

BNSSG Integrated Care System (ICS) People Committee Meeting

Minutes of the meeting held on 31st July 2023 at 15.00 virtually via Microsoft Teams

Minutes

| Present | | |
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| Jaya Chakrabarti | Non-Executive Member – People (Chair) | JC |
| Bernard Galton | People Committee Chair, Non-Executive Director, UHBW | BG |
| Jo Hicks | Chief People Officer, BNSSG ICB | JH |
| Kelvin Blake | Non-Executive Director, NBT | KB |
| Judith Gray | Chief People Officer, NBT: SRO (workforce, planning strategy, supply & demand) | JG |
| Rosi Shepherd | Chief Nursing Officer, BNSSG ICB | RS |
| Sarah Truelove | Deputy CEO and Chief Finance Officer, BNSSG ICB | ST |
| Apologies | | |
| Colin Bradbury | Director of Strategy, Partnerships and Population, BNSSG ICB | CB |
| Emma Wood | Chief People Officer for UHBW: SRO for Learning, Leadership and Wellbeing | EW |
| Eugine Yafele | Chief Executive Officer, UHBW | EY |
| Helen Holland | Chair of Bristol Health and Wellbeing Board | HH |
| Jeff Farrar | Chair of BNSSG ICB | JF |
| Sarah Margetts | Deputy Chief People Officer, NBT: SRO | SM |
| Joanne Medhurst | Chief Medical Officer, BNSSG ICB | JM |
| In attendance | | |
| Alex Nestor | Director of HR, UHBW | AN |
| Anthony Dorman | Business Partner - Temporary Staffing, BNSSG ICB | AD |
| Evonne Artman | Programme Administrator, BNSSG ICB | EA |
| Heather Toyne | People Programme Lead, BNSSG ICB | HT |
| Halle Fowler | Workforce Business Partner, BNSSG ICB | HF |
| Jean-Michel Simpore | EDI Inclusive Recruitment Project Manager, BNSSG ICB | JMS |
| Jean Scrase | Associate Director of Education UHBW, BNSSG Learning Academy SRO | JS |
| Jennifer Bond | Deputy Director of Communications and Engagement, BNSSG ICB | JBo |
| Louise Carthy | Programme Officer, BNSSG ICB | LC |
| Matthew Foxon | People Programme Manager, BNSSG ICB | MF |
| Monira Chowdhury | Head of Equality, Diversity, and Inclusion, NBT: SRO for EDI workstream | MC |

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| Peter Russell | Director of Resources, UHBW | PR |
| Richard Francis | Apprenticeship Project Manager, BNSSG ICB | RF |
| Lara Reading | HR Manager, SCW CSU | LR |

| | Item | Action |
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| 1 | Welcome and Apologies The above apologies were noted. | |
| 1.1 | Declarations of Interest JC declared an interest in item 13. Noting that this item was circulated for information only and not for discussion, the committee agreed that JC would not be required to leave the meeting. | |
| 2 | Minutes of the last meeting The minutes of the meeting on 16 th May 2023 were approved as a correct record. | |
| 3 | Action log The action log was reviewed and updated. | |
| 4 | <p>Workforce Plan Monitoring Report July 23</p> <p>MF presented the Workforce Plan Monitoring Report July 2023 to the group and highlighted the following points:</p> <ul style="list-style-type: none"> • The Committee ‘rhythm’ has changed which now enables more recent workforce data to be brought to the meetings, and greater alignment with Finance Committee reporting. • Month 3 data shows that we have more people in post than planned at this point. This means all providers are currently delivering above plan. • There has been a downward trend in staff turnover since November 22. Vacancies are also now on a downward trend. • There is a focus on retention across all providers. • The data shows a shortfall in medical staff; this is being investigated and will pull through into the next report. <p>The Committee raised the following points:</p> <ul style="list-style-type: none"> • JH confirmed this is a new report, noting that this is the first time we have monitored workforce in this way. It will form part of the performance report that goes to the Board. Thanks were extended to the team in reaching this point and enabling us to monitor our workforce in this way. • BG acknowledged the benefits that more real-time data would bring. It was highlighted that instead of separately reporting different sets of figures from each organisation, was this was a tool that can add real value and make a difference as a system. | |

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| | <ul style="list-style-type: none"> MF confirmed that currently we were just using UWE to inform our pipeline work, however we are looking to expand this going forward. UWE gives us a model to build from. <p>The Committee were invited to submit any further feedback on the report to matthew.foxon@nhs.net.</p> | |
| 5 | <p>Temporary Staffing Update</p> <p>AD presented the Temporary Staffing Update to the group and highlighted the following points:</p> <ul style="list-style-type: none"> There is an increase in bank use within our temporary staffing sphere. We need to reduce our agency reliance as this represents significant expenditure. We are looking at how we can undertake this in a collective way. The incentives toolkit aims to make bank use more attractive before looking to agency staff. The prioritisation criteria sets out protocols for crisis situations vs longer term requirements. Support for this approach is sought from the Committee, for further scoping of the Collaborative Bank. <p>The Committee raised the following points:</p> <ul style="list-style-type: none"> BG commented on this great work and its benefits in terms of system working. It will also impact positively on culture – collaborative as opposed to competitive. BG commended partners for the work they have done and for embracing the collaborative approach. JH reiterated that all partners have stepped up and that Trade Union partners have also been involved. It was highlighted that the approach is not just about expenditure, it is about how it can benefit staff firstly, and how this will leverage the money secondly. JG acknowledged the good work that has been achieved across all NHS providers and asked when social care / private care providers should be brought into the conversation. AD confirmed that the incentivisation work has focussed on NHS health and care staff to date, however work is ongoing to develop and pilot an incentivisation scheme for social care providers later in the year. JC highlighted the need to keep abreast of what other ICSs are doing in this space, including cross-boundary banks. JH confirmed that we are working closely with BSW, and that temporary staffing is an ongoing item on the national CPO agenda. We are taking learning from different regions and communities. | |
| 6 | <p>NHS EDI Improvement Plan Update Paper</p> <p>HT presented the EDI Improvement Plan update to the group and highlighted the following points:</p> | |

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| | <ul style="list-style-type: none"> • The NHS Equality, Diversity and Inclusion (EDI) Improvement Plan identifies 6 high impact actions. Each action has defined requirements and measurements. • Most of the 6 high impact actions are focussed at NHS organisation level, and are for NHS Trusts and their boards to implement. The role of the ICS is to provide effective system leadership overseeing delivery of the EDI improvement plan by NHS providers, ensuring progress toward the achievement of the high impact actions and NHS Long Term Workforce Plan priorities. • The 6 high impact actions were shared, including how these will be measured. Organisations will be responsible for reporting progress against these going forward from Autumn onwards. <p>Action: Agreed to carry out a first trawl of an objective assessment, then come back to the Committee to review and agree where we may want to be more specific / go beyond the NHSE requirement.</p> | HT |
| 7 | <p>NHS Staff Survey Report 2022</p> <p>LR presented a high-level overview and emerging themes from the results of the NHS National Staff Survey in October 2022, for the ICB and system partners.</p> <p>The Committee raised the following points:</p> <ul style="list-style-type: none"> • BG highlighted that the NHS Staff Survey results are very slow, and that there is a need to do things that are much quicker in order to be responsive. There is a need to engage and get feedback in real time. • JH confirmed that we would use the results as part of a triangulation of data to give us the best possible understanding. • AN observed that it was helpful to see the results presented across the ICS, not just per organisation. | |
| 8 | <p>Workforce Supply Deep Dive</p> <p>AN, MF, HF and RF presented the deep dive to the group, highlighting the following points around the themes of recruit, retain and reform:</p> <ul style="list-style-type: none"> • The strengths, weaknesses, opportunities and threats (SWOT) relating to workforce supply in BNSSG were noted. • It was highlighted that a key issue is around accommodation, recognising that the cost of living and housing affordability in Bristol is a significant problem. This needs to be considered in terms of how we attract people to work in the Southwest, and also trainees coming through. • Plans / ambitions are set out in our operating plan; it was acknowledged that there is a big recruitment ask for 2023/24 with lots of activity to undertake during this time. | |

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| | <ul style="list-style-type: none"> PR highlighted that there is currently a heavy reliance on India in terms of international nurse recruitment. Large scale recruitment events are very expensive with relatively little gain, PR is therefore looking at delivering our own system-wide events, with a trial event suggested later in the year. We are also looking at admin recruitment events out in the community, and how we might replicate those in other parts of our system. A mixture of interventions should be considered. It was noted that retention is a key priority in the NHS Long Term Workforce Plan. BNSSG has a high leaver rate, nationally as well as regionally. There is focussed work taking place around this, linked to staff wellbeing and retention. BNSSG is no longer a national outlier for staff turnover. An update was provided on apprenticeships, the educational pipeline, and next steps. ST highlighted that BNSSG has multiple providers in a single system, which is unusual, and queried if the full impact of this is understood. MF confirmed that this does skew the numbers, in terms of staff movement between NBT and UHBW. Reference was made to the Glos. system which has 2 acutes under one organisation, meaning they do not have the same turnover rate with staff moving between them. <p>Action: AN will pick this up as an action, recognising the significant cost of recruiting through the 'revolving door'.</p> <p>Any other feedback / comments to be submitted following the meeting.</p> | AN |
| 9 | <p>Inclusive Recruitment Review Project</p> <p>JMS presented to the group, highlighting the following points:</p> <ul style="list-style-type: none"> The review is based on the Roger Kline “No More Tick Boxes” report on fair recruitment and career progression. A questionnaire was created to capture a gap analysis of 7 ICS partners’ Inclusive Recruitment processes, to be reviewed against the Roger Kline recommendations of good practice. The questionnaire contained 119 questions, and 79 Job descriptions were sampled and reviewed. Challenges to the review were highlighted. Recommendations from the report were noted, in addition to other inclusive recruitment projects in the pipeline. <p>Action: partners to take away the engagement piece to resolve with their organisations.</p> | ALL |
| 10 | <p>People Programme SRO Update</p> <p>HT presented to the group, highlighting the following updates against our 5 priority areas, linked to the 10 People Functions of an ICS.</p> <p><u>Growing the workforce for the future and enabling adequate workforce supply</u></p> | |

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| | <ul style="list-style-type: none"> • Agency spend reduction plan submitted as part of operational planning round. • Secondary/collaborative bank option proposal under consideration as part of staged temporary staffing strategy approach. Further iteration of Incentive Framework developed. System workshop took place in June. <p><u>Supporting inclusion and belonging for all, and creating a great experience for staff</u></p> <ul style="list-style-type: none"> • EDI Improvement Plan drafted for People Committee. • Inclusive recruitment review is now closed, report drafted. • Draft proposal for partners to sign up to diverse interview panel scheme is being consulted on. • Business case drafted for short training videos to support inclusive recruitment good practice. • Refugees workshop held on 19th April. The next workshop is scheduled for 19th September with a focus on recruitment and retention through an EDI lens. • Believe Programme: 13 of 40 participants achieved some level of progression. <p><u>Leading workforce transformation and new ways of working</u></p> <ul style="list-style-type: none"> • Specific projects e.g. Urgent and Emergency Care strategy produced with workshop input from 30+ staff, and workforce Model for Clinical Assessment Service (CAS) developed. • 244 trained in Calderdale to date. • Commissioning Arrangements agreed - BNSSG social care L&D approach and framework. • HEE funded workforce transformation role for social care hosted by Care & Support West. <p><u>Valuing and supporting leadership at all levels, and lifelong learning</u></p> <ul style="list-style-type: none"> • System-wide Foundation Systems Leadership scheduled for pilot in Sep 23. • Graduate Management Training Scheme - submission complete, 5 Trainees 6 Partners. • Supercharging coaching and mentoring to support leaders and improve retention. <p><u>Educating, training and developing people, and managing talent</u></p> <ul style="list-style-type: none"> • Oliver McGowan: roll out of E-learning package, recruitment to Project Manager, Lead Trainer, Experts by Lived Experience and Coordinator complete for Sept go-live. • 3 day “Experience of Work” for 12 students from an inner-city school, providing insight into apprenticeships, communication, EDI, and careers. 46 students from across BNSSG underwent a work experience placement across Community, Acute and Primary. • Passporting of stat and man training has saved £216k of training hours since it started. • Learning and Leadership Academy business case for L&D Open Book Exercise is underway. |

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| | <p>It was acknowledged that a reshape and refocus would follow, to further align with the NHS Long Term Workforce Plan.</p> <p>Action: Oliver McGowan progress update to be provided to RS in advance of her forthcoming meeting with Paula McGowan.</p> | LC |
| 11 | <p>Hot Topics / Risks or matters for escalation or communication</p> <p>The following risks were noted:</p> <ul style="list-style-type: none"> JH referenced the ICB efficiency savings requirement of 30% of running costs, noting that this also entails a lot of internal-facing work for the People Directorate. It was confirmed that the Directorate will not be the same size and shape that it was before. This will mean different conversations around ICB delivery with system partners. RS referenced the ongoing industrial action, noting that this creates tension between professional groups as well as impacting on patients. | |
| 12 | <p>Any Other Business</p> <p>The following AOB was raised:</p> <p><u>NHS Long Term Workforce Plan</u></p> <ul style="list-style-type: none"> JH confirmed that the NHS Long Term Workforce Plan will be on future agendas. We already have some of the building blocks in train to deliver the plan, which is encouraging. There will be a workforce and culture strategy in place across BNSSG to drive some of this work. JH is in communication with regional CPO colleagues to look at what we can do collectively. A round table discussion will take place in the Autumn. A refresh of the People Programme Board is underway; work will align with the train, retain, and reform themes. <p>Special thanks were extended to HT in her last ICS People Committee before retirement. The group expressed their thanks for her hard work and support to the team.</p> | |
| 13 | <p>Draft PID Review</p> <p>This agenda item was for information only.</p> | |
| 14 | <p>BNSSG ICS Strategy Update</p> <p>This agenda item was for information only.</p> | |
| | <p>Date of Next Meeting</p> <p>Tuesday 26th September 2023, 0900-1100.</p> | |

Evonne Artman
Programme Administrator
August 2023

