

Title:	Bi-Annual People Strategy Update		
Report to:	Trust Board		
Meeting:	17 May 2023	Agenda item:	7
Purpose of the report:	For Noting: <input checked="" type="checkbox"/>	For Decision: <input type="checkbox"/>	For Assurance: <input checked="" type="checkbox"/>

Executive Summary:

This report provides the Trust Board with an update, overview, understanding and assurance of the actions and plans in place to recruit, retain, develop, and support our people. It builds upon the last report presented in November 2022. 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 and continuous improvement and our quality ambitions by ensuring that our staff experiences are the best they can be. This is central to us being able to achieve our over trust strategy and service plans. The strategy is delivered through five programmes of work which directly support the NHS People Plan ambitions. The report is written under these five programmes, they 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 wellbeing.

Implementation of the strategy is monitored by the Trust Board via bi-annual progress updates being provided directly to the Board. The following groups and sub-committees oversee the delivery of key work areas to ensure the strategy is being delivered:

- People Participation Trust Board Sub-Committee.
- Quality and Improvement Safety Trust Board Sub-Committee.
- Workforce Diversity and Inclusion Sub-Group.
- Live Life Well Steering Group.
- Staff Opinion Survey Task and Finish Group.
- Executive Team.
- Executive Programme Board.
- 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.

	Name	Title
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"/>

Trust Objectives:

Trust Objective	
Provide outstanding care	The report demonstrates that the Trust and its leaders undertake monitoring of staffing levels in order to maintain safety
Collaborate with others	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 a sustainable organisation	The report identifies how the Trust seeks to ensure sustainable workforce supply to meet our future staffing needs
Equality and Diversity Objective	
To fully implement the actions identified following our review of the No More Tick Boxes review of potential bias in Recruitment practices	Update on progress with this is included in this report.
The Trust Board will role model behaviours that support the Trust ambition to be an anti-racist organisation including actively implementing the Trust's and their personal anti racism pledges, to instill a sense of belonging for all our staff	Update on progress with this is included in this report.
To commence collection of demographic data for people who give feedback.	This is not covered in this report
To work with the data team and clinical services to target the collection of demographic data	This is not covered in this report

Links to BAF risks / Trust risk register

This report refers predominantly to actions associated with Board risks:

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

Legal and Regulatory Requirements:

CQC Outcomes

NHS Constitution – Staff Rights and Pledges

NHS People Promise and People Plan

Previous Papers:

Title:	Dates Presented:
Bi-annual People Strategy Update	November 2022

1. 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 provides assurance on the actions and activities in place. Delivery of our strategy is underpinned by an annual implementation plan.

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 that we work within, providing efficient and effective services for our local communities and our commissioners.
- We will develop well-designed volunteering initiatives/opportunities across our different services as recommended in the NHS Long Term Plan.
- 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, dynamic and which challenges the 'norm', drives improvements for greater quality care leading to high performing and financially sustainable services for our local communities.

2. DELIVERING THE PRIORITIES OF OUR PEOPLE STRATEGY

2.1 **Programme 1: A Highly Engaged Workforce (NHS People Promise Domain – We have a voice that counts)**

2.1.1 **Staff Engagement**

We engage with our people formally and informally in a range of ways and we act upon feedback.

The retention of our workforce, (our 'stay' strategy), is a key part of the role of our people managers and our workforce planning activities. 56% of our staff will still be below their earliest retirement age in 10 years' time 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 fair way.

We recognise that most of our workforce perform well and are happy in their current role, so we place as much emphasis on supporting them as we do in supporting those who have the ability and desire to progress.

As part of the development of our refreshed three-year Trust Strategy, we held several listening in action conversations with our people called 'Let's Talk '. Feedback from these sessions was included in our updated strategy and behaviour statements.

2.1.2 Staff Opinion Survey 2022

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.

The detailed results of the 2022 survey were reported to the Board in March 2023.

We achieved a 47% response rate, which whilst lower than in 2021, remains a good response rate and gives us a set of feedback which is statistically representative of our workforce.

Our results show that we are 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)

Our results also show that we are 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.

Trust wide improvement plan in place and services are currently working on their local improvement actions. In addition, a sub-group has been set up to focus on actions in relation to violence and aggression against members of staff.

The Trust committed to donating to the Trussell Trust £1 for every completed staff survey. A donation therefore of £1370 has been made.

2.1.3 Pulse Survey

The quarterly NHS staff Pulse Survey is open to all staff and takes place in 3 of the 4 quarters each year. Whilst uptake of this survey is low, the feedback is reviewed, and actions taken if the feedback highlights new areas for improvement.

2.1.4 **Use of Exit (Learning from Leavers) and New Starter Feedback Data**

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.

It is important to improve the retention of staff already working in the service, especially following the last three challenging years. To do this, 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 across all of our services.

We are committed to listening and responding to feedback from our people. We have reviewed the exit interview process and piloted a new 'Learning from Leavers' questionnaire in September 2022. This new 'Learning from Leavers' process has been embedded and includes all leavers being offered an independent opportunity of a conversation with a member of the retention team.

The latest reporting period is 1st December 2022 to 31st March 2023, 172 leavers were identified, 104 surveys were sent to staff still employed at the time of leavers report being sent and 31 staff members returned their surveys. 5 staff have been interviewed via the independent listening process.

Whilst the completion numbers are significantly higher than previously, there is more work planned to improve the timely sharing of leaver information so that the survey/ conversation can be offered before staff leave.

The feedback supports our plans to develop in the areas of career conversations/support with progression and targeted training and development to aid progression as well as improvements in engagement between staff and leaders across the organisation.

Overall, the responses were broadly in line with both the annual staff survey and the recent 'Let's Talk' sessions with our people. The key reasons for leaving being:

- Lack of development opportunities.
- Management support and capability.
- Fairness of processes.

Following the latest review of this feedback we will:

- Explore how the leavers form can be shared with the retention team earlier so they can send out the leavers survey before staff leave.
- Design and implement 'itchy feet' discussions, to allow staff to talk with someone if they are thinking of leaving but before they make the decision to do so.
- Develop guidance for managers to support them to have 'stay conversations' with their staff regularly, at 1;1s and appraisals and when in place to promote this widely starting with our Leadership Forum
- Incorporate data on leavers into a workforce data dashboard for the workforce function to use in discussion with services to drive improvements.

2.1.5 **Appraisals**

The appraisal system provides the opportunity for our people to have a meaningful conversation with their manager about all aspects of their work. This includes their health and wellbeing, current performance and future aspirations and training needs. This

supports our 'stay' strategy as it provides a solid platform for succession planning within our different service areas. The appraisal is essentially a listening conversation, ensuring that members of staff and line managers retain a clear understanding of what has been achieved, as well as a route map to future development.

2.1.6 Appraisal Policy

The Appraisal Policy is regularly reviewed and updated based on user feedback and was fully refreshed and relaunched in 2022. It supports a wide-ranging conversation led by the member of staff, in conjunction with their manager. The policy also outlines the key responsibilities of both sides and is supported by training for those involved.

2.1.7 Appraisal Documentation

It was most recently updated in April 2023, to include an opportunity for staff to agree with their manager protected time to be a member of our staff networks.

2.1.8 Management Supervision

In addition to an annual appraisal, all staff should have regular management supervision conversations. Health and well-being are now the first areas for discussion, and it prompts staff to discuss with their manager, them being released in work time, to be a member of staff networks. There are also links to intranet pages to help members of staff who may benefit from targeted support.

2.1.9 Evaluating the Quality of Appraisals

Since the last report, we continue to evaluate the experience of appraisal for our people in real time. Following their appraisal, the individual receives a link to an online evaluation tool.

Feedback was collected for the period from the beginning of October 2022 until March 2023. Based on responses from 293 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.

Key data for this period is as follows:

- 96% found their appraisal to be a positive experience.
- 98% Said it was a chance to express themselves openly.
- 79% said their appraisal made a positive difference to them in undertaking their role.

However, feedback on individual's appraisal experience is less positive in the annual staff survey and services are looking at how best to improve this through their local improvement plans.

2.1.10 **Partnership Working**

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

Close partnership working continues with our regular Joint Consultation and Negotiating Partnership meetings and our Medical and Dental Negotiating Group, with representatives from the management team, local union/professional body representatives and full-time union officers.

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.

2.1.11 **Potential Industrial Action**

Several unions have taken strike action in relation to the national NHS pay awards for 22/23 and 23/24. These cover both staff employed on agenda for change pay and conditions and those employed on medical and dental pay and conditions. 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.

We will continue with this approach as the RCN, UNITE and BMA ballot their members for further strike action.

3. **Programme 2 - Equality and Inclusion for All (NHS People Promise Domain – We are compassionate and inclusive; we are recognised and rewarded)**

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 stories and lived experiences.
- As part of the Armed Forces Covenant our ambition during 2023 is to move from Bronze to Silver accreditation from the Employers Recognition Scheme (ERS) and Veteran Aware by embedding activities such as employing and deploying Reserves. With the longer term plan gaining 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.

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 Committee.

4 **WORKFORCE DIVERSITY REPORTS AND OBJECTIVES**

4.1 **The Workforce Disability Equality Standards (WDES)**

4.1.1 **WDES Objectives 2022/23:**

Our 2022/23 WDES actions were.

- We will continue to seek to have a workforce at all pay bands and roles which is representative of our disabled workforce by:
 - Commissioning and rolling out Cultural Intelligence training across the Trust using a train-the-trainer model.
 - Continuing to offer career development sessions to all staff networks and wider by:
 - Relaunching our Diversity Mentor scheme.
 - Implementing our action plan following our review of No More Tick Boxes and If Your Face Fits.
 - Implementing mandating of having diverse recruitment panels as standard in all interviews.
 - Agree and set stretch Disparity reduction targets to be achieved over the next 3 years.
- Ensure that all recruitment panel members are trained in anti-discriminatory practice as part of their recruitment training.
- Promote internally the support available to managers and disabled staff to enable them to undertake roles:
 - My CCS Employment (Adjustments) Passport.
 - Flexible working options.
 - Remote working.
 - Long Term Conditions & Disability Network for staff.
 - Continue to seek to resolve all cases informally where possible.
- Implement the actions identified in the Trust self-assessment against the Violence Prevention Standards (violence and aggression from members of the public) via our Health & Safety Group.
- Support line Managers to have the skills to support staff via coaching, training packages and bite size sessions.
- Continue to offer career development sessions to all staff networks and wider.
- Relaunch Diversity Mentor Scheme.
- Continue to work with the Long-Term Conditions and Disability Network to learn from their experiences.
- Provide staff with regular up-to-date information to support the Trusts commitment to the diversity and inclusion of our workforce by promoting importance of staff declaring their diversity data (in ESR) by reminding staff of the positive actions we have then been able to take.
- Continue to work with the Long-Term Conditions and Disability Network to learn from their experiences.

4.2 **Workforce Race Equality Standards (WRES)**

Our 2022/23 WRES actions were:

- We will seek to have a workforce at all pay bands and roles which is representative of our BAME workforce by:
 - Commissioning and rolling out Cultural Intelligence training across the Trust using a train-the-trainer model.
 - Continuing to offer career development sessions to all staff networks and wider.
 - Implementing the CCS Action Plan following our review of No More Tick Boxes and If Your Face Fits.
 - Implementing mandating of having diverse recruitment panels as standard in all interviews.

- Agree and set stretch disparity reduction targets to be achieved over the next 5 years.
- Implement the Trust Action Plan following our review of No More Tick Boxes and If Your Face Fits.
- Implement mandating of having diverse recruitment panels as standard in all interviews by April 2023 all panels will consist of 3 diverse members with 1 of these being BAME.
- Provide staff with regular up-to-date information to support the Trusts commitment to the diversity and inclusion of our workforce by:
 - Reviewing, updating, and re-sharing our cultural awareness information.
 - Continue to promote and support 'See Me First Champions'.
 - Continue work/support developed by previously completed actions.
 - Continue ensure recruiting staff have been trained and to continue to deliver and update our recruitment training (anti-discriminatory practice).
 - Commission and begin the roll out Cultural Intelligence training across the Trust using a train-the-trainer model in 2023.
 - Ensuring we have sufficient trained Cultural Ambassadors and continuing to support them.
- Continue to offer career development sessions to all staff networks and wider by:
 - Provide training & development opportunities on the Training & Education intranet pages, including a BAME staff specific list of opportunities.
 - Actively participate in the planned Diversity and Inclusion work of our system partners for 2022/23 and with our Cultural Diversity Network to identify and share opportunities for development.
 - Relaunch Diversity Mentoring- training for Diversity Mentors will begin in January 2023.
- Implement the actions identified in the Trust self-assessment against the Violence Prevention Standards (violence and aggression from members of the public) led by the Health and Safety Group.
- Commissioning and rolling out Cultural Intelligence training across the Trust using a train-the-trainer model.
- Continue to work with the Cultural Diversity staff network to learn from their experiences, the population we service and the staff we employ.
- We will continue and widen our mentoring and reverse mentoring for Board members.
- Agree and set stretch disparity reduction targets to be achieved over the next 5 years.

WRES and WDES 2023

The Trust will report on its WRES and WDES data by 31 May 2023, and will also report WRES data for Banks Workers and Medical Staff , although in CCS we have always included medical staff in our reporting. Our associated action plans will be published by the national deadline date of 31 October 2023.

In the interim we continue to act upon our 2022/23 actions plans and the WRES and WDES questions in the 2022 staff opinion survey actions are being actioned already as part of our staff survey improvement plan.

4.3 **Gender Pay Gap Report**

Our 2021 gender pay gap data /report was published in July 2022 and presented to the People Participation Committee in August 2022. The actions that we will continue to focus on are:

- ensure senior roles are advertised with flexible working as an option to attract female applicants.
- offer the empowering female staff training '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, including reverse/diversity mentoring.
- work with young people to encourage more young men to enter NHS careers.
- Provide support for female medics in applying for CEAs.

Our 2023 Gender pay gap data was published in March 2023, and our updated report being finalised.

4.4 **If Your Face Fits / See Me First Review of Recruitment Practice**

As updated in the November 2022 and in response to national review, we have agreed the actions the Trust 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 which has been reviewed and updated with a key focus on the selection decision and anti-discriminatory practice. An action plan is in place to deliver these changes and is on track, with the first and most significant actions coming into effect on 1 April 2023, whereby all recruitment panels must have at least one panel members (staff or a service user) who is black or Asian.

4.4.1 **See Me First**

In May 2022, the Trust launched its See Me First Champion's Programme. Like other Trust champions roles, these champions are staff who have made a pledge to be allies for BAME colleagues and to be a safe person to talk to about any concerns BAME staff may have, or non BAME staff, who have concerns about how they have seen BAME colleagues being treated. They continue to act as a supportive friend and to signpost staff to other support as required.

4.4.2 **Neurodiversity**

We continue to implement our plan to create a working environment which support a neurodiverse workforce and to build into our support for both applicants and staff, a range of support measures which will include ,but is not be limited to, attracting applicants and making adjustment at recruitment stage, increasing awareness amongst managers and staff of neurodiversity, providing training for managers and reviewing policies to ensure they are supportive and accessible. We continue to develop this work and to report progress on our plan to the People Participation Committee.

Anti Racism Plan

4.4.3 To support the Trust's commitment to becoming an anti-racist organization, we signed up to the UNISON Anti-Racism Charter in May 2022 and are working on actions to implement this. Our action plan to deliver this is overseen by the People Participation Committee.

4.5 **Equality Delivery System 2022 (EDS22) – Workforce Objectives**

The 2022/23 local workforce and Organisational/Culture EDS Objectives were :

- To fully implement the actions identified following our review of the No More Tick Boxes review of potential bias in recruitment practices.
- The Trust Board will role model behaviours that support the Trust ambition to be an anti-racist organisation including actively implementing the Trust's and their personal anti racism pledges, to instill a sense of belonging for all our staff.

The No more tick boxes actions are well on track with full roll out during 2023. Trust board members continue to champion anti racism and role model behaviours and have committed with their personal pledges.

The Board agreed its EDS22, 2023/24 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

The objectives agreed for domains 2 and 3 are;

Domain 2: Workforce health and well-being

- To work with our Occupational Health providers to support staff to manage 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: Inclusive leadership

- 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.

Under Domain 2, we have begun discussions with our two occupational health providers and will publish information on our Live Life Well pages giving advice to staff affected by these conditions and will 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 which may include site visits or webinars.

As small group has been established, chaired by the Assistant Director for Organisational and System development, to support actions to address abuse from patients and service users and to feed into the health and safety committee. Managers, supported by the HR team will continue to act on any complaints made by staff about inappropriate behavior towards them by a colleague .

4.6 Staff Networks

Our three staff networks continue to meet regularly and a new fourth Carers network is currently being established. Our Menopause Cafes are also running. All provide feedback on lived experiences of staff which have led to improvements in our support offer to staff, most recently 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 and the promotion of staff using their e mail footer to state their preferred pronouns.

4.6.1 **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.

4.6.2 **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 looked into. The misuse of BAME representatives on recruitment panels continues to be an area fed back by the network, as does staff leaving due to the way they have been treated. The Trust's Future Talent Advisor is also running career development session for network members, and we have introduced a measure, to support our 'Being an Excellent Employer' objective, of ensuring that any BAME individual who chooses to leave the Trust is offered an exit interview with someone independent. Ashley Sumbhoolaul, Physiotherapist in our Dynamic Health Services has recently taken over chairing this network.

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

The group has invited guest speaks, most recently Lara Challinor Head of HR and Recruitment, to talk about the 2022 Staff Survey feedback. The group has been instrumental in supporting group has also initiated work by the corporate Governance Team to produce some guidance on best practice and etiquette in using Microsoft Teams and emails, following feedback that one downside of remote working and the use of Teams is that sometimes colleagues make Teams calls which interrupt meetings and or, an expectation that if you don't have a meeting in your diary you are 'free'. This guidance is intended to support the remote working policy. Also 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.

4.7 **Training**

4.7.1 **Cultural Competence Training**

Alongside other Trusts in the Cambridgeshire and Peterborough ICS, the trust has commissioned Above Difference to run a development programme on Cultural Competence. This will be rolled out starting with the board and senior leadership team with the aim of a train the trainer approach to wider roll out across the organisation.

4.7.2 **Mandatory Training**

We have reviewed our two mandatory training programmes and feel both are fit for purpose and they are supported by additional introduction to diversity and inclusion at induction. In addition, 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 roll out 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

user lived experience. We have identified two clinicians who work in this field as our subject matter experts to advise on this roll out.

4.7.3 **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 Committee.

Progress to date against this:

- Launched 60-minute bitesize session introducing Think QI model and approach.
- 4 masterclass sessions have been launched – Process Improvement, Numsense, People: The Heart of Change and Creativity Rules! All are 3-hour virtual sessions for anyone to gain a greater understanding of a particular improvement area.
- Commenced a refresh of our intranet site which includes more resources for colleagues to access independently.
- Introduced a new role to the team – QI Lead Coach role, increasing the use of coaching approach with teams to encourage ownership of change, build skills, knowledge, and confidence.
- Increased the use and analysis of data in understanding problems, using data science techniques like simulation modelling to understand the impact of changes. Recruiting another Data Scientist to the team in September.

5 **Living Our Values, Civility and Respect**

Our Assistant Director of Organisational Development continues to lead on the development across services on the importance of civility and respect and they have developed an evidence base 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.

6 **Programme 3: Retaining Our People – (NHS People Promise Domains - We are always learning, we are a team, we are recognised and rewarded)**

6.1 **Training and Development**

We offer a wide range of training and development, both in house and externally and we undertake an annual training needs analysis (TNA) that covers all our people.

We have developed a hybrid offer for our people, with some courses continuing to be delivered online, while some others have now started to take place face-to-face and several being a mix of both.

Delivery online through MS Teams has worked effectively in many instances especially for shorter sessions, for example coaching conversations and bitesize skills-based sessions such as time management and training for appraisers.

Where attendees get a benefit from networking together and sharing learning, face to face sessions will be used. We are doing this already for our internal Chrysalis leadership programme.

The following courses/sessions are currently offered by the Training & Development Team:

- Care Certificate (all modules)

- Chrysalis Leadership Programme
- Chrysalis Action Learning Sets
- Coaching and mentoring support
- Personal Development and Career Planning Workshop
- Diversity Mentors
- Induction
- Personal Resilience (Power Skills)
- Step On Up training for new leaders
- Amazing Managers new manager induction
- Time Management
- MS Teams Whiteboard
- Power-Point Presentations
- Chairing Meetings
- Appraisal training
- Diversity mentoring
- Coaching Conversations
- Training and Presentation Skills
- Group Myers-Briggs Type Indicators (MBTI) (Group and Individual)

We signpost people to training support and commission courses as required as well as delivering programmes ourselves. We also continue to support the Organisational Development and Quality Improvement Teams in delivering programmes to teams across the Trust.

A series of regular bite size people management sessions take place to support people managers on a range of topics. These sessions teach our managers the basic skills, techniques, and confidence to manage and lead people well and to know when to access professional HR support.

During 2023, we will be developing both a wider new line managers development programme and a programme for existing managers which will focus on equipping managers with the skills to lead teams effectively and in managing in challenging circumstances.

During the last six months, the team has run two sessions to train Diversity Mentors to work together with members of the Trust leadership group. This work is 1:1 and allows members of the Trust Board and wider executive to learn from the lived experience of staff members from diverse backgrounds. This will help them meet their own anti racism pledges and set the culture to support the organisation to achieve its anti-racism plan.

6.2 E-Learning and Electronic Staff Records (ESR)

ESR Manager and Employee ESR Self-Service is in place across all services. Managers and/or administrators with access have been trained to directly input sickness absence as the first part of a wider roll out of ESR functions to support managers to know their workforce data better and to use it in timely way.

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 and are monitored through our Clinical Operational Boards. 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.

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 roll out is managers self-service and this is currently being scoped.

The team are starting to record essential clinical training on individual staff competency profiles. This is underway with Luton Adult services. The aim being that the training record function within ESR will become the single place to record all training.

6.3 Professional Development

The Trust provides Continuing Professional Development (CPD) and supports essential for job role training for all clinical staff to deliver their roles safely and enable staff to develop professionally.

Services think creatively about the delivery of training to their teams and can request bespoke 'large groups/whole service' training and services working together across the Trust to support their teams to access large scale training along with staff requesting to attend external courses and requests for educational resources to provide in-house training where appropriate.

Following feedback from staff the study leave forms have been reviewed and updated to make them more concise and easier to complete and a 'group' study leave form is also now available to support the process for larger numbers.

The Trust recently reviewed and withdrew the High-Cost Learning contract, whereby staff may have been asked to repay for training should they decide to leave as this was proving a disincentive for some staff to develop in their careers and was difficult to apply fairly

The Trust was successful with bids to Health Education England (HEE) for Community Upskilling Funds across 2 of our 3 systems. In Cambridgeshire and Peterborough 4 services were able to access funding for training and in BLMK we were awarded £19k (50% of the cost) towards the delivery of the Brazelton Newborn Observation training. Feedback from this has been extremely positive, with staff identifying how it will support and improve the delivery of their practice as well as having positive outcomes for the families they work with.

Essential to job role training – our Clinical Educator and Placement Leads deliver facilitated Practice Supervisor and Practice Assessor training and updates for all NMC registrants to enable them to support students in practice. These sessions are well attended and receive positive feedback.

An annual report is presented to our Quality Improvement and Safety Committee each year which outlines all non-medical placements and CPD activity.

We continue to work with neighbouring trusts in providing a joint approach to support learners requiring work-based placements. We also have a robust shadowing/work experience process enabling school, college, health education students as well as those considering a change of carer to spend time in clinical and non-clinical areas to gain an understanding about 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.

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

The care certificate can now only be offered to staff in non-clinical roles who have patient contact as part of their role e.g., reception or conversations via telephone. The training team has reviewed delivery and assessment as part of the care certificate, and this is

currently being rolled out to ensure a timely uptake, greater pastoral support and earlier identification of any individual needing additional support.

Preceptorship

The national Preceptorship Framework (nursing and midwifery) was launched in September 2022 by NHS England to deliver standardised, high-quality preceptorship to all newly qualified nursing and midwifery staff. The Health Care Professional Council (HCPC) are still under consultation however this is being modelled on the nursing framework for allied health professionals.

The Professional Education Team has formulated a multi-professional preceptorship programme in line with the current national framework and the NMC principles. When the AHP framework is launched this will be incorporated into the Trust framework to deliver a fully multi-professional offer.

The Trust Multi-Professional Preceptorship package will provide:

- Twelve-month programme.
- Provides pastoral support designed to complement supervision, induction and clinical skills development already taking place in services.
- Preceptor training will be provided for staff post 12 months qualification in order to be able to support Preceptees (3-hour training).
- Preceptors receive 8 hours protected time towards Preceptor role (includes 3-hour training).
- Preceptees receive 1st 2 weeks in post supernumerary.
- Preceptees and Preceptors have 3 formal meetings Initial (2 weeks), midpoint (6 months) and end point (12 months)- paperwork to accompany these to explore development goals and support needs.
- Preceptees and Preceptors have 2 touch point contacts at 3 months and 9 months to keep in touch in between formal meetings (can be email or phone contact).
- Preceptees attend 6 half day facilitated sessions once per month in AM. PM session is time out of service to meet with preceptor, engage in PNA support, career development or peer forums towards preceptorship.
- There will be 3 cohorts per year in January, June and October to allow for annual leave and sickness. Preceptor support will begin in the first two weeks of beginning in post.
- Preceptor/ Preceptee register will be held centrally by Preceptorship Lead, this will be kept up to date through liaising with Preceptorship Champions within services and Preceptees.

This has been piloted with the internationally recruited nurses and 2 UK newly qualified nurses in Luton Adults district nursing service.

This will be managed centrally by the team and registers of preceptees, and preceptors will be held to collect data for reporting and for collating feedback as this will be an evolving offer whilst it is embedded.

6.4 Apprenticeships and Growing Our Own

Our apprenticeship numbers have continued to grow. Between 1 April 2022 and March 2023, we had 39 apprenticeship starts including apprenticeships in Nursing, Occupational Therapy, Speech and Language Therapy and Senior Leadership. 7 of those were new direct entry Business Administration apprentices who are studying the Level 2 Customer Service apprenticeship in Dynamic Health and Bedfordshire Childrens Services

Apprenticeships require the apprentices to spend at least 6 hours a week in learning, and sometimes much more time for clinical pathways. Covering the study time required remains a key challenge and is sometimes a barrier to manager's supporting existing staff to undertake apprenticeships. 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.

This year we launched a new apprenticeship called Data Citizen and so far, five members of staff have signed up. This apprenticeship will increase knowledge and skill in the use of data. One apprentice has also started the Data Analyst apprenticeship. We continue to investigate new apprenticeships and training providers across all services.

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 spending around 70% 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. We will continue to assess levy transfer requests as we receive them and will choose to support when the request is supporting our local health systems.

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. Staff can access functional skills classes through a range of local training providers, or a self-study option is now available using Basic and Key Skills Builder (BKSB) for assessment and learning and then Open Awards for the exams. This process is administered by the Training and Education Team and is funded by HEE until 2024.

The Training and Education Team continue to support widening participation work to promote NHS careers through our group of NHS Ambassadors. The NHS Ambassadors have taken part in mock interviews, careers fairs and SEND preparing for adulthood event.

We are currently investigating the routes for providing work experience for students with SEND and are in contact with Project Search and Project Choice. There is a growing interest in widening participation work from services.

The Trust currently has 71 staff undertaking apprenticeships, in both clinical and non-clinical roles.

6.4.1 Supporting Learners and working with Higher Education Institutions

Health care professionals undertaking training are the largest student group that come 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. Placement activity is calculated in hours as required by Health Education England and reported quarterly.

Clinical placement areas offer learners face-to face learning opportunities with a blended approach fitting with their service delivery models. Student feedback is received from the

National Education and Training Survey (NETS) as well as the 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.

The Professional Education 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.

January 2023 brought in the new cohort of Specialist Community Public Health Nurses (SCPHN – Health Visiting & School Nursing) students 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 started to recruit for September 2023 at UOH (Bedfordshire & Luton HCPs) and the process for recruiting to January 2024 will commence early June 2023.

This year to support recruitment we have agreed to offer a £1500 incentive to train to internal and external successful candidates in a bid to increase uptake of our commissions. Norfolk HCP has an active programme to support their SCPHNs to become dual trained to offer a 0-19 service and have recently moved their students from the University of Suffolk to Anglia Ruskin University as the University of Suffolk have withdrawn this module. The Trust is also supporting a number of staff nurses within our HCP services to access academic modules as part of their preparation to apply for the SCPHN course in the future.

Luton Adults did not fill their commissioned places for district nursing in January 2023 and recruitment for January 2024 will commence with the SCPHN recruitment in June 2023.

Children's Community Specialist Nursing services across Bedfordshire, Luton and Cambridgeshire recruited one student (internal secondment) between them for the PgDip Specialist Community Nursing course and they started in September 2023. Following the success of our initial Practice Education Facilitator (PEF) role secondment we continue to explore funding routes to recruit to a PEF role in future to continue and build on supporting services to provide high quality learning environments and to be able to slowly increase placement capacity.

Our first NMC and HCPC professionals undertaking their Return to Practice (RtP) have successfully completed the process and been able to register with the required governing body – 1 physiotherapist and 1 SCPHN have remained with the Trust and 1 SCPHN has registered with the NMC but decided to move to an organisation closer to her geographically. We now have a process for advertising for nurses/SCPHNs wishing to return to the register and are in the process of recruiting for the September 2023 cohort. We are also contacted by the regional RtP lead from HEE as and when requests appropriate for CCS arise to see if we can support and we continue to offer both the employer led route as well as student led placement only.

The Trust is part of three Nursing Associate Partnerships:

- Bedfordshire Nursing Associate Partnership Board (NAPB) – BLMK.
- Cambridgeshire & Peterborough Nursing Associate Partnership Board.
- Norfolk and Waveney Nursing Associate Partnership Board.

- We are also exploring the need to join with the Suffolk Nursing Associate partnership as we have requests apprentices to start attending UOS.

6.5 **Medical Staff Development**

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. Work is ongoing to promote Genitourinary Medicine locally (see below).

Covid-19 recovery – We ran a successful Medical Educator Faculty Day in February to support our clinical and educational supervisors, focusing on resilience and support of trainees and trainers and updates on HEE EoE faculty development. We also purchased licenses for interactive teaching tools which are being promoted more widely for other staff groups within the trust.

Staff Grade Associate and Specialty Doctors (SAS) – Our SAS tutor has now run two face-to-face events with further events planned (both virtual and face to face). Specific funding for this staff group is now embedded in Trust finances and work is ongoing to develop application procedures for relevant staff. Unfortunately, we were unable to undertake a sub analysis of staff feedback for SAS doctors within the trust due to small numbers of responses.

Higher Specialist training

Our Junior Doctors' forum has resumed, and we have clarified arrangements with the Guardians of Safe Working for both the Trust and North West Anglia NHS Foundation Trust for our Paediatric trainees and are looking at the on-call elements of the posts to further support integration of trainees in the acute paediatric team. Due to small numbers of trainees, we did not receive any feedback from the National Education and Training (NET) survey.

Community Paediatrics: We continue to provide posts at Cambridge and Huntingdon and for trainees based at Luton and Dunstable and Bedford Hospitals. Work remains ongoing on agreement of contractual arrangements for trainees between the trusts in Bedfordshire.

iCaSH: Both of our higher specialist training posts in Genitourinary (GU) Medicine remain vacant and national recruitment remains challenging. In the interim we have agreed a temporary reallocation of one post to Community Sexual and Reproductive Health (CSRH) until one of the current incumbents completes training, and the other post is temporarily being used for Internal Medicine training to promote the specialty to trainees with an interest. Promotional activities are planned to include a taster event in the East of England (supported by HEE EoE) and medical careers information in the Trust website. The lack of trainees locally could impact on succession planning within iCaSH.

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 two GP trainees who are attached part time to Community Paediatrics in Cambridge will be reviewed when the current clinical supervisor steps down, and we continue to have one post in Huntingdon the initial issues raised in the GMC survey from 2022 were found to relate to the General Practice element of the posts.

We have two foundation trainees working within Community Paediatrics in Bedford and requests for expansion of posts. There is interest within iCaSH in the development of future Foundation posts to promote GU Medicine. We support undergraduate medical training from a range of HEI's:

University of East Anglia (UEA)

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 increase to 194 for 2022-2023. The change to delivery of clinical experience has been positively evaluated.

University of Cambridge (UoC)

The Trust has applied for Teaching Partner/Affiliated Hospital Status

- iCaSH: Additional sexual health training and resources have been developed by UoC Primary care team with input from iCaSH, and an initial half day of training was run in August and is being reviewed. We have had further meetings about creating students' placements within iCaSH and work is in progress with a view to students starting in the next academic year.
- 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 support for research projects.

University of Buckingham Medical School

We have been approached to restart medical student attachments in Milton Keynes.

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.

7 Programmes 3 and 4. Retaining our people and maximising our recruitment and supply opportunities (NHS People Promise domains We work flexibly; we are a team)

7.1 ATTRACTING STAFF

The Trust recruited 230 substantive and 23 bank staff between 1 October 2022 and 31 March 2023 (excluding LSV and rehires)

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.

To attract and retain staff, several local Recruitment and Retention Premia (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

roles in a locality. Where these are in place, they are paid to both newly recruited and current staff working in those roles in that locality.

RRPs were recently reviewed, and the outcome of that review is detailed below:

- **Health Visitors in Luton** – to continue with the RRP for a further 12 months.
- **School Nurses in Luton** – to continue with the RRP for a further 12 months.
- **Health Visitors in Wisbech** – to continue with the RRP for a further 12 months.
- **Audiology in Luton** – to continue with the RRP for a further 12 months.
- **Band 6 Health Visitors in Cambridge City and Doddington** – RRP extended to cover these roles.
- **School Nurses and Health Visitors** in the Norfolk Healthy Child Programme (HCP) East Locality.
- **Band 6 and below staff** in the HCP Just One Number Single Point of Access.

Flexible working/job share continue 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. TRAC and the Recruitment Team are utilising 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.

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, reduction 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 are from a visibly Black or Asian heritage Shortlisting should be completed independently, to prevent panel members 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 of the same colleagues (or PIP) as at shortlisting, all having an equal say during the interview process.

We have a detailed action plan in place to deliver the above and this is shared through our People Participation Committee, which includes utilisation of ESR's Applicant Dashboard

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

Sexual health services support General Practitioners (GPs) in training, and this can provide a source of future GPs with special interest to provide sessional work for us.

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.

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.

Both MS Teams and telephone interviewing has been used successfully during the pandemic and a blended approach will continue.

Detailed recruitment plans in place for 0-19 Healthy Child Programme roles across the Trust. This includes more proactive advertising on social media and vimeo's promoting these careers. Recruitment into our 0-19 services remains a key focus for the Trust.

7.1.2 International Recruitment

Luton Adult services have struggled to recruit and retain Band 5 staff however have successfully recruited 15 oversea nurses in the past year.

The first cohort of six international recruits arrived in September, a further cohort of six arrived in November 2022 and the 3rd cohort arrived in March 2023. Learning from these cohorts is being used to shape future cohorts and focuses on a trust wide model for pastoral support, timely access to competency assessment models and agile financial systems.

The Trust has recently been granted further funding to recruit 8 international nurses to work in the healthy Child Programmes as staff nurses with a view to them progressing to undertake the SCPHN course and we will be working in partnership with the Primary Care Network in Luton and Bedfordshire to recruit 6 nurses to work with them. These nurses will be recruited before the end of November 2023.

International recruitment is now a recognised strand of recruitment for healthcare staff to the NHS. NHS Employers have produced a toolkit to support NHS Trusts to recruit and retain international staff <https://www.nhsemployers.org/publications/international-recruitment-toolkit>

7.1.3 Recruitment from Overseas via Job Adverts

Through our normal recruitment processes via NHS Jobs/TRAC we have 14 overseas candidates currently in the recruitment cycle and we will be applying the learning from the Luton cohort to support both onboarding and support for candidates. In addition, we have appointed four international physiotherapists.

We currently have 12 international applicants for the SCPH training advert for Bedfordshire & Luton HCPs who are not able to be shortlisted as they do not have current NMS registrations and need to be in the country for a year before they can access the course. However, they may be signposted to the future HCP staff nurse roles we will be recruiting to.

7.2 Professional and Pastoral Support

Our Retention Team will provide future pastoral support to our international recruits, and we will ensure that professional support is identified as appropriate. This will be in line with national best practice to help shape our offer to overseas candidates.

A learning exercise will take place by the end of May between the retention team and colleagues involved in international recruitment from Luton Adults to understand end to end process and where appropriate, develop a Trust wide consistent process. In addition, we will develop a bank of information/FAQs based on issues raised from previous cohorts, such as accommodation, finance, driving in the UK and development opportunities.

This will include all aspects of support from advert for 12 months and will cover both formal and informal elements.

A self-directed peer support group will be formed to provide help, assistance, encouragement and feedback for our internationally recruited colleagues.

The Trust will apply 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 CCS to have our work recognised demonstrates our commitment to supporting internationally educated nurses and midwives at every stage of recruitment and beyond.

Our programme for professional and pastoral support includes:

- Meet and greet at the airport.
- Provision of free accommodation for at least the first two months.
- Welcome pack which includes bedding, cooking utensils, basic foods.
- Orientation and connection to the local community including banking, GP services, transport arrangements, community networks, shops, understanding the geography, support with finding more permanent accommodation.
- Financial support – Costs we will cover include visa application; flight to UK (up to £600); £1,000 welcome on arrival.
- Driving familiarisation and access to a pool car for work purposes.
- Professional Development – Fully funded OSCE training and test culturally appropriate 12 month preceptorship programme after OSCE.
- Career Development support after preceptorship.
- Relocation assistance

7.3 Strategic Workforce Planning

Following the review of the Trusts approach to workforce planning in August 2022 and the completion of an 18-week Masterclass Programme on Workforce Planning for a multi professional team (which included representation from service, improvement and transformation, workforce intelligence and recruitment and resourcing) we have set out our approach to workforce planning which focuses on:

- Explore any changes to the service 1-3 years (linked to the findings from the Demand and Capacity modelling being undertaken in services)
- Review the impact this will have on demand and supply of staff.
- Agree staffing priorities for the next (1yrs +)

Workforce profiles have been completed for each service, which include the following:

- Demographics – age, ethnicity, gender, disability
- Skill mix (bands) - seniority
- Leavers – turnover by age, band, staff group, reason, and “learning from leavers “survey intelligence.
- Bank and Agency usage
- Use of Volunteers within services
- Any available qualitative data – exit interviews, staff survey results etc.
- Assumptions on supply: international recruitment, flow relating to newly qualified, (via HEE Supply modelling tools), Apprenticeships, trend data from specialised commissions (last two years) etc.

During the last quarter of 2022/23 Workforce Planning meetings have been undertaken within each service. The emerging priorities have been aligned to each service plan and priorities for the next 1-3 years and have been used to help inform investment into education and training needs during 2023/24. Emerging workforce priorities include:

- More targeted and scalable approaches to growing our own staff through work experience, health ambassadors, care certificate, apprenticeships, nursing associate, flexible degree pathways, community nursing training pathways etc.
- With circa 50% of our workforce being below their earliest retirement age in ten years' time retaining these staff will be critical as well as supporting those that are due to retire consider flexible working arrangements to retain their skills, knowledge and experience to support our diverse range of learners and trainees (i.e., our future staff).
- Increase the development opportunities for our experienced workforce, including enhanced, advanced and specialist practice levels and commissioning education pathways with local higher education providers to meet these needs.
- Increasing the number of volunteer and peer experience roles within our services.
- More targeted international recruitment campaigns during 2023/24 to include District Nurses, Children's Nurses and Staff Nurses. In addition to join collaborations/ pilots with both Primary Care and Care Homes.
- Undertaking workforce modelling within services where we know we will be taking a lead provider role in order to better prepare now for more collaborative workforce models.

During quarter 1 of 2023/24 the strategic workforce planning lead will work with services to revisit their workforce planning discussions and to support them to translate their staffing priorities into their service level 3-year plans.

7.4 Temporary Staffing Service

7.4.1 In January 2023, the Trust established its Temporary Staffing Service which along with the roll out of eRostering, will centralise the recruitment, deployment and compliance of an administration workers bank and the booking of admin and clinical Agency workers Trust wide. Roll out across more disciplines continues.

7.5 The Trust transferred its service as Lead Provider role for Large Scale Vaccination (covering Cambridgeshire, Peterborough, Norfolk and Waveney) to Hertfordshire Community Services on 30th March. This included the safe transfer of employment of the 47 staff working in the services. In addition, circa 500 bank workers have asked to remain on the Trusts Bank (registered health care practitioners, administrators trained vaccinators) and are available to work in services as required.

7.6 WORKFORCE MODELLING

The" Allocate "staff rostering system has been rolled out within support services and Luton Adults teams and a Trust-wide plan is in place for further roll out across the Trust with the aim to have this fully rolled this out by October 2023.

8 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)

8.1.1 Flexible Retirements/Retire and Return

The Trust continues to offer flexible retirement as an alternative to staff retiring completely. 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. This is available on request and is accommodated wherever possible and supports the retention of knowledge and skills whilst freeing up roles for progression for other staff. 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.

Changes the NHS pension schemes from April 2023, will hopefully support staff to retire and return as they can now continue to pay into the new pension scheme whilst being retired from the older schemes.

8.2 Staff Health, Wellbeing and Attendance

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. It should be noted that in many instances individual's sickness absence reasons relate to things going on outside of work.

8.2.1 Supporting our Staff to Maximise their Health and Wellbeing

The Trust's overall level for 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. We are linking with other Trust's to understand their processes and will look to bring back any areas of good practice into our approach.

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 has been reviewed and significantly changed, so that it is more user friendly, non-judgmental, and supportive.

Supporting the mental wellbeing 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.

Feedback from staff has informed our mental wellbeing support offer to staff. 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.

The Trust's Emotional Health and Wellbeing Team and Clinical Psychologists offered some additional support at the height of the pandemic, and we now widely promote the support available from our ICS level 'Hubs' which offer psychological support to all staff.

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.

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 rises including:

- Continuing with our relationship with our financial support provider who offer 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 temporarily removed the 3500 business milage cut off for the higher rate.
- We have introduced a financial assistance fund, open to all staff to apply for a non-repayable grant up to £1000, to help with severe financial hardship.
- The Trust hosted a visit from members of the NHS Pay Review Body, for them to talk with unions and staff to help inform the 2023, pay recommendations.

Our occupational health providers offer a comprehensive occupational health services and Employee Assistance Programme (EAP) offering a comprehensive wellbeing assessment that staff or their families can take at any time.

8.2.2 Live Life Well Programme

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 show casing our offer and positive actions by staff. Our most recent newsletter focused on the current cost of living pressures.
- Promoting 'pass it forwards' and acts of kindness as a way to promote wellbeing.
- Continuing to promote personalised approaches to managing attendance and flexible working requests and a support offer for staff with their financial wellbeing.
- Promotion of the wellbeing 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 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 the 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.

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

8.2.3 Wellbeing Guardian

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

Through this update and through the Staff Opinion Survey and Live Life Well action plans we are able to give assurance, via the Health and Wellbeing Guardian to the Board, that we have the wellbeing of staff as core to the organisation. The Health and Wellbeing Guardian's 9 principles are:

1. The health and wellbeing of NHS people will not be compromised by the work they do.
2. The Board and guardian will check the wellbeing of any staff member exposed to distressing clinical events.
3. All new staff will receive a wellbeing induction.
4. The NHS people will have ready access to self-referral and confidential occupational health services.
5. Death by suicide of NHS people will be independently examined.
6. The NHS will ensure a supportive safe environment to promote psychological, and physical wellbeing.
7. The NHS will protect the culture and spiritual needs of its people, ensuring appropriate support is in place for overseas NHS people.
8. Necessary adjustments for nine groups under the equality act 2021 will be made.
9. The wellbeing guardian will suitably challenge the Board.

We have mapped with our Guardian the evidence that we have in place across the Trust to meet each of the above principles.

In addition to our in-house stepped offer to support psychological wellbeing during the pandemic, the Trust continues to signpost staff to offers of support both locally and nationally, which are ongoing and include the National NHS help line 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.

Throughout the pandemic several services have run online support sessions including eleven fitness classes and twenty-eight session of 15 Minutes of Mindfulness. Yoga, Zumba, whole body office-based exercises, stretching and mobility and Pilate's sessions have also been made available for staff to view online. These have been re-publicised to staff to access via links on the Intranet.

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 which some staff will need more support than other with.

8.2.4 Coaching Support Programme

To maximise performance and to support 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.

9 Recommendation

The Board is asked to:

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