REPORT TITLE:	Board Level Metrics for People
SPONSORING EXECUTIVE:	Richard Beeken, Chief Executive
REPORT AUTHOR:	Frieza Mahmood, Chief People Officer
	Ruth Wilkin, Director of Communications
MEETING:	Public Trust Board	**DATE:**	8th March 2023

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

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 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[s] this paper supports]*				
OUR PATIENTS		**OUR PEOPLE**		**OUR POPULATION**	
To be good or outstanding in everything that we do		To cultivate and sustain happy, productive and engaged staff	X	To work seamlessly with our partners to improve lives	

3.	Previous consideration *[at which meeting[s] has this paper/matter been previously discussed?]*
n/a	

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

5.	Impact *[indicate with an 'X' which governance initiatives this matter relates to and, where shown, elaborate in the paper]*						
Board Assurance Framework Risk 01		*Deliver safe, high-quality care.*					
Board Assurance Framework Risk 02		*Make best strategic use of its resources*					
Board Assurance Framework Risk 03		*Deliver the MMUH benefits case*					
Board Assurance Framework Risk 04	X	*Recruit, retain, train, and develop an engaged and effective workforce*					
Board Assurance Framework Risk 05		*Deliver on its ambitions as an integrated care organisation*					
Corporate Risk Register [Safeguard Risk Nos]							
Equality Impact Assessment	Is this required?	Y		N	X	If 'Y' date completed	
Quality Impact Assessment	Is this required?	Y		N	X	If 'Y' date completed	

SANDWELL AND WEST BIRMINGHAM NHS TRUST

Report to the Public Trust Board: 8th March 2023

Board Level Metrics for People

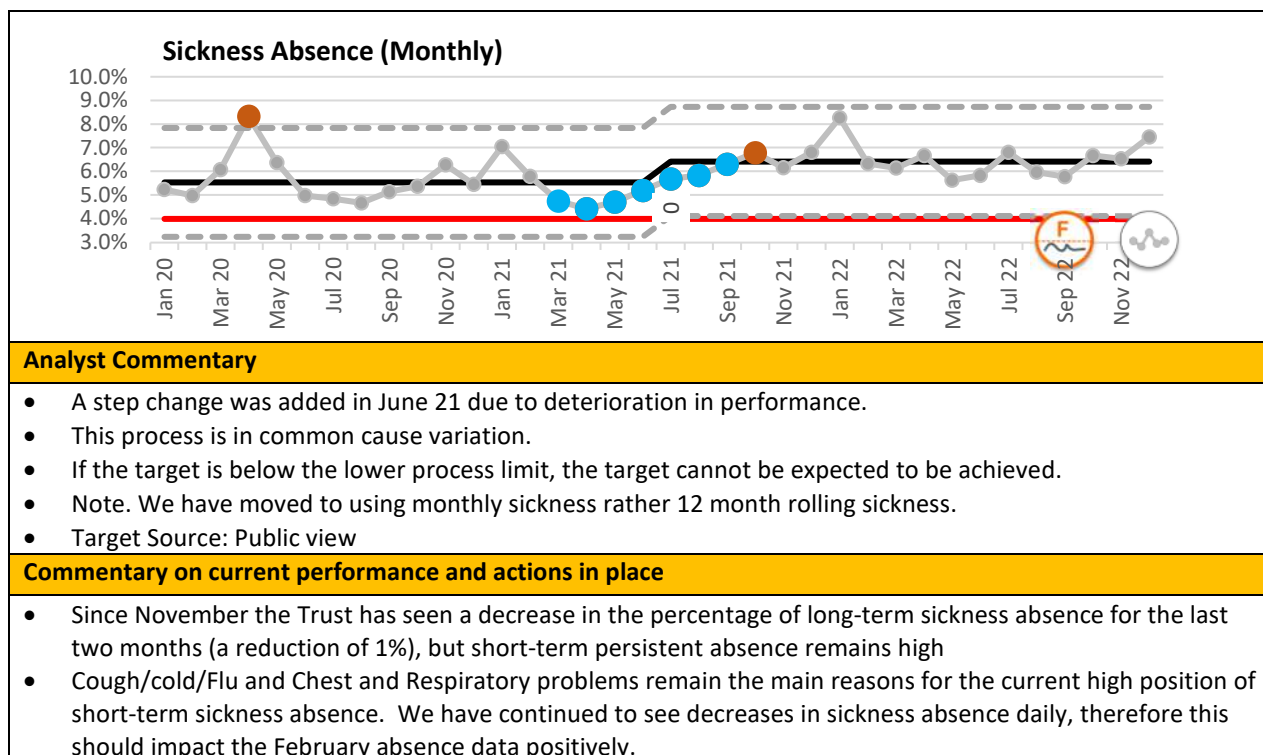## 1. People – PEOPLE AND ORGANISATION DEVELOPMENTAL COMMITTEE

*1.1 **Target Assurance Matrix***

<table>
<tr>
<td colspan="2" rowspan="2"></td>
<td colspan="3">Assurance</td>
<td rowspan="2"></td>
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<tr>
<td>Consistently Pass Target</td>
<td>Hit & Miss</td>
<td>Consistently Fail Target</td>
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<tr>
<td rowspan="3">Variation</td>
<td>Special Cause Improvement</td>
<td></td>
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<tr>
<td>Common Cause Variation</td>
<td></td>
<td>• Staff Survey.

• Turnover Monthly.</td>
<td>• Sickness Absence</td>
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<td>Special Cause Concern</td>
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1.2 Sickness Absence (monthly) – PEOPLE AND ORGANISATIONAL DEVELOPMENT COMMITTEE

Analyst Commentary

- A step change was added in June 21 due to deterioration in performance.
- This process is in common cause variation.
- If the target is below the lower process limit, the target cannot be expected to be achieved.
- Note. We have moved to using monthly sickness rather 12 month rolling sickness.
- Target Source: Public view

Commentary on current performance and actions in place

- Since November the Trust has seen a decrease in the percentage of long-term sickness absence for the last two months (a reduction of 1%), but short-term persistent absence remains high
- Cough/cold/Flu and Chest and Respiratory problems remain the main reasons for the current high position of short-term sickness absence. We have continued to see decreases in sickness absence daily, therefore this should impact the February absence data positively.

• Stress and Anxiety continues to impact long term sickness absence and remains high accounting for almost one third of all long-term sickness absence.
• Group Sickness Reduction are currently in place and actively being followed up with support from the HR team.

- As previously outlined, we are exploring the possibility of rolling out a recovery-based targeted Continuous Quality Improvement (CQI) approach to improving sickness absence. This process is based on the Quality Improvement Retention Pilot and will commence following the completion of the evaluation of the pilot. The aim is for this exercise to focus on 3 directorates currently impacted by high sickness absence levels and will involve a diagnostic assessment and deep dive into the key causes for sickness absence.
- The three departments include:
    - Emergency Department Nursing (both sites), Maternity (including delivery suite, community, and specialist midwives) and Ward Services (both sites).
    - The outcome of this exercise will inform the development of a targeted multidisciplinary plan for improving sickness within the service.
    - The independent review into our current psychological wellbeing offering for staff is underway with key stakeholder meetings already taken place. As outlined the objective of this review is to enhance our offering and ensure we have a comprehensive well integrated evidence-based psychological and therapies model for staff to access across the Trust. We aim to complete this review by Quarter 1 of 23/24.

1.3   Turnover (monthly) – PEOPLE AND ORGANISATIONAL DEVELOPMENT COMMITTEE
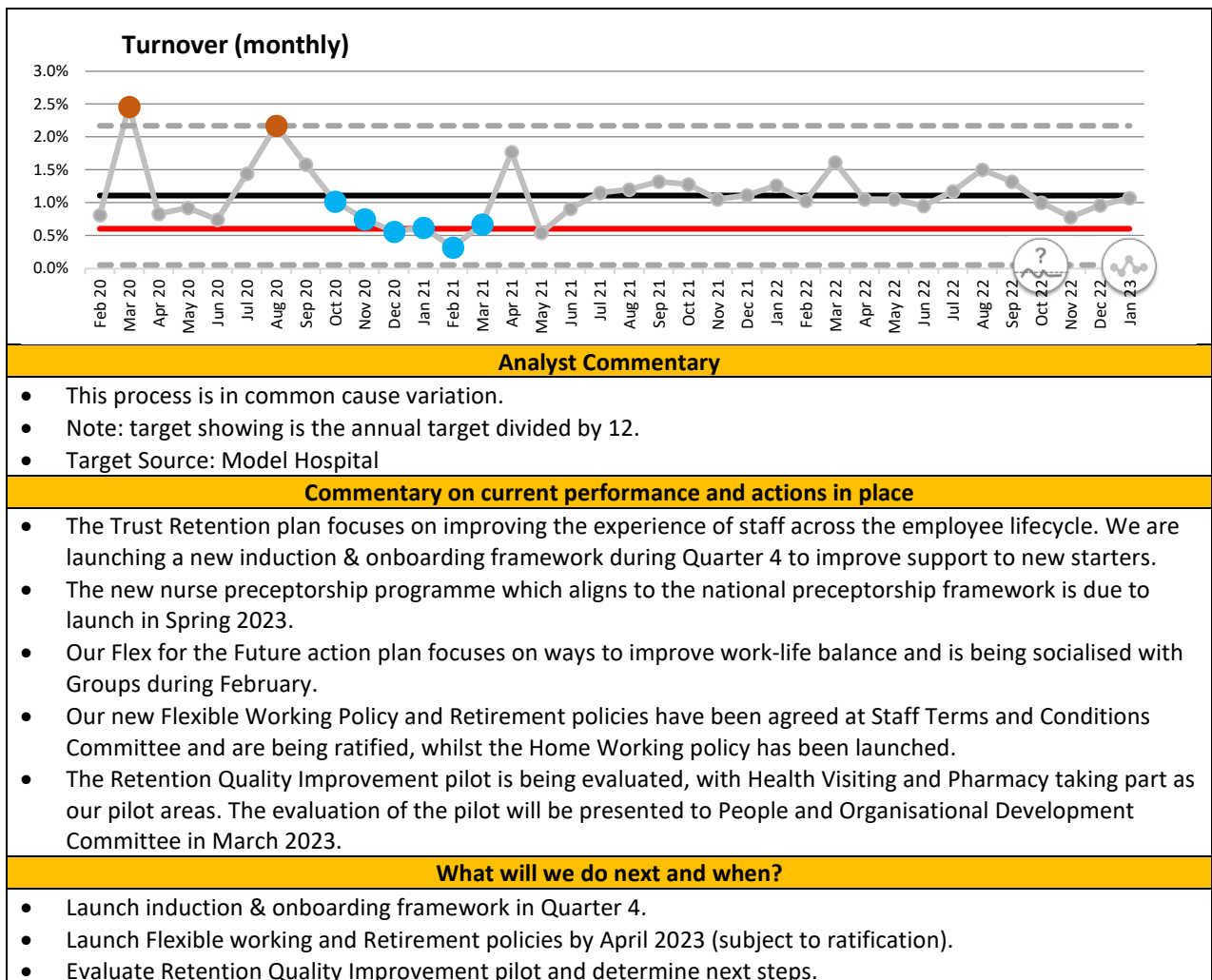
Analyst Commentary

- This process is in common cause variation.
- Note: target showing is the annual target divided by 12.
- Target Source: Model Hospital

Commentary on current performance and actions in place

- The Trust Retention plan focuses on improving the experience of staff across the employee lifecycle. We are launching a new induction & onboarding framework during Quarter 4 to improve support to new starters.
- The new nurse preceptorship programme which aligns to the national preceptorship framework is due to launch in Spring 2023.
- Our Flex for the Future action plan focuses on ways to improve work-life balance and is being socialised with Groups during February.
- Our new Flexible Working Policy and Retirement policies have been agreed at Staff Terms and Conditions Committee and are being ratified, whilst the Home Working policy has been launched.
- The Retention Quality Improvement pilot is being evaluated, with Health Visiting and Pharmacy taking part as our pilot areas. The evaluation of the pilot will be presented to People and Organisational Development Committee in March 2023.

What will we do next and when?

- Launch induction & onboarding framework in Quarter 4.
- Launch Flexible working and Retirement policies by April 2023 (subject to ratification).
- Evaluate Retention Quality Improvement pilot and determine next steps.

1.4   Staff Survey – PEOPLE AND ORGANISATIONAL DEVELOPMENT COMMITTEE

Staff Survey

Staff Survey
(this includes National and Pulse result)

Analyst Commentary

- 3 main areas requiring attention:
    - Look forward to going to work.
    - Can make Improvement in my area.
    - Recommend my organisation as a place to work. With a Target of 80%
- Nb. Baseline is first survey results.
- Target Source: Local (no Public View comparator)

Commentary on current performance and actions in place

- Launch of the people plan will help to track improvement against the three areas requiring attention in the staff and pulse surveys.

What will we do next and when?

- Review of initial staff survey 2022 report is currently underway to help identify areas for improvement and support.