMENDED ITEMS01/22 **Junior Doctors Guardian of Safe Working Quarterly Update**

The Acting Chief People Officer presented paper F which noted that the Guardian of Safe Working was responsible for overseeing the safety of junior doctors working and required to provide assurance by exception reporting on a quarterly basis. It was reported that for Quarter 3 2021/22 204 exceptions reports had been recorded, which was an increase of 57 from the previous quarter. Some of these exceptions had been raised at a time of significant medical workforce pressures, and higher levels of absence due to Covid-19. There were 12 immediate safety concerns, which were being addressed. The Acting Chief People Officer noted that the report would be updated prior to presentation to the Trust Board in May 2022.

Recommended –That (A) the Junior Doctors Contract Guardian of Safe Working Quarterly Report be updated to reflect the action taken CPO

and (B) that the updated) be recommended to the Trust Board for approval and as a stand-alone report in May 2022. CPO

RESOLVED ITEMS02/22 **APOLOGIES**

Apologies for absence were received from Ms G Collins-Punter, Associate Non-Director and Mr D Kerr, Director of Estates and Facilities.

03/22 **DECLARATIONS OF INTERESTS**

There were no declarations of interest.

04/22 **MINUTES**

Resolved – that the Minutes of the meeting of the People and Culture Committee (PCC) on 23 December 2021 (paper A) be confirmed as a correct record.

05/22 **MATTERS ARISING**

Resolved – that the report be received and noted.

06/22 **KEY ISSUES FOR ASSURANCE**

06/22/1 Looking After Our People - UHL People Strategy

The Acting Chief People Officer presented paper C and provided an update on the delivery of the UHL People Strategy, which was aligned, to the LLR and National People Plan. It was noted 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. Work on the National People Plan, with its seven core commitments, had progressed albeit as a slower rate in light of the pandemic and focus on Covid-19 vaccination as a condition of deployment.

With respect to health and wellbeing, appended to the report was a summary of the offer to staff. There would be printed versions and highlighted on the intranet to ensure the extensive offer was visible.

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. Five pop up clinics had been held in December 2021 and January 2022 with a remote event offered to Alliance staff. The main requests were for payroll and pensions advice. Twenty-five quick reference guides were launched to support managers with people processes, such as payroll. Paper I on the agenda updated PCC on the work undertaken to digitalise and simplify people processes.

The PCC expressed its support for the health and wellbeing agenda and transformation of people processes. The Chief Operating Officer noted the need to consider wellbeing in a broad sense to take account of the stresses in working life, for example, the provision of the right equipment. Ms V Bailey, Non-Executive Director, noted the need for a variety of mechanisms to ensure staff were heard. In addition, noting the process improvements, she highlighted the need to ensure that new processes were not merely overlaid but the change management process ensured that legacy systems were stopped.

Dr A Haynes, Non-Executive Director, enquired about the leadership development for the system. The Acting Chief People Officer noted that Ms B Kotecha, Associate Director for Systems Leadership and OD was leading on the initiative, which was a co-creation. There would be an update a future meeting.

The Chief Information Officer reflecting on the transformation of the transactional processes noted that it had been a collaborative approach between People Services and IM&T and noting the need, for IM&T, to balance the priorities between clinical and corporate requests for support.

Resolved – that the contents of the report be received and noted.

06/22/2 National Staff Survey Overview

The Acting Chief People Officer presented paper D which provided a 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.

The response rate had improved from 33%, in 2020, to 45% in 2021. The most improved scores were for the positive action taken by the organisation on health and wellbeing. The most declined scores related to staffing levels and feeling able to recommend the Trust as a place to work or for a place for friends and family members to be treated. The Chief Executive had asked for the approach to the survey results to be considered at the Trust Board in April 2022.

PCC noted the need to acknowledge how staff were feeling coming out of the pandemic and levels of fatigue whilst generating enthusiasm and hope for the future.

Resolved – that the contents of the report be received and noted.

The Acting Chief Nurse presented paper E, which provided 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. In addition, the paper addressed recruitment and retention plans.

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 noted that staff had been redeployed to alternative wards to mitigate staffing gaps and skill mix to ensure delivery of safe care. Data was captured to know where staff were redeployed from, and to where, to review the impact.

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.

In December 2021 there had been three concerns raised with the Freedom to Speak Up Guardian that related to staffing. The recurrent theme identified for escalation was behaviours, relationship breakdowns, and not patient safety.

With respect to maternity care, the majority of red flags related to delays in induction of labour, which reflected staff shortages on the delivery suites. There had been no adverse outcomes associated with any of the reported red flags.

The Acting Chief Nurse concluded her presentation by noting the plans for nurse and health care worker recruitment adding the need to consider different career pathways for the latter group.

Mr B Patel, PCC Chair, Non-Executive Director, asked whether the salaries for health care assistants were competitive. The Acting Chief Nurse noted that the posts were on Agenda for Change rates and were higher than salaries offered in other settings. However, they were dealing with complex cases and equipment. It was felt that the level of responsibility and rates of pay were not comparable with other roles, for example, domestic assistants who were also on a band 2. This highlighted the need to ensure there were development opportunities and a career path.

Ms V Bailey, Non-Executive Director, commended the report and the new approach to triangulating staffing and safety. She asked whether PCC should receive similar reports for different groups of staff. The Acting Chief Nurse reported that an Associate Chief Allied Health Professional would be recruited. The Acting Chief People Officer noted that the work would be addressed within the workforce plan. The strategic workforce plan would be presented to the April 2022 meeting and sit alongside the People Plan.

Ms V Bailey, Non-Executive Director, referencing the surge capacity created to relieve winter pressures asked how bed availability impacted on the ability to admit patients. She noted that the additional beds had not changed the conversion rate for the Emergency Department. The Chief Operating Officer considered that opening additional beds had been the right approach but acknowledged the knock-on effect was that staff were spread thinly. This, in turn, had delayed patient discharges. He thought that the ability to discharge patients had a significant impact on patient flow and the ability to admit patients from the Emergency Department. The Chief Operating Officer proposed that the Trust should, if there was not a step change in the ability to discharge patients, consider its role in community care.

Ms V Bailey, Non-Executive Director, with reference to the health care assistant roles, noted the need to be creative in designing new roles and a flexible workforce. She felt that it would not be possible to be a community provider based on the current model and there was transformation work needed.

Resolved – that the contents of the report be received and noted.

06/22 **ITEMS FOR NOTING**

06/22/1 Workforce and OD Data Set

Resolved – that the contents of the report Workforce and Organisational Development Data Set (paper G) be received and noted.

06/22/2 Agile and Flexible Working/Working from Home Considerations

Resolved – that the contents of the Agile and Flexible Working/Working from Home Considerations (paper H) be received and noted.

06/22/3 Transactional Transformation Update

Resolved – that that the contents of the Transactional Transformation Update (paper I) be received and noted.

06/22/4 SAS Doctor Contract

Resolved – that that the contents of the SAS Doctor Contract (paper J) be received and noted.

07/22 **ANY OTHER BUSINESS**

It was noted that PCC would consider whether to resume face-to-face meetings.

08/22 **IDENTIFICATION OF ANY KEY ISSUES FOR THE ATTENTION OF THE TRUST BOARD**

- Junior Doctors Guardian of Safe Working Quarterly Update

09/22 **DATE OF THE NEXT MEETING AND FUTURE PCC MEETING DATES**

Resolved – that the next meeting of the People and Culture Performance Committee be held on Thursday 28 April 2022 from 11.30am until 1.30pm.

The meeting closed at 12.35pm.

Alison Moss - Corporate and Committee Services Officer

Cumulative Record of Members' Attendance (2021-22 to date)

Voting Members

<i>Name</i>	<i>Possible</i>	<i>Actual</i>	<i>% attendance</i>
<i>I Crowe (until January 2022)</i>	6	6	100
<i>V Bailey</i>	7	6	86
<i>P Baker</i>	N/A	-	
<i>R Brown</i>	N/A	-	
<i>Mr A Carruthers</i>	7	7	100
<i>Ms G Collins-Punter</i>	0	0	0
<i>C Fox (until December 2021)</i>	5	1	20
<i>A Furlong</i>	N/A	-	
<i>K Gillatt (until January 2022)</i>	6	6	100
<i>D Kerr</i>	0	0	0
<i>A Haynes (from February 2022)</i>	1	1	100

<i>S Lazarus</i>	N/A	-	
<i>D Mitchell (until January 2021)</i>	6	4	66
<i>E Meldrum (from January 2022)</i>	1	1	100
<i>I Orell (until December 2021)</i>	3	3	100
<i>B Patel (Chair)</i>	7	7	100
<i>T Robinson</i>	0	0	0
<i>J Tyler-Fantom (from January 2022)</i>	1	1	100
<i>H Wyton (until December 2021)</i>	6	5	83