

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST**MINUTES OF THE PEOPLE AND CULTURE COMMITTEE (PCC) MEETING HELD ON THURSDAY
25 JULY 2024 AT 10:00 AM – VIRTUAL MEETING VIA MS TEAMS****Voting Members Present:**

Prof I Browne – Non-Executive Director (Chair)
 Dr R Abeyratne – Director of Health Equality and Inclusion
 Ms V Bailey – Non-Executive Director
 Dr A Haynes, MBE – Non-Executive Director
 Mr J Melbourne – Chief Operating Officer
 Mr B Patel – Non-Executive Director
 Ms C Teeney – Chief People Officer

In Attendance:

Mr R Binks – Deputy Chief Nurse
 Mr M Brearley – Interim Chief Financial Officer
 Ms B Cassidy – Director of Corporate and Legal Affairs
 Ms K Ceesay – Deputy Chief People Officer
 Ms T Francis – Senior People Partner
 Ms K Khaira – Head of People Services
 Ms T Larder – Head of People Services
 Mr R Manton – Head of Risk Assurance
 Ms Z Marsh – Deputy Chief People Officer
 Ms J McCarthy – Senior Learning and Development Manager
 Ms A Moss – Corporate and Committee Services Officer
 Ms R Moss – Freedom to Speak Up Guardian
 Mr R Singh - Guardian of Safe Working and Consultant in Medicine
 Ms S Zavery – Head of Equality, Diversity and Inclusion

		<u>ACTION</u>
	<u>RESOLVED ITEMS</u>	
01/24	WELCOME AND APOLOGIES FOR ABSENCE	
	Apologies for absence were received from Dr R Abeyratne, Director of Health Equalities and Inclusion, Mr D Barnes, Deputy Medical Director, Mr A Carruthers, Chief Information Officer, Ms M Smith, Director of Communications & Engagement and Ms J Hogg, Chief Nurse.	
02/24	DECLARATIONS OF INTERESTS	
	There were no declarations of interests made at this meeting.	
03/24	MINUTES	
	It was noted that the Minutes of the meeting held on 30 May 2024 would be presented to the next meeting.	
04/24	MATTERS ARISING	
	Paper B updated members on the position of actions from previous PCC meetings.	
	<u>Resolved</u> – that the report be noted, and any updates be taken forward by the named leads.	Named Leads
05/24	KEY ISSUES FOR ASSURANCE	
05/24/1	<u>Board Assurance Framework</u>	
	The Head of Risk Assurance presented the report which addressed the risks on the Board Assurance Framework (BAF) that related to the remit of the Committee (paper A refers). The risks	

	<p>had been reviewed and there were no changes to the risk scores.</p> <p>Ms V Bailey, Non-Executive Director, proposed that the description of the recruitment controls be reviewed following discussion of the Month 3 Workforce Plan Position (item 05/24/7). The Chief People Officer noted that the risk looked at workforce capacity and capability. The interdependence between the workforce and finance risks was addressed in relation to the finance risks on the BAF and considered by the Finance and Investment Committee. Prof I Browne, noting the Trust's budget deficit, highlighted the need to consider the whole picture. A paper triangulating financial, workforce and safe staffing data would be considered at the Trust Board.</p> <p>It was agreed to discuss, outside the meeting, how the Committee used the BAF to ensure it was a living document and informed what reports were presented.</p> <p>Ms V Bailey, Non-Executive Director, asked whether there was a description of which steering groups reported into the People and Culture Committee.</p>	
	<p><u>Resolved</u> – that (A) the report be received and noted,</p> <p>(B) the PCC Chair, Chief People Officer and Head of Risk Assurance review how the Committee used the BAF, and</p> <p>(C) a document detailing the Board and Groups reporting to PCC be presented.</p>	<p>PCC NED CHAIR/ CPO/ HRA CPO</p>
<p>05/24/2</p>	<p><u>Chief People Officer Update</u></p> <p>The Chief People Officer presented an update on regional, national and local developments relevant to the committee's terms of reference (paper D refers).</p> <p>The Chief People Officer highlighted the potential for a pay settlement with junior doctors and industrial action to be taken by nurses and general practitioners. She reported that she was the employer sponsor for the Midlands regional networks' work on sexual safety. Joint work was being undertaken with the East Midlands Acute Providers network on aligning employment policies. Work on the staff survey to be launched in September 2024 was noted.</p> <p>Prof I Browne, Non-Executive Director PCC Chair, asked about the impact of the increase in the national living wage on the staffing structure. The Chief People Officer hoped that a national pay award would resolve the anomalies but in the interim, there were issues to be addressed with respect to salary sacrifice schemes.</p> <p>Ms V Bailey, Non-Executive Director, asked for an update on the dispute regarding back pay for Health Care Workers. It was reported that Unison's grievance would be heard the following week. The Union had notified the Trust of its intention to take discontinuous industrial action in August 2024. Plans were in place to manage staffing on those days. There would be an update to the private meeting of the Trust Board on 8 August 2024.</p> <p>The Chief People Officer presented for approval a set of metrics for People and Culture, noting the proposed reporting route and frequency. Ms V Bailey, Non-Executive Director, considered it would be useful for the metrics to be accompanied by a narrative to provide context. Prof I Browne, Non-Executive Director PCC Chair, added that it would be useful to report on trends. The Deputy Chief People Officer (Ms K Ceesay) noted that work was being undertaken with the Analytics team to present the data but cautioned of data quality issues. She added that the team was under pressure and that external support had been provided from an external adviser. The Chief Operating Officer suggested that the financial metrics be presented as a monetary value, as well as a percentage.</p> <p>The Chief People Officer noted that work had commenced on the Trust's People and Culture Strategy. Iterations would be presented to future meetings to ensure engagement and provide assurance of progress.</p>	
	<p><u>Resolved</u> – that (A) the report be received and noted, and</p>	

	(B) the people and culture metrics be agreed.	ALL
05/24/3	<p><u>Freedom to Speak Up Update</u></p> <p>The Director of Corporate & Legal Affairs introduced the report of the Freedom to Speak Up Guardians (paper E refers). She noted that the format was prescribed by the external agency and there was a need to provide additional data on trends for future reports.</p> <p>Ms S Kaya and Ms R Moss reported that 80 concerns had been raised in Quarter 1 2024/25 (bringing the total to 235 since the service was relaunched in October 2023). The main themes related to management issues, patient safety queries and systems and procedures. There had been 13 patient safety concerns raised in Quarter 1 2024/25 which had been responded to quickly. There were three worker safety/wellbeing concerns. Concerns that were escalated related to lack of support for long term health conditions or disability. The staff group that raised the most concerns was Administrative and Clerical followed by Medical and Dental and Healthcare Scientists. The Clinical Management Groups/Directorates with the highest number of concerns were Clinical Support and Imaging and Estates and Facilities. The report highlighted the activity undertaken to publicise the service.</p> <p>The Deputy Chief Nurse invited the Guardians to attend existing nursing forums. In response to a question from the Director of Health Equalities and Inclusion the Guardian confirmed that they would be working with staff networks.</p> <p>Ms V Bailey, Non-Executive Director, considered it would be helpful to state the numbers of staff/concerns as a percentage to the staff group. She prompted the Committee to think about how it responded to issues of culture and learning points. Prof I Browne, Non-Executive Director PCC Chair, suggested that the Committee could consider a deep dive to look at key issues.</p> <p>Dr A Haynes, Non-Executive Director, highlighted the concerns around the sexual safety of medical students. The Chief People Officer noted that sexual safety for doctors in training was an area of focus and a reporting tool was being considered. Ms R Moss noted that this was a national issue and students feared speaking up in case it impacted on their future career. The Chief People Officer added that the way the training programme operated was a problem which had been referenced in the report ‘Surviving in Scrubs’.</p> <p>The Director of Corporate and Legal Affairs noted that there was a lot of work to do. An updated action plan, drawn up using the National Guardian’s Office’s self- assessment tool, would be presented to the next meeting. There would be a review of how ‘detriment’ was defined.</p>	
	<u>Resolved</u> – that the report be received and noted.	
05/24/4	<u>Junior Guardian of Safe Working – Quarterly Report</u>	
	<p>Mr R Singh, the Guardian of Safe Working presented the quarterly report (paper F refers). The report was considered in mitigation of BAF risk 10 (failure to recruit, retain, redesign and transform the workforce, it may result in insufficient workforce capacity, capability and lacking diversity).</p> <p>The report noted the number of concerns raised by all junior doctors (including Trust Grade Doctors) with respect to their work patterns, and rota gaps noting any consequential patient safety concerns. Between 1st March and 31st May 2024, 200 exception reports had been recorded. This was an increase of 61 reports compared to the previous quarter and an increase of 85 when compared to the same quarter in 2023. The main areas of concern related to staying late, workloads and disproportionate administrative tasks. The area of greatest concern was general surgery. There had been reports of bullying and poor behaviour.</p> <p>The Committee noted the issues and impact arising from the delays in finalising rotas for Foundation Year 1 and 2 doctors. The Chief People Officer noted that this had been caused by a number of external factors (including the late addition of 41 Foundation year 1 doctors) which the clinical teams had worked hard to address. She provided assurance that processes were in place for Foundation Year 1 inductions and rotation of Foundation Year 2 doctors. The Chief People Officer acknowledged that impact on individuals. The Committee noted the potential for</p>	

	<p>reputational damage and suggested that there was a communication to the whole cohort to explain the issues and what actions had been taken.</p> <p>The Guardian of Safe Working reported on the work undertaken by both Guardians to address concerns, encourage reporting and promoting the service.</p> <p>Ms V Bailey, Non-Executive Director, acknowledged the positive work and noted the need to triangulate the data with patient safety concerns as poor morale led to a poor safety culture.</p>	
	<u>Resolved</u> – that the report be received and noted.	
05/24/5	<u>Employee Relations</u>	
	<p>Ms Z Marsh, Deputy Chief People Officer, provided an update on employee relations (paper G refers). The report was considered in mitigation of BAF risk 10 (failure to recruit, retain, redesign and transform the workforce, it may result in insufficient workforce capacity, capability and lacking diversity).</p> <p>The report updated the Committee on numbers of disciplinary, capability, resolution, and Employment Tribunal cases. Good progress had been made and the length of time taken to achieve a resolution was reducing.</p> <p>The overall absence rate for the Trust had increased to 5.68% which was above the national average and the Trust's target of 3% for 2024/25. It was suggested that the increased could be due to improved reporting. Anxiety/depression/stress was the most common reason.</p> <p>Dr A Haynes, Non-Executive Director, noted the good progress made, and asked whether there was a target for resolution of casework, and why one Clinical Management Group had a much higher number of cases than others. The Head of People Services (Ms T Larder), noting that as six bank case investigators had been recruited, she expected the average time to come down. The higher number of cases was due to a number of reasons and a high incidence within one department which had been the subject of an external review. Additional support was being provided. The Chief People Officer added that the average length of the case work was distorted by a number of cases involving external agencies, such as the police, where the time taken was out of the Trust's control. She highlighted that the number of suspensions was relatively low and that a number of long- standing and complex MHPS (Maintaining High Professionals Standards) cases had been resolved.</p> <p>Prof I Browne, Non-Executive Director PCC Chair, asked about the breakdown of cases between white and black minority and ethnic staff and whether the Trust was an outlier. He asked whether, given the main reason for sickness was anxiety and stress, there was the right offer for staff to enable them to return to work. The Chief People Officer noted that the next meeting would focus on the health and wellbeing offer. She noted that one of the main drivers for sickness absence was the organisation being under resourced. There was a need to look at safe staffing, recruitment and retention and the impact of health and wellbeing services in the round and whether the impact of that investments could be demonstrated.</p> <p>The Chief People Officer considered that further work could be undertaken to demonstrate that the Trust was adhering to best practice, removing bias and wider benchmarking. In addition, she noted that cases that went to Employment Tribunals were reported to the Remuneration Committee (where there was a financial settlement) and these should be referenced in future reports.</p> <p>The Committee took assurance from the report and noted that there would be a focussed discussion on health and wellbeing at the August meeting of the Committee.</p>	
	<u>Resolved</u> – that the report be received and noted.	
05/24/6	<u>Equality, Diversity, and Inclusion</u>	
	The Deputy Chief People Officer (Ms Z Marsh) and the Head of Equality, Diversity and Inclusion presented paper H which provided an annual review against the Workforce Race Equality	

	<p>Standard (WRES), Workforce Disability Equality Standard (WDES), and Gender Pay Gap. The report was considered in mitigation of BAF risk 10 (failure to recruit, retain, redesign and transform the workforce, it may result in insufficient workforce capacity, capability and lacking diversity).</p> <p>The metrics for the WRES and WDES highlighted the different experiences of Black Minority and Ethnic (BME) staff and white staff and disabled and non-disabled staff. There had been some improvements and more work to do, specifically in respect to representation of BME staff in non-clinical pay bands 7 and above, and for medical staff at the consultant grade. The report highlighted the differing experiences for recruitment and disciplinary processes. It was noted that the national data had yet to be published.</p> <p>The report identified the next steps to be taken to support the Equality Diversity & Inclusion Strategy.</p> <p>The Deputy Chief Nurse asked about staff declaring disabilities and whether this was known at the outset or declared during the disciplinary process. It was noted that staff were encouraged to declare any disability and the 'disability confident' symbol was used on recruitment material and the reasonable adjustment guidance was regularly promoted.</p> <p>The Director of Health Equalities and Inclusion questioned the use of the label 'BME' and whether it was helpful. She suggested whether the staff networks could consider what terminology should be used. With respect to the report on the inclusion summit and celebrating achievements, she cautioned of the need to balance this with acknowledging that there is work to do to address racism experienced by staff and patients. The Deputy Chief People Officer acknowledged the point and noted there had been a shift from presenting awards to recognising equality, inclusion and diversity.</p> <p>The Committee took assurance from the report and noted that there would be a deep dive on equality and diversity and inclusion at its October meeting.</p>	
	<u>Resolved</u> – that the report be received and noted.	
05/24/7	<p><u>Workforce Productivity 2024/25 Month 3 Workforce Plan Position</u></p> <p>The Chief People Officer presented the reports on workforce productivity and the Month 3 Workforce plan (papers I and J). These reports were considered in mitigation of BAF risk 10 (failure to recruit, retain, redesign and transform the workforce, it may result in insufficient workforce capacity, capability and lacking diversity).</p> <p>As at end of June 2024 the workforce stood at 18,434 whole time equivalents (including bank and agency staff) which was 143 over plan with Clinical Management Groups/Directorates reporting vacancies. An exercise to understand the establishment, which posts were funded, and which were not, would conclude at the end of July 2024. This work would inform a plan for corrective action. In the meantime, vacancy control panels, led by Executive Directors were meeting weekly. An update would be reported to the next meeting.</p> <p>There had been good progress in reducing bank and agency spend.</p> <p>The Committee emphasised the need for a sustainable approach.</p>	
	<u>Resolved</u> – that the reports be received and noted.	
05/24/8	<u>NHS Annual Staff Survey</u>	
	The Chief People Officer directed the Committee to paper K which provided an update on the delivery plan in response to the 2023 staff survey, along with plans for the 2024 NHS Staff Survey.	
	<u>Resolved</u> – that the report be received and noted.	
05/24/9	<u>Education and Training update</u>	

	Due to time constraints and as the Chief Allied Professional was unavailable this item was deferred.	
	Resolved – that the report be deferred.	DCPO CCSO
05/24/10	<u>Management of Change Policy</u>	
	The Chief People Officer presented the revised Management of Change Policy for approval (paper M). The changes were minimal and reflected legislative changes with respect to Protection from Redundancy (Pregnancy and Family Leave) Act 2023.	
	Resolved – that the Management of Change Policy be approved.	CPO
05/24/11	<u>Internal Audit Report: Financial Systems – Pay Expenditure Audit</u>	
	The Deputy Chief People Officer (Ms K Ceesay) presented the report of 360 Assurance, the Trust's Internal Auditor, with respect to its audit of pay expenditure. The report provided moderate assurance. Recommendations in relation to controls that could be improved would be addressed.	
	Resolved – that the report be received and noted.	
6/24	ITEMS FOR NOTING	
	There were no items for noting.	
7/24	ANY OTHER BUSINESS	
	The Committee thanked Mr B Patel, Non-Executive Director, who was attending his last meeting of the Committee, for his service.	
8/24	IDENTIFICATION OF ANY KEY ISSUES FOR THE ATTENTION OF THE TRUST BOARD	
	Resolved – that the following items be escalated to the Trust Board on 8 August 2024:- <ul style="list-style-type: none"> • Junior Doctors Guardian of Safe Working – Quarterly Report • Freedom to Speak Up Update • NHS Annual Staff Survey 	PCC NED CHAIR
9/24	DATE OF NEXT MEETING	
	Resolved – that the next meeting of the People and Culture Committee be held on Thursday 29 August 2024 in the Board Room, Leicester Royal Infirmary from 10:00am.	

The meeting closed at 12.34 pm

Alison Moss – Corporate and Committee Services Officer

Cumulative Record of Members' Attendance (April 24-March 25) (excluding May 2024)

Voting Members

<i>Name</i>	<i>Possible</i>	<i>Actual</i>	<i>% Attendance</i>
Prof I Browne (Chair)	1	1	100
Dr R Abeyratne	1	1	100
Ms V Bailey	1	1	100
Mr A Carruthers	1	1	100
Dr A Haynes	1	1	100
Ms J Hogg	1	1	100
Mr J Melbourne	1	1	100
Mr B Patel	1	1	100
Ms C Teeney	1	1	100