

Northumberland, Tyne and Wear NHS Foundation Trust

Board of Directors Meeting

Meeting Date: 26 October 2016

Title and Author of Paper: Workforce Directorate Quarterly Update – Lynne Shaw, Deputy Director of Workforce and OD

Executive Lead: Lisa Crichton-Jones

Paper for Debate, Decision or Information: Information

WORKFORCE STRATEGIC AIMS:	✓
We will develop a representative workforce which delivers excellence in patient care, is recovery focussed and champions the patient at the centre of everything we do.	✓
We will embed our values, improve levels of staff engagement, create positive staff experiences and improve involvement in local decision-making.	✓
We will lead and support staff to deliver high quality, safe care for all	✓
We will help staff to keep healthy, maximising wellbeing and prioritising absence management	✓
We will educate and equip staff with the necessary knowledge and skills to do their job	✓
We will be a progressive employer of choice with appropriate pay and reward strategies	✓

The Workforce Directorate quarterly report outlines some of the key work and developments across the Trust. The report supports the six key aims of the Workforce Strategy which was ratified by the Trust Board in summer 2015.

Includes updates on:

1. Workforce Disability Equality Standard
2. Equality North East Awards Finalist
3. 2016 Staff Survey
4. Capsticks HR Advisory Service Extension of Contract
5. Investors in People and Health and Wellbeing Good Practice Awards
6. Better Health at Work Award
7. National Sickness Absence Statistics
8. Health Education North East - Education Investment Plan
9. Trust-wide Workforce Plan
10. Junior Doctors Contract
11. Retire and Return
12. NHS Pension Administration Charges
13. Public sector exit payments

Risks Highlighted to Board : N/A

Does this affect any Board Assurance Framework/Corporate Risks?

Please state Yes or No No

If Yes please outline

Equal Opportunities, Legal and Other Implications:

Various aspects of Employment Law

Outcome Required: Information Only

Link to Policies and Strategies:

Workforce Strategy

Workforce Directorate Quarterly Report

26 October 2016

Strategic Aim 1

1. Workforce Disability Equality Standard

The NHS Equality and Diversity Council (EDC) at its meeting in July 2016 recommended that a Workforce Disability Equality Standard (WDES) should be mandated via the NHS Standard Contract in England from April 2018, with a preparatory year during 2017-18. (This has been delayed from April 2017 which has previously been reported in an earlier Workforce report).

Engagement on the proposed Workforce Disability Equality Standard has begun, alongside an extensive programme of communications and engagement to raise the profile of this initiative, coupled with 'Making Disability an Asset' and to outline what support will be provided to organisations to deliver the change with disabled staff.

The Trust, through its role as a Diversity and Inclusion Partner with NHS Employers will be taking part in the pilot work for the standard which will include the collection of metrics for the proposed standard in 2017.

The Trust's Equality and Diversity Lead is facilitating an engagement event to raise the profile of the standard in November. A key initiative of the standard will be to start disability asset networks to help share and spread good practice and act as peer support. The Trust's network for Disabled Staff has a launch meeting on 4 November 2016 and the exploration of an asset network will be part of its remit.

2. Equality North East Awards Finalist

Equality North East have announced the finalists in all nine categories of 2016 North East Equality Awards. The Trust is a finalist in the "**Larger organisations making a difference in the community**" category, for recognition of the work undertaken around Dementia Friends and the training of staff as Champions. North East Ambulance Service and Your Homes Newcastle are the other two organisations shortlisted for this category.

In their thirteenth year, the Awards have become a significant fixture on the North East business calendar, highlighting and celebrating the good equality practice being carried out regionally. The winners will be revealed at an awards ceremony on Thursday 20 October 2016 at the Ramside Hall Hotel.

Strategic Aim 2

3. 2016 Staff Survey

The 2016 staff survey launched to all staff approximately 4 weeks ago. At the time of writing our response rate was 22%, which is a few % points behind the same point in time last year yet just above the average for returns from mental health trusts.

We are monitoring the response rate carefully, through weekly executive and senior operational meetings and have ongoing communications underway. We have re communicated the actions taken in response to last years results and operational managers are working hard to ensure staff are given time to complete the survey. In addition our staff governors and staff side reps are working with us to encourage completion. We are offering an I pad as an incentive and the winner will be selected by our new survey contractor, Quality Health.

4. Capsticks HR Advisory Service Extension of Contract

Capsticks HR Advisory Service has been working with the Trust for the past three years providing support on key areas such as disciplinary and grievance investigations and hearings and more latterly undertaking some complex sickness cases. The current contract expires on 30 November 2016. Following a review and feedback from operational managers it has been agreed to extend the contract until March 2018. The exact detail of the contract is still being worked through but the benefits of continuing with the service were key in the decision-making process, including free legal advice (up to Employment Tribunal), bespoke specialist training and reduced timescales for completion. The cost of the contract continues to be significantly less than the previous in-house model.

Strategic Aim 4

5. Investors in People and Health and Wellbeing Good Practice Awards

The re-assessment of the Investors in People (IIP) and Health and Wellbeing Good Practice Awards concluded on Monday 17 October 2016 with verbal feedback given. Meetings/focus groups were held over a two week period involving 108 staff from various professions, locations and grades, including some Trust Board members. The feedback was positive in nature with many areas of good practice identified along with some ongoing suggestions for further development.

The final report will be received in approximately two weeks, the details of which will be included in a future report. Next steps will include the development of an action plan and a move towards the self assessment against the new national standard.

6. Better Health at Work Award

This award is a North East based initiative that recognises the efforts of local employers in addressing health issues within the workplace. The award recognises the achievements of organisations who promote health at work and encourage healthy workplaces.

There are four levels to the award - Bronze, Silver, Gold and Continuing Excellence. Since 2009 the Trust has held the award at Continuing Excellence level. Assessment is annual but for those organisations at the highest level there is an interim assessment bi-annually and a full assessment bi-annually.

Each level of the award has appropriate criteria and organisations are required to submit a portfolio of evidence to demonstrate how it has met the criteria. This is supplemented by an assessment meeting with key members of the organisation. The Trust will undergo its full assessment on 20 October 2016.

7. National Sickness Absence Statistics

The latest figures released by NHS Digital (end of September 2016) show that NHS staff sickness absence increased from May 2015, where it was 3.09 per cent, to 3.84 per cent in May 2016.

The data considers sickness absence rates and total days lost supplied by staff groups, Health Education England (HEE) regions and organisations.

- The lowest sickness rate groups for April 2016 were nursing, midwifery and health visiting learners, with 0.95 per cent
- The highest sickness rate groups were healthcare assistants and other support staff at 5.87 per cent
- The North Central East London HEE region had the lowest regional sickness absence at 2.98 per cent for May 2016
- The North West HEE region had the highest sickness absence at 4.45 per cent.

NHS Employers has introduced an on-line tool designed to help managers support staff with a confident and consistent approach to sickness absence. This is currently being reviewed with a view to introducing it as part of the management skills programme.

Strategic Aim 5

8. Health Education North East - Education Investment Plan

Health Education North East requires all organisations wishing to access the education it commissions through continuous workforce development (CWD) to complete an education investment plan. The education funded via this route is for non-medical staff at Band 5 and above and the plan should detail the specific educational requirements we will need as a Trust for 2017/18 (to be linked to the Trustwide Workforce plan). This covers Modules and Masterclasses as opposed to full programmes of study such as degrees.

The plan has been completed in partnership with the Training Academy, professional leads across Nursing, AHP, Psychology and Pharmacy as well as other key stakeholders across the Trust to identify the types of training required as well as the number of places we wish to utilise. The content of the return was agreed at Group Business Meeting and was submitted on 17 October 2016. The final plan will be available in January 2017.

9.Trust-Wide Workforce Plan

The draft trust-wide workforce plan was presented to the Corporate Decision Team on Monday 17 October 2016. This informative session was delivered by members of the Workforce Directorate alongside the Professional Leads and generated much discussion on key areas such as age profiles, workforce demand and supply, the apprenticeship levy and generational differences. The future workforce supply was explored with specific focus on new roles and alternative ways of working to the traditional ways we have previously worked within and across professional groups. Feedback from the session was very positive. Next steps and the updated action plan will be considered by the Workforce Group.

Strategic Aim 6

10.Junior Doctors Contract

Since the last quarterly report the BMA has called off all proposed strike dates and the contract implementation is going ahead. The BMA are asking Trusts to ensure they are satisfied that all the adequate safeguards are in place prior to implementation and if Trusts are not satisfied they should delay. By way of reminder, junior doctors working within the trust are employed by the Lead Employer Trust (hosted by County Durham and Darlington FT) and we continue to work closely with them on implementation plans.

All Trusts in the region are proceeding as the implementation timetable. Foundation Year 1 Doctors will transition on 6/7th December 2016 (employed by the acute Trusts),

Psychiatry are still on track for February 2017 with only those starting core training (CT1) or higher training (ST4) being offered the new contract due to those on 'run-through' training schemes only having a break in contract at these junctures.

The Junior Doctors forum has met once and the next meeting is early in November. Terms of reference are being agreed.

11. Retire and Return

The NHS Pension Scheme Advisory Board (consisting of NHS employer organisations and trade union representatives) met at the end of September 2016 and it is anticipated that national guidance will shortly be issued by the Department of Health in respect of Retire and Return. Whilst this guidance will act as a framework for local decision-making it is expected to assist employers avoid improper use of retire and return arrangements in respect of the NHS pension scheme.

12. NHS Pension Scheme Administration Charges

A consultation on the anticipated NHS Pension Scheme administration charge (0.08% of pensionable pay) is expected to be undertaken in the near future. Early indications suggest that the consultation document will be in respect of how best to implement this cost rather than whether there ought to be a cost transfer. It is thought that the associated cost transfer from the Department of Health to individual NHS employers will be implemented by increasing the employer pension contribution rate to 14.38% with effect from 1 April 2017. Further details will be provided as they emerge.

14. Public Sector Exit Payments

The government has published its [response to the consultation](#) about reforms to public sector exit payments to ensure greater consistency between public sector redundancy compensation schemes and value for money for the taxpayer. These reforms will apply to the majority of the 5 million public sector workforce, including civil servants, teachers, NHS workers, local government workers, armed forces personnel, police officers and firefighters.

The new framework ensures a fair and appropriate level of compensation is provided for employees who are required to leave public sector jobs, whether on a mutually agreed or voluntary basis, or through compulsory redundancy.

Government departments will produce proposals for reform for each workforce, consistent with the terms set out in this document. The Treasury expects the necessary changes to be made within 9 months of the publication of this response.

The government has already committed to introducing two other measures on public sector compensation: a cap on all public sector exit payments at £95,000; and 'clawback' of redundancy compensation when a highly-paid individual returns to the public sector shortly after receiving an exit payment.

Lynne Shaw
Deputy Director of Workforce and OD