

Whittington Health **NHS**

WORKFORCE ASSURANCE COMMITTEE

Minutes of meeting held on Wednesday 26th April 2017

Present:	Norma French Helen Gordon Graham Hart Steve Hitchins Lisa Smith	Director of Workforce Deputy Director of Workforce Non-Executive Director (WAC Chair) Trust Chairman Assistant Director, Nursing Education & Workforce
In attendance:	Caroline Fertleman Kate Green	Guardian of Safe Working PA to Director of Workforce (minutes)

- 17/10 Welcome and Introductions
- 10.01 Graham Hart welcomed everyone to the meeting. There was some disappointment at the low turnout of committee members, and Graham agreed to raise this at the Trust Board the following week. Under minute 03.02, Norma would draft a note to all committee members reminding them to send a substitute in the event of their being unable to attend in future. Lisa Smith was warmly welcomed to her first meeting of the committee.
- 10.02 Apologies for absence were received from Philippa Davies, Jana Kristienova, Stephen Bloomer and Siobhan Harrington.
- 17/11 Minutes of the meeting held on 8th February
- 11.01 It was noted that the spelling of Adrien Cooper's name in minute 8.3 needed to be corrected; other than this, the minutes of the meeting held on 8th February were agreed. It was agreed that for the future pages should be numbered, also that papers circulated should be clearly labelled and numbered. Graham requested that a separate action log be added to future minutes so that actions could be easily identified.
- 17.12 Matters arising
- 12.01 It was noted that matters arising from the February minutes would be covered under the Workforce Director's report.

17.13 Quarter 4 Workforce Report

13.01 Introducing this item, Helen Gordon said there were a number of process issues that had arisen at the February meeting. The first of these was the request for trends information, and work was beginning on this, however historical reference points were limited so this would take time. The second was information on diversity; data had been included within the report for the first time, and Helen stressed this was not in any way intended to replace information contained within the Workforce Race Equality Standard (WRES) or any other statutory requirement, but a year's worth of data was now available and so had been included for information. Turning to the exit information data, Helen reminded committee members she had been asked to provide assurance around uptake, and she was pleased to report that uptake had moved from 57% the previous quarter to 72% for quarter 4. She paid tribute to the work carried out with payroll to automate the system which had helped to bring this about.



- 13.02 Moving onto specific sections of the report, Helen highlighted the following:
 - The analysis of bank and agency usage where an increase in agency usage was almost certainly attributable to winter pressures, however the increase was at a slower rate than the previous quarter and therefore moving in the right direction; there were however still some 'hotspots'. Slide 3 for example showed an increase in AHP usage, which might be down to the changes being made to bank rates which had not yet been finalised.
 - Table 6 showing vacancies was not greatly changed from that shown in the previous report. Helen drew attention to the interplay between turnover and recruitment activity, the aim being not just to replace like for like but to actively reduce the vacancy factor.
 - Section 7 showing sickness absence shows an improved position, which given the pressures currently faced by staff was felt to be reassuring.
 - Section 9 on appraisal also showed an improving picture. Much corporate attention had been placed on this and the focus was increasingly positive.
 - Exit interviews of interest was the analysis showing where people had moved on to, with a surprisingly high number (9%) shown as 'no employment'. Further analysis would be undertaken to provide a better understanding of this, including seeing how this correlated with the information in the staff survey.
 - Equality and Diversity data as yet it was difficult to draw conclusions from the data collected but more would follow once trends analysis became possible.
- 13.03 Norma French added that the Emergency & Urgent Care ICSU appeared to be showing as an outlier in terms of its bank and agency usage; she had been informed by the senior manager with responsibility for the rostering system that shifts had not been entered onto the system in a timely fashion which inevitably impacted on the data and there was a need to triangulate this. Graham Hart said that that ICSU also showed a high level of sickness; this was something he had remembered from the GMC survey results presented by Graeme Muir at a previous meeting. Lisa Smith pointed out that a high number of RMNs had been required to care for psychiatric patients, and that frequent delays occurred in finding these patients beds once they had been discharged; this was now not only a London-wide problem but a national one.
- 13.04 Norma informed the committee that Danielle Morrell had now been appointed as substantive Director of Operations for the Emergency & Urgent Care ICSU, and at that ICSU's performance review meeting earlier in the week it had been evident that she was already exerting a firm control on staffing issues. Graham suggested that once Danielle had settled into her role it might be timely for the committee to conduct a deep dive into staffing issues within Emergency & Urgent Care, and Norma French expressed support for this, saying that Danielle would welcome the opportunity to air any issues of concern and also to learn how the committee might best offer its support. Lisa Smith had researched data available from Picker (the organisation contracted to carry out the annual staff survey) and had been informed that of the 73 clients that company worked with, Whittington Health had been rated as having the fifth most improved ED.

- 13.05 Steve Hitchins enquired whether the Emergency Care Improvement Partnership (ECIP) interventions had impacted on staffing issues, and Norma replied that that work had broadly concentrated on patient flow. Steve had also held an induction meeting with newly-appointed Head of Organisational Development Eleanor Clarke, and learned she would be looking at some of the junior doctors' issues raised; Norma added that Eleanor would also be leading on the appointment and training of twelve Trust mediators, an exciting and innovative project for the Trust.
- 13.06 Referring back to bank rates, Steve said that he had been made aware of some concerns regarding the impact of the new rates of some staff groups, and enquired whether the effects were being monitored. Helen Gordon replied that some very useful discussions had been held at the start of the implementation, and ward managers in particular had seen that the new system was actually fairer than the previous one in that staff were paid at the rate for the grade they were working. She had also heard only the previous day from one of the heads of nursing who had confirmed that although some concerns had initially been raised staff appeared now to be satisfied with the position. She would however continue to monitor this.
- 13.07 Steve asked what measures might be taken to increase diversity, and Helen replied that this was part of a wider discussion which needed to take place around WRES; there needed to be some agreed priorities on which clear progress could be tracked. Norma added that one of the outcomes of the recent restructuring of the OD, Learning & Development Team was the appointment of an equalities lead post reporting to Charlotte Johnson, the first such appointment made by the Trust. In answer to a question from Lisa Smith about promotion, Helen replied that this was an issue more usefully considered in the context of the staff survey results. It was noted that the make-up of the Trust Board itself reflected positively on diversity at least within the Non-Executive side. Caroline Fertleman added that when designing the Schwartz rounds the planning team had been very mindful of the backgrounds of the presenters in an attempt to represent diversity; this was another method of ensuring better representation and increasing awareness.

17/14 Report from Guardian of Safe Working

- 14.01 Caroline Fertleman informed the committee that she had been in post since last August, and had begun the role at the time of the implementation of the new junior doctors' contract, which had not been well received by many. Under the old contract a system of diary card monitoring had existed; under the new, exception reporting had been introduced, and this came with two options, time off in lieu (TOIL) for additional hours worked or payment, the latter being accompanied by the issuing of a fine, with the decision of how to spend accumulated funds being made by the junior doctors' forum. The Trust had received 108 exception reports (more from within medicine than surgery), with the three main causes being:
 - paperwork needing to be completed for pre-11am discharges
 - phlebotomy
 - staff shortages due to sickness or other (mainly unplanned) absence.

- Whittington Health NHS
- 14.02 At the first meeting Caroline had attended in her new role the emphasis had appeared to be on encouraging TOIL. Guidance now suggested that for under half an hour no report should be submitted, for between 30-60 minutes TOIL be claimed, for between 1 and 4 hours payment should be made, and for 4 hours plus TOIL should be taken since this equated to half a day's work. A number of reports remain unclosed, and Caroline has written to the responsible supervisors reminding them of this. TOIL can only be taken during the junior doctors' current placement, so if they move on before the issue is resolved payment then has to be made. Compared to other Trusts Whittington Health has received a relatively high number of reports, but that might be attributable to dissatisfaction with the previous diary card monitoring.
- 14.03 Caroline's report also included some narrative which had served in turn to inform the wordcloud illustrated. The report then went on to look at different specialties. In summary then 108 exception reports had been received, some of which remained open, however this was a new process which would inevitably take a while to bed in. Caroline had spoken at Medical Committee, she had also attended the Integrated Medicine ICSU meeting, and was due to attend the Children & Young People ICSU the following week. The junior doctors' forum was progressing well, as well as junior doctors there was representation from the LNC and DME; together they had carried out a great deal of work around scheduling, and had been very supportive of Caroline's role. The junior doctors had also organised a conference, written several articles, and conducted a survey to canvas opinion on how the fines money should be spent.
- 14.04 Concluding, Caroline thanked everyone for their support, and in particular Graeme Muir and Lawrence Anderson for their assistance with the report. She said that she felt very privileged to be working with such great junior doctors and supportive senior managers. The biggest issue though for her remained that of phlebotomy, and this remained unresolved. Lisa Smith expressed surprise at this given that her team helped to train phlebotomists within the Trust, and it was agreed she and Caroline would meet to discuss this separately. Helen Gordon stressed the importance of working together to secure systems improvement, which should include the development of a local policy and procedure for exception reporting, and said that Lawrence was happy to attend the junior doctors' forums to take this forward.
- 14.05 Norma French had attended that week's ICSU quarterly performance review meetings, and said that the ICSUs were keen to see Caroline's report. Caroline would make some minor amendments then send to Norma for circulation. Helen suggested the report be sent to the Trust Management Group (TMG) given all ICSU clinical directors are members of that body. Graham Hart praised the quality of the paper and said that he looked forward to being able to review trends over time. He wondered whether the format of the report might be slightly onerous for those with responsibility for its production, but was informed by Caroline that the format was a statutory requirement as laid down by NHS Improvement so there was little scope for alteration. Caroline would however welcome some feedback on which parts of her report had been particularly good and helpful, and Norma agreed to pick this up outside the meeting. Concluding, Caroline informed the committee that the Trust would have its full complement of junior doctors in August, so comparative data for the year including all would be available in August 2018.

17/15 Employee Relations Activity

- 15.01 Helen Gordon introduced the report which summarised employee relations activity for Quarter 4. This was, she explained, still being drawn from a manual system. The team had been going through an internal process redesign, which had included the development of training sessions for line managers on such subjects as conducting investigations and addressing long-term sickness these were scheduled to begin the following week. Unfortunately however Kristen Cluer who had been leading on this developmental work was due to leave the Trust within the next fortnight, so there would inevitably be a brief period of discontinuity.
- 15.02 Information on diversity was not currently routinely collected on the manual system; in order to include it, it was necessary to conduct a 'read across' exercise to the Electronic Staff Record (ESR). The entire report was generated from a large spreadsheet, the completion of which was demanding of staff time and effort and (in terms of timing) sometimes conflicted with their desire to move towards the timely resolution of cases.
- 15.03 With the assistance of medical staffing lead Lawrence Anderson, it was proposed to migrate the medical staffing cases onto this system, thus enabling this data to be included in reports to the committee.
- 15.04 Steve Hitchins asked what the plan was for data collection and reporting moving forward, and Helen replied that ideally, she would like to bring in an automated casework management system, which would also generate standard letters, reminders etc, although she fully understood that current financial constraints made this unlikely in the immediate term. It was possible that some type of system was available through ESR, but it was unlikely to be the most effective or user-friendly system for staff.

17/16 Director's Update

- 16.01 Norma French began her report by expounding upon the link between this committee and the medical productivity work currently being undertaken. A steering group (Improving Medical Value Programme Board) had now been convened; this met fortnightly and was chaired by Rob Sherwin. The Allocate IT system had been purchased, and the job planning system was under review, this included the introduction of a new job planning toolkit, for which a consultation exercise was underway through the Medical Negotiation Sub-Committee (MNSC).
- 16.02 Four of the six ED consultant appointments had now been made, however the efficacy of this had been slightly negated by maternity leave within the team which meant that staffing levels to some extent remained a challenge. Danielle Morrell had recently been confirmed as substantive Director of Operations however, and her vision was that staffing levels and rotas would be compliant from 17th July.
- 16.03 Staff appraisal rates have risen to 80%, representing a huge rise in some of the ICSUs. This had been very encouraging to hear voiced at the performance review meetings. There had also been a great deal of data cleansing. Since the committee last met the results of the staff survey had been received all ICSUs had been sent their own discrete data and had developed action plans accordingly. Norma would be bringing a progress report to the Trust Board in the autumn.

- 16.04 Norma had now completed her restructuring of the learning & development and OD team, and was pleased to report that Helen Kent had been appointed as Assistant Director of Learning & OD and would be joining the Trust on 12th June. Eleanor Clarke, previously with the Programme Management Office, had been appointed as Head of OD working to Helen, and Charlotte Johnson had been appointed as Head of Development & Inclusion; Charlotte's role would include management of an Equalities Manager, the first such post to be appointed at the Trust. A Learning & Development Trainer was also being recruited. These appointments would result in the team being at full establishment by the summer.
- 16.05 Moving to wider recruitment issues, Norma informed the committee that four nursing leads were to fly out to the Philippines on 26th May to conduct a nursing recruitment exercise there. There were also plans for another cross-Trust open day, and Lisa Smith had been in discussion with UCLH about rotation posts. The first meeting of the apprenticeship steering group had now taken place, and recruitment of apprenticeships was currently focused on two areas; estates & facilities under Adrien Cooper, and health care assistants under Lisa. Helen Gordon was about to launch a consultation on the form and function of the temporary staffing office.
- 16.06 Concluding, Norma informed the committee that she had recently written a paper on long service awards, which she had sent to Steve Hitchins for his consideration.
- 16.07 Steve Hitchins added that there were plans to hold a Whittington Health open day on September 16th, and it was possible this could be expanded to include a recruitment component. A planning group for the day was being led by Carol Gillen and co-ordinated by Delia Mills. Steve also invited committee members to reflect, and let him have their thoughts, on the amount of senior staff time currently being taken up with the STP, strategic partnership working etc this was, he suggested, quite evident in the lack of directors' availability for patient safety huddles and indeed by the poor attendance at that day's meeting. Norma French replied that for her own part, the NC London HR Directors met fortnightly, the venue meant she would be losing half a day each time so she had begun to dial in to meetings instead. Helen Gordon echoed this, saying she had been asked to commit to six full days to work on the bank proposals. This issue was expected to come up at the following week's Board meeting.

17/17 Self-assessment of sub-committees and terms of reference

- 17.01 Norma French proposed amendments to the membership section of the terms of reference, which were to add Helen Kent to the membership, and to add Lisa Smith to the committee in place of Philippa Davies. This was agreed, and the revised terms of reference were approved.
- 17/18 Any other business
- 18.01 There being no other business, the meeting concluded at 3.20pm.