

Executive Summary

Report to the Board of Directors

Subject	People Committee Meeting Assurance Reports
Author	Shiella Wright, Non-Executive Director and Committee Chair
Status¹	Note

PURPOSE OF THE REPORT

To provide in summary an update on the key discussions and outcomes of the Committee meetings on 11 November, 9 December 2024 and 13 January 2025.

KEY POINTS

The report(s) provides a summary of the People Committee agenda items, matters escalated and next steps to address any new significant issues or areas of concerns which the Board of Directors needs to be aware of.

IMPLICATIONS²

Aim of the STHFT Corporate Strategy		✓ Tick as appropriate
1	Deliver the Best Clinical Outcomes	✓
2	Provide Patient Centred Services	✓
3	Employ Caring and Cared for Staff	✓
4	Spend Public Money Wisely	✓
5	Create a Sustainable Organisation	✓
6	Deliver Excellent Research, Education and Innovation	✓

RECOMMENDATIONS

The Board of Directors is asked to **NOTE** the update provided and respond to any specific points raised within the three reports.

APPROVAL PROCESS

Meeting	Date	Approved Y/N
Board of Directors	28/01/2025	

Meeting Assurance Report to the Board of Directors

Name of Committee / Group	People Committee
Date of Meeting	11 November 2024
Chair	Shiella Wright, Non-Executive Director
Lead Officer	Mark Gwilliam, Chief People Officer
Meeting Administrator	Lucy Middleton, Business Manager

Purpose

The purpose of this report is to provide in summary an update on the key discussions and outcomes of the above meeting.

Agenda items covered at the meeting

The agenda included the following items:

- Declarations of Interest
- Minutes of the Previous Meeting held on 9 September 2024 and matters arising
- Industrial Action Update
- Guardian of Safe Working Hours Annual Report
- People Strategy Deep Dive (We Work Flexibly)
- People Strategy Workstream Progress Report
- Biannual Nursing Workforce Review
- Winter Preparedness Nursing and Midwifery Safer Staffing
- Neonatal Nursing Workforce Action Plan
- Evaluation of Appraisal Pilot
- KPI Report
- Action Log

Matters to highlight

Specific areas to highlight are as follows:

- Evaluation of the Appraisal Pilot – The Committee were updated on the impact of the appraisal window pilot and agreed the next steps for the alternative approach to completing appraisals following review by the Trust Executive Group. The report highlighted the following key points:
 - The pilot was initiated in response to the Committee's request to improve appraisal performance against the Trust's 90% target.
 - The five directorates involved in the pilot had improved their appraisal performance compliance.
 - There was mixed feedback on the approach which had been detailed within the report.
 - That the pilot had not delivered the expected improvement to the Trust's overall rate, and reason for this was thought to be due to the focus on Electronic Patient Record (EPR) implementation and showed a drop in performance for some areas.

TEG had considered how to use the approach given the mixed feedback and supported using the initiative as a recovery tool for directorates whose performance was 85% or below. In addition, it is planned to consider the 2024 staff survey results, and scores for quality of appraisals, for those five directorates in the pilot as a measure of the impact of this approach.

- People Strategy Workstream Progress Report – The Committee received a report which described the progress against the workstreams of the people Strategy. The focus was on progress update against top priorities across each workstream; all domains were Amber or Green; rework undertaken over the past year to ensure workstreams were aligned with each of the organisation's priorities; the most challenged workstream was 'We are a Team' due to capacity and the challenge in releasing people.
- People Strategy Deep Dive – We Work Flexibly – The Committee received a presentation on the important work to standardise job description documentation as this will affect a large proportion of staff. It was noted there is good engagement and buy in from larger professionals groups such as administration, nursing and facilities; however, it was proving more difficult to obtain documentation from unique smaller areas into the right format. Furthermore, the team are aligned and sighted on the regional Chief Nurses and HR Directors work on Band 2/3 support workers, and next phases to ensure there was commonality across the region and share the re-banding work to ensure there was standardisation.
- Guardian of Safe Working Hours Annual Report – The committee received a presentation from the Guardian of Safe Working. They were presented with information on key points, including comparison of the results to previous years, immediate safety concerns – low at 0.008%, exception reporting by outcome mainly resulted in payment which was lower than previous years, the level of fines which had increased, introduction of a new system and app which provided better functionality and would make it easier to report, and the balance of the guardian funds and the amount spent for the year 2023/24/ including an important point on the reassurance received on the previously raised concern related to Oncology fines, and powerful testimony from a Weston Park doctor on the much-improved position. In regard to the national picture, it was highlighted a shift in reporting across the country, and nationally there is a sense of under reporting.
- Biannual Nursing Workforce Reviews – the assurance provided related to having appropriate establishment of inpatient wards to triangulate with the Board. There was a discussion on what it felt like on the ground and past sense of understaffing, however the report provided assurance that wards were better staffed whilst acknowledging that wards are busy.
- Neonatal Nursing Workforce Action Plan – The Committee received an update on the progress of the previously agreed action plan and agree further actions to be undertaken in the next year to work towards achieving compliance with the British Association of Perinatal Medicine (BAPM) standards of nursing as required as part of Safety Action 4 in the CNST Maternity Incentive Scheme. Key points highlighted were:
 - challenge regarding the number of nurses that did not have the QIS training;
 - on recruitment people did understand the need to complete the course as part of their role;
 - The plan for QIS to reach the level needed is more likely to be next year and oversight of the plan was by the Maternity and Neonatal Improvement Board and PMF (Performance Management Framework) meetings.
 The Committee received and was assured by the Neonatal Nursing Workforce Action Plan.

Documents approved were:

No documents presented for approval.

New significant issues / concerns escalated including proposals on the next steps to address this

None

Implications

Aim of the STHFT Corporate Strategy		✓ Tick as appropriate
1	Deliver the Best Clinical Outcomes	✓
2	Provide Patient Centred Services	✓
3	Employ Caring and Cared for Staff	✓
4	Spend Public Money Wisely	✓
5	Create a Sustainable Organisation	✓
6	Deliver Excellent Research, Education and Innovation	✓

Recommendations

The Board of Director is asked to **NOTE** the update provided and respond to any specific points raised within the report.

Meeting Assurance Report to the Board of Directors

Name of Committee / Group	People Committee
Date of Meeting	09 December 2024
Chair	Shiella Wright, Non-Executive Director
Lead Officer	Mark Gwilliam, Chief People Officer
Meeting Administrator	Lucy Middleton, Business Manager

Purpose

The purpose of this report is to provide in summary an update on the key discussions and outcomes of the above meeting.

Agenda items covered at the meeting

The agenda included the following items:

- Declarations of Interest
- Minutes of the Previous Meeting held on 11 November 2024 and matters arising
- Maternity Incentive Scheme (MIS) Year 6 Safety Action (SA) 4 and 8 evidence sign off
- People Strategy Deep Dive (We Are Safe and Healthy)
- Staff Survey Update
- Update on the Trust's Hard-To-Fill Roles
- Board Assurance Framework (BAF) – Strategic Risk 3 - Workforce
- Freedom to Speak Up (6 Monthly Report)
- KPI Report
- Action Log
- Review of Effectiveness of the Meeting

Matters to highlight

Specific areas to highlight are as follows:

- **Freedom to Speak Up (6 Monthly Report)**
 The People Committee received a presentation which highlighted key themes and trends for the period 1 April 2024 to 30 September 2024. Cases raised for the period totalled 46, and the increase was attributed to promotion of the service, and 14 volunteer guardians across the Trust. The People Committee were also informed that benchmarking numbers remained low compared to other Shelford Trusts. However, it is envisaged that following the newly appointed guardians promotion of the service, there should be an increase in reported cases. The People Committee noted the report.
- **People Strategy Deep Dive (We Are Safe and Healthy)**
 The People Committee received a presentation which focussed on staff wellbeing. The presentation highlighted:

- staff well being is identified as core to EPR implementation, with targeted support for the project team,
- secured funding for the continuation of an onsite counsellor,
- 373 trained wellbeing champions;
- patient story outcomes;
- Priorities for 2025 included the roll out of the Stress Policy and violence and aggression prevention and support.
- Improvement Huddles Pilot initiated on three wards with the purpose of involving colleagues in improving flow.
- Leading Improvement training was in the testing and development phase.

Identified risk relate to long term capacity of the team and consistency of engagement with the agenda, and funding issues resulting in discussion with Sheffield Hospital Charity.

- **Update on the Trust’s Hard-To-Fill Roles**

The People Committee were informed that a Hard to Fill Roles Working Group had been established, with the purpose of developing a longer term strategy and seeking opportunities for change. The Committee also noted action being taken in identifying hard to fill roles.

Documents approved were:

- **Maternity Incentive Scheme (MIS) Year 6 Safety Action (SA) 4 and 8 evidence sign off**

The People Committee received evidence and were assured of Effective Clinical Workforce Planning to the required standard relating to Obstetric Medical Workforce, Anaesthetic Medical Workforce, Neonatal Medical Workforce and Neonatal Nursing Workforce.

It also received evidence and were assured by actions taken relating to Safety Action 8 regarding the local training plans and “in house” multiprofessional training for, Foetal monitoring and surveillance (in the antenatal and intrapartum period), Maternity emergencies and multiprofessional training, and Neonatal basic life support.

All evidence provided confirmed compliance. The People Committee thanked the team for ongoing improvement.

The People Committee recommended to the Board of Directors that MIS Year 6 Safety Action 4 and 8 submitted as compliant.

New significant issues / concerns escalated including proposals on the next steps to address this

None

Implications

Aim of the STHFT Corporate Strategy		✓ Tick as appropriate
1	Deliver the Best Clinical Outcomes	✓
2	Provide Patient Centred Services	✓
3	Employ Caring and Cared for Staff	✓
4	Spend Public Money Wisely	✓
5	Create a Sustainable Organisation	✓
6	Deliver Excellent Research, Education and Innovation	✓

Recommendations

The Board of Director is asked to **NOTE** the update provided and respond to any specific points raised within the report.

Version 2

**Meeting Assurance Report
to the Private Board of Directors
held on 28 January 2025**

Name of Committee / Group	People Committee
Date of Meeting	13 January 2025
Chair	Shiella Wright, Non-Executive Director
Lead Officer	Mark Gwilliam, Chief People Officer
Meeting Administrator	Lucy Middleton, Business Manager

Purpose

The purpose of this report is to provide in summary an update on the key discussions and outcomes of the above meeting.

Agenda items covered at the meeting

The agenda included the following items:

- Maternity Incentive Scheme (MIS) Year 6 Safety Action (SA) 5
- Midwifery Workforce
- Guardian of Safe Working Hours Quarterly Update
- Staff Survey
- People Strategy Deep Dive (We Are Always Learning)
- People Strategy Workstream Progress Summary
- Medical Appraisal / Mandatory Training Update
- KPI Report

Matters to highlight

Specific areas to highlight are as follows:

- **Maternity Incentive Scheme Year 6 Safety Actions**
The People Committee received the report which provided evidence of achievement of all 10 safety actions. It also received a report which demonstrated an effective system of **Midwifery Workforce Planning** to the required standard. An additional action plan was presented to recover the rotational anaesthetic resident doctor training compliance to 90%. This relates to prompt training within their rotation period in obstetrics and to confirm compliance with Safety Action 8.
- **Guardian of Safe Working Hours Quarterly Update**
The Guardian of Safe Working Hours presented the quarterly update on exception reporting by year, month and speciality. The report also noted the seven specialities reporting the highest exception rates, doctor's grade and education versus hours of rest lost. Also considered was information on actions being taken to address high levels of reporting, the Exception Reporting Improvement Project and the Balance of funds. (fines).

- **The Staff Survey**

The People Committee received the first cut of the raw data relating to the 2024 Staff Survey. The Trust Level Staff Survey report provides, Theme Level performance; Trust level question level performance compared with 2023; Directorate heatmap which shows Directorate performance on each question compared to our Trust average. All data under embargo until March 2025.

- **People Strategy Deep Dive (We Are Always Learning)**

The Trust aims to have a representative workforce across all bands and roles. Current STH EDI data indicates, for instance:

- an increase in the workforce of ethnic minority staff from 13.55% during 2020 to 23.69% in 2024, but representation above Band 6 is still below the required metrics.
- analysis of national data by ethnicity, gender and eligibility for free school meals indicated people within these groups were least likely to pass GCSE English and Maths and do not achieve as highly as other groups.

In response to the above findings the People Committee were informed about STH working in Partnership with Sheffield College on developing and delivering initiatives in the provision of Maths and English, Apprenticeship Expansion, Supported Internship Programme T Level qualifications, and offering placements across Health and Social Care. The committee also heard about learning and actions to be taken to improve retention rates on specific courses. Finally, we had input from Kerri about her experience of the Rising Star Programme, which improved her knowledge and learning in relation to career opportunities in a healthcare environment.

The People Committee have previously received information relating to STH's actions such as development programmes, aimed at addressing under representation of minority ethnic staff at band 6 and above.

- **Medical Appraisal / Mandatory Training Update**

The People Committee received the report on the Medical and Dental Appraisal performance data. Key points receive included:

- Medical and dental appraisals now stand at 90% at the end of December having achieved a high of 92.7% during October 2024;
- Appraiser training has improved the ratio of appraisers to doctors in many directorates;
- For practical reasons doctors may be appraised by an appraiser from outside of their speciality;
- A small number of directorate's performance remains below target, but the reasons appear to be understood, and further action is being taken to bring them up to the required level of performance.

The People Committee agreed to accept a progress report on performance annually. However, any decline in performance to below the target is to reported to the next scheduled meeting.

Documents approved were:

- Maternity Incentive Scheme -Year 6 Safety Actions.

The People Committee recommend to the Board of Directors that MIS Year 6 is submitted as compliant.

Significant issues / concerns escalated including proposals on the next steps to address this

New areas which the Committee / Group wishes to escalate as potential areas of non-compliance, which need addressing urgently or escalating:

None.

Implications

Aim of the STHFT Corporate Strategy		✓ Tick as appropriate
1	Deliver the Best Clinical Outcomes	✓
2	Provide Patient Centred Services	✓
3	Employ Caring and Cared for Staff	✓
4	Spend Public Money Wisely	✓
5	Create a Sustainable Organisation	✓
6	Deliver Excellent Research, Education and Innovation	✓

Recommendations

The Private Board of Directors is asked to **NOTE** the update provided and respond to any specific points raised within the report.