



REPORT TITLE:	People Metrics						
SPONSORING EXECUTIVE:	Frieza Mahmood, Chief People Officer						
REPORT AUTHOR:	Matthew Maguire (Associate Director of Performance and Strategic Insight)						
MEETING:	Public Trust Board				DATE:	13 th September 2023	
1.	Suggested discussion points <i>[two or three issues you consider the Trust Board should focus on in discussion]</i>						
<p>Each member of the Executive Team has personally provided their own exception reporting and commentary to the area for which they are the lead within the Population Strategic Objective.</p> <p>This adds a further strengthening to the ownership and accountability where improvements are required in the main IQPR Report.</p>							
2.	Alignment to our Vision <i>[indicate with an 'X' which Strategic Objective[s] this paper supports]</i>						
OUR PATIENTS		X	OUR PEOPLE		X	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	
3.	Previous consideration <i>[at which meeting[s] has this paper/matter been previously discussed?]</i>						
4.	Recommendation(s)						
The Trust Board has asked to:							
a.	RECEIVE and NOTE the report for assurance						
b.	DISCUSS the escalations						
5.	Impact <i>[indicate with an 'X' which governance initiatives this matter relates to and, where shown, elaborate in the paper]</i>						
Board Assurance Framework Risk 01		X	Deliver safe, high-quality care.				
Board Assurance Framework Risk 02		X	Make best strategic use of its resources				
Board Assurance Framework Risk 03		X	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		X	Deliver on its ambitions as an integrated care organisation				
Corporate Risk Register <small>[Safeguard Risk Nos]</small>							
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 on 13th September 2023

People Metrics

1. Background

- 1.1 'Board Level Metrics' are a rationalised set of priority metrics for the Board to focus on. The metrics are shown below, aligned against our three strategic objectives (Patients, People, Population) and our 2023/24 annual plan. Whilst this is a rationalised set of metrics to generate higher quality discussions and assurance, we also monitor our existing Integrated Quality and Performance Report (IQPR) which tracks over 200 metrics. Any performance exceptions from the IQPR are included in this report. This report shows data in Statistical Process Control (SPC) charts using the NHS 'Make Data Count' house style of reporting. Further detail on how to interpret SPC charts including the plain English descriptions of performance icons is shown in annex 1.

2023/24 Annual Plan on a Page









Our 14 Objectives for 2023/24

6 High Impact Objectives



2. Performance Overview: Annual Plan Objectives

		Assurance		
		Passing the Target / Plan 	Hit & Miss the Target 	Failing the Target / Plan 
Variation	Special Cause Improvement 	Good and getting better	Ok but getting better Friends & Family Test	Poor but getting better
	Common Cause Variation 	Predictably good	Ok Patient Safety Incidents – Moderate Harm or Above	Predictably poor 62 Day (urgent GP referral to treatment)

			Patient Safety Incidents Emergency Access Standard (EAS) Performance 2 Hour Urgent Community Response	Excluding Rare Cancers DM01 RTT-Incomplete Pathway Pts waiting >65 weeks Staff survey Urgent Community Response Contacts
Special Cause Concern 	Good but getting worse	Ok but getting worse	Poor and getting worse	
Not an SPC Chart	Good Elective Activity	Ok Bed closure plan Train leaders	Poor Income & Expenditure Bank & Agency Spend	
Annual plan objectives delivery to date	6.6%	46.6%	46.6%	

2.1.1 **Annual plan metrics where the target is outside the control limits.** This indicates that the target is unlikely to be reached without a significant change to existing process. These targets are:

2.1.2 DM01 Diagnostics 6 weeks target

2.1.3 RTT – Incomplete Pathway (18-Weeks) Patients Waiting > 65 Weeks.

2.1.4 62 Day (urgent GP referral to treatment) Excl Rare Cancers.

2.2 The Executive have agreed that the volume of **patient safety incidents and patient safety incidents with moderate harm and above** will not carry a target. This will affect the visualisation of pass, fail or hit and miss target assurance icons.

2.3 We have discussed **targets for committee metrics that do not have them set**, with the executive leads for Finance, Investment and Performance Committee, Quality and Safety Committee and the Integration Committee, we still have the executive lead for People and Organisational Development Committee to discuss targets with this will be completed by the middle of September 2023.

Committee escalations

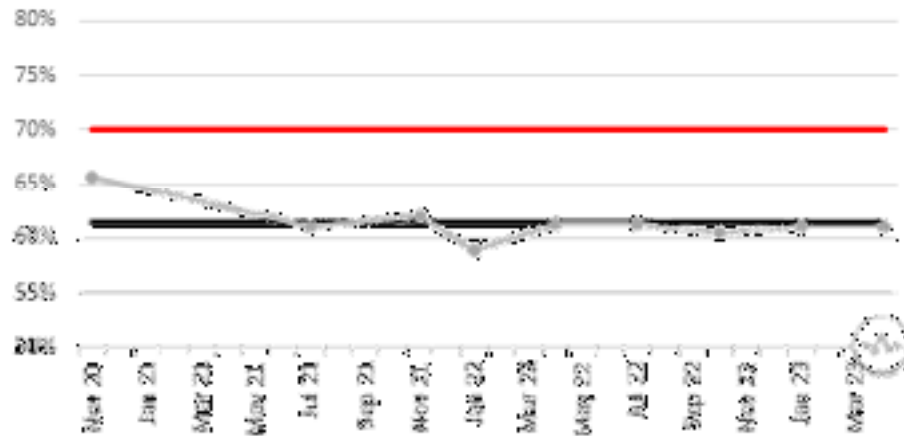
2.4 People and Organisational Development Group

2.4.1 No escalations identified; discussion should focus on the relevant annual plan objectives.

People

To improve staff experience from 60% to 70% (combined engagement score)

Staff Survey



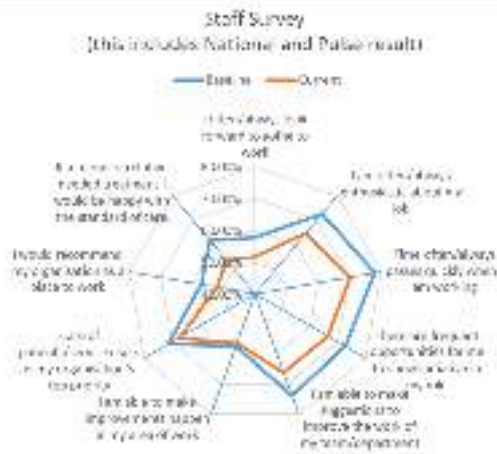
Analyst Commentary:

This is in common cause variation. We are 94th out of 120 on Public View [Quarter 3 22/23]. The median target from Public View is 66.91%
Target Source: Local

Executive Commentary:

Clinical groups and corporate groups have been encouraged to share and discuss staff survey reports with their managers and encourage them to discuss the feedback with their teams. Teams are asked to review and adjust their action plans accordingly and share these with the triumvirate leads.

The People Plan is now launched and will tackle the issues raised regarding overall staff experience. This will include a series of initiatives looking at equality diversity and inclusion, staff wellbeing, personal development, and leadership development.



Action	By who	By when
ARC Leadership Programme - Senior leaders training commences	Chief People Officer	September 2023
Launch People Plan campaign	Chief People Officer	Sept 2023
Launch Compassionate Caregiver training	Chief People Officer	June 2023 - Commenced

People

To develop 200 leaders in compassionate and inclusive leadership, restorative people management, and in safety and service innovation - **Top 6 objective**

Cumulative Trajectory For Senior Leaders



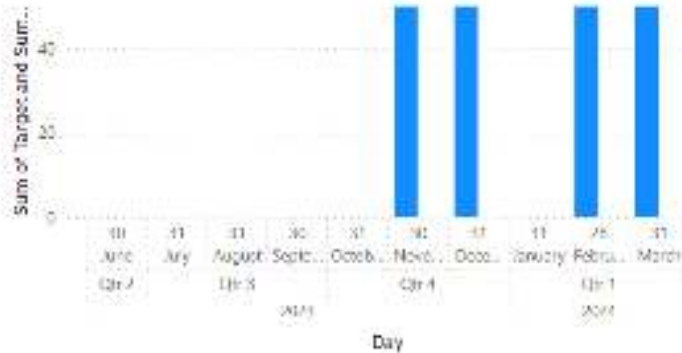
Analyst Commentary:

The charts show the planned training figures for senior leaders by their planned course completion dates. People trained will show on the bar chart as a run rate against the bar chart. Senior leader charts will be broken down into Senior-level Leaders (100 leaders) and Middle-Level Leaders (100 leaders).

Executive Commentary:

All 8 leadership cohorts have now been finalised with dates confirmed for cohorts 1-4 and the cohorts 5-8 will have dates confirmed this month. Compassionate Caregiver Training for Team Members commenced in June 2023. 110 staff have now been trained with further 103 staff currently booked to attend training.

Senior Leaders Trained Each Month Against Plan



Action	By who	By when
Launch leadership training programme for the top 200 leaders	Chief People Officer	May 2023 – completed
Senior leaders training commences	Chief People Officer	September 2023

KPI	Latest month	Measure	Target	Variation	Assurance	Mean	Lower process limit	Upper process limit
Turnover %	Jul 23	12.8%				13.1%	12.2%	14.0%
Sickness R12m %	Jul 23	5.9%				5.7%	5.5%	6.0%
Vacancies %	Jul 23	14.1%				9.5%	7.9%	11.0%
Mandatory Training %	Jul 23	78.7%				74.7%	65.2%	84.2%
Time To Hire (Days)	Jul 23	86				83	55	111
ER Open Casework - Count	Jul 23	29				35	22	49
ER Casework - Avg Days over Target Date	Jul 23	131				124	74	173
Engie - SLA % of Calls Rectified	Dec 22	79.0%				81.5%	73.6%	89.4%
Employee Relations: BAME as % of total	Jul 23	36.7%				36.0%	25.1%	47.0%
Employee Relations: Disability as % of total	Jul 23	7.0%				5.9%	3.0%	8.7%

KPI	Latest month	Measure	Target	Variation	Assurance	Mean	Lower process limit	Upper process limit
Female - AFC	Jul 23	63.0%				61.4%	60.9%	61.8%
Female - Consultants	Jul 23	6.0%				6.6%	6.5%	6.8%
Female - Directors & Chief Executive	Jul 23	39.8%				39.0%	37.1%	40.9%
BAME - AFC	Jul 23	24.4%				21.6%	21.0%	22.2%
BAME - Consultants	Jul 23	12.7%				13.7%	13.4%	14.0%
BAME - Directors & Chief Executive	Jul 23	13.3%				12.3%	11.7%	13.0%
Disability - AFC	Jul 23	3.7%				2.7%	2.4%	2.9%
Disability - Consultants	Jul 23	0.3%				0.2%	0.2%	0.2%
Disability - Directors & Chief Executive	Jul 23	0.0%				0.0%	0.0%	0.0%
LGBT - AFC	Jul 23	2.7%				2.2%	2.1%	2.3%
LGBT - Consultants	Jul 23	0.2%				0.1%	0.1%	0.1%
LGBT - Directors & Chief Executive	Jul 23	0.0%				0.0%	0.0%	0.0%
Senior Leaders: Female	Jul 23	69	75			68	68	69
Senior Leaders: BAME	Jul 23	37	40			35	35	36
Senior Leaders: Disability	Jul 23	4	3			3	3	3
Senior Leaders: LGBT	Jul 23	3	2			2	2	2

3. Recommendations

3.1 The Trust Board is asked to:

- a. **DISCUSS** performance against annual plan objectives
- b. **DISCUSS** the escalations

Name: Matthew Maguire, Associate Director – Strategic Performance & Insight
September 2023