

Agenda item 2 ii

Report to:	Board of Directors	Date: 5 September 2024
Report from:	Director of Workforce and Organisational Development	
Principal Objective/Strategy:	Update from the Director of Workforce and OD on key workforce issues	
Title:	Report of the Director of Workforce and Organisational Development	
Board Assurance Framework Entries:	Recruitment Retention 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:		

Items covered in this paper are:

- Board vision for inclusive leadership
- Improving the working lives of doctors in training

1. Inclusive Leadership

1.1 In the latter half of 2023 the Workforce Committee and subsequently the Board held a number of discussions about whether the work that was being done through the Workforce Strategy and in particular the Compassionate and Collective Leadership Programme was bringing about the desired improvement in EDI and the broader culture in the organisation. These discussions led to the commissioning of a series of Board Development sessions in which the Board challenged itself about its role as leaders of the culture. Working from the premise that if the Board's primary role is to ensure that the organisation has a vision and to provide leadership and governance of the vision, then it needs to seek to ensure that the paradigm, that central set of governing beliefs and experiences, is congruent with that vision.

1.2 Through these workshops the Board arrived at a shared perspective on the current culture across the organisation and the impact of this culture on staff's working experience and particularly staff from an ethnic minority background and/or those with a protected characteristic. The linkages between the current culture and clinical outcomes, patient experience, patient safety and on innovation were also explored. There was an acknowledgement that not addressing the problems identified posed a significant risk to the ability of the organisation to deliver on its core strategic objectives.

1.3 The output from this work was a commitment by the Board to develop a vision of board leadership for inclusion and to engage the Trust's leadership community and the wider workforce in delivering this vision. The Board will also identify a number of areas of focus for leaders and leadership teams in bringing this vision to life. This work builds on and brings fresh impetus to the Compassionate and Collective Leaderships Programme.

1.4 Since the last Board development session a small group of Executive and Non-Executive Directors have been continuing the work on developing the vision for leadership. This group has also been planning an event to engage with the wider Trust leadership which has been organised for the 17 September and then following that communication/engagement with the wider organisation.

1.5 The Workforce Committee will be kept updated on this work in future meetings.

2. Improving the working lives of doctors in training

2.1 In April 2024 NHS England issued a letter to NHS employers setting out a number of actions that employers could take to improve the working lives of doctors in training. This was against the backdrop of the industrial action by the BMA on pay. Concerns at the working arrangements and their impact on the working lives of doctors in training were being raised in the discussions with the BMA to settle the dispute.

2.2 The letter from NHS England is included in the reference pack for information. It set out a series of actions to improve the working lives of doctors in training for NHS England, who is responsible for the overarching structure and organisation of doctors training, and for employers. These actions were grouped as follows:

- Increase choice and flexibility through better rota management and deployment
- Reduce duplicative inductions and pay errors: streamline and improve HR support
- Reduce the content, repetition and time required for statutory and mandatory training and enable the passporting of training between employers
- Protecting training time, for both learners and educators.
- Improving the rotation arrangements
- Ensuring that the wellbeing of doctors in training is attended to and facilities arrangements meet minimum standards

2.3 NHS England stated that they expect every trust board to take responsibility for this agenda. The Workforce Committee reviewed a gap analysis, completed by the Medical Staffing and Medical Education teams, of current practice in the Trust and the requirements set out by NHS England. A number of the areas for attention are ones that have already been discussed and are reporting to the Workforce Committee for example Locally Employed Doctors training arrangements, Junior Doctor Rest facilities.

2.4 The gap analysis is attached as Appendix 1. The areas for future action/consideration have been reviewed by the Executive Team. Responsibility for delivering the actions will be held by the relevant governance group and issues escalated to the Executive Team as necessary. The Workforce Committee concluded that there was limited assurance regarding some aspects of the work plan and has requested that an update on progress is brought back to the Committee in six months.

Recommendation:

The Board of Directors is requested:

- **To note the progress with developing the Board vision for inclusive leadership and engagement with the wider Trust leadership**
- **To note the areas of work to improve the working lives of Doctors in Training.**