

**PEOPLE AND ORGANISATIONAL DEVELOPMENT COMMITTEE**

**Minutes of the meeting held on 26 July 2018  
 Trust Offices Meeting Room, Colchester Hospital**

**PRESENT:** Dian Leacock, Non-Executive Director (*Chair*)  
 Clare Edmondson, Director of Human Resources  
 Catherine Morgan, Chief Nurse  
 Dawn Scrafield, Director of Finance  
 Alison Smith, Director of Operations Group 3  
 Crawford Jamieson, Site Medical Director

**IN ATTENDANCE:** David White, Chairman  
 Sara Naylor, Director of Communications  
 Karen Lough, Associate Director of Operations - General Surgery &  
 Anaesthetics (deputising for Director of Operations Group 2)  
 Rees Millbourne, Head of Workforce Systems & Reporting  
 Leigh Howlett, Deputy Director OD & HR  
 Sharon Wyatt, Associate Director of Education  
 Tom Fleetwood, Freedom to Speak Up Guardian  
 Clare Harper, Senior Committee Secretary (*minutes*)

**APOLOGIES:** Laurence Collins, Non-Executive Director  
 Tim Fenton, Non-Executive Director  
 Neill Moloney, Managing Director  
 Shane Gordon, Director of Strategy, Research and Innovation  
 Alison Power, Director of Operations Group 1  
 Simon Hallion, Director of Operations Group 2  
 Melissa Dowdeswell, Site Director of Nursing  
 Jo Wood, Assistant Director of Human Resources

<b>ITEM</b>	<b>RESPONS- IBILITY</b>
<b>01/18 APOLOGIES/INTRODUCTIONS</b>	
1. The Chair introduced all attendees to the first ESNEFT People Organisation and Development Committee.	
2. Apologies were noted as above.	
<b>02/18 DECLARATION OF INTERESTS</b>	
3. None received.	
<b>03/18 MINUTES OF THE LAST MEETING</b>	
4. The minutes of the Workforce, Development and Education Committee meeting held on 23 <sup>rd</sup> May 2018 (IHT) were approved as a true record of the meeting. The minutes of the People and Organisational Development	

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Assurance Committee meeting held on 20<sup>th</sup> June 2018 were approved as a true record of the meeting, subject to the following change:

- Item 8 - Draft Terms of Reference, Assurance Map and Forward Plan for ESNEFT People and OD Committee. Remove the words 'to include' at the end of the first paragraph.

**CH****04/18 ACTION CHART AND MATTERS ARISING**

5. The Committee reviewed the action log noting the following action updates:

- *Action 18/42 – Deep dive into AHPs to be undertaken by Committee.* The newly established divisional management team for Integrated therapies had commissioned a review of workforce and of the leadership structure required to develop an integrated team. The review will make recommendations for the division to consider. Therapy services sits in one CDG will give improved clarity on any workforce challenges relating to physio, OT and dietetic services. **Action:** AS to present findings to Committee in October.
- *103/18 – Final report showing progress to date against divisional workforce plans to be presented to Committee.* HRPBs would attend the next meeting to provide a progress update.
- *Action 115/18 – Dates to be confirmed of when risks were added to the risk register.* The Director of Human Resources confirmed that that there would be a tidy up of current risks and more detail would be provided in the risk report.

**AS**

6. It was agreed that the Director of Human Resources would review the action log from historic organisations to see check the relevance of each action and alignment with correct division in the new organisation. This revised action chart would be circulated to Committee members with the draft minutes.

**CE****05/18 CHAIR'S KEY ISSUES (CKI) – FEEDBACK FROM BOARD**

7. The Chair confirmed that no feedback had been received from the July Trust Board meeting. The Trust Chairman reminded Committee members that the CKI reports were taken as read and stressed the importance of highlighting or expanding on any key issues to be discussed at Board.

**06/18 PROPOSED NEW TERMS OF REFERENCE, ASSURANCE MAP AND FORWARD PLANNER FOR ESNEFT POD COMMITTEE**

8. The Committee's new Terms of Reference were discussed and agreed subject to minor changes to the membership and attendance sections:

- To be added to Membership – Director of Finance to be added.

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- To be added to Attendance – Site Director of Nursing (Workforce) and Director of Operations.
- To be changed – Director of Communications to attend, not Head of Communications.

9. The Director of Human Resources agreed to discuss with the Chief Medical Director whether she should attend going forward or Site Medical Director. **CE**

**7/18 WORKFORCE DASHBOARD/PERFORMANCE REPORT**

10. The Deputy Director of OD & HR provided a brief summary to the Committee of the key points within the Workforce dashboard, noting that there appeared to be no adverse effect from the merger with regard to staff turnover (remaining at 10%) and an expected dip in mandatory training due to a change in reporting processes and also the introduction of one mandatory training system across both sites.

Comments/Questions

11. The Chief Nurse commented that it was pleasing to see turnover going in right direction at Colchester. She asked where the retention collaborative work, previously reported at POD Committee meetings, was being picked up now. The Deputy Director of OD & HR advised that the retention programme run by NHSI had not involved Ipswich Hospital and she was now exploring what could be transferred across the organisation.
12. The Director of Finance commented that the report contained a lot of information but she was unsure what this was telling the Committee. She felt that there were conversations to be had about what the Committee was being asked to review to get timeframes and the level of assurance required.
13. It was agreed that the information within the dashboard report was more operational level and useful for exceptional reporting, however higher level trend data together with a front sheet providing a summary of key points would be helpful to the Committee going forward.
14. DL did not feel that there was enough detail regarding the progress of Job Planning across the divisions and requested a summary of progress to date at future meetings. **LH**

**8/18 BANK AND AGENCY UPDATE**

15. The Committee discussed bank and agency staffing across both sites, given the continued high costs associated with these staff, and expressed concern that some locums had clocked up significant lengths of service. Members were keen to ensure that recognising the agreed rate caps were not breached within ESNEFT, that all partners within the region kept their

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rates within the rate cap. Further discussion took place around ensuring that the Trust was seen to be a good employer and retained its staff.

**8/18 ACUITY REVIEW**

16. The Chief Nurse provided a verbal update to members on the Acuity Tool, noting hotspots in the manual safe care tool collection of data and subsequent need for an electronic alternative, the continual expansion of workforce in EAU and ED meaning the review was not current, and concerns in HDU ratio requirements for some patients on Somersham Ward.

17. It was recognised that a review of the Safe Care Tool across the whole organisation would be required and an exception update of the comprehensive review would be brought back in September followed by a 6 month sense check.

**CM****9/18 E-ROSTERING UPDATE**

18. The Head of Workforce Systems & Reporting provided an update on the progress of e-rostering across the two sites. The Committee noted that the merged E-Rostering system was progressing as planned however the project team was now dealing with competing priorities. The Executives were therefore being asked to agree the priorities going forward, so that the numerous programmes of work could be completed.

19. Upcoming programmes include the rostering of clinicians, standardisation of processes and the implementation of SafeCare across all of nursing and midwifery, and the wider implementation of HealthRoster across the Trust (e.g. Community colleagues).

20. The Director of Operations – Group 3 was keen for Community Services staff to be included in the E-Rostering system as soon as possible as this cohort of staff were crucial for moving patients out to the Community during times of seasonal pressure.

21. The Director of Finance congratulated the team on progress to date.

**10/18 ESNEFT WEBSITE PROPOSALS – STAFF PAGES**

22. Members were informed that the current information on the website was not up to standard and external help was being sourced to assist with the re-design to ensure our offering on the website is as good as possible. An update would be provided in October.

**LH****11/18 FREEDOM TO SPEAK UP SELF-REVIEW TOOL**

23. The Freedom to Speak Up Guardian gave an update on the Self-Review Tool, which would enable the board to carry out a detailed review of leadership and governance arrangements in relation to Freedom to Speak

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Up and identify areas to develop and improve. This enables the Board to evidence its commitment to embedding a culture of speaking up, and enables external review bodies (e.g. CQC) to evaluate how healthy the Trust's speaking up culture is. A follow up action for the Board to consider Speak Up Ambassadors across the organisation would be discussed after the National Guardian attends the Board Seminar in October. The selection of Ambassadors would be facilitated after the Raising Concerns Steering Group had been re-started.

24. The Chair thanked the Freedom to Speak Up Guardian for his sterling work and support with the predecessor trusts and welcomed his continued efforts in the new merged organisation.

**12/18 LOCAL CLINICAL EXCELLENCE AWARDS GUIDELINES**

25. The Committee discussed the revised Guidelines, which align the processes across both sites for Local Clinical Excellence Awards, and welcomed the changes which were deemed to be long overdue. The Director of Human Resources confirmed that these changes would be implemented with immediate effect.

**13/18 MEDICAL EDUCATION GROUP**

26. The Site Medical Director advised that the group had not met since the last POD meeting however an Away Day had taken place in the lead up to the merger to discuss how processes should be aligned going forward. Corporate TOM meetings would be held bi-weekly and the outcomes would be reported to this Committee bi-monthly.

**14/18 HEALTH AND WELLBEING UPDATE**

27. This item was deferred until August.

**15/18 SUFFOLK MIND**

28. The Committee was informed that the outcome of the resilience survey had been received and a work plan had been produced. It was recommended that this is discussed at the next POD meeting.

**LH****16/18 MANDATORY TRAINING UPDATE**

29. The Assistant Director of Education updated the committee and advised that a suite of mandatory training courses had been agreed. Members were made aware there may be a dip in mandatory training compliance as this is embedded across the organisation but assurance was given that training would be as accessible as possible for all staff.

30. Praise was given to SW for rolling this out in such a short timeframe.

**17/18 TRANSACTION UPDATE**

31. The Director of Human Resources confirmed that all legacy work had been completed and all staff had been paid. Job evaluations had been

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completed, some of which were out of work hours, to hit the deadline and thanks were given to those involved. Workforce would continue through the JUC and JCNG harmonising the Terms & Conditions and a programme of work for staff forums which will be reported to this Committee periodically.

- 32. The LNC’s agreement of Consultant Terms & Conditions was almost at the signing off stage thanks to cohesive working with members on both sites.

**18/18 EXTERNAL REVIEWS - GMC SURVEY**

- 33. The Committee was informed of the recent GMC survey, results of which were not available yet. The survey results will be brought to the POD Committee in October for discussion and review.

**SW**

**DATE OF NEXT MEETING**

Thursday, 23 August 2018, 1:30pm-3:30pm, Trust Offices, Meeting Room, Colchester.

Signed: .....

Date: .....

