Sandwell and West Birmingham

Report Title:	Board Level Metrics for People	Board Level Metrics for People				
Sponsoring Executive:	Richard Beeken, Chief Executive	ichard Beeken, Chief Executive				
Report Authors:	Frieza Mahmood, Chief People Officer					
	Kam Dhami, Director of Governance					
Meeting:	Trust Board (Public)	Date	2 nd March 2022			

1. Suggested discussion points [two or three issues you consider the Trust Board should focus on]

Each member of the Executive Team has personally provided their own commentary to the area for which they are the lead within the People Strategic Objective.

This adds a further strengthening to the ownership and accountability where improvements are required in the main IQPR Report.

The report is of course, a work in progress and will remain so, to ensure that performance is easily understood, tracked over time and constantly improved.

This report, when working as we would expect it to, should enable the board to operate at strategic level, confident in the work of the sub-committees in testing assurance and understanding further detail provided by the executive and their teams.

2. Alignment to our Vision [indicate with an 'X' which Strategic Objective this paper supports]								
Our Patients		Our People		Our Population				
To be good or outstanding in		To cultivate and sustain	x	To work seamlessly with our				
everything that we do		happy, productive and	^	partners to improve lives				
		engaged staff						

3. Previous consideration [where has this paper been previously discussed?] N/a

4.	Recommendation(s)
The	e Trust Board is asked to:
а.	RECEIVE and note the report for assurance

5.	Impact [indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]								
Tru	st Risk Register								
Boa	ard Assurance Framework								
Equ	uality Impact Assessment	ls	this required?	Y		Ν	Х	If 'Y' date completed	
Qu	ality Impact Assessment	ls	this required?	Y		Ν	Х	If 'Y' date completed	

SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST

Report to the Public Trust Board: 2nd March 2022

Board Level Metrics for People

CQC Domain	Well-Led				
Trust Strategic Objective	Our People				
Executive Lead(s): Chief People Officer & Director	of Governance				
Days Lost to Sickness Absences Sickness absence for the month of January 2022 average trend showing consistent increases in rec stress/depression/other psychiatric illnesses, othe flu-influenza (includes COVID related absence)	cent months due to anxiety				
We have maintained a corporate focus on health and wellbeing; with access to Well-being hubs; mental health support, lifestyle health management advice, training for managers and specialist support from OH. The Groups have continued to support wellbeing through the Restoration and Recovery group. The findings of a recent review which were approved by the Executive Team have been communicated across the Trust. The focus of this is on investing in core wellbeing such as developing staff break rooms, improving access to food and hydration, along with delivering fully staffed ambitions. This included ensuring consistency in access of support and appropriate rest to improve the resilience of staff.					
There is strong ownership and accountability for t reinforced through OMC. A daily rhythm of sickne established to support covid surge efforts. The Gr trigger meetings continue to take place and that t trajectories previously agreed at POD Committee.	ess reporting and management has been oups have also been supported to ensure they are delivering against the revised				
Turnover (Monthly) Turnover has increased slightly this month compa	ared to the previous month.				
A comprehensive retention plan and investigative multi-disciplinary approach to identify and target place to support improvements in Recruitment & independent review of processes. A strong focus through engagement along with a detailed suppo career. Our strategic approach to flexible working with support from NHSEI as part of our engagement programme". There is more focused work to com Equality, Diversity and Inclusion aims that will also particularly in relation to the talent management	hot spot areas. Revised arrangements are in On-boarding process following an on Nurse retention has been established rt plan for retaining colleagues in their later g as a lever for retention has been overhauled ent with the National Pioneer "Flex for Work nplete on the High Impact actions for achieving o contribute positively to improving turnover				

Q2 21/22 People Pulse Staff Engagement Score

The second quarterly Pulse Check survey was carried out in January 2022 with 1307 responses (17%). The survey measures staff engagement using nine core questions that are also included in the national staff survey that was carried out in Q3.

Overall staff engagement has reduced slightly since the Q2 survey. The score for ability to contribute to improvements has increased. Motivation and recommendation have reduced.

Trust Level Staff Engagement	Q2 21/22	Q4 21/22
Motivation	6.52	6.24
Improvements	6.31	6.73
Recommendation	6.51	6.22
Overall Staff Engagement	6.45	6.40

Most engaged directorates were Nuclear Medicine, Interventional Radiology and People & OD. Least engaged were Health Street Health Centre, Maternity & Perinatal Medicine, and Theatres.

The information including directorate breakdown and comments is being shared with clinical groups and corporate directorate leads. Teams are asked to discuss their results and talk within their teams about how to make improvements in their own areas, as well as identifying suggestions for improvement Trust-wide. Listening events are scheduled with all clinical groups during March. The surgical services group are providing more frequent listening opportunities for their staff.

The Trust has also received the annual staff survey results which has lower scores across most areas, in comparison to the previous year. Staff engagement scores in the annual survey are higher than the scores in this latest Pulse survey.

The Pulse survey and national staff survey results are a regular source of data that can indicate success of implementation of elements of the Trust's People Plan.

Risk Mitigations

The overall compliance for <u>risk review</u> is **84%**, up from **81% last month**. As clinical pressures have increased compliance in clinical groups has fallen overall but the non-clinical groups have continued to improve. Compliance within the clinical groups is still high overall with average compliance at **94%**.

<u>Risk action</u> compliance however, has begun to decline with rates falling from **67% in December** and **62% in February.**

This metric will remain a standing item on the Risk Management Committee agenda until the current performance issues with risk reviews and overdue actions is resolved. The aim is that this is achieved by the end of this Financial year. The corporate Governance team is supporting the poorer performing areas.