

Title:	Bi-Annual People Strategy Update	
Report to:	Trust Board	
Meeting:	22 November 2023	Agenda item: 13
Purpose of the report:	For Noting <input checked="" type="checkbox"/>	For Decision <input type="checkbox"/>

Executive Summary

This report provides the Trust Board with an update, overview, understanding, and assurance of the actions and plans to recruit, retain, develop, and support our people. It builds upon the last report presented in May 2023. It provides the Board with assurance on our people activities that underpin the delivery of our People Strategy.

Our refreshed People Strategy 2023-2026 supports our approach to transformation, continuous improvement, and quality ambitions by ensuring that our people experiences are the best they can be. This is central to us being able to achieve our overall trust strategy and service plans. The strategy is delivered through five programs of work that are intrinsically linked to the NHS People Plan ambitions. The report is written under these five programs, which are:

- A highly engaged workforce
- Equality and inclusion for all
- Retaining our people
- Maximising our recruitment and supply opportunities
- Continuous improvement in supporting people's health and well-being.

The Trust Board monitors the implementation of the strategy via bi-annual progress updates. The following groups and committees oversee the delivery of key work areas to ensure the strategy is being delivered:

- People Participation & Equalities Committee.
- Quality and Improvement Safety Committee.
- Workforce Diversity and Inclusion Sub-Group.
- Live Life Well Steering Group.
- Staff Opinion Survey Task and Finish Group.
- Executive Team.
- Health and Safety Committee.
- ESR Programme Board.
- Joint Consultative and Negotiating Partnership (JCNP).

Recommendation

The Board is asked to note and discuss the information and actions in this report.

Report author:	Angela Hartley	Deputy Director of Workforce
Executive sponsor:	Anita Pisani Kate Howard	Deputy CEO and Director of Workforce Chief Nurse

Assurance level:	Substantial <input checked="" type="checkbox"/>	Reasonable <input type="checkbox"/>	Partial <input type="checkbox"/>	No assurance <input type="checkbox"/>
Rationale for Assurance rating	Assurance contained within this report that the People Strategy is being implemented as planned includes: <ul style="list-style-type: none"> • Staff Survey results, where the Trust is a top performer in the East of England and across the NHS • Appraisal feedback • WDES (Workforce Disability Equality Standards) and WRES (Workforce Race Equality Standards) Action Plans 			
Assurance action	No action required			

How the report supports achievement of the Trust Strategic Objectives:

Provide outstanding care	The report demonstrates that the Trust and its leaders undertake monitoring of staffing levels to maintain safety
Be Collaborative	Demonstrates close working with Health Education East of England; other NHS and Care organisations and Higher Education institutions, where appropriate
Be an excellent employer	The report identifies improvements in line with the People Strategy.
Be Sustainable	The report identifies how the Trust seeks to ensure sustainable workforce supply to meet our future. staffing needs

Equality and Diversity Objectives
An update on progress is included in this report.

Links to Board Assurance Framework risks / Trust risk register

- Staff Morale and workforce challenges
- Compliance with Care Quality Commission standards

Legal and Regulatory requirements

- CQC outcomes
- NHS Constitution – Staff rights and pledges

Previous Papers (last meeting only)

Title:	Bi-annual people strategy update
Date:	17th May 2023

1.0 Introduction

1.1 This report is aimed at making it easy for the Board to see how actions relate to the delivery of our People Strategy and it assures the actions and activities in place. An annual implementation plan underpins the delivery of our strategy.

1.2 As detailed in the People Strategy, successful delivery of the five programmes will ensure that:

- We will continue to attract, recruit, and retain appropriately skilled, qualified, and experienced people.
- Our people will live our values, demonstrate our agreed behaviours, and support the delivery of safe, compassionate, and outstanding care.
- We will be a great place to work, with excellent outcomes and feedback and our staff engagement levels will be high.
- We will continue to be a learning organisation with an embedded culture of continuous improvement, with our patients at the heart of our service delivery.
- We will collaborate with other organisations across all the systems we work within, providing efficient and effective services for our local communities and commissioners.
- We will develop well-designed volunteering initiatives/opportunities across our different services as the NHS Long Term Plan recommends.
- We will continue to demonstrate diversity and inclusivity for all, both as an employer and as a provider of services.
- We will develop our future change leaders by providing greater opportunities for them to develop a skill set and knowledge base in continuous improvement tools and techniques including the human aspects of change.
- We will create a culture which, through our people is ambitious, innovative, and dynamic and which challenges the 'norm', drives improvements for greater quality care leading to high-performing and financially sustainable services for our local communities.

1.3 The People Strategy supports our objectives to **be an excellent employer**. Our ambitions for our people are that by 2026:

- Service users are our people who report they feel valued, our services are inclusive and easy to access—joint ambition with **providing outstanding care**.
- Our people feel valued, and they can reach their full potential.
- Our people embrace diversity and promote an inclusive culture that challenges all forms of discrimination.
- In meeting the needs of our services, our people can balance their work and personal commitments and are trusted to work flexibly.

Our People Ambitions	Our workstream Programmes support us in achieving our ambitions				
Service users and our people report they feel valued, our services are inclusive and easy to access.	A Highly Engaged Workforce		Retaining our People		Continuous improvement in supporting people's health and wellbeing.
Our people embrace diversity and promote an inclusive culture that challenges all forms of discrimination.		Equality and inclusion for all			Continuous improvement in supporting people's health and wellbeing.
In meeting the needs of our services, our people can balance their work and personal commitments and are trusted to work flexibly.	A highly engaged workforce		Retaining our People & maximising our recruitment and supply opportunities		Continuous improvement in supporting people's health and wellbeing.
Our People feel valued and can realise their full potential	A highly engaged workforce	Equality and inclusion for all			

Delivering the priorities of our People Strategy

2.0 Programme 1: A Highly Engaged Workforce (NHS People Promise Domain – we have a voice that counts)

2.1 Staff Engagement

2.1.1 The retention of our workforce, (our 'stay' strategy), is a key part of the role of our peoplemanagers and our workforce planning activities. 56% (unchanged since last reported in May 2023) of our staff will still be below their earliest retirement age in 10 years and therefore retaining them is as important as attracting new staff. Much of the People Strategy focuses on:

- encouraging people to stay.
- listening to and acting on their feedback.
- treating them with dignity and respect.
- supporting their development, career aspirations and current career choices.
- addressing issues when things go wrong at work in a kind, compassionate and fairway.

2.1.2 We recognise that most of our people perform well and are happy in their current roles, so we support them as much as we support those who have the desire to progress.

2.2 Our Last Staff Opinion Survey 2022

2.2.1 Research evidence shows that a highly engaged workforce will achieve

better patient satisfaction and outcomes; therefore, we continue to pay particular attention to how engaged and valued our people feel. The best way of getting this feedback is through the annual NHS Staff Opinion Survey (SOS) and our quarterly staff Pulse Surveys.

2.2.2 The detailed results of the 2022 survey were reported to the Board in March 2023 and an update on the action plan was reported in May 2023. In summary, we achieved a 47% response rate, and our results show that we were the **best** (or joint best) performing NHS trust in the East of England for all themes (see below):

- We are compassionate and inclusive (best)
- We each have a voice that counts (joint best)
- We are safe and healthy (best)
- We are always learning (joint best)
- We work flexibly (best)
- We are recognised and rewarded (best)
- We are a team (best)
- Staff engagement (joint best)
- Morale (joint best)

2.2.3 Our results also show that we were the joint top scoring Trust across the NHS nationally for:

- We are compassionate and inclusive.
- We are always learning.
- We work flexibly.
- We are a team.

2.2.4 The trust-wide improvement plan is now completed, and a suite of actions is in place to focus on actions concerning violence and aggression towards members of our staff.

2.2.5 The 2022 survey demonstrated a 23% disparity in the experience of culturally diverse colleagues as opposed to white colleagues when it came to opportunities for career progression or promotion. In response to this, we are rolling out an offer to all individuals from a culturally diverse background, to have an additional career conversation with a member of the workforce team. This offer has started in Bedfordshire and Luton and will be rolled out to the rest of our services in the coming months.

2.3 **Use of Exit (Learning from leavers) and New Starters Feedback Data**

2.3.1 Retention of our people is crucial, therefore whilst also addressing the challenge of our future workforce supply, we focus not only on recruitment but also ensure new and existing staff are supported and encouraged to stay.

2.3.2 It is important to improve our retention rates, especially in the current environment when attracting and retaining staff in the NHS is critical. We have a relentless focus on continuing to be an attractive employer, offering more opportunities for flexible working, and embedding collective, compassionate, and inclusive leadership in all that we do.

2.3.3 In the latest reporting period (1 April to 21 October 2023) we had 358 leavers. 117 surveys (33%) were sent to these individuals 32 (27%) returned their surveys and 9 staff were interviewed via the independent listening process.

2.3.4 Increasing the number of surveys is a focus for the team and further work will be undertaken with leaders at our December 2023 Leadership Forum. In addition, we will share learning and themes from feedback received to date.

2.3.5 The feedback continues to be broadly in line with the annual staff survey, however, understanding the triggers that cause someone to leave helps us to identify and act on things which we can improve on.

2.3.6 The 3 top reasons for leaving the surveys in the last 6 months are:

- Decision making
- Appreciation and value
- Health and wellbeing
- Management style.

2.3.7 To address these, we will:

- Review how we communicate and advertise the support available, including how to raise concerns and the role of the Freedom to Speak Up guardian and champions, the range of health and wellbeing support available and the role of health and wellbeing champions.
- Continue to promote the importance of civility and respect between individuals, and act when these standards are not met.
- Continue to show our appreciation of staff and how we value their commitment and build on the success of the admin appreciation day with a plan to promote a Health Care Support Workers Day in November 2023.
- Review how we support managers to know how to involve staff when making decisions.

2.4 Appraisals

2.4.1 The Appraisal Policy is regularly reviewed and updated. The policy outlines the key responsibilities of both the employee and the manager and is supported by training for those involved. It was most recently updated in April 2023, to include an opportunity for staff to agree with their manager, and protected time to be a member of our staff networks.

2.5 Management Supervision

2.5.1 In addition to an annual appraisal, all staff should have regular 1:1s with health and wellbeing being an area for discussion. There are also links to intranet pages to help members of staff who may benefit from targeted support.

2.6 Evaluating the Quality of Appraisals

2.6.1 Since the last report, we have continued to evaluate the experience of

appraisals for our people.

2.6.2 Based on responses from 274 people, the feedback is largely positive, and the team continues to review and act on feedback to ensure that the appraisal conversation is supportive and effective.

2.6.3 Key data for this period is as follows:

- 94.5% found their appraisal to be a positive experience.
- 96.4% said it was a chance to express themselves openly.
- 82.1% said their appraisal made a positive difference to them in undertaking their role.

2.7 Partnership Working

2.7.1 Partnership working with local, regional, and national trade union colleagues continues to be positive and we support protected time for the Staff Side Chair to undertake their duties on a full-time basis.

2.7.2 Our Staff Side Chair is a member of our financial support grants panel and a key member of all our workforce-related working groups, including Workforce Diversity and Inclusion, Live Life Well and the Staff Survey Task and Finish Group.

2.7.3 The Deputy Director of Workforce and Staff Side chair attended the regional staff forum conference on 13 November and will share and implement any best practices across the Trust.

Industrial Action

2.7.4 Over the past few months, several unions have taken strike action about the national NHS pay awards for 22/23 and 23/24. These cover both staff employed on the agenda for change pay and conditions and those employed on medical and dental pay and conditions.

2.7.5 We continue to balance our support for staff to take part in legal industrial action alongside planning for the provision of services in the event of staff taking part in any such action. We continue to manage our response in partnership with our local and regional staff side colleagues.

Professional Nurse Advocates (PNA's)

2.7.6 The trust recognises that many of our staff work in complex and stressful patient/ clinical situations and trained local nurse advocates, are in place across the trust to support colleagues and are trained to support colleagues with restorative clinical supervision in a safe, confidential setting.

2.7.7 PNAs offer restorative clinical supervision. They:

- Listen without judgment.
- Create a confidential safe space.
- Support through restorative conversations

and:

- Support staff to learn from their experience, reflect on their emotions and prioritise their wellbeing.

3.0 Programme 2 - *Equality and Inclusion for All*

(NHS People Promise Domain – We are compassionate and inclusive; we are recognised and rewarded)

3.1 Actions for this workstream are as follows:

- Enable our people and services to meet the needs and expectations of our increasingly diverse population and work towards our workforce being representative of their local population.
- Deliver our Public Sector Duty. For our people we will continue to implement our Workforce Race Equality Standards; Workforce Disability Equality Standards and Gender Pay gap action plans.
- Deliver our commitment in this area by supporting the delivery of our annual Equality Delivery Standards (EDS) Objectives and our Equality Improvement Plan.
- Deliver against our Disability and Diversity stretch targets. Deliver the UNISON anti-racism charter and trust-wide pledge.
- Work with experts in this field to embed the diversity and inclusion agenda from both a service delivery perspective and as an employer.
- Implement No More Tick Boxes recommendations to remove any discrimination from our recruitment and onboarding systems and processes.
- Further expand our Diversity Mentoring programme including diversity mentoring across all 9 protected characteristics, using people's stories, and lived experiences.
- As part of the Armed Forces Covenant our ambition was to move from Bronze to Silver accreditation from the Employers Recognition Scheme (ERS) and Veteran Aware in 2023 – we achieved this. Our longer-term plan is to gain gold ERS recognition by the end of 2024.
- Focus on our workforce team by taking positive action to achieve a workforce reflective of our local communities. We will implement the #hrinclusive methodology.

3.2 In addition to these actions, the Trust has in place its Workforce Race Equality Standards (WRES), Workforce Disability Equality Standards (WDES) and Gender Pay gap reports and action plans. These are all presented and discussed through our People Participation & Equalities Committee.

Workforce Diversity Reports and Objectives

3.3 The Workforce Disability Equality Standards (WDES) 2023/24:

We have published our WDES data and action plan.

Our 2023/2024 WDES action plan is outlined below.

Priority 1 Inclusive Leadership and Management:

Objective	Current Position	Action
We will roll out two-line manager's programmes (one for new and one for existing managers) with a focus on managing people well, including supporting those with health conditions.	<p>We offer a new manager induction session, which is not mandatory.</p> <p>We offer a programme of people management skills and leadership development opportunities, open to all, and non-mandated.</p> <p>This relies on the self, or line manager, identification of a development need which works well for many, whilst also missing some people who would benefit from new skills development or having a refresher.</p>	<p>New Managers Induction</p> <p>We will review the content of our new manager's induction session and make this mandatory for all those appointed either externally or internally into a line manager position. Booking will be part of onboarding into the new role. Feedback will be reviewed on the impact of this induction, and it will be continually reviewed. Following induction, new managers will access relevant skills development training within 6 months and be supported to have a coach and or mentor, including a diversity mentor within 12 months of starting in their role.</p> <p>Existing Managers and Leaders Workshop</p> <p>All existing managers and leaders will take part in a one-day workshop focused on managing people with compassion and inclusivity.</p>
We will continue to act (including those above) to meet our Diversity Stretch Targets	In 2022, the trust agreed on a set of stretch targets, some relating to supporting our disabled staff.	We will remind staff at induction and ongoing that they can update their disability status in their electronic staff record and explain why this is important.

		<p>We will promote the following.</p> <ul style="list-style-type: none"> • My CCS passport (adjustments) • Disability Leave Guidance • Supporting Disabled staff policy • People Management Bite size training • Access to modified kit to support disabled staff.
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Priority 2 Inclusive Talent and Career Development

Objective	Current Position	Action
<p>We will learn from the additional career conversations we are holding during 2023/24 with our culturally diverse colleagues and implement this learning to support career development opportunities for our disabled workforce.</p>	<p>During 2023 we are rolling out the offer to all culturally diverse staff, an additional career conversation to seek to address the issues behind the disparity reported in our 2022 staff survey on the experience of staff in the equity in career development and progression.</p>	<p>Ongoing throughout this rollout, we will review the themes and use these to put in place actions to address issues.</p> <p>We will review if the same “barriers” exist for disabled staff and put in place actions which support equitable support for the development and career progression.</p> <p>We will continue to offer development opportunities via the arrangement of accessible methods including the use of Teams, and the provision of transport/kit as required.</p>

Priority 3 Zero Tolerance and the Protection of Staff from harassment and Abuse from patients, the public and colleagues

Objective	Current Position	Action
<p>We will strengthen our response to any act of violence or aggression/ bullying and harassment from service users against our staff. To focus on:</p> <ul style="list-style-type: none"> ○ Reducing Incidents that occur. ○ Encouraging colleagues to report 	<p>Overseen by the Health, Safety and Security function, a programme of work is in place to fully implement the actions identified in our review of the Violence and Aggression NHS standards about incidents involving patients and the public.</p>	<p>Implementation of action plan</p>

<p>incidents if they do occur.</p> <ul style="list-style-type: none"> ○ Build on support available to staff if this does occur. 	<p>We have a robust people management process to encourage and support staff experiencing inappropriate behaviour from colleagues, alongside a range of staff champions who support staff who may not feel able to access the formal process without support.</p>	
<p>We will act to reduce acts of discrimination by service users and colleagues, with a focus on disabled (and LGBTQI+) people and take steps to inform, educate and upskill all managers and staff in actively challenging prejudice, being a true ally and taking steps to ensure our workforce do not face discrimination.</p>	<p>In relation to violence and aggression from the public We will continue to implement our action plan.</p>	<p>See above for actions about violence and aggression from the public.</p>

3.4 Workforce Race Equality Standards (WRES)

- 3.4.1 We published our WRES data in May 2023 and action plan to address areas for action in October 2023.
- 3.4.2 Despite positive steps undertaken over recent years, the experience of our culturally diverse colleagues remains less positive than that of their white colleagues.
- 3.4.3 Particularly disappointing is the ongoing, and slightly increased from last year, proportion of culturally diverse applicants not being appointed after the interview, compared to their white colleagues. The rate in the 2023 WRES data shows white applicants are 1.86 times more likely to be appointed. The work ongoing to implement the no more tick boxes actions to eliminate any bias in recruitment aims to address this. In particular the renewed focus on, and changes to, our requirement that all selection panels must be diverse.
- 3.4.4 Our full 2023/24 WRES action plan is outlined below.

Objective	Current Position	Action
<p>We will begin the rollout of the Cultural Intelligence Training programme in conjunction with our Cambridgeshire and Peterborough ICS partners.</p>	<p>We are working in partnership with our Cambridgeshire and Peterborough ICS partner organisations to commission and roll this programme out starting with members of the Board.</p>	<p>We will roll out in 3 cohorts starting with some Board members in January 2024</p>

<p>We will change how we refer to staff from culturally diverse backgrounds and use the term culturally diverse and no longer use the term BAME (as requested by our cultural diversity network) NB BAME continues to be used nationally within the WRES reports.</p>	<p>Our staff network has adopted a new name (Cultural Diversity Network) and our People Participation Committee has begun to use the new terminology.</p>	<p>New terminology will be used in all internal reports and communications.</p> <p>Reference to BAME will only be used if reflecting a national ask which uses the terminology, and it cannot be avoided e.g.in Staff Opinion survey and WRES reporting template.</p>
<p>We will align our internal actions to the 6 high impact Diversity and Inclusion actions published nationally.</p>	<p>Work has begun to align each high-impact action.</p>	<p>To embed existing equality, diversity and inclusion activity in relevant high-impact actions To identify any further actions, assign and implement them. To maintain our high-impact changes action plan to record this whilst minimising any duplication with other EDI-related actions.</p>
<p>We will implement the workforce actions of our 2023/24 Anti-Racism Plan</p>	<p>Implement the ‘No More Tick Boxes’ action plan to remove any discrimination from recruitment processes including embedding Black or Asian representation on all interview panels</p>	<p>Culturally Diverse interview panels in place from April 2023 and ongoing review to further embed and to ensure all appointing managers understand why this is introduced.</p> <p>Relaunch this with supporting information as part of Black History Month 2023</p> <p>Facilitate an “all things Diversity and Inclusion” session at our leadership forum during 2023/2024.</p>
<p>To reduce the Under-representation of culturally diverse staff in pay bands 6, 7 and 8a, as a percentage of overall staff in those pay bands, to reflect the proportion who are in the current workforce. This is a target of 13.2% of staff in these bands to be from culturally diverse</p>	<p>Review, update and re-share our cultural awareness information for staff working with diverse populations. Continue to promote and support “See Me First Champions”. Actively participate in the planned D&I work of our ICS</p>	<p>Deliver our actions detailed in our stretch diversity action plan.</p>

backgrounds by March 2025.

Position as of end July 2023
culturally diverse staff %

- Band 6 10.8%
- Band 7 11.5%
- Band 8a 8.2%

Actively support our current Staff networks to thrive; particularly our Cultural Diversity Network, which is pertinent to this plan, and to develop new staff networks as required.

partners for 2022/23 and with our Cultural Diversity Network to identify and share development opportunities.

Provide training & development opportunities on the Training & Education intranet pages, including a culturally diverse staff-specific list of opportunities.

Continue to work with the Cultural Diversity staff network to learn from their experiences.

- Promote positive staff stories to highlight the benefits of recruiting, developing, and retaining a diverse workforce.
- Promote, attract, and retain allies to support the Cultural and Diversity Network.
- Develop allyship skills e.g., in Chrysalis Leadership Programme and promote being or having a Diversity mentor.

Modernising Recruitment:

- Implementing our No More Tick Boxes action plan.
- In-depth review of recruitment data to improve and de-bias recruitment and promotion practices.

Identifying and Developing Talent:

	<ul style="list-style-type: none"> • All Culturally Diverse staff to be offered an additional career coaching session by April 2024 • Commission and promotion of Stepping Up programme to all Black, Asian and minority ethnic staff. • Commission and promote Springboard to all culturally diverse staff in bands 1-4. • Wider review of Trust-wide Talent Management. <p>4 staff networks are established. The Culturally diverse network chair has co-produced actions planned to re-launch and embed culturally diverse interview panels.</p> <p>The Disability and Long-Term Conditions network will work in partnership with the HR team to develop a stand-alone Disability Leave guidance document.</p>	
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Priority 2 Talent and Career Development

Objective	Current Position	Action
We will take positive action to ensure that all staff believe they have an equal opportunity for career progression or promotion, including continuing to embed a fair, non-biased recruitment, including promotion, and culture.	During 2023 we are rolling out the offer to all culturally diverse staff, an additional career conversation to seek to address the issues behind the disparity reported in our 2022 staff survey on the experience of staff in the equity in career	<p>Roll out this offer, learning and adapting as required.</p> <p>Gather and theme feedback and action learning.</p> <p>Support staff to access development opportunities</p>

	development and progression.	
We will complete the implementation of our actions to eliminate bias in our recruitment and onboarding processes. (No More Tick Boxes)	See above	

In addition, we will continue with actions initiated in 2022/23 to strengthen our response to any act of violence or aggression/ bullying and harassment from service users against our staff. To focus on:

- Reducing Incidents that occur.
- Encouraging colleagues to report incidents if they do occur.
- Build on support available to staff if this does occur.

3.5 Gender Pay Gap Report

Our 2023 Gender Pay Gap report was published in March 2023 and a report published in May 2023. The actions that we will continue to focus on are:

- ensure senior roles are advertised with flexible working options.
- offer the women's development programme 'Springboard' to staff.
- regularly review shortlisting data and identify any areas of concern.
- use diverse selection panels through policy practice and training.
- promote and facilitate mentoring and coaching.
- work with young people to encourage more young men to enter NHS careers.
- provide support for female medics in applying for Clinical Excellence Awards.

3.6 If your face first/See me first review of Recruitment Practice

3.6.1 As updated in May 2023, in response to the national review we have agreed on the actions we will undertake to seek to eliminate any bias in our recruitment and onboarding processes. These are embedded in the Trust's Recruitment and Selection Policy.

3.6.2 An action plan is in place and on track to deliver these changes. We introduced mandatory diverse recruitment panels from 1st April 2023. We have built on feedback received to improve this further to ensure culturally diverse panel members are valued and equal members of panels. They have a role in shortlisting, writing, and asking questions and in decision-making. We are currently finalising a standing operating process to help support both managers and colleagues to understand why this is in place and their roles and expectations within the recruitment process. This will include helpful templates and interview question examples.

3.6.3 We will widen the actions to include deep dives into our recruitment data about who is appointed to understand if there are any patterns and how to address any of them if they occur.

See Me First

- 3.6.4 In May 2022, the Trust launched its See Me First Champion Programme. Like other Trust champion roles, these champions pledge to be allies for culturally diverse colleagues and to be a safe person to talk to about any concerns staff may have. They continue to act as a supportive friend and to signpost staff to other support as required.

Neurodiversity

- 3.6.5 We continue to implement our plan to create a working environment which supports a neurodiverse workforce and to build into our support for both applicants and staff, a range of support measures. These will, but is not limited to, attracting applicants and making adjustments at the recruitment stage, increasing awareness amongst managers and staff of neurodiversity, providing training for managers and reviewing policies to ensure they are supportive and accessible.

Choices College

- 3.6.6 We are currently working with Choices College to offer supported work experience placements to young people with SEND or autism. Cambridgeshire children and young people's services plan to offer a placement at the Oaktree reception in Huntingdon where several administrative tasks have been identified. The young people will come from local SEND schools and will be supported in the workplace by a teaching assistant and co-ordinator from Choices College. We hope to expand the number of areas where we can offer placements.

Anti-Racism Plan

- 3.7 To support the Trust's commitment to becoming an anti-racist organisation, we made our Anti-racism pledge and signed up to the UNISON Anti-Racism Charter in May 2022 and are working on actions to implement these. In addition, we have in place a 2023/24 anti-racism plan covering patient and staff actions.

Equality Delivery System 2022 (EDS22) – Workforce Objectives

- 3.8 The Board agreed to our 2023/24 EDS 22 objectives in March 2023. The 3 domains are:

- Domain 1: Commissioned or provided services.
- Domain 2: Workforce health and well-being
- Domain 3: Inclusive leadership

- 3.8.1 The objectives agreed upon for the workforce and leadership domains 2 and 3 are.

Domain 2

- To work with our Occupational Health providers to support staff in managing obesity, diabetes, asthma, COPD, and mental health conditions.

- We will take all reasonable steps to prevent abuse of any kind and will always act to support staff when it does occur.

Domain 3

- To continue to work towards achieving the Trust Board's anti-racism pledge.
 - Ensure that all Trust Board/Sub-committee papers/reports detail how they are addressing health inequalities.
- 3.8.2 Under domain 2, we have sought support from our two occupational health providers and have published public health information on our Live Life Well pages advising staff affected by these conditions. We continue to refer staff for appointments with occupational health practitioners as required as well as working with the providers on additional support they can offer.
- 3.8.3 Managers, supported by the HR team will continue to act on any complaints made by staff about inappropriate behaviour towards them by a colleague.
- 3.8.4 The board paper reporting templates updated to require the author to highlight how the content addresses health inequalities.

3.9 Staff Networks

We have four staff networks, and all 4 network chairs shared their experiences with the board in September 2023. Menopause Cafes are also in place.

All networks have central administrative support but are self-run and governed by the members and provide feedback on their lived experiences. This feedback has led to improvements in our support offer, including updates to the appraisal and supervision paperwork, promoting a conversation about time to attend networks, updates to the induction session on Diversity and Inclusion, the addition of wording on disability leave into policies, the promotion of staff using their email footer to state their preferred pronouns and the improvements in how we support diverse recruitment panels as details earlier in this report.

3.9.1 LGBTQIA+ PRIDE Network

The network has an active membership who regularly share information and ideas via a team chat group. They have run two successful PRIDE quizzes to celebrate PRIDE month and all things LGBTQIA+.

The group launched their pledge programme with rainbow lanyards which can be worn to demonstrate support for and allyship with the LGBTQIA+ community. The group has also agreed to use the intersectionality LGBTQIA+ flag as its logo and represented the trust at several PRIDE events over the summer.

3.9.2 Cultural Diversity Network

The Network continues to be a safe place for staff to share their lived experiences, and to feedback to the Trust on areas of concern, which are always investigated. The feedback on the misuse of culturally diverse representatives on recruitment panels led to the action detailed earlier in this report.

3.9.3 **Long-Term Conditions & Disability Network**

The group has guest speakers and feedback from members has led the HR Team to update the Organisational Change Policy to include in it that any My CCS Employment (Adjustments) Passport should be considered during any organisational change impacting on someone who has a passport agreed with their manager.

3.9.4 **Caring Responsibilities Network**

Our newest network, established in June 2023, is one that brings together colleagues who have caring responsibilities of any kind. The network has established itself with 2 joint chairs is meeting regularly and has planned guest speakers.

3.10 **Training**

3.10.1 **Cultural Competence Training**

Alongside other Trusts in the Cambridgeshire and Peterborough system, the trust has commissioned Above Difference to run a development programme on Cultural Competence. This will be rolled out starting with the 3 board members, Chair, CEO and Deputy CEO in cohort one and 2 service directors and the Deputy Director of Workforce in cohort 2, with senior culturally diverse leaders and network chair in cohort 3, starting in early 2024. This will be followed by a train-the-trainer approach to wider rollout across the organisation.

3.10.2 **Mandatory Training**

We continually review our two mandatory training programmes to ensure they are fit for purpose, and they are supported by an introduction to diversity and inclusion at induction. Training takes place for those involved in recruitment and selection and as part of all in-house leadership and management training as well as in bite-size people management sessions. In addition, the Trust began the rollout of mandatory Learning Disability and Autism awareness training in April 2023, and there is now a mandatory e-learning session for all staff to undertake. Further mandatory training on this for some staff groups will be implemented in collaboration with our system partners and will involve service users' lived experiences.

3.10.3 **Specific Training**

We continue to work with other agencies who train our staff locally on relevant diversity and inclusion matters including transgender training.

We have in place a detailed workforce diversity and inclusion action plan, the detail of which is discussed at our People Participation & Equalities Committee.

Living Our Values, Civility and Respect

3.11 We continue to support conversations across services on the importance of civility and respect and have developed an evidence-based tool to be used in teams; hold sessions to raise awareness of this and to allow teams to talk about it and gain a better understanding of how to support each other. The tool kit has been used successfully in several teams.

3.12 **6 High-Impact Diversity and Inclusion Objectives**

A set of 6 diversity and inclusion high-impact objectives has been nationally set to assist in our commitment to diversity and inclusion for all characteristics.

The 6 objectives and actions are detailed in the table below. Many are already actioned, and others are helpful in spotlighting areas to focus on.

High Impact Action	Actions
<p>Action 1</p> <p>Chief executives, chairs and board members must have specific and measurable EDI objectives to which they will be individually and collectively accountable</p>	<p>Every board and executive team member must have EDI objectives that are specific, measurable, achievable, relevant, and timebound (SMART) and be assessed against these as part of their annual appraisal process (by March 2024)</p>
	<p>Board members should demonstrate how organisational data and lived experience have been used to improve culture (by March 2025).</p>
	<p>NHS boards must review relevant data to establish EDI areas of concern and prioritise actions. Progress will be tracked and monitored via the Board Assurance Framework (by March 2024).</p>
High Impact Action	Actions
<p>Action 2</p> <p>Embed fair and inclusive recruitment processes and talent management strategies that target under-representation and lack of diversity</p>	<p>Create and implement a talent management plan to improve the diversity of executive and senior leadership teams (by June 2024) and evidence the progress of implementation (by June 2025)</p>
	<p>Implement a plan to widen recruitment opportunities within local communities, aligned to the NHS Long Term Workforce Plan. This should include the creation of career pathways in the NHS such as apprenticeship programmes and graduate management training schemes (by October 2024). The impact should be measured in terms of social mobility across the integrated care system (ICS) footprint.</p>
<p>Action 3</p> <p>Develop and implement an improvement plan to eliminate pay gaps</p>	<p>Implement the Mend the Gap review recommendations for medical staff and develop a plan to apply those recommendations to the senior non-medical workforce (by March 2024).</p>
	<p>Analyse data to understand pay gaps by protected characteristics and put in place an improvement plan. This will be tracked and monitored by NHS boards. Reflecting the maturity of current data sets, plans should be in place for sex and race by 2024, disability by 2025 and other protected characteristics by 2026.</p>
	<p>Implement an effective flexible working policy including advertising flexible working options on organisations' recruitment campaigns. (March 2024)</p>

High Impact Action	Actions
<p>Action 4</p> <p>Develop and implement an improvement plan to address health inequalities within the workforce</p>	<p>Line managers and supervisors should have regular effective wellbeing conversations with their teams, utilising resources such as the national NHS health and wellbeing framework. (By October 2023).</p> <p>Work in partnership with community organisations, facilitated by ICBs working with NHS organisations and arm's length bodies, such as the NHS Race and Health Observatory. For example, local educational and voluntary sector partners can support social mobility and improve employment opportunities across healthcare (by April 2025).</p>
<p>Action 5</p> <p>Implement a comprehensive induction, onboarding, and development programme for internationally recruited staff</p>	<p>Before they join, ensure international recruits receive clear communication, guidance, and support around their conditions of employment; including clear guidance on the latest home Office immigration policy, conditions for accompanying family members, financial commitment, and future career options (by March 2024).</p> <p>Create comprehensive onboarding programmes for international recruits, drawing on best practices. The effectiveness of the welcome, pastoral support and induction can be measured by, for example, turnover, staff survey results and cohort feedback (by March 2024).</p> <p>Line managers and teams who welcome international recruits must maintain their cultural awareness to create inclusive team cultures that embed psychological safety (by March 2024).</p>
High Impact Action	Actions
<p>Action 5 continued</p>	<p>Give international recruits access to the same development opportunities as the wider workforce. Line managers must proactively support their teams, particularly international staff, to access training and development opportunities. They should ensure that personal development plans focus on fulfilling potential and opportunities for career progression (by March 2024).</p>
<p>Action 6</p> <p>Create an environment that eliminates the conditions in which bullying, discrimination, harassment and physical violence at work occur</p>	<p>Review data by protected characteristics on bullying, harassment, discrimination, and violence. Reduction targets must be set (by March 2024) and plans implemented to improve staff experience year-on-year.</p> <p>Review disciplinary and employee relations processes. This may involve obtaining insights on themes and trends from trust solicitors. There should be assurances that all staff who enter formal processes are treated with compassion, equity, and fairness, irrespective of any protected characteristics. Where the data shows inconsistency in approach, immediate steps must be taken to improve this (by March 2024).</p>

	Ensure safe and effective policies and processes are in place to support staff affected by domestic abuse and sexual violence (DASV). Support should be available for those who need it, and staff should know how to access it. (By June 2024)
High Impact Action	Actions
Action 6 continued	Create an environment where staff feel able to speak up and raise concerns, with steady year-on-year improvements. Boards should review this by protected characteristics and take steps to ensure parity for all staff (by March 2024).
	Provide comprehensive psychological support for all individuals who report that they have been a victim of bullying, harassment, discrimination, or violence (by March 2024).
	Have mechanisms to ensure staff who raise concerns are protected by their organisation.

Cultural Ambassadors

3.13 We have increased the number of cultural ambassadors to 7. These are senior culturally diverse leaders trained in this role. They undertake this role in any people management processes where appropriate.

2.20.1 The ambassadors have established regular peer support meetings to share their experience and learning and invite the Workforce Director and Deputy Workforce director to share feedback. Following the first of these meetings, it was agreed that we would review data on any staff leaving the trust within 6 months of being the subject of a people management process (irrespective of its outcome), offer shadowing opportunities for cultural ambassadors, in agreement with all involved, to people management investigations/hearings, so they can learn whilst awaiting being formally involved and that they will attend people management processes training led by the HR experts.

4.0 Programme 3: *Retaining Our People*

(NHS People Promise Domains - We are always learning, we are a team, we are recognised and rewarded) Excellent Employer ambitions.

4.1 Training and Development

4.1.1 We offer a wide range of training and development, both in-house and externally and weundertake an annual training needs analysis (TNA).

4.1.2 We have introduced a Trust-wide Training Bulletin, which will be sent out every quarter.

4.1.3 We continue to develop a hybrid training offer, with some courses continuing to be delivered online, while others are face-to-face, and several are a mix of both.

4.1.4 A variety of courses/sessions are currently available, such as:

- Amazing Manager's new manager induction
- Appraisal training
- Care Certificate (all modules)
- Chairing Meetings
- Chrysalis Action Learning Sets
- Chrysalis Leadership Programme
- Coaching and mentoring support
- Coaching Conversations
- Diversity mentoring training.
- Diversity Mentors
- Excel training
- MS Teams Whiteboard
- Group Myers-Briggs Type Indicators (MBTI) (Group and Individual)
- Mental health First Aid Training
- Personal Development and Career Planning Workshop
- Power-Point Presentations
- Step On Up training for new leaders
- Time Management
- Training and Presentation Skills

4.1.5 We signpost people to training support and commission courses as required. This means that we can commission specialist organisations to support staff. As an example, we have just agreed on a training programme for MSK Team members on delivering bad news.

4.1.6 We also support staff to take up national and local qualifications and courses, such as:

External Learning programmes
Edward Jenner Programme – NHS Leadership Academy
Mary Seacole Programme – NHS Leadership Academy
Apprenticeships e.g., Data skills
Springboard Training for female staff
Leading Beyond Boundaries

4.1.7 We are currently updating our bite-size people management sessions to support people managers on a range of topics. These sessions will teach our managers the basic skills, techniques, and confidence to manage and lead people well and to know when to access professional HR support.

4.1.8 During 2023, we will be improving induction training for new managers to link in with teams from the support services more effectively. We will also be supporting the delivery of the external diversity at work programme.

4.1.9 During the last six months, we have been working to establish our trained

coaches as a community of practice.

- 4.1.10 Recently, many teams have been asking for more support in health and wellbeing. Therefore, we will be building up our resources and our available courses in this area in the next six months. This will include support with essential conversations and sessions on mindfulness and techniques to help with resilience.

4.2 **E-Learning and Electronic Staff Records (ESR)**

- 4.2.1 ESR Manager and Employee ESR Self-Service are in place across all services.
- 4.2.2 For the majority of mandatory and role-specific training, our people access e-learning on ESR. This supports staff to access user-friendly training at a time and place which suits them and their work. Our mandatory training compliance rates remain high. Our mandatory training is in line with the Core Skills Training Framework and has been expanded since April 2023 to include the new patient safety and learning disability and autism e-learning packages.
- 4.2.3 Staff can also easily access their pay slips, total reward package information, including projected pension benefits and their personal data. The next area that we are looking to rollout is managers' self-service.
- 4.2.4 The team are starting to record essential clinical training on individual staff competency profiles. This is underway with Luton Adult Services. The aim is that the training record function will become the single place to record all training.

4.3 **Professional Development**

- 4.3.1 The Trust provides Continuing Professional Development (CPD) and supports essential job role training for all clinical staff to deliver their roles safely and enable staff to develop professionally.
- 4.3.2 Essential to job role training – our Professional Education Leads deliver facilitated Practice Supervisor and Practice Assessor training and updates for all NMC registrants to enable them to support learners in practice. These sessions are well attended and receive positive feedback.
- 4.3.3 An annual report is presented to our Quality Improvement and Safety Committee each year which outlines all non-medical placements and CPD activity.
- 4.3.4 We continue to work with neighboring trusts in providing a joint approach to support learners requiring work-based placements. We also have a robust work experience process enabling school, college, and health education students as well as those considering a change of career to spend time in clinical and non-clinical areas to gain an understanding of that area. We provide central support to all learners and the services to ensure learners have a quality learning experience, with the aim that they see the Trust as an employer of choice after they qualify.

- 4.3.5 The Trust continues to support the Care Certificate Programme, which gives clinical supportworkers a national standard level of skills and competence. New and existing staff are invited to complete the Care Certificate.

4.4 Preceptorship

- 4.4.1 The Professional Education Team deliver a multi-professional preceptorship programme in line with the current national framework and the Nursing and Midwifery Council principles. When the Allied Health Professions framework is launched this will be incorporated into the Trust framework to deliver a fully multi-professional offer.
- 4.4.2 This is managed centrally by the team and registers of preceptors, and preceptors are there to ensure equitable access to a preceptor, collect data for reporting and collate feedback as this will be an evolving offer whilst it is embedded.

4.5 Apprenticeship and Growing Our Own

- 4.5.1 Apprenticeships are being discussed as part of developing our 3–5-year strategic workforce plans and all services are currently viewing apprenticeships as one way to help meet their future workforce supply needs.
- 4.5.2 This year has seen a focus on Dental Nurse recruitment, and we have recently recruited 3 Dental Nurse Apprentices with another 4 planned for the autumn. We also continue to prioritise growing our own Nurses and Allied Health Professionals. We currently have 7 young apprentices in Administration apprenticeship roles in Dynamic Health and Beds and Luton Children's Services and would like to grow this as an entry route across the Trust.
- 4.5.3 The Trust has continued to support apprenticeship training programmes within the growing our workforce agenda with 20 new apprentices starting in Quarter 2.
- 4.5.4 We currently have 77 staff members completing a variety of clinical and non-clinical apprenticeships. We are currently spending around 60% of our apprenticeship levy and we expect our usage to continue to grow. As part of the levy funding rules, we can choose to transfer up to 25% of our funds to pay for an apprenticeship at another employer. We are currently supporting 10 apprentices employed in primary care to undertake the apprenticeships through the levy transfer scheme.
- 4.5.5 A key challenge for some services is that the levy cannot be used to support the time when an apprentice is undertaking study, and this leaves services short-staffed. This will be reviewed as part of the work on developing our strategic 3–5-year workforce plans. Should apprenticeships be identified as a key supply route, within a particular service, then we will identify a way to provide cover for those undertaking the training.
- 4.5.6 The Trust is an active member of both Cambridgeshire and Peterborough and Bedfordshire Luton and Milton Keynes (BLMK) apprenticeship networks. Within BLMK we are taking part in a Healthcare Support Worker rotational apprenticeship project. We plan to employ one apprentice within Luton Adult Services who will spend the first part of their employment with us and then undertake placements in other health and care organisations. We are

currently recruiting for this post, and it's planned that the rotational scheme will start on November 23.

4.5.7 We support our people to achieve Level 1 or Level 2 Functional Skills qualification in English and/or Mathematics as this is a requirement for all apprenticeships and can also be used to upskill literacy and numeracy. We have seen 6 members of staff take either Level 2 English or Math's through Open Awards between 1/4/23 and 31/10/2023.

4.5.8 The Trust will continue to promote the healthcare sector as a future employer to young people in schools and colleges as conditions allow as well as to those who are considering returning to employment. The Trust continues to support the NHS Ambassador programme participating in career activities to promote the NHS as a future employer to young people.

4.6 **Supporting Learners and Working with Higher Education Institutions**

4.6.1 Healthcare professionals undertaking training are the largest student group that comes to the Trust. They are required to complete clinical placements alongside their academic learning and the Trust supports learners with a quality learning environment as part of this. Activity is at its highest in the spring term and then falls during the autumn term as this period includes the Higher Education Institutes (HEIs) summer break and reflects reduced placement activity at the beginning of the academic year. The average number of pre-registration placement hours per year is currently 49,000.

4.6.2 Clinical placement areas offer learners face-to-face learning opportunities with a blended approach fitting with their service delivery models. This has worked well in our Allied Health Professionals (AHP) services where a blended placement delivery has been received positively by learners and staff. We have been able to provide laptops for our AHP learners as they are with the trust for long placements and are required to work a small caseload.

4.6.3 Our new Norfolk Mental Health Support team is keen to support learners. We are looking at using the York and Humberside placement capacity model to establish current placement capacity across AHP teams, to support with giving specific aims for increasing capacity. This can apply to all learners, including pre-reg students, nursing services and apprentices.

4.6.4 Student feedback is received from the National Education and Training Survey (NETS) as well as the Higher Education Institutes (HEIs) we work with and requested by the Professional Education at the end of each placement. This information includes what was positive for the students as well as what we could do better to support them on placement. The compliments and learning are shared with the services both locally if they are service specific and wider if more general where all areas can benefit. We have successfully attracted newly qualified staff to work for us based on their positive training experiences and we continue to support post-registration specialist practice learners.

4.6.5 The team continue to work with services to find innovative ways to manage increasing demands on placement capacity caused by both increased university cohort sizes for traditional pre-registration courses and the increasing number of learners also requiring placements through alternative qualification routes including Apprenticeships and T levels. We are reviewing our policies to ensure they are robust and clear to follow and are

updating the trust induction pack for all learners and this will include information about mental health and wellbeing.

- 4.6.6 January 2023 brought in the new cohort of Specialist Community Public Health Nurses SCPHN – Health Visiting & School Nursing) students (due to qualify Jan 2024) (from Anglia Ruskin University for Cambridgeshire and Peterborough, Healthy Child Programme (HCP), University of Hertfordshire (UOH) for Bedfordshire and Luton HCPs and at the University of Suffolk (UOS) for Norfolk HCP. These students started their course knowing they had the offer of a substantive post upon successful completion of their course. The HCPs have completed their recruitment for learners for both September 2023 (started) at UOH (Bedfordshire & Luton HCPs) and for January 2024 at ARU (Cambs HCP and Norfolk HCP).
- 4.6.7 This year to support recruitment we have agreed to offer a £1500 incentive to train internal and external successful candidates in a bid to increase the uptake of our commissions. Norfolk has an active programme to support their SCPHNs to become dual-trained to offer a 0-19 service. The Trust is also supporting several staff nurses within our services to access academic modules as part of their preparation to apply for the SCPHN course in the future.
- 4.6.8 Luton adults, and the Children's Community Specialist Nursing services across Bedfordshire, Luton and Cambridgeshire all received NHSE commissioned places for the PgDip Specialist Community Nursing course (adult or child pathways) commencing Jan 2024 at the University of Hertfordshire. Recruitment for these learner posts has been for staff currently employed within these services and they have also qualified for the incentive to train being offered. Luton Adults have filled their 2 places for January 2024.
- 4.6.9 We continue to support individuals to undertake their Return to Practice (RTP) to enable them to regain their registration with their governing bodies. We are running a rolling program of advertising nursing RtP linked into the HEI calendar and Norfolk HCP is about to advertise for RtP nurse/SCPHN for the Feb 2024 cohort using the employer-led model. We are part of the East of England regional networks for nursing and AHP RtP.
- 4.6.10 We have been working with services to explore Advanced Clinical Practice (ACP) and how this can move forward within the trust. This has required services to review their workforce plans and think creatively about how they can support the required career pathways for this. We have x1 ACP trainee completing the MSc ACP apprenticeship who has just started their 2nd year. This is being funded through the apprenticeship levy with NHSE financial support towards ensuring the trust has the infrastructure and governance required to support this development in services.

4.7 Health Care Support Worker Pastoral Support

- 4.7.1 Our clinical support workers play an integral role in improving the health and wellbeing of people across the diverse communities we serve. They are present in each service we deliver, and we value their contribution.

- 4.7.2 The term Health Care Support Worker does not begin to describe the diversity of roles we have, and we are excited to have begun a piece of work to fully understand and celebrate the breadth of opportunities we have that fall under this banner incorporating over 70 different roles.
- 4.7.3 After taking part in the pilot NHS Pastoral Care Quality Award for clinical support workers, we have been awarded silver status and are currently the only community Trust to have achieved this.
- 4.7.4 To achieve the award, we have successfully met a set of standards and demonstrated best practice pastoral care for support workers, including recruitment and induction; in-role support; ongoing learning and development; valuing staff and recognition.

4.8 Medical Staff Development

- 4.8.1 Annual Trust Development Plan – We have made progress against the objectives, with educational and clinical supervisors being approved and GMC registered and further approvals pending. Further work is required on developing a strategic response to requests for new training post-development (in the Foundation Programme and General Practice training) - there remain significant issues with clinic space and supervisory capacity in some sites and services and limited response to a survey from services which have not traditionally trained doctors.
- 4.8.2 We ran an in-house accredited educational and clinical supervisor training day in October and continue to recruit and train further clinical supervisors.
- 4.8.3 Staff Grade Associate and Specialty Doctors (SAS) – There is an ongoing programme of training events for SAS staff planned, with a successful day in September and a further day booked for January. Other opportunities for this staff group are also being actively promoted.

4.9 Higher Specialist Training

- 4.9.1 Our Junior Doctors' forum has resumed, and we have clarified arrangements with the Guardians of Safe Working (GoSW) for both the Trust and Northwest Anglia NHS Foundation Trust for our Paediatric trainees. In Cambridge and Huntingdon, supervisors have had training from the GoSW on how trainees should report infringements on educational opportunities.
- 4.9.2 Community Paediatrics: We continue to provide posts at Cambridge and Huntingdon and for trainees based at Luton and Dunstable and Bedford Hospitals.
- 4.9.3 iCaSH: National recruitment for Genitourinary (GU) Medicine remains poor, and we currently have internal medicine trainees in our Cambridge post and rebadging of the Norwich post to a Community Sexual and Reproductive Health post.
- 4.9.4 Feedback from our GP training posts within iCaSH, (based in Kings Lynn,

Peterborough, Bury St Edmunds and Great Yarmouth and a new post in Milton Keynes) remains good. The GMC survey for 2023 highlighted work pressures on supervisors in Paediatrics and we are reviewing how the GP placements are run to see if this can be improved, as well as evaluating whether the educational supervisors get protected time as funded.

4.9.5 We have two foundation trainees working within Community Paediatrics in Bedford and a new post in Luton which has community experience. There is interest within iCaSH in the development of future posts to promote GU Medicine.

4.9.6 We support undergraduate medical training from a range of HEI's:

University of East Anglia (UEA)

4.9.7 iCaSH currently provides clinical teaching and placements for medical students from UEA. This year saw an increase from three to four cohorts prior and the total student numbers increased to 194 for 2022-2023. The change to delivery of clinical experience has been positively evaluated.

University of Cambridge (UoC)

4.9.8 The Trust has applied for Teaching Partner/Affiliated Hospital Status

- iCaSH: Additional sexual health training and resources have been developed by the UoC Primary care team with input from iCaSH, and an initial half-day of training was run in August 2022 and is now ongoing. We are now delivering a half-day placement for all UoC students within iCaSH.
- Community Paediatrics: As well as lecturing on childhood development and assessment and on common neurodevelopmental conditions in children and their management (for year 4 and 5 medical students respectively), the service provides clinic experience for 140 Year 5 medical students. There is ongoing involvement in examining and supporting research projects.

4.9.9 The University of Leicester has been approached to take students from Leicester to our iCaSH service in Peterborough.

4.9.10 University of Central London (UCL)

Medical students from UCL have returned to placements in Community Paediatrics in Bedford. Arrangements about placements and funding of training continue to be progressed.

5.0 Programmes 3 and 4. *Retaining our people and maximizing our recruitment and supply opportunities*

(NHS People Promise domains *We work flexibly; we are a team*)

5.1 Attracting Staff

5.1.1 The Trust recruited 208 substantive and 6 bank staff between 1 April and 30 September 2023. We recruited 8 Trainee SCPHN's for September 2023 start and have a further 24 starting in January 2024.

5.1.2 We have also offered 24 Trainee Education Mental Health Practitioner roles for Jan 2024 starting an increase in 2022.

5.1.3 The key areas of workforce challenges continue to be:

- Luton and Bedfordshire - District Nursing; Health Visitors, Community and School Nurses, Audiologists and specialist safeguarding roles; Community Paediatrics.
- Dental – Dental Nurses in South Cambridgeshire and Dentists.
- Cambridgeshire: Health Visitors in Cambridge City, Doddington and Wisbech.
- School Nurses in Cambridgeshire, Cambridge, and administrative staff.
- Norfolk - SCPHNs in the HCP Norfolk East Locality and Just One Norfolk across all staff band 6 and below, challenges across Norfolk for SCPHN recruitment.
- SLT - The SLT Service in Luton and Bedfordshire.

5.3.4 To attract and retain staff, several local Recruitment and Retention Premiums (RRP) are in place and the effectiveness of these is regularly reviewed. RRP's are a salary premium payable under national NHS terms and conditions where there is evidence of hard to recruit.

5.3.5 Flexible working/job sharing continues to be promoted in our adverts. In addition, services are being encouraged to advertise and offer relocation assistance and the Trust's policy has been revised to be more inclusive.

5.3.6 The recruitment team are using social media advertising as well as the more traditional NHS advertising. Adverts are now promoted on LinkedIn, Twitter, Facebook, indeed, Jora and NHS Jobs which is reaching a wider pool of potential candidates. Adverts have also been updated to encourage applicants from diverse backgrounds.

5.3.7 Work is also underway to implement our actions arising from our review of the NHS-wide 'If Your Face Fits and No More Tick Boxes' review of discrimination in recruitment practices. Actions so far include:

- Job Descriptions and Person Specification: There is now guidance including removing discriminatory language, reducing in number of essential criteria, and limiting desirable criteria.
- Shortlisting: A minimum of three people to conduct shortlisting and the recruitment panel must include a colleague or People Involvement Partner (PIP) who is from a culturally diverse heritage. Shortlisting should be completed independently, to prevent panel members from being influenced by others in line with anti-discrimination.
- Interview process- guidance for managers on the importance of planning for interviews and how to reduce bias in the interviewing process. The interview panel will comprise the same colleagues (or PIP) as at shortlisting, all having an equal say during the interview process.

5.3.8 We are also reviewing our recruitment processes to ensure that we are supporting neurodiversity which can include giving interview questions ahead of the interview.

5.3.9 Sexual health services support General Practitioners (GPs) in training, and this can provide a source for future GPs with a special interest in

providing sessional work for us.

- 5.3.10 The Trust has hosted several NHS graduate trainees over recent years and successfully appointed former graduate trainees to substantive roles. The Trust has agreed to work with the BLMK ICS to offer a placement for a general management trainee in Luton Adult Services and an individual is on placement with the team now.
- 5.3.11 Work continues to explore the greater involvement of service users in the selection process with service users often part of stakeholder panels or interview panels.

5.4 International Recruitment

- 5.4.1 Luton Adult Services has completed its onboarding of 15 internationally recruited nurses; all of whom have passed their competency assessment set by the NMC and have moved out of their initial temporary accommodation into more permanent settings.
- 5.4.2 We will continue to review demand for targeted cohorts of international recruitment during 2024/25.

5.5 Recruitment Overseas via Job Adverts

- 5.5.1 Through our normal, direct, recruitment processes via NHS Jobs/TRAC, we have 4 overseas candidates currently in the recruitment cycle and we continue to apply the learning from targeted cohorts of international recruitment to support the onboarding of future candidates.

5.6 Professional and Pastoral Support

- 5.6.1 We continue to provide pastoral support to our international recruits, ensuring that professional support is identified as appropriate. This is in line with national best practices (Stay and Thrive) to help shape our offer to overseas candidates.
- 5.6.2 A learning exercise took place in September 2023 to identify a consistent approach across the Trust. This was shared with our current IRs through the Peer support group. Bespoke information is now available including Health and wellbeing, regional and local learning opportunities, step-by-step guides to passing our UK driving test, accommodation and FAQs based on issues raised from previous cohorts.
- 5.6.3 This will include all aspects of support from an advert for 12 months and will cover both formal and informal elements as the Website is developed. A self-directed peer support group has been formed and have met twice to provide help, assistance, encouragement, and feedback for our internationally recruited colleagues.
- 5.6.4 The Trust applied for the NHS quality award based on our international recruitment practices. As well as helping to standardise the quality and delivery of our pastoral care, this award is an opportunity for us to have our work recognised demonstrating our commitment to supporting internationally educated nurses and midwives at every stage of recruitment

and beyond. We are pleased to have achieved this at a bronze level and will begin using the kite mark as soon as this becomes available.

5.7 Strategic Workforce Planning

5.7.1 In June the NHS Long Term Workforce Plan was launched focusing on three key areas; training *more* (up to 65% increase in training places in the next 15 years) with a greater reliance on apprenticeship routes across professions (including Medicine) to reduce the over-reliance on international recruits. As well as activities to further *retain more* staff through targeted approaches to career planning and embedding flexible working arrangements. Significant *reform* to how we develop our staff by reducing the length of training, using more digital/ AI as part of the delivery of training, and growing more enhanced and advanced levels of practice within our workforce models in addition to supporting those coming through via entry-level roles.

5.7.2 These national ambitions align well with our Trust-wide priorities identified from our Services workforce plans and our People Strategy from 2023. More targeted and scalable approaches to growing our own staff through work experience, health ambassadors, care certificates, apprenticeships, nursing associates, flexible degree pathways, community nursing training pathways etc.

- With 56% of our workforce being below their earliest retirement age in ten years' time retaining these staff will be critical as well as supporting those who are due to retire and considering flexible working arrangements to retain their skills, knowledge and experience to support our diverse range of learners and trainees (i.e., our future staff) as well as rolling out our 'core retention offer'.
- Increase the development and retention opportunities for our experienced workforce, including enhanced, advanced and specialist practice levels.
- Attracting new staff to join and build their careers with CCS (career pathways for each service, flexible working, modernising our adverts/ JDs to focus on unique selling points, targeting our recruitment to known pools of staff, learning from others etc)
- Increasing the number of volunteer and peer experience roles within our services.

Workforce Development highlights include:

5.7.3 In January 2023 we had an acute shortage of Dental Nurses in Wisbech, Cambridge and Ely with only one Dental Nurse Progressing through the apprenticeship route. A working group was established to include service, recruitment, HR, workforce planning and Temporary Staffing representatives. To date, we have reduced the vacancy gap to 5.8 (of which 3 are filled by agency) with Cambridge as our only clinic with outstanding vacancies. Targeted interventions included:

- Sourcing bank and agency staff and rates to fill current staffing during recruitment campaigns.
- To date 7 recruitment campaigns have been launched; linked to local publications, dental networks, social media etc. Resulting in the appointment of 5 Dental Nurses.

- Dental Nurse Career pathway developed, with staff stories to highlight individual experiences on the careers in dental nursing.
- Workforce modelling to understand both current and future needs for Dental Nursing within our services.
- Further expansion of Dental Nurse apprenticeships, with our second round of recruitment to be launched before December. And planned expansion year on year to manage workforce flow.
- Dental Open days undertaken, showcasing the careers in dental, sparking interest in both work experience and upcoming recruitment.
- Explore mutual aid with other Dental Providers, including future collaborations with academic partners (University of Suffolk) as they begin delivery of Dental education within the east of England.

5.7.4 Our children and Young People services continue to experience challenges in both attracting and training Health Visitors and School Nurses, this is both a regional and national workforce challenge. When reviewing key mandated contacts and the skill mix within the 0-5 pathway we have explored the introduction of supportive and associate levels of practice within the pathway.

5.7.5 A career pathway for Health Visitors has been developed, which includes the level of practice, academic level, the scope of the role and the average length of time to consolidate practice upon completion of training. The career map, in addition to evidence relating to Health Visitor workforce flow (sourced from regional supply forecasting and trend data), has aided discussions with service commissioners to adjust the skill mix of the service linked to mandated key contacts. As a result, CCS and Norfolk County Council have been awarded funds to participate in a workforce pilot to develop competencies for both supportive and associate-based roles within a vulnerable pathway in one locality in Norfolk, to test out these new roles with the view to apply learning Trust wide within 0-5 services working with a range of partners from maternity, early years etc.

5.8 Temporary Staffing Service

5.8.1 Temporary Staffing service has now been rolled out to Dynamic Health, Support Services, Luton District Nursing, Rapid Response, Norfolk HCP, and SaLT in Norfolk. During the remainder of the year iCaSH, C&P HCP and MHST will be onboarded. Following the rollout pattern of Health Roster, due to the dual systems between eRostering and bank staffing.

5.8.2 A monthly review of active bank and bank profiling continues to support more effective deployment linked to the future rollout of skills-based rostering. Key shortages in bank posts include community nursing (adult and child), dental nurses, dental therapists, health visitors and senior programme managers. As such recruitment campaigns will be established to support further bank deployment in these fields.

5.9 Workforce Modelling

5.9.1 The rollout of the Health Roster will be complete amongst services by the end of December 2023, thus allowing for the next phase of implementation to begin focusing on further utilisation of the roster system to aid workforce modelling, safer staffing, competency-based workforce planning, workforce reporting,

greater sight by the team on the budgeted establishment and how we can bridge the gap with staff in post during 2024.

6.0 Programme 5 - Continuous improvement in supporting people's health and wellbeing.

(NHS People Promise Domains – We are safe and healthy; we work flexibly; we are a team)

6.1 Flexible Retirements/ Retire and Return

The Trust continues to offer flexible retirement as an alternative to staff retiring completely which is now more attractive due to changes in the NHS pension scheme. This is particularly helpful as some clinical staff groups can retire with their NHS Pension at 55 when many people are not ready to stop working completely. Guidance is available for managers and staff on the different flexible retirement options. Following the May Board Report, the flexible retirement policy has been reviewed and found to remain supportive and fit for purpose.

6.2 Staff Health, Wellbeing and Attendance

6.2.1 The HR Team regularly review the reasons for absence with the teams they support and work with managers to support individuals to maximize their health and wellbeing and maintain attendance at work. The top three reasons for absence over the past year has been.

- anxiety/stress
- cold/cough/flu and
- chest/respiratory

6.2.2 It should be noted that in many instances individual's sickness or absence reasons relate to issues outside of work.

6.2.3 The HR team are currently reviewing and updating the supporting policies and procedures to both ensure staff who are unwell receive timely and appropriate support and that line managers have clear and timely advice and support for their role in managing attendance at work.

Supporting our Staff to Maximise their Health and Wellbeing

6.2.4 The Trust's overall level of sickness absence has remained consistently higher than average over the last few years. We are focusing on a flexible supportive approach, aimed at supporting the individual and their circumstances and creating an environment where they can remain in, or get back to work as quickly as possible.

6.2.5 We support managers and staff through guidance on workplace stress assessments and are working with staff who have been absent from work due to stress or anxiety, regardless of whether it was work-related or not, to understand the level of support offered locally and how effective this was and what more can be done. The stress tool kit and manager guide have been reviewed and significantly changed so that it is more user-friendly, non-judgmental, and supportive.

6.2.6 Supporting the mental well-being of our people remains a priority with

successful mental wellbeing weeks which help to raise the profile of paying attention to your own mental wellbeing. This work has continued during the pandemic with expert input from clinical physiologists in our 'stepped offer' of mental wellbeing and psychological support. We have also sourced additional training for managers in managing mental health in the workplace.

- 6.2.7 Feedback from staff has informed our mental wellbeing support offer. Based on this feedback we have developed a four-part 'Compassionate Team' training course, developed to deliver to whole teams and sessions have been well received. In addition, an awareness session for managers is being developed to enable them to be able to support the mental wellbeing of their staff better.
- 6.2.8 We continue to offer personal resilience training to all staff and bespoke support to individuals and teams going through organisational change and this has been successfully run virtually and have a new programme starting soon, to support managers and staff in handling challenging situations.
- 6.2.9 Never before have we been more aware of the impact of financial difficulties/pressures can cause. We have taken proactive steps to support staff most affected by the cost-of-living raises including:
- Continuing with our relationship with our financial support provider who offers staff free access to financial health checks, advice, information and, where applicable, access to loans, savings and potentially in the future, investment opportunities.
 - Published details of the financial support available to trade union members via their unions.
 - We have introduced a financial assistance fund, open to all staff to apply for a non-repayable grant of up to £1000, to help with severe financial hardship.
- 6.2.10 Our occupational health providers offer comprehensive occupational health services, and the Employee Assistance Programme (EAP) offers a comprehensive wellbeing assessment that staff or their families can take at any time.

Staff Health and Wellbeing "Live Life Well" Programme

- 6.2.11 Our staff Health and Wellbeing programme 'Live Life Well', continues to successfully support staff and below are a few examples of the support in place:
- Recruiting, training and subsequently held refresher training, for Health and Wellbeing Champions and regular champions network meetings.
 - Bi-annual Health and Wellbeing Newsletter showcasing our offer and positive actions by staff. Our most recent newsletter focused on the current cost of living pressures.
 - Promoting 'pass it forward' and acts of kindness as a way to promote well-being.
 - Continuing to promote personalised approaches to managing attendance and flexible working requests and a support offer for staff with their financial well-being.
 - Promotion of the well-being values of good team working

and two-way communication and taking a break.

- Mental Health First Aid light training (for Health and Wellbeing Champions).
- Promotion of NHS staff discounts and promotion of NHS health checks.
- Mental wellbeing weeks.
- Promotion of key national wellbeing-related national days/weeks throughout the year.
- Resilience training.
- Newsletters, Intranet pages and Comms Cascade updates.
- Providing information on menopause to reduce the reluctance of staff to talk about this openly at work, a Menopause Policy and regular Menopause cafes.
- Health and Wellbeing Champions across all services/locations supported through a peer group network.

6.2.12 In addition to our in-house offer, we continue to signpost staff to offers of support both locally and nationally, which are ongoing and include the National NHS helpline run by the Samaritans and support from mental health trusts locally for staff to access support should they need more specialist interventions and are exploring what we can learn from the experiences of the armed forces, post-conflict support offers.

6.2.13 Support is available to managers and staff from health and safety, HR, and other colleagues, in how staff can work differently in future, which many staff expected to work in a hybrid way with a mix of remote and traditional work-place based work. This requires a culture and mindset change, and some staff will need more support than others.

6.2.14 In October 2023 7 of our health and wellbeing champions undertook Mental Health First Aid Lite training.

6.2.15 We have a health and wellbeing action plan in place that is developed and monitored by our Live Life Well group.

Sexual and Domestic Violence

6.2.16 In October 2023, the trust signed up to the NHS sexual abuse charter and committed to supporting staff affected by both sexual and or domestic violence. We already have in place a domestic violence policy and support mechanism to support staff and draw on the expertise of our safeguarding experts internally. We will ensure that all our practices and policies which support staff affected by incidents in work, either from colleagues or the public, encompass expressly unwanted sexual attention, violence, language, or aggression and that all incidents reported will be dealt with as serious incidents.

Wellbeing Guardian

6.2.17 To support the delivery of our People Strategy, we have appointed one of our non-executive directors as our Wellbeing Guardian. We have in place a Health and Wellbeing Champions Network and process and support for our managers to take a leading role in their staff members' wellbeing. We have already built this into line managers' practice, conversations on staff wellbeing at both management supervision meetings and appraisals, as

well as embedding this as a core skill for managers in our development programmes.

6.2.18 Through this update and the Staff Opinion Survey and Live Life Well action plans we can give assurance, via the Health and Wellbeing Guardian to the Board, that we have the wellbeing of staff as core to the organisation.

Rapid Access MSK

6.2.19 A trusted physiotherapist is a core member of the Live Life Well group, and our internal MSK services offer rapid access to advice and interventions, for staff with MSK issues. In addition, the service is working on making all our internal Gyms, which are in place to support patients, can be accessible for staff use when not required for patients.

Coaching Support Programme

6.2.20 To maximise performance and to support the health and wellbeing of our operational leaders we have commissioned a coaching support programme from an external provider. They will offer 2 coaching sessions to 32 of our operational leaders to help support them with their overall resilience.

Recommendation

6.3 The Board is asked to:

- note and discuss the content of this report.
- Identify whether any other actions should be undertaken.