

Item 4.i

Agenda item

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| Report to: | Board of Directors | Date: 3 March 2022 |
| Report from: | Director of Workforce and Organisational Development | |
| Principal Objective/Strategy: | The purpose of this paper is to provide the Board with an update on workforce and organizational development matters not included in PIPR. | |
| Title: | Report of the Director of Workforce and Organisational Development | |
| Board Assurance Framework Entries: | BAF 1854 Recruitment BAF 1853 Retention BAF 1929 Staff Engagement | |
| Regulatory Requirement: | Well-Led | |
| Equality Considerations: | Public Sector Equality Duty Workforce Race Equality Scheme | |
| Key Risks: | <ul style="list-style-type: none"> • Turnover increases as a result of poor staff engagement • We are unable to recruitment sufficient staff to meet safe staffing levels • Staff engagement is negatively impacted by poor people practices | |
| For: | Information The Board is asked to note the updates set out in this report. | |

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:

- **Q4 Pulse Survey**
- **LGBT+ History Month**

1. Q4 Pulse Survey

1.1 The Q4 Pulse Survey was undertaken at the end of January/beginning of February. We had a response rate of 290 which is approximately 14% of our employed workforce. We have been asking a core set of questions in this survey for the last two years which means that we are able now to look at trends in the results.

1.2 In Q4, despite the pressures on the workforce and service as a result of the Omicron surge, the recommender score as a place to work improved to 74% and a place to be treated remained broadly static at 90%. The other area where we saw an improvement from the last quarter were in the percentage of staff planning to stay working with the

Trust for the next 12 months albeit it returned to the levels in previous quarters. (It is worth noting that the response rate for Q2 was very low at 7% and the majority of responses were from administrative and clerical staff.)

| | 20/21 Q2 (510) | 20/21 Q4 (349) | 21/22 Q1 (214) | 21/22 Q2 (152) | 21/22 Q4 (290) |
|---|---------------------------|---------------------------|---------------------------|---------------------------|---------------------------|
| Regular One to One | 48% | 56% | 70% | 61% | 66% |
| Regular Team Meetings | 51% | 56% | 70% | 68% | 68% |
| Staff communication on issues that are important to you | 60% | 63% | 78% | 68% | 66% |
| Sufficient resources to undertake your role | 70% | 69% | 65% | 61% | 62% |
| Planning to stay working with the Trust for the next 12 months | 55% | 54% | 53% | 49% | 56% |
| Wellbeing is considered | 54% | 61% | 75% | 72% | 64% |
| Mental Health wellbeing is considered | 54% | 61% | 64% | 60% | 64% |
| Recommender as a place to work | 70% | 70% | 66% | 67% | 74% |
| Recommender as a place to be treated | 92% | 96% | 90% | 89% | 90% |

1.3 We saw deterioration in the percentage of staff feeling that their wellbeing is considered. The key themes in the feedback on this aspect and the general feedback on the areas of concern with working in the Trust were as follows:

- Stress being experienced as a result of the workload and the pace of work
- Concerns at staffing levels
- Problems accessing appropriate digital equipment
- Not having adequate rest areas and access to office space
- Not having supportive line managers
- Support with continuing to work from home

1.4 The free text comments also contained positive feedback on the ongoing work on improving the health and wellbeing support for staff including the mental health services and the gestures of appreciation such as the Christmas gift and free refreshments. There were also many staff expressing that they enjoyed working for the organisation and believed it provided excellent services to patients.

1.5 The concerns highlighted in the feedback reinforce the importance of progressing the Values and Behaviour Workshops, which relaunched mid-February, and the Compassionate and Collective Leadership Line Managers Programme which is on track to commence at the end of April 2022. It is difficult at this point to evaluate how much of a contributory factor the impact of Covid-19, both the high staff absence and surges in patient numbers, is on staffs perception of staffing resources and workload. We have relatively low vacancy rates in areas such as nursing but they are higher in some of the smaller staff groups/departments such as AHPs. We will need to monitor this carefully as we see staff absence reduce and we seek to address the backlog in patients needing to access our services. With regards to staff facilities such as rest areas and office space we will need to continue to pay attention to this and where the opportunity presents itself make improvements. We continue to work with the Junior Doctor Forum to improve the rest facilities for doctors and other staff who are required to work at nights. The option to work from home continues where it suits the individual and the service/team. This increased flexibility has been valued by staff and it also reduces demand on office accommodation.

1.6 With effect from last July 2021 we have been required to submit a core data set on staff experience nationally on a quarterly basis. As a result we can review our responses benchmarked against peer organisations which in this case are organisations rated as outstanding. This benchmarking is now available for the Q2 21/11 data set. It analyses the data against the following four themes:

- Staff engagement: consists of three sub-scores of advocacy, involvement and motivation.

| Trust Score (Top quartile) | Peer Median | National Median |
|----------------------------|-------------|-----------------|
| 7.1 | 7.0 | 6.6 |

- Advocacy: degree to which staff advocate for their organisation as a place to work or to be treated.

| Trust Score (Top quartile) | Peer Median | National Median |
|----------------------------|-------------|-----------------|
| 7.9 | 7.6 | 6.8 |

- Involvement: degree to which staff feel that they are involved in making improvements within their organisation.

| Trust Score (Top quartile) | Peer Median | National Median |
|----------------------------|-------------|-----------------|
| 6.8 | 6.7 | 6.3 |

- Motivation: degree to which staff feel motivated to work for their organisation.

| Trust Score (third quartile) | Peer Median | National Median |
|------------------------------|-------------|-----------------|
| 6.7 | 6.8 | 6.6 |

2. LGBT+ History Month

2.1 LGBTQ History Month, which takes place in February, celebrates the lives and achievements of the lesbian, gay, bisexual and transgender community and focuses on gay rights and the related civil rights movements.

2.2 The Trust's LGBT+ Network organised three well attended and highly engaging webinars to raise awareness of LGBT+ issues and history. The aim of these webinars was to bring staff together as a community, remember the past and celebrate how far the LGBT+ community have come and think about the future.

2.3 The first webinar was hosted by LGBT+ Network Deputy Chair, Sophie Fellows with external speaker Lee Gale from Gendered Intelligence. Lee is a trainer and consultant who has worked to support the trans community in a range of voluntary roles and organisations since 2000. He spoke about the challenges facing trans people and how to build an inclusive working environment. The second webinar was hosted by Dr Helen Barker, Consultant Physician, and guest speaker Dr Sandie Dunne. Dr Dunne is an Organisational Development Consultant, widely recognised as an expert in, and advocate of equality and social justice. She spoke about leadership approaches to achieve the desired levels of equality, diversity and inclusion for those with protected characteristics across NHS-funded services. The final webinar was hosted by Lani Gale, Chair of the LGBT+ Network and LGBT+ history talk from network lead Lani Gale and Ben Hunte who is a senior reporter for VICE World News, investigating stories about LGBTQ people, race, and inequality from across the world.

3 Recommendation

The Board is asked to note the updates provided in this report.