

## Agenda Item: 5ii

Report to:	Trust Board	Date: 5 July 2018
Report from:	Director of Workforce and Organisational Development	
Principal Objective/ Strategy and Title	Workforce Report	
Board Assurance Framework Entries	Recruitment and Retention Staff Engagement Safe Move	
Regulatory Requirement	Employment Legislation Well-Led Safe Staffing	
Equality Considerations	n/a	
Key Risks	<ul style="list-style-type: none"> <li>• Staff engagement is damaged as a result of poor consultation processes</li> <li>• Retention increases as a result of poor staff engagement</li> </ul>	
For:	Information	

### 1. Purpose

The purpose of this paper is to provide the Board with an update on key workforce issues that are not covered in the PIPR. The areas this paper focuses on are:

- 18/19 Pay Award
- Update on consultations and OD work to support teams
- Update on August junior doctor change over
- Employee ESR self service
- Pulse survey results
- BAME event

### 2. 18/19 Pay Award

The NHS Staff Council has reached agreement on a refresh of the NHS Terms and Conditions of Service (Agenda for Change), and following a consultation exercise, trade union members voted to accept the proposed changes.

The deal was formally ratified at the NHS Staff Council on 27 June 2018. The Secretary of State has confirmed that the pay deal will be funded.

This is a three year pay deal, reform of the pay structure and changes to terms and conditions. The changes are:

- Starting salaries increased across all pay bands.
- New pay structure with fewer pay points – overlapping pay points removed initially followed by further pay points.
- New system of pay progression linked to annual appraisal.
- Top of pay bands to be increased by 6.5 per cent over the three years (apart from band 8d and 9 which will be capped at the increase of Band 8c).
- Minimum rate of pay in the NHS to be set at £17,460 from 1 April 2018 – ahead of the Living Wage Foundation Living Wage rates
- Band 1 to be closed to new starters from 01 December 2018.
- Bands 2 to 4 and 8 to 9 will only have two pay points in the new structure. Bands 5 to 7 will have three.
- Staff below band 8 will have the opportunity to reach the top of their pay band more quickly than under the current pay system.

- The time it takes for bands 8 to 9 to reach the top remains unchanged.
- Re-earnable pay remains for those staff that have reached the top of their pay band in bands 8c to 9

ESR is being updated to enable the new pay rates to be paid in July with arrears paid in August.

A key driver for the pay deal is to improve recruitment and retention and we will be ensuring that we publicise the improved pay rates in our recruitment campaigns.

### **3. Update on consultations and OD work to support teams**

The consultation process for Royal Papworth Hospital commenced on 22nd June and will run for 45 days up to 7th August 2018. Ahead of the start of the consultation 10 open meetings were held between 11th and 22nd June. A member of the Executive team and Workforce were present at each meeting and Trade Union representatives attended a number of the sessions. Over 180 members of staff attended.

All staff received a letter from the Chief Executive as well as an overarching consultation document to their home address over the weekend of 9th/10th June. Those departments with planned changes above and beyond the change of location have a specific appendix. These appendices can be accessed through the Trust's 'Big Move' website and through individuals' line managers.

Departments have been holding team meetings to discuss the proposed changes and staff have the opportunity to have 1:1 meetings with their manager. Staff are invited to feedback their comments and queries to their manager, union representatives or through a designated email address. Frequently asked questions gathered from both open meetings, feedback and emails are updated regularly.

Staff and union engagement with the process has been good. HR Partners are engaging with those staff who have expressed a preference to work at the House or at another NHS organisation to support their redeployment.

The decision has been made to continue the consultation process to the original timetable.

The OD team have been running a series of development sessions for managers on aspects of organisational change. All teams have been offered team development and facilitation to support them with planning for the move and a number of them are working through a development framework.

### **4. Junior Doctors**

The August junior doctor rotation is one of the largest the Trust has experienced with the majority of the junior doctors in training changing organisations. The Deanery allocates junior doctors in training to Trusts and we were informed in early June that there would be three training gaps in Thoracic services from August. This is the highest number of gaps for a number of years and reflects the regional position of a shortage of junior doctors in training.

The Trust immediately advertised the three vacancies as Locum Appointments for Service (LAS) and have successfully appointed to one of these posts. It is anticipated that the successful candidate will be able to commence in time for the rotation. At the time of writing this report the advert has been re-issued and discussions are ongoing with the Thoracic Directorate to ensure adequate service provision can be maintained over the rotation period.

Following the delay in the move to the Cambridge Biomedical Campus all incoming junior doctors have been written to informing them of the delay and offering contact information for questions or concerns.

### **5. Employee ESR Self Service and Electronic Payroll Forms**

The Trust is implementing ESR Employee self-service in August 2018. This is in support of:

- Ensuring that we can work efficiently and effectively across the two sites of Royal Papworth House and Royal Papworth Hospital
- Supporting the move to paper-lite processes

- Maximising the potential of our electronic workforce systems
  - Introducing and embedding eLearning to meet mandatory training requirements
- A further driver for change is that space capacity for delivering classroom based training will be limited at Royal Papworth Hospital and staff will be working across multiple sites. eLearning will reduce demand as well as enabling a more flexible solution for staff.

All employees will have access, either on their work PC, home PC or tablet to view and update their ESR record and undertake Equality and Diversity and Conflict Resolution mandatory training e-learning. Further e-learning packages will be rolled out in a two month period after the implementation date.

Electronic payroll forms will also be introduced in August. The forms will ensure that information provided to payroll will be more accurate and timely, reducing the potential for pay errors. In particular those starting and returning from maternity leave have often been paid incorrectly, which is a poor experience. Mandatory fields and drop down lists within the documents will enable the correct information to be selected and processed. We will start with trialling it in a number of areas in August and then roll out across all departments from September.

## 6. Feedback from the monthly Pulse Survey

Following the Your Move Interview Programme a monthly pulse survey has been introduced in order to track staff perception on aspects of the planning and preparation for the relocation. This will enable us to determine whether actions being taken to address concerns highlighted in the Your Move Programme are having an impact. We have also integrated the national staff recommender questions (place to work and place to receive treatment) into this survey. The survey is open online for the third week of the month and staff are encouraged via Newsbite and the Our Move Briefings to participate. We report the results of the survey at the weekly Our Move briefing and we share an analysis of the results with managers in order to inform their planning and staff engagement.

There were 238 responses (13%) to the May survey and 225 in June (13%) compared to 377 completed in April. The largest staff groups completing the survey are A&C staff and nursing staff.

	Apr-18	May-18	Jun-18
Total number of surveys completed in month	377	238	225
Do you know where your role will be based?	86.7%	90.8%	90.7%
Do you still have concerns about the move?	82.0%	84.5%	82.2%
Concerned about changes to ways of working	44.8%	51.3%	43.1%
Concerned about disruption to team	41.4%	41.2%	40.0%
Concerned about parking at new site	58.9%	59.2%	59.6%
Concerned about traveling to new site	61.5%	63.4%	57.8%
Have you had discussions with your line manager about the move?	75.6%	82.4%	78.2%
Is there enough joint working within your team on planning for the move?	61.0%	63.9%	62.7%
Are you getting sufficient communication?	56.5%	59.2%	60.0%
Have you worked out your travel plans for your new base?	50.1%	56.7%	57.8%
Will you be staying with the trust post move?	74.8%	85.3%	83.1%
Would you to recommend the Trust to friends and family if they needed care or treatment?	80.4%	88.7%	81.8%
Would you to recommend the Trust to friends and family as a place to work?	39.8%	40.3%	36.9%

The Friend and Family recommender score continues to be significantly below the national average of 63%.. Reviewing the free comments the predominant theme driving a neutral or negative response is the relocation of staff to New Papworth House and all that it involves for new ways of working and the move of the hospital to the Cambridge Biomedical Campus. The recommender score as a place to be treated remains above the national average.

## 7. BAME (Black, Asian and Minority Ethnic) Staff Event

On 28<sup>th</sup> June we held a lunchtime session to celebrate the contribution of BAME staff to the Trust and to launch the creation of a BAME Network. At Royal Papworth we are proud and grateful to have staff who come from all over the world. 22<sup>nd</sup> June was Windrush Day and the 70<sup>th</sup> anniversary of the arrival of a ship filled with over 500 people looking to settle in the UK. Many of those people came to work in the NHS. We wanted to participate in this anniversary by holding our own event.

Investing in a diverse NHS workforce enables us to deliver a more inclusive service and improve patient care. Equality, diversity and inclusion must be at the heart of our workforce strategy. Equality is about creating a fairer workplace where everyone has the opportunity to fulfil their potential. Diversity is about recognising and valuing difference in its broadest sense. Inclusion is about an individual's experience within the workplace and in wider society and the extent to which they feel valued and included.

The Trust's Workforce Race Equality Standard, reported annually, tells us that staff from BAME backgrounds do not always have a good experience within the Trust, this is borne out in the Staff Survey results. We have an action plan but we recognise that we need to better understand the experiences of our BAME staff and to ensure that the actions we take will address the concerns of staff.

At the very well attended event on the 28<sup>th</sup> June four members of BAME staff gave a presentation on their experience of working in Royal Papworth Hospital and their suggestions for how we could improve the experience of BAME staff. These presentations were thought provoking and inspiring. We had a number of expressions of interest in participating in a BAME Network to help us develop some of the suggestions that came from the event. The network will report to the newly formed Equality, Inclusivity and Dignity Steering Group co-chaired by the Chief Operating Officer and Director of Workforce and OD.

### **The Board is asked to:**

Note the updates provided in this report.