NHS
Sandwell and West Birmingham
NHS Trust

Report Title:	Board Level Metrics for People		
Sponsoring Executive:	Richard Beeken, Chief Executive		
Report Authors:	Frieza Mahmood, Chief People Officer Kam Dhami, Director of Governance Ruth Wilkin, Director of Communications		
Meeting:	Trust Board (Public)	**Date**	4th May 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 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	**X**	To work seamlessly with our partners to improve lives	

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
b.	

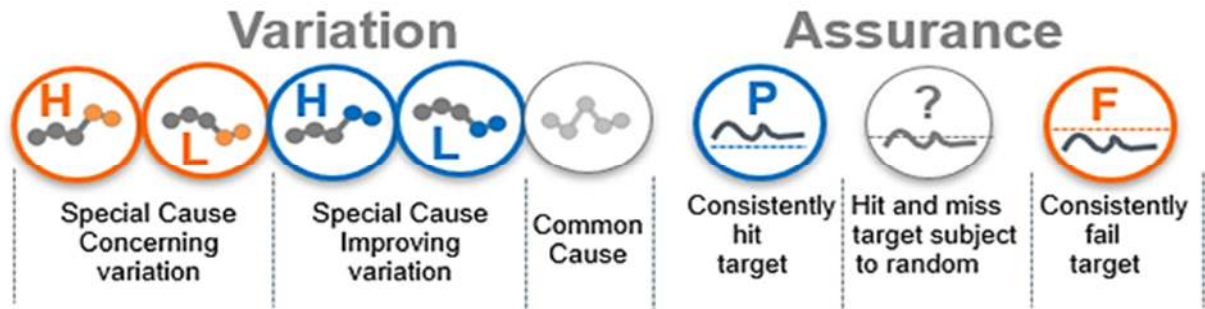| 5.	Impact *[indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]*							
Trust Risk Register								
Board Assurance Framework	X	New BAF risks for this strategic objective are under construction for presentation at April 2022 Trust Board						
Equality 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: 4th May

Board Level Metrics for People

| CQC Domain	Well-Led
Trust Strategic Objective	**Our People**
Executive Lead(s): Chief People Officer & Director of Governance	Statistical Process Control (SPC) Trend Charts
Days Lost to Sickness Absences There has been a further improvement in our sickness absence performance for March after a peak in January which was followed by a significant reduction in February. The current sickness figure in 6.1% which is slightly above the targeted reduction to 6% by year end. However we had seen a significant increase in covid related absence. Focused work continues with the groups to drive down reductions in key hotspots areas and institute group level improvement plans with the necessary oversight.	

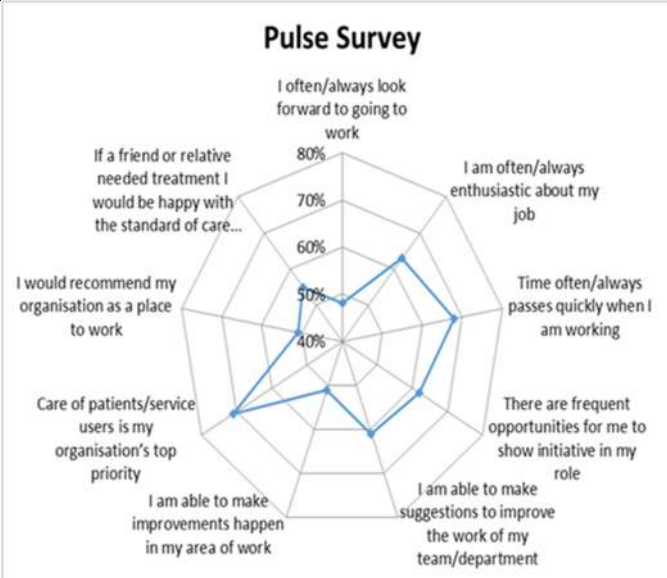|	
Turnover (Monthly) We have seen an increase in our rolling 12-month average turnover figure for the month of March which has increased from 13.78 to 14.45%. A focused NHSEI sponsored Retention plan is in plan supported by a Quality Improvement Methodology endorsed by People and Organisation Development Committee (PODC) the aim of which is targeting key areas on a pilot basis for rollout more widely in the Trust post evaluation. We continue to analyse reasons for leaving and engage in stay conversations with staff across the Trust	
Staff engagement – survey results The staff engagement score is measured through the national staff survey and quarterly Pulse surveys. The most recent Pulse survey was January 2022. Staff engagement in this survey is less positive than in the previous quarter which included staff engagement within the national staff survey. Group listening events are taking place to identify areas for improvement. The Trust's People Plan will be the key enabler to improve staff experience. The Pulse survey for Q1 of this year is currently underway.	
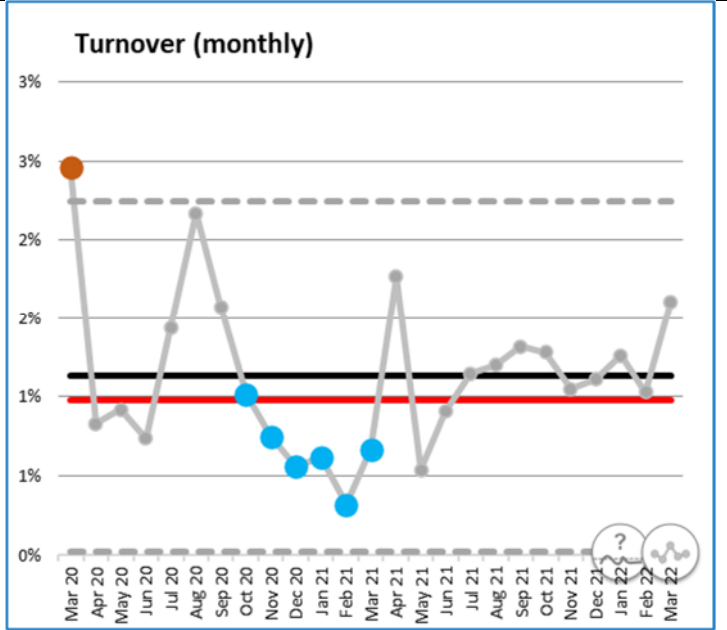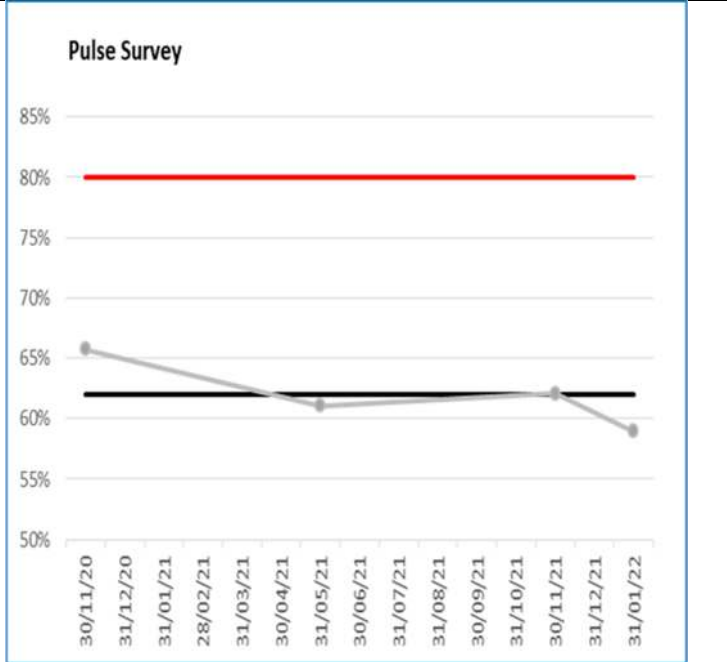
Pulse Survey (2) The combination of these questions makes up the overall staff engagement score. The poorest responses are for: recommending SWB as a place to work, looking forward to going to work and ability to make changes happen in own areas of work.	
Risk Mitigations Since monitoring began the total number of overdue mitigations has reduced, although there remains an upward cause of concern. Both the way the information is depicted and tolerances have been reviewed and from May 2022 overdue mitigations will be shown within a tolerance percentage (still being determined) but also with an acknowledgement that actions not reviewed within 4 weeks of the due date is within that tolerance. This will provide improved data on the impact of the work to address overdue risk mitigations.	