

Meeting title:	People and Culture Committee					
Date of the meeting:	30.05.24					
Title:	Escalation Report from the People and Culture Committee (PCC): May 2024					
Report presented by:	Dr Andrew Haynes – PCC Non-Executive Director (acting Chair)					
Report written by:	Ms Tina Lee – Interim Corporate and Committee Services Officer					
Action – this paper is for:	Decision/Approval	x	Assurance	x	Update	x
Where this report has been discussed previously	None.					

To your knowledge, does the report provide assurance or mitigate any significant risks? If yes, please detail which

Yes. BAF risks within the remit of PCC are listed below:

BAF Ref	Risk Cause	Risk Event
10-PCC	Failure to recruit, retain, redesign and transform the workforce	Insufficient workforce capacity, capability and lacking diversity

Impact assessment

N/A

Acronyms used:

- People and Culture Committee – PCC
- Board Assurance Framework – BAF
- Non- Executive Director – NED
- Guardian of Safe Working – GOSW
- Freedom To Speak Up – FTSU
- HCSW – Health Care Support Workers
- GMTS – General Management Training Scheme
- LMTS – Local Management Training Programme
- ESR – Electronic Staff Record
- TOR – Terms of Reference
- WTE – Whole Time Equivalent

1. Purpose of the Report

To provide assurance to the Trust Board on the work of the Trust’s People and Culture Committee (PCC), and escalate any issues as required.

2. Recommendations

2.1 There are 2 items from PCC requiring for June 2024 Trust Board approval.

3. Summary

The following items from the PCC meeting of 30th May 2024 are summarised for the 13th of June 2024 Public Trust Board:

Recommendations:

3.1 Annual Report and Self-Assessment

Ms B Cassidy, Director of Legal & Corporate Affairs, provided an overview of the Annual Report update on the current position and effectiveness of the committee. The PCC workplan updated on a quarterly basis, including workforce-related financial planning. The CFO to attend quarterly PCC meetings for discussions on work-related financial planning. PCC to review the reporting sub-committee structure to ensure efficiency and effectiveness. Consideration and review how PCC integrate with other committees reviewing risk. There will be a change in Chair in July 2024.

People and Culture Annual Report 2023-24 are endorsed and recommended for Trust Board approval. A standalone report is included on the 13.06.2024 Trust Board agenda accordingly.

3.2 Update PCC TOR for Agreement and Approval

Ms B Cassidy, Director of Legal & Corporate Affairs, provided an update on the PCC Terms of Reference annual review update. Changes to the TOR are minimal and reflect the change of adding CFO to the meetings on a quarterly basis, and workforce and finance overlap this mirrors the arrangement in place at FIC for the CFO to attend that meeting.

People and Culture Committee Terms of Reference annual review are endorsed and recommended for Trust Board approval as per the attached.

Discussion items:

3.2 Guardian of Safe Working (GOSW) Report

Mr R Singh, Consultant provided an overview on Guardian of Safe Working Report and highlights of Quarter 4.

The PCC Committee were provided with an update on the quarterly report on Exception Reporting, 139 exceptions reported have been recorded which is a decrease of 48 compared to the previous quarter and is comparable to the same period in previous years. It was highlighted that a further Section was recommended by the PCC Committee on the report – Section 7, and this extra section has now been added with further information. The PCC Committee noted the contents of the GOSW report and was assured on the ongoing progress of the GOSW service to support UHL staff. The Chief People Officer will present a report to the Committee at the next meeting and escalate to the Board on conversion rates, induction, training and substantive employment of Junior Doctors.

The Chair thanked the GOSW team for all the work done and noted the development and commented on this project being critical moving forward for the future recruitment of Junior Doctors to work for the Trust at a Senior Consultant level.

3.3 Freedom to Speak Up Annual Plan (incorporating Q4 update)

Ms R Moss, and Ms S Kaya, Freedom To Speak Up Guardians, updated the Committee on the 6 monthly report, incorporating the Quarterly Report (4th Quarter – 01 January 2024 to 31 March 2024), as well as an oversight of the Speaking Up concerns raised, and giving a deeper insight into the progress and development of the service, with a summary of themes arising. It was reported that there have been 155 concerns raised to the FTSU Guardians, which includes 80 concerns within Q4, across all reported themes.

The Chair thanked the FTSU Team on all the critical ongoing work and activity and the Committee were assured on the themes and progression arising from cases received.

3.4 Chief People Officer Update

Ms C Teeney, Chief People Officer provided an overview on the updated Terms and Conditions on Consultants Pay Deal; Junior Doctors dispute, pay terms and conditions; call to action from GP's; and HCSW Re-bandings, and the potential knock-on effects currently within the NHS. The Committee was assured about the progress of the ongoing work being carried out by People Services Team.

The PCC Non-Executive Chair noted the ongoing work presented and was assured on the update.

3.5 Band 2 and 3 Update – Health Care Support Workers

Ms C Teeney, Chief People Officer provided assurance to the Committee and on the current situation regarding the ongoing dispute, rebanding and support of HCSW, seeking to resolve the situation and that the Trusts is working towards closure.

The PCC Non- Executive Chair was assured of the update and planned work to mitigate any potential risks that may occur as a result of further strike action.

3.6 Employee Relations Report (incl Pay Award, Nurse Pay Spine, Medical AI Update)

Ms K Kalwant, Head of People Services, updated the Committee regarding the live Employee Relations (ER) cases, outlining the number of cases for disciplinarys, resolution and capability, and highlighted the monthly partnership meetings with the FTSU Guardians. The Committee was assured on the progress of the programme of work related to disciplinary cases and sexual safety in healthcare.

The PCC Committee was assured on this important work and noted the contents and improvements of the update provided.

3.7 Reporting of Recruiting Activity

Ms R Darcey, Recruitment Manager, provided an update on the Annual Report of medical and non-medical recruitment activity (April 2023 to March 2024) and the positive impact on candidate experience for both medical and non-medical recruitment. The PCC Committee were updated on the recruitment events, community outreach events, recruitment support application sessions, Doctor induction programme and Clinical Fellowship programmes.

The PCC Committee was assured on the ongoing work to improve engagement within the local communities to support securing employment within the Trust.

3.8 Agency Compliance, Usage and Reduction

Ms K Ceesay, Deputy Chief People Officer, provided the Committee with assurance surrounding the programme of work to ensure compliance and governance surrounding agency usage, expenditure and reporting in accordance with the NHS England Agency Rules and plans in place across UHL on the reduction programme. PCC members noted that agency expenditure has reduced month on month. Agency spend M1 is the lowest it has been. Framework suppliers were particularly highlighted with a supportive piece of work in place and the planned target being met by June 2024.

The PCC Committee was assured on the ongoing work to reduce agency expenditure and also the work in place for framework suppliers.

3.9 Substantive Workforce Controls and Temporary Spend

Ms K Ceesay, Deputy Chief People Officer, provided a summary on the elements around the workforce plan and builds on other elements of the plan that are currently in place. Three areas were highlighted in the report – substantive workforce, bank WTE and agency WTE.

The PCC Committee were assured on the updated provide and the workforce plan, along with the position in month 1. The PCC Non-Executive chair thanked the team for their hard work.

3.8 EDI Quarterly Update (GPG, WRES/WDES/Staff Networks)

Ms S Zavery, Head of Equality, Diversity and Inclusion, provided an update on the Annual EDI Report, Gender Pay Gap, WRES and WDES action plans and the Equality Delivery System (EDS), and the work undertaken to achieve this within UHL.

The Committee received the update and were assured of the update.

3.9 People Services Work Programme

Ms K Ceesay, Deputy Chief People Officer, provided assurance to the Committee with an update on the delivery of the underpinning activities to strengthen and improve Operational People Services, highlighting in particular the progress on the workforce systems improvement programme, the transition away from absence recording on SmartAbsence and the use of core systems; and the underpinning recruitment activity in 2023/24, including best practice and the benefits of the recruitment events.

3.9 Culture Quarterly Update (incl staff survey, DP Behaviours, Sexual Safety)

Ms T Francis, Head of OD, Culture and Talent, provided assurance to the Committee of the progress from the 2023 Staff Survey responses and in particular highlighted engagement of staff, UHL Values and Behaviours Framework being rolled out and embedded and the aim to be “A Great Place to Work”. The report also highlighted the great progress and the areas for improvement, with agreed activities and timelines, with such things being launched as the Long Service Awards, Cultural Ambassadors training and the launch of the framework and supportive reporting tools.

The PCC Non-Executive chair thanked the team for their hard work.

4. AOB

- None

Reports for noting

- None

5. Supporting documentation

- None

6. Date of Next Meeting

Thursday 25th July 2024 – Board Room, Leicester Royal Infirmary.

People and Culture Committee

Terms of Reference

1. Constitution

The University Hospitals of Leicester NHS Trust hereby resolves to establish a Committee of the Trust Board (hereafter referred to as “the Board”) to be known as the People and Culture Committee (hereafter referred to as “the Committee”).

The Committee shall have terms of reference conferring delegated authority from the Board and will be subject to conditions such as reporting its activities of the Board, as the Board shall decide and act in accordance with any legislation, regulation or direction issued by regulators or statutory bodies.

2. Purpose

The purpose of the Committee is to act as a point of triangulation which seeks assurance from officers on the appropriateness and effectiveness of, and the adequacy of risk management arrangements associated with progress against the People Strategy and on shared workforce and finance reporting.

3. Membership

The Committee shall comprise:

Core Members

- 4 x Non-Executive Directors (not including the Trust Chair) one of whom will chair the Committee and one whom is the NED lead for Equality, Diversity and Inclusion.
- Chief People Officer
- Director of Health, Equality and Inclusion
- Chief Information Officer
- Chief Nurse
- Chief Operating Officer

Additional Attendance

Colleagues will be asked to attend to present and discuss relevant topics associated with their portfolio as is appropriate.

A standing invitation to attend the Committee will be extended to the following:

- Chief Executive
- Trust Chair

- Other Non-Executive Directors
- Representatives of Internal and External Audit
- Deputy Director of People Services
- Chief Financial Officer (to specifically attend for the quarterly update on shared workforce and finance reporting, and any related discussion items)
- Head of Risk and Assurance
- Director of Corporate and Legal Affairs

The secretary and administrative support to the Committee shall be provided through the Corporate and Committee Services.

A deputy shall be nominated to attend a meeting of the Committee when the absence of one of the members (detailed above) would prevent an item of business being addressed. The deputy attending shall count towards meeting quorum, but not to the attendance record of the committee member him / herself.

All members shall attend a minimum of 75% of meetings of the Committee on a rolling 12 month basis.

4. Quorum

Quorum shall be 4 members to include 2 Non-Executive Directors (one of whom will chair if the Committee chair is unavailable) and 2 Executive Directors.

5. Meetings

The Committee shall meet a minimum of 6 times per annum. Additional ad hoc meetings may be convened as and when required.

6. Duties

The Committee will:

6.1 Monitor and take assurance against the Trust's approach to Equality, Diversity and Inclusion monitoring and improvements.

6.2 Monitor and review the Trust's performance against the Workforce Race Equality Standard (WRES), Workforce Disability Equality Standard (WDES) and the Equality Delivery System 2 (EDS2) progress and corresponding actions.

6.3 Receive assurance that the Trust continues to develop and embed an open and safe culture towards Speaking Up. Receive quarterly FTSU reports in relation to concerns raised, themes and outcomes ensuring the Board has sight of any escalations of a concerning nature

- 6.4 Gain assurance that the Trust approach and initiatives connected to the promotion of staff health and wellbeing are aligned to workforce needs and embody the culture and values of the organisation
- 6.5 Receive quarterly assurance reports from the Guardian of Safe Working Hours
- 6.6 Receive assurance there are robust and effective processes in place for the delivery of transactional services
- 6.7 Be assured that the Trust's approach and initiatives connected to attract, recruitment and retention are effective
- 6.8 Seek assurance the Trust has an appropriate workforce plan which aligns with the Trusts broader business plan
- 6.9 Gain assurance on the Trust approach and initiatives connected to culture improvement
- 6.10 Seek assurance there is a positive and open culture to staff engagement and that there are appropriate processes in place for engaging and communicating with staff on Trustwide initiatives
- 6.11 Receive and review the findings of the annual National Staff Survey, and take assurance on the implementation and effectiveness of resultant actions
- 6.12 Receive assurance there are robust systems and processes in place for management and resolution of employee relations matters. The committee should receive regular updates on the status of employee relation cases and any escalations of particular concerns
- 6.13 Seek assurance there are appropriate processes in place to enable the responsible Officer to carry out their statutory duties. Receive the annual completion of Medical Revalidation
- 6.14 Receive assurance the Trust has a learning and organisational development programme to support staff at every level and reinforces the culture and values the Trust is seeking to achieve
- 6.15 Review the Committee's associated risks on the Board Assurance Framework at each meeting. The committee will assess the level of assurances received, risk appetite and tolerance of each risk and determine its status. Reports to the Trust Board and/or Audit Committee will be produced as required
- 6.16 Receive a quarterly update on shared workforce and finance reporting – the same report will also be submitted to the Finance and Investment Committee to enhance visibility and enable an appropriate deep dive by both groups

General Governance Responsibilities

- 6.17 To receive assurance in relation to any deep dives issued by the Trust Board. To follow up with assurance back to the Board on the findings and subsequent actions
- 6.18 To receive the outcome report of all internal audit reports which are aligned with the work of the committee, seeking assurance there is a plan to address the recommendations
- 6.19 To receive annual reports for:
- Equality, Diversity and Inclusion
 - Freedom to Speak Up
 - Health and Wellbeing
 - Safer staffing
- 6.20 To receive regular assurance reports from reporting groups/Committees ensuring escalations are discussed and fed back to the group
- 6.21 To escalate issues of concern requiring Board awareness and or attention
- 6.22 To develop and maintain an annual work programme to reflect and enable assurance in relation to the above duties
- 6.23 To annually review the Committee terms of reference to ensure they remain fit for purpose and align with annual work programme
- 6.24 To produce an annual report incorporating the Committee's effectiveness to adhere to the duties placed upon it
- 6.25 To review any reporting subcommittee structure to ensure both efficiency and effectiveness of reporting, including any addition of new sub-committees or working groups as required

7 Reporting and Governance

The Committee shall produce minutes of its meetings which will be formally ratified at the following meeting. A written summary each meeting shall be submitted to the next scheduled meetings of the Board. The summary will focus on items of escalations and specific items connected to strategic risks and strategic direction.

In addition, an annual report will be produced by the Corporate and Committee Services team setting out the Committee's compliance with its terms of reference and performance of its duties. This will be informed by an annual self-assessment conducted by the committee, ensuring its work and responsibilities are reflective of the changing environment within which the Committee functions. The Board will receive and approve the annual report.

8 Review

The Committee will continually review the effectiveness, and where appropriate, revise the committee membership and terms of reference at least annually. Ratification will be by the Board.

9 Ratification

Updated and reviewed by: People and Culture Committee

Date: 30 May 2024

Ratified by: Trust Board

Date: *June 2024*