

Report Title:	Board Level Metrics for People		
Sponsoring Executive:	Richard Beeken, Chief Executive		
Report Authors:	Frieza Mahmood, Chief People Officer Kam Dhani, Director of Governance		
Meeting:	Trust Board (Public)	Date	2 nd February 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 everything that we do	To cultivate and sustain happy, productive and engaged staff	To work seamlessly with our partners to improve lives
	X	

3. Previous consideration *[where has this paper been previously discussed?]*

n/a

4. Recommendation(s)

The 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]*

Trust Risk Register					
Board Assurance Framework					
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: 2nd February 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 <p>Sickness absence for the month of December 2021 remained above target with the average trend showing consistent increases in recent months due to Covid related sickness and also stress/anxiety related absence.</p> <p>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 Occupational Health. 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.</p> <p>There is strong ownership and accountability for the management of absence at group level reinforced through Operational Management Committee, led by the Chief Operating Officer. A daily rhythm of sickness reporting and management has been established to support covid surge efforts. The Groups have been supported to ensure trigger meetings continue to take place and that they are delivering against the revised trajectories agreed at People and Operational Development Committee (POD). Focused interventional work is being undertaken with directorates highlighted on the Heat Map as outliers in performance.</p>	
Turnover (Monthly) <p>Retention performance has improved along with accuracy of recording for turnover.</p> <p>A comprehensive retention plan and investigative tool has been developed supported by a multi-disciplinary approach to identify and target hot spot areas. Revised arrangements are in place to support improvements in recruitment & on-boarding process following an independent review of processes. A strong focus on Nurse retention has been established through engagement along with a detailed support plan for retaining colleagues in their later career. Our strategic approach to flexible working as a lever for retention has been overhauled with support from NHSEI as part of our engagement with the National Pioneer “Flex for Work programme”. There is more focused work to complete on the High Impact</p>	

actions for achieving Equality, Diversity and Inclusion aims that will also contribute positively to improving turnover particularly in relation to the talent management and employee relations processes.

Q2 21/22 People Pulse Staff Engagement Score

Early this year we carried out the first of the NHSEI Quarterly Pulse Check surveys linked to the delivery of the NHS People Promises. There were 1,549 responses in total (21.2%).

Overall Staff Engagement was measured as an average across three subscales including motivation (6.52), ability to contribute to improvements (6.31) and recommendation of the organisation (6.51) on a scale of 10. The lowest levels of engagement were seen in Maternity and Perinatal staff at 5.26 and Estates and Ancillary Staff at 5.84. The highest levels of engagement in the People and Organisation Development Directorate at 7.43 and the Healthcare Scientists staff group at 7.27 respectively.

The data has been shared with all group and corporate leads. Surgical Services held a listening event with colleagues in January. Other groups have scheduled these for end of Feb / early March.

The Pulse survey for Q4 is out for completion within the organisation. The results of this will enable comparison between the two surveys. There was no Pulse survey in Q3, as the national staff survey was distributed during that quarter. The Trust has received initial results from the national staff survey. Benchmarked results are expected this quarter in line with national publication. The report will be shared at the POD Committee in February 2022.

Risk Mitigations

Groups and Directorates continue to work to reduce their overdue risk actions. The overall compliance for risk reviews was **81%**, down from **84% last month**. The reduction in compliance was uniform across most groups and may be explained by increases in recent activity and interference due to the Christmas period.

Regarding rates of overdue risk actions, there has been similar reduction in compliance rates from **71% in November to 67% in December**. The biggest improvers within the month were in the non-clinical groups with strategy and governance improving from 33% to 58% compliance and Corporate Operation improving from 28% to 40%.

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.