

Report to Trust Board of Directors

Date of Meeting:	2 June 2015
Enclosure Number:	13
Title of Report:	Workforce & Organisational Development Report
Author:	Morven Smith, Interim Head of Human Resources
Executive Lead:	Helen Ray, Executive Chief Operating Officer
Responsible Sub-Committee (if appropriate):	Workforce Committee
Executive Summary:	<p>All key HR controls are RAG rated as green with the exception of recruitment (red), appraisal rates (amber) sickness absence (amber) and completion of mandatory training (amber).</p> <p>Pre-employment checks for new employees are robust and audits are in place to monitor this. The Trust does however have significant challenges in recruiting to medical staff posts and qualified nurses. Appraisal rates at 31/03/15 were 80.52% and action plans, monitored by Workforce Committee are in place for 2015/16.</p> <p>The Trust sickness rate has an annual average of 4.97% at the end of March 2015.</p> <p>The overall completion rate for mandatory training at the end of March 2015 was 85%, this is however rated as amber as there are some key courses (see page 11) which have low completion rates. Plans are in place in Business Units for staff to undertake mandatory training in 2015/16.</p> <p>The Workforce Report gives an overview of the key strategic areas of assurance, workstreams / associated action plans and progress to date within key areas.</p>
Board Assurance Framework Reference:	5.3 Workforce 6.1 Culture
Risk Rating (high, medium, low risk) and any recommended changes to risk rating:	Medium

Compliance, legal and national policy regulatory requirements:	Trust Board are to be assured that key performance indicators outlined above which are red or amber have robust plans in place to address this, all of which are monitored through the Workforce Committee. Trust Board is asked to note that this is ongoing work in progress for reporting assurance purposes.
Financial Implications:	N/A
Actions required by the Board:	To approve: Discussion and decision
	To note: Where the Board is made aware of key points but no decision required
	For information: For reading and consideration and for discussion by exception only
	To note the contents of this report
Data quality:	Source:
	Validated by:
	Date:

Workforce & Organisational Development Report

Report to the Trust Board – 2nd June 2015

Date of Sub-committee Meetings: Workforce Committee – 21st April 2015

1. Minutes are located on the Trust intranet.

2. Our key strategic performance questions cover the following areas:

- 2a Creating a learning environment for quality and continuous improvement
- 2b Providing excellent patient centric customer service
- 2c Management and maintenance of robust HR policies and systems for safety and compliance

2a. Creating a learning environment for quality and continuous improvement: Key Strategic Questions

(i). What development opportunities are we providing for our staff to improve their performance and drive a culture of continuous improvement?

We continue to work towards our Organisational Development strategic action plan and this was reviewed for the year 2015/16 in April 2015 at a time out session with the Executive Management Team. The outcomes from this session are being incorporated into a revised action plan still focussing on the 5 workstreams of board development, leadership, capability, systems and improvement methodology. The revised action plan now has the courses removed and being transferred into a course handbook which can be distributed to Business Units for reference and information about leadership and development opportunities plus how to nominate. The action plan for 2015/16 will be finalised and shared at Workforce Committee prior to distribution.

Organisation development programmes- March – May 2015

Programme	Sessions	Northumbria Participants	Cumbria Participants
Alison Proudfoot Time Out Sessions	9	0	128
Annual Safeguarding Conference	1	97	0
Breast Services Team Away Day NHCT	1	22	0
BUDs programme NCUH	1	0	20
BUDS programme NHCT	1	38	0
Change Management	2	21	0
Coaching - AIS	5	7	0
Consultant 5 Day Programme	3	37	6
Consultant Recruitment - AIS	3	0	4

Consultant Recruitment Training	3	9	9
External Coaching	7	7	0
Junior Doctors Leadership	4	38	8
Management Skills Cohort 3	4	61	0
Matrons Programme - Cumbria	2	0	18
MES Focus Groups	6	0	19
My Customer My Responsibility	3	49	0
Neo & HDS	-	57	70
Oncology Team Away Day	1	41	0
SAS Doctors Leadership	3	35	7
Staff Nurse Leadership Programme	2	43	0
T16 coaching	7	11	4
Trust 16	4	85	14
Northumbria's Strategic Leadership Development Programme (1 year programme)			7
TOTAL:	72	658	302



(ii) *What benchmarking or other information do we have in terms of the development of our culture?*

Staff Survey

Business Unit action plans specifically targeting areas of concern have been agreed at most Business Unit Boards, the remainder will be agreed by the beginning of June 2015. The Business Units are working to ensure these plans are being implemented at department and ward level, and progress is reported at the Trust's Workforce Committee on a monthly basis. The Trust has also developed a Medical Staff Workforce Action Plan, which has been agreed at the Executive Management Team meeting.

Raising Serious Concerns at Work (Whistleblowing)

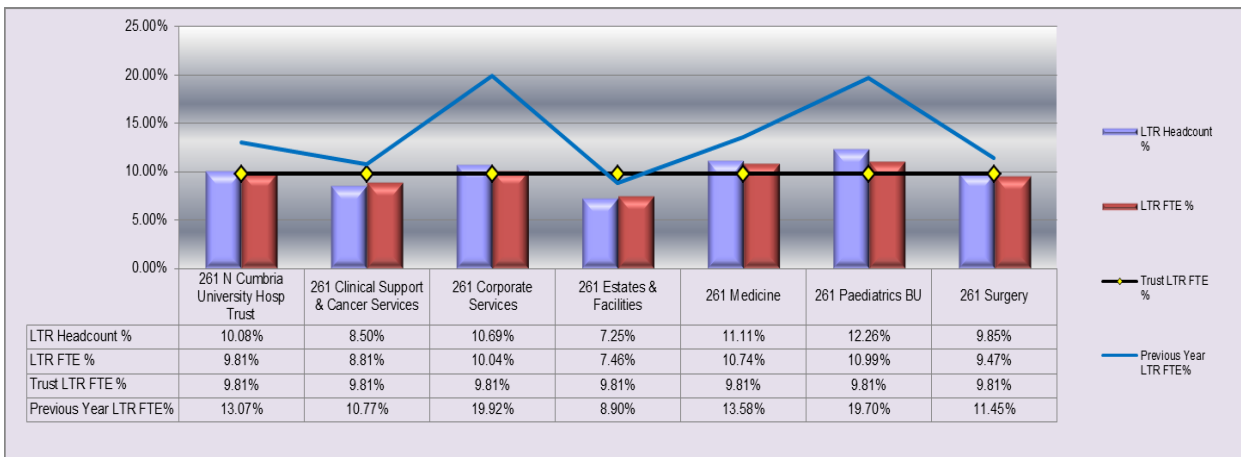
As the Trust Board are aware, concerns and comments on how services can be further improved can be raised through managers. If issues then need to be escalated, this can be done in the strictest confidence through the Trust's Whistleblowing Policy. The confidential helpline is also available.

There have been no whistleblowing issues recorded since 1st April 2015.

Turnover

Annual workforce turnover rate is 9.81% (FTE) from April 2014 – March 2015

Turnover Rates by business from April 2014 – March 2015



2b. Providing excellent patient centric customer service: key strategic questions:

- (i). *How does our HR & OD service support provision of excellent patient centric customer service in relation to training?*

All Business Unit leads were required to identify a 3 month time frame, with a plan to achieve completion of Statutory and Mandatory Training and Appraisals for their area by Dec 2015 (Quarter 3). Quarter 4 Jan – Mar of each year is held from remedial action for those services who have not achieved in their three month time frame. Please note the 3 month time frame is effective for all learning other than face to face learning. For facilitators to spread the capacity to comfortably support staff in training, the fixed time period is from April –Dec each year. The target compliance rate for Statutory and Mandatory Training is 80% for all subjects with the exception of Information Governance and Hand Hygiene which are set at 95%. The Workforce Committee monitors completion of training and reviews business unit action plans monthly to ensure key performance targets are being met.

The Trust provides blended training through a mixture of face to face sessions, workbooks and eLearning. External providers continue to be sourced for Conflict Resolution, Control and Restraints, Prevention of Suicide, Mental Capacity Act Level 2 and Deprivation of Liberty.



(ii) How does our HR/OD service support the provision of excellent patient centric customer service in relation to recruiting the right staff?

Joint recruitment between the Trust and Northumbria Healthcare Foundation Trust for medical staff continues.

Several areas continue to prove very difficult to recruit to, particularly at West Cumberland Hospital. Every effort is being made to recruit medical staff and critical posts have now been advertised widely with a recruitment premium attached; the third phase of advertising is currently underway, with adverts appearing in the BMJ in early June 2015.

The Trust has had some limited success with overseas recruitment for nursing staff from Italy; plans are being made for further international recruitment in the Philippines and this is currently in the final stage of the procurement process. The Trust has recruited 44 student nurses into qualified nursing roles from September 2015 pending successful completion of student nurse training.

The Workforce Committee continues to review audits of recruitment activity for both medical and non-medical staff undertaken on a quarterly basis. A further medical recruitment review is due to be submitted to Workforce Committee in June.

Values Based Recruitment is being introduced in the Trust for Health Care Assistants as a means of determining that new recruits are committed to the Trust's priorities/aims and objectives. This will be fully implemented during 2015 and then rolled out to extended recruitment across the Trust.



(iii) We continue to focus on the link between the health and wellbeing of our staff and the care delivered to patients

Occupational Health has been working closely with the HR project lead for open sickness / absence. We have continued to monitor for "hot spots"; the Emergency Admissions Unit at West Cumberland Hospital was identified as a "hot spot" and interventions were recommended and implemented as follows:

- Stress risk assessments
- Communication to staff about support services was placed on noticeboards on the ward and staff informed in ward hand overs
- Staff were advised they could self-refer to occupational health
- Serious concerns were escalated to HR Director
- Staff have been referred to counselling
- Staff have been referred to psychology
- Staff have been directed to appropriate policies

The Health & Wellbeing Co-ordinator secondment from Northumbria Healthcare Foundation Trust has ended and we are currently looking at a job description to recruit to the vacancy

in North Cumbria in order that the Trust can continue with plans for health and wellbeing. The Occupational Health team will continue to move the plan forward by holding health campaigns during the year.

Occupational Health are currently looking at a screening tool to detect alcohol and drugs. This will be considered as part of reducing the risk to patients and colleagues from staff who may attend work under the influence of alcohol or drugs. The associated training for managers has been delayed until the screening tool is in place.

Planning for the winter influenza vaccination programme has commenced and meetings are being held on a monthly basis in Newcastle. One of the occupational health specialist nurses has attended on behalf of both NCUH and NHCFT, and is liaising with the CIC and WCH teams in planning for this year's programmes, sharing good practice from across the region.

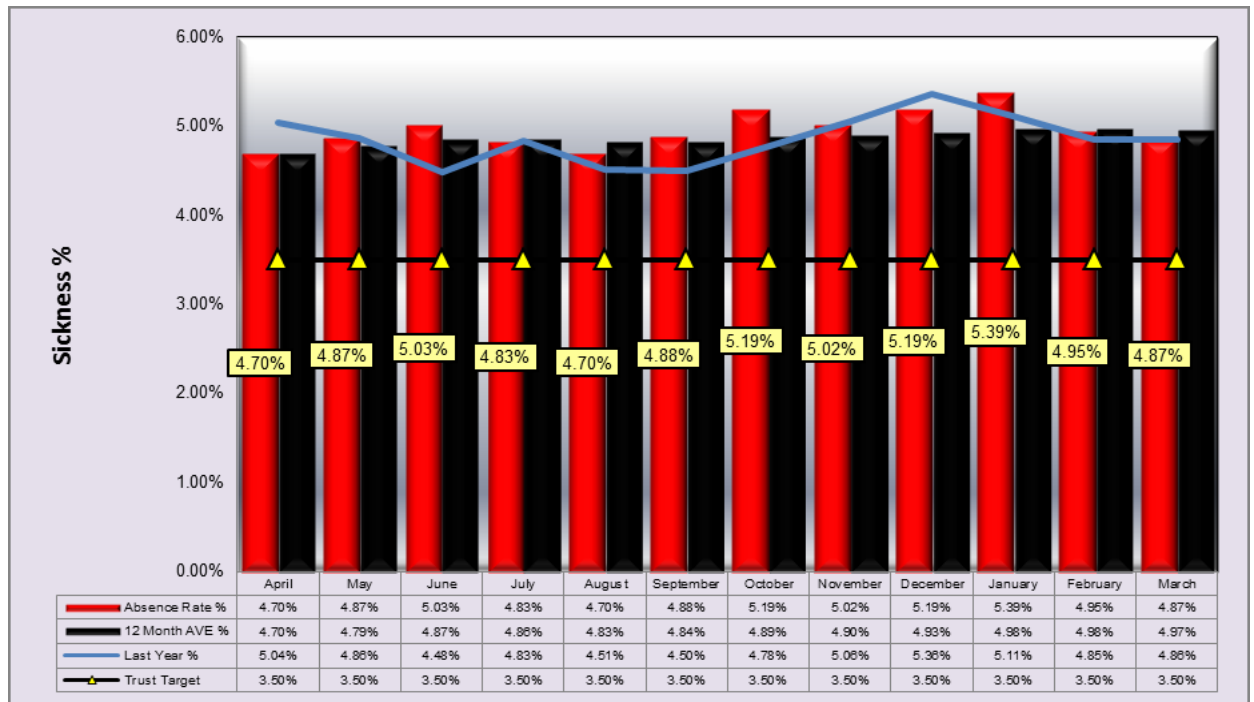
Staff from occupational health at CIC visited NHCFT to look at the COHORT system functions to develop some key KPIs to support the quarterly report. These will be reported in due course.

Occupational Health submitted a draft sharps action plan to help reduce the number of sharps injuries per year, reduce litigation, look at trends and put actions into place to improve / promote the use of safety devices currently available in the Trust. Occupational Health have taken responsibility for the specific sections of the action plan; overall responsibility lies with the Health and Safety Officer. Updates on this action plan will be given at Workforce Committee and Control of Infection Committee.

Trust Sickness Rate to March 2015

The NHS absence target is 3.5% for 2014/15; the Trust rate continues to exceed this target, the figure to March 2015 is 4.87%.

Sickness rates by Trust for the year April 2014 – March 2015



Sickness Rates by Business Unit Average to March 2015

Business Unit	Average % rate over a 12 month period to 31/03/2015
Clinical Support and Cancer Services	4.38%
Corporate	4.11%
Estates and Facilities	5.48%
Medicine	5.16%
Paediatrics	4.14%
Surgery	5.28%

Consultation with staff side on a revised Health at Work policy is ongoing.



2c. Management and maintenance of robust HR policies and systems for safety and compliance. Key strategic questions:

(i) What is our compliance with regulatory standards such as CQC and NHSLA

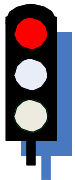
Compliance with CQC Outcomes 12 and 14 are reported quarterly to the Workforce Committee.

Outcome 12 is not yet fully compliant with the following actions being undertaken:

- Volunteer review – Assurances now in place for all new starters since the appointment of the Volunteer Co-ordinator. There are some checks still outstanding in respect of current volunteers. One further letter has been issued to this group insisting that they must have the checks undertaken otherwise they will no longer be allowed to volunteer with the Trust
- Agency Workers/Students Audit – It has been a time-consuming task to co-ordinate this exercise given the high turnover and demands for agency workers over the past year. An audit of personal files has been completed. An action plan is now underway to fill any gaps, where on an exceptional basis, and with Senior HR approval and supported with a business case, Agency workers have been allowed to commence work pending any of the usual pre-employment clearances. This is conducted on an individual risk assessed basis.
- Increasing appraisal rates and mandatory training rates to meet targets

CQC Outcome 14 is not compliant, however an action plan is in place relating to appraisal rates and levels of attendance at statutory and mandatory training and specific developments relating to mandatory training are outlined earlier in this report.

CQC 13 is non-compliant, mainly due to recurrent issues in relation to recruitment of medical staff and some nursing posts in 'hot spots' areas (e.g. admissions units and some elderly care wards).



Appraisal Completion

Appraisal completion rates were re set to zero on 1 April 2015. The same planning approach as last year will be adopted.

Following on from last years planning process where each ward and department agreed to complete their appraisals within a 3 month period; ideally within distinct Quarters i.e. Q1 (April – June), Q2 (July – September), or Q3 (October – December) and Workforce Committee monitors progress monthly.

All departments who had not delivered their plan by the end of Quarters 1 & 2 submitted a recovery plan to July's Workforce Committee 2014. This approach will be requested for 2015/16.

The overall Trust completion rate for appraisals at the end of March 2015 was at 80.52%.

The Revised Appraisal documentation is now fully adopted and has been rolled out across the Trust. Appraisal workbooks are now used to increase the link between roles, responsibilities and objectives with Trust values and behaviours.

Appraisal Completion Rate by Business Unit as at 31st March 2015

Business Unit	Required by 31/03/15	Completed by 31/03/2015	%
Bank	188	122	65%
Clinical Support & Cancer Services	559	514	92%
Corporate Services	272	259	95%
Estates & Facilities	218	211	97%
Medicine	1191	888	75%
Paediatrics	112	100	89%
Surgery	1120	853	76%
Trust	3660	2947	80.52%



Completion of statutory and mandatory training is outlined below:

At the end of year the Trust's overall rate for completion of Statutory and Mandatory Training was at 85%. The Trust appraisal rate was also at 80%

Those areas that remain red or amber on the overall Trust Report and which are being targeted including:

- Red - Basic Life support (Paediatrics), Immediate Life Support (Paediatrics & Adults) and Advanced Life Support (Paediatrics). The Resuscitation team have undertaken a review of face to face provision and provided an action plan
- Amber at 50-70% Prevention of Suicide, Control and Restraint, Moving and Handling Objects 2 yearly, Dementia , Nasogastric Tube, Calculating Drug doses
- Amber at over 70% Risk Management for Board Members, Tissue Viability Medicines Management, Blood Safety 01/02/03/4, Slips, Trips and Falls, Safeguarding Adults Level 2, Deprivation of Liberty and Mental Capacity Act Level 2, Slips, trips and falls

All Trust staff are to receive letter week ending 21st May 2015, informing them of learning that they are to complete in the coming year against their services training /appraisal plan dates. Detailed reports will be discussed at Business Units Boards for follow up action.

Attendance at Trust Corporate Induction and completion and submission of relevant induction documentation is closely monitored and escalated to line managers where required, with particular attention on Medical Locums and Foundation Year Trainees.

CQC Outcome 14 is not compliant, however an action plan is in place relating to appraisal rates and levels of attendance at statutory and mandatory training and specific developments relating to mandatory training are outlined earlier in this report.

North Cumbria University
Hospitals Trust

No. of Employees:

	Need	Complete	%	Report Date:
Appraisal Overview	3530	2837	80%	31/03/2015
Statutory & Mandatory Training Overview	113645	96958	85%	02/04/2015
				Report Downloaded:
				Target Year End:
				31/03/2015

Course Name	Standard	Renewal Period	Target	Need	Complete	%	To Complete
Appraisal	NHSLA	Annual	95%	3530	2837	80%	693
Medical Devices Self Assessment	NHSLA	Annual	95%	2764	2043	74%	721

Course Name	Standard	Renewal Period	Target	Need	Complete	%	To Complete
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Trust Induction (in last rolling year)	NHSLA	One Off	80%	572	572	100%	0
Speciality Induction for New Starters (in last rolling year)	NHSLA	One Off	80%	572	437	76%	135

Course Name	Standard	Renewal Period	Target	Need	Complete	%	To Complete
Information Governance	CQC	Annual	95%	4315	3938	91%	377
Fire Safety	STAT	Annual	80%	4315	3914	91%	401
Equality and Diversity	CQC	One Off	80%	4315	3994	93%	321
Hand Hygiene for Clinical Staff	NHSLA	2 Yearly	95%	2850	2727	96%	123
Hand Hygiene for Non Clinical Staff	NHSLA	2 Yearly	95%	1465	1440	98%	25
Infection Prevention & Control for Clinical Staff	NHSLA	2 Yearly	80%	2850	2272	80%	578
Infection Prevention & Control for Non Clinical Staff	NHSLA	2 Yearly	80%	1465	1206	82%	259
Health and Social Care Records Management and Keeping	CQC	3 Yearly	80%	4315	3761	87%	554
Food Hygiene Level 1	STAT	3 Yearly	80%	41	40	98%	1
Food Hygiene Level 2	STAT	3 Yearly	80%	5	5	100%	0
Conflict Resolution Refresher	CFSMS	3 Yearly	80%	1446	1174	81%	272
Control & Restraint	NHSLA	3 Yearly	80%	34	22	65%	12
Health & Safety	NHSLA	One Off	80%	4315	3971	92%	344
Risk Management	NHSLA	One Off	80%	4315	3588	83%	727
Risk Management Awareness for Board and Senior Managers	NHSLA	3 Yearly	80%	311	238	77%	73
Prevention of Suicide	NHSLA	3 Yearly	80%	108	59	55%	49
Venous Thromboembolism (VTE)	NHSLA	One Off	80%	1178	1013	86%	165



Internal Audits

There are no audit outcomes to report with all outstanding actions completed.

Regulatory Standard:	Relates to:	Compliance:
Statutory/Mandatory Training	CQC	
Appraisal	CQC	
Internal audit outcomes	N/A	
Notable practice areas	Not applicable	N/A
Exception reports	None this quarter	N/A

HR Risk Register

The risk register is presented regularly to both the Workforce Committee and Assurance Committee for quarterly review. This register provides positive assurance that key controls are in place and that there are no gaps in controls or assurances (other than as shown in the risk register) to the best of the knowledge of the Workforce Committee. Outstanding actions and persons responsible are as shown on the risk register.

Revalidation

Revalidation of medical staff is progressing successfully.

Equality & Diversity Update

The Equality and Diversity Steering Group met in December 2014 and in April 2015. A key target is to complete an assessment of the Trust's current position against the national NHS Equality Delivery System. The results of the assessment will enable the Trust's equality objectives for both service delivery and employment to be revised. A paper on National NHS Equality Delivery system (EDS2) and Workforce Racial Equality Standards will be taken to Workforce committee and then submitted to Board for recommendations to be actioned in support of these standards.

Mediation

The Trust's Mediation Service has now undertaken 5 mediations with a possible further one pending. Feedback questionnaires are sent to the parties after one and three months to measure the effectiveness of the service and provide suggestions for further development. From the small number of returns to date there is a positive response to the service.

The Trust mediators have attended a CPD update day together with mediators from Northumbria.



3. Consultant Job Planning

Job Planning schedules for each of the Business Units are currently being devised to ensure that job planning and agreements are actioned in a timely manner. Job plans are now being trialled within the Allocate system with the aim of all job plans being recorded via this system. Job planning guidelines and other related policies have been drafted in support of the implementation of job planning via the Allocate system.

4. Medical / Nursing Establishment Control

Work has been completed on finalising medical establishments at both sites for both consultant and non-consultant posts and a comparison of establishment gaps and current recruitment is continuing. This combined with similar detailed exercises for nursing staff has created the provision of a staffing report for Workforce Committee each month.

5. MHPS CASES

The Trust as at the end of April 2015 had 4 active cases being dealt with under Maintaining High Professional Standards (MHPS); all are being pro-actively case managed as appropriate.

6. Recommendation to the Trust Board

Trust Board is asked to note the contents of this report.

MORVEN SMITH
Interim Head of HR

GINA TILLER
Non-Executive Director