

## People and Culture Committee (PCC) - Tuesday 31 October 2023 12pm to 1pm

### Highlight Report

Strength of Assurance	Colour to use in Assurance Level columns below:
<b>Low</b>	Red - there are significant gaps in assurance and/or not properly assured as to the adequacy of action plans/controls
<b>Medium</b>	Amber - there is reasonable level of assurance, but some issues identified to be addressed.
<b>High</b>	Green – there are no gaps in assurance and there are adequate action plans/controls/impact

Attendance and apologies noted below.

Agenda Item:	Assurance level:		Committee escalation:	ORR Risk Ref:
	Current Performance/ impact	Delivery plan/ Management process		
Strategic Workforce Group (SWG)	Amber	Green	Committee received the SWG highlight report and considered more detailed assurances on: Sickness monitoring – detailed SPC (statistical process charts) tracking and areas for focus were included. Agreed now to be monitored through SWG on a quarterly basis and included in highlight report to future committees. Policy progress schedule – on track BLS (Basic lifesaving) and ILS (intermediate lifesaving) training compliance - more assurance on improving compliance to be presented to next committee. Other issues escalated were covered by Workforce and Agency reduction plan assurance report – below.	
Workforce and Agency Reduction Plan	Assurance was discussed under each workstream & target.			
<b>Agency Reduction:</b> Stop off framework use. Reduction in agency spend	Amber but red for CHS community	Amber but red for CHS community	Expenditure on target for cumulative year but above target for September. Not on target for stopping off framework use. Good progress in areas other than CHS community staffing which the committee agreed was red assurance for both delivery plan and performance. Paper on more action around CHS community being developed for executive team consideration. To be reflected in next report to committee.	85
<b>Recruitment &amp; Retention:</b> Increase number of Health Care Assistants	Red	Amber	Continuing risk of backlog of successful candidates waiting to be onboarded although figures are beginning to move positively and a downward trajectory expected for next report. Below plan target for recruitment to RNs, HCAs, Administration and medical consultants. Retention work progressing well as is action on medical workforce plan.	84, 85, 86

Agenda Item:	Assurance level:		Committee escalation:	ORR Risk Ref:
	Current Performance/ impact	Delivery plan/ Management process		
(HCAs) on bank. Reduce trust vacancies. Medical Workforce. Improve Registered Nurse (RN) retention			Assurance on action decreased to amber and performance remains at red until an improvement is seen. Discussion on disconnect between planned numbers for recruitment to RNs and target to reduce off framework use and agency workers in CHS community. To be addressed in report to Executive team on CHS community challenge.	
<b>Growth &amp; Development:</b> Number of trainees Number of staff in new roles Skill mix	Amber	Amber	This is a slow burn area with a focus on putting the right conditions in place to introduce new roles. This includes addressing the challenge of placement capacity for trainees. Cannot consider accelerating progress until this risk is addressed. May require an ORR risk.	84, 61, 74
Organisational Risk Register (ORR)	Red	Green	Changes to the risk register means that PCC now has oversight on five risks. A new combined risk 94 replaces risks 84 (vacancy rate) and 85 (high agency spend). New risk 95 addresses the recruitment backlog risk. All risks referenced during discussions including risk 86 which is overseen by Quality and Safety committee. Performance assurance rated as red due to need for further mitigating action around CHS community and placement capacity.	New94, New95, 61, 73, 74, 86
Performance report	Amber	Green	Committee received the performance report to triangulate data. It was noted that the SPC tracking for vacancies is in line with PCC discussion although different target figures; Agency cost SPC hides the issue relating to CHS community. Pleasing to see improving position on clinical supervision as significant contribution to the health and well-being of staff.	
Committee review	Green	Green	Survey to be circulated so can complete annual review later in year.	
Monitoring policy compliance and effectiveness audit	Green	Green	Committee pleased to see the good start to evaluating effectiveness and application of policies.	

<b>Chair of Committee:</b>	Ruth Marchington
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**Attendance**

Ruth Marchington (RM) - Non-Executive Director & Senior Independent Director (Chair)  
Kate Dyer (KD) - Acting Director of Corporate Governance  
Sarah Willis (SW) - Director of Human Resources and Organisational Development  
Samantha Leak (SL) - Director of Community Health Services  
Alison O'Donnell (AO'D) - Head of Education Training and Development  
Haseeb Ahmad (HA) - Head of Equality, Diversity and Inclusion  
Saquib Muhammad (SMu) - Interim Medical Director  
Faisal Hussain (FH) - Non-Executive Director, Deputy Chair  
Helen Thompson (HT) - Director of Families Young People & Children's Services & LDA  
Dan Norbury (DN) - Deputy Director Human Resources and Organisational Development  
Anne Scott (AS) - Director of Nursing/AHP's & Quality  
Alexander Carpenter (AC) - Non-Executive Director  
Claire Taylor (CT) - Head of Operational HR  
Nicola Ward (NW) - Head of Workforce Transformation and Planning  
Kamy Basra (KB) - Associate Director of Communication  
Andres Patino (AP) – Deputy Director of Mental Health  
Debbie Allen (DA) - PA to Director of HR & OD (note taker)

**Apologies**

Emma Wallis (EW) - Deputy Director of Nursing and Quality  
Tanya Hibbert (TH) - Director of Mental Health  
Nikki Beacher (NB) - Deputy Director Community Health Services  
Sharon Murphy (SM) - Director of Finance

**Next Meeting:** Tuesday 19 December 2023 - 12pm to 1pm via MS Teams