



TRUST BOARD

Title: KEY ISSUES AND ESCALATION POINTS
Name of Committee: People Participation Committee
Committee Chair: Fazilet Hadi
Meeting Date: 22 January 2020

Summary of key messages:

Quality and Clinical Strategy and the related strategic indicators:

- The five draft recommendations developed by the Trust Wide Working Together Group were discussed and agreed and will be included in the refreshed Quality and Clinical Strategy.
- The second priority of the refreshed Quality and Clinical Strategy will be the People Participation approach from April 2020 onwards. The area of focus agreed, will be to continue to be built on the work develop and embedded over the last two years.
- The measure indicators linked to providing outstanding care will also be included.
- People Participation will also include the approach for Patient Experience as with the last strategy and this will continue to be developed and assurance measured against the NHS Improvement Patient Experience Tool which highlights the areas for outstanding patient experience for Trusts.
- Our volunteers approach will also form part of the new strategy. This is a new area of focus for the People Participation.
- It was agreed that the final strategy will be presented to the next People Participation Committee.

Divisional update and focus on changes made as a result of people participation – Ambulatory Care Division:

- The Committee received a focus session from the Co-production leads and Service Director for Ambulatory Care. This was in line with the cycle of business whereby at each quarterly meeting there is an in-depth review of the activity around co-production over the last year in the division.
- To gain an insight into the work and achievements of the co-production approach, the Committee watched a patient story video from iCaSH King's Lynn about a developing Peer Mentor scheme for HIV Service Users.
- The Committee also heard about a Local Working Together Group (which includes service users, staff and a co-production lead) set up by the MSK Team in Doddington with support from the co-production lead. The aim of the Group was to work with services users to increase the offer of protected gym time within the community once they had finished their set exercise classes provided by our MSK service. This Group had also developed links with the Local Authority that was supporting the offer of looking at gym use with local stakeholders. This work continues and, along with feedback received from previous services user, the Committee agreed that it was an excellent example of how co-production is making a difference.
- The Committee heard that the Service Director was assured that the co-production approach was making a difference and that there were several projects/focus groups and Local Working Together Groups which were developing and being embedded within the Ambulatory Care division.
- It was agreed to scope further how the work around co-production could be shared and celebrated further across the Trust and with our stakeholders. Further work is planned around this and updates will be provided in future.

The Trust Wide Working Together Group highlight reports were received:

- The highlight reports from each directorate gave assurance that there was a vast amount of co-production work happening across all of our services, which is being supported by the co-production leads.
- For the first time, this report included data on the number of people who were getting involved with our People Participation approach (Quarter 3: Oct-Dec 2019). This data was split into three groups:
 - **Contacts:** Our co-production leads and service staff have been in contact with **4,444 people** at community or engagement event. This work included gaining feedback and improvements around our service offer. For example, breastfeeding cafés/groups and scoping ideas around extending or changing our service offer such as people using current services at the North Cambs Hospital site, promotion of the Just One Number with local safeguarding networks and ADHD pathways with local stakeholders and families.
 - **Groups or Networks:** There were **94 service users/carers** who were part of an already established group or network in our communities that we have attended. We have either been a part of one of their established meetings or contacted them through their networks. This included engagement work with youth groups (youth health watch), schools, CAMH participation youth groups and Family Voice (charity) engagement events.
 - **Local Working Together Groups:** There are **104 service user** volunteers who are part of our establishing groups who volunteer their time on a regular basis to be part of a Working Together Group. They sign a volunteering form and meet with a co-production lead and other group members on a regular basis (some monthly and some bi-monthly). There are terms of reference and agreed aims for each group. These volunteers are known as task volunteers.
- **Service Volunteers:** The Committee received an update as part of this report on the numbers of service volunteers and related successes and issues. Assurance was given that clear processes are in place against the Trust's policy. At the time of this meeting, the Trust had 61 service volunteers who volunteer their time on a regular basis to support our service offer, which is an increase of four since the last quarter.
- The first volunteer's award was awarded by the Chief Nurse to a volunteer from our Bedfordshire 0-19 team. This volunteer is a peer volunteer for breastfeeding support to new mothers who are known as Breastfeeding Buddies. This award will be presented to one of our volunteers on a quarterly basis.
- In addition to our 61 service volunteers, we also have 104 task volunteers who volunteer their time to support our regular projects/focus group or Local Working Together Groups for service improvement led through co-production.

Workforce Diversity and Inclusion update was received:

- The Committee received an update on a number of actions which supported the delivery of the Trust's Workforce Strategy and its "Diversity and Inclusion for All" Programme.
- A newly named 'People Strategy' is being developed as part of the recent strategy refresh exercise which will continue to include the "Diversity and Inclusion for All" Programme.
- The Workforce Disability Equality Standards (WDES)
An adjustments passport has been agreed which is available to all staff and for managers to discuss at every opportunity. This was launched at the Leadership Forum in December 2019. To date, feedback from those staff who had used the new system was very positive. In implementing the adjustments passport, the HR team and union colleagues are working on an approach to special leave arrangements for disabled staff. This work is ongoing with the aim to launch after ratification.
- Staff networks
Work is ongoing to review, refresh and re-launch staff networks during 2020.

- Mentoring
The Big 9 Diversity mentoring training was almost complete with only the Non-Executive Directors who have not been trained.
- The Workforce Race Equality Standards (WRES) updates
BAME representation on recruitment panels continues and, as agreed in December 2019, all our recruitment activity will move in house from April 2020. This will enable the Trust to support the final roll out of BAME representation on all interview panels where a BAME applicant has been shortlisted. The Training Team has scheduled recruitment training (including anti-discriminatory practice) for 2020 and, thereafter, staff who have not had this training will not be able to take part in the selection process.
- Gender Pay Gap Work
This is ongoing to both develop female staff in order to increase the number in female senior roles (including Springboard training) whilst also seeking to attract more men into the workplace through our new work experience programme which will begin in June 2020.
- Cultural Ambassadors
Our 5th Cultural Ambassador was trained in July 2019. We will continue to make wider use of their knowledge, expertise and life skills to support issues before they become formal disciplinary or grievance cases by acting as an expert resource for managers and HR advisors. In line with October Black History Month, we launched our new diversity mentoring programme “Big 9” with training for mentors, using a mix of our existing mentor training and specific diversity and inclusion mentoring training. The aim of the Big 9 mentorship is to promote the availability of mentors from a range of backgrounds to work with staff and share their characteristics to help support career and personal development.

Patient Diversity and Inclusion:

- The Committee received an update on the refresh and planned work around the EDS2 and the strategic indicators. This is an ongoing programme of work and further updates will be presented at the next Committee.

Escalation points

- There are no escalation points for the Board.

Emerging Risks/Issues:

- There are no risks/issues points for the Board.

Examples of Outstanding Practice or Innovation:

- Overall, it was agreed that the Committee continued to gain assurance from the report received and the focussed discussions that People Participation was being embedded effectively. Furthermore, there was clear evidence of increased participation within our communities, staff, stakeholders and service users through this approach.
- The Trust’s dedicated co-production leads within each of our directorates continued to embed our co-ordinated approach and were sharing with our staff and communities the learning around the approach and support given to our services.
- The Ambulatory Care co-production approach was being embedded within the directorate and there was clear evidence through the examples of the peer mentor scheme and work with MSK and various other projects, that co-production was being embraced and was making a difference to how we work with our service users/carers.
- Our volunteer workforce continued to grow steadily and the governance and support was

fully embedded. In addition, the new volunteer staff recognition award was in place.

- We were meeting all our public sector duties around equality and diversity and these were being monitored through the Equality Delivery System (EDS2) plan. By using the EDS2, the Trust was providing outstanding commitment to providing an inclusive NHS that was fair and accessible to all and provided evidence that we were delivering on the Public Sector Equality Duty.

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