

REPORT TO THE TRUST BOARD IN PUBLIC
23 SEPTEMBER 2021

Title	Progress Report ELFT People Plan
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Purpose of the report

The purpose of the report is to update the Trust Board on the progress against the ELFT People Plan and to provide the board with assurance in terms of the areas of concerns, mitigating actions and progress across some people metrics. A new KPI dashboard which gives a snapshot across all People metrics at a point in time is being developed and will be reported at the next board.

The purpose of the report is also to update the Board on the recent NHS England submissions for the Workforce Race Equality Standards (WRES) and Workforce Disability Standards (WDES) submissions made at the end of August 2021. This paper also provides assurance in terms of the general activities of the People & Culture department.

Committees/meetings where this item has been considered

Date	Appointments and Remuneration Committee
-	Appointments and Remuneration Committee not held in September 2021.

Key messages

ELFT are still the lead employer for mass vaccination for North East London. In terms of support for COVID-19 19 from 1st of September the testing programme will move into universal system where staff will be required to order their own kits via a dedicated NHSE portal; Trusts will no longer be able to order and stock staff lateral flow devices. ELFT will continue using already established result reporting system to ensure we have an oversight of the testing compliance and are able to provide support locally when required. Staff with COVID-19 symptoms are required to access test via national NHS testing service.

Since the start of the asymptomatic staff testing programme in November 2020, the trust received and distributed around 16,000 lateral flow kits.

Arrangements are being finalised for the Annual Staff Awards ceremony to be held on 21 October 2021 at the Troxy theatre.

Freedom to Speak Up Guardian

There has been an increase in reporting in this reporting period in comparison to the last reporting period. The increase in patient safety/ quality is directly relating to staffing level and its impact on patient care and staff's ability to manage caseload or provide quality care.

'Worker safety' has been added as a category by the National Guardian Office as of July 2021 (in addition to the existing 'patient safety/quality' and 'bullying and harassment' categories). The term 'detriment' has been replaced with 'disadvantageous and/or demeaning treatment', though the term detriment is still used in brackets to avoid any confusion. (The definitions for various categories have been updated for added clarity.)

The total number of themes doesn't always correspond with the total number of staff raising concern, one staff concern can relate to multiple themes.

There are currently 10 live organisational changes across the Trust – a decrease from 20 since the last report. The reasons for the organisational changes are due to service redesign/reconfiguration and changes to ways of working. There are 178.2 staff affected, which has increased from 168.2 staff since the last report. These changes are placing 4.5 staff at risk of redundancy resulting in 1 actual redundancy.

What is going well?

The Trust have been successful in acquiring the 'Excellence' award from the Mayor's London Health Workplace Award (LHWA). The awards ceremony for the Healthcare People Managers Award (HPMA) takes place on 7 October 2021. ELFT are finalists for the Capsticks award for innovation for the online learning for children. ELFT are also shortlisted for the NHS Communicate Awards hosted by NHS Providers and NHS Confederation award for the Twitter campaign as part of the Race and Privilege project #MyNameReallyIs. The awards ceremony is on 16 September 2021.

The Workforce Race Equality Standards (WRES) and Workforce Disability Equality Standards (WDES) submissions have been made and there has been progress, and the Trust are ahead of the model employer targets in terms of representation from Black, Asian, Minority communities in some senior bands.

What is a concern?

The People & Culture team, are working well. There are a number of concerns around the Resourcing team specifically around the timeliness of recruitment. This is occurring in pockets across the Trust. We are in the process of recruiting additional temporary resources as this issue is likely to be exacerbated due to the additional demand created by the additional monies within mental health. We are also in the process of compiling a business case for additional permanent resources.

Resourcing Team

The Recruitment and Retention meeting has been restructured so that more focus can be applied in terms of recruitment gaps and high agency usage. A meeting is being scheduled with the Resourcing team to ascertain more detail about the challenges. In addition, this an agenda item for the Service Delivery Board on 22 September 2021.

Employee Relations

Activity remains high. We have settled two Employment Tribunal cases since the last report. Since March 2021 we have consistently had 5 suspensions, this has reduced to 1 in August 2021. 14 cases were closed in August. A previous concern has been raised in relation to three Employment Tribunal cases – arrangements are being made for the Trust solicitors to attend a Chief Executive Discussion group to discuss the themes and the learning to avoid such issues in future. This has been delayed due to the solicitor's availability and the meeting may take place in October 2021.

Further analysis was undertaken on disciplinary cases, focusing on band 6 disciplinary cases, as this group was a cause for concern.

Staff Vaccination

There is also concerns around the requirement to have staff who visit care homes, and also staff within the community to be fully vaccinated by November 2021. The Trust continue to try to achieve what is required exhibiting our values.

Statutory and Mandatory Training

Compliance has increased slightly from 85% in July 2021 to 85.98% in September 2021. The trajectory is to reach 90% by December 2021.

Disclosure and Barring Service (DBS) Checks.

In March 2020, the extension to re-check period was increased from three to four years, due to COVID-19, which has resulted in a backlog of DBS rechecks. In addition, there are between 300 and 500 DBS checks requiring renewal each month alongside processing new starters. We are working to clear the back log and have prioritised all clinical areas. We reverted to three-yearly checks on 1 July 2021.

A 6 month trajectory was agreed on 25 June and we anticipate clearing the backlog by 25 December 2021 by increasing the resources non-recurrently. Datix reports have been completed and this has been reported to the Appointments and Remuneration Committee and included on the Board Assurance Framework (BAF). Weekly reporting is also in place to keep track of the progress and to update the trajectory.

Strategic priorities this paper supports

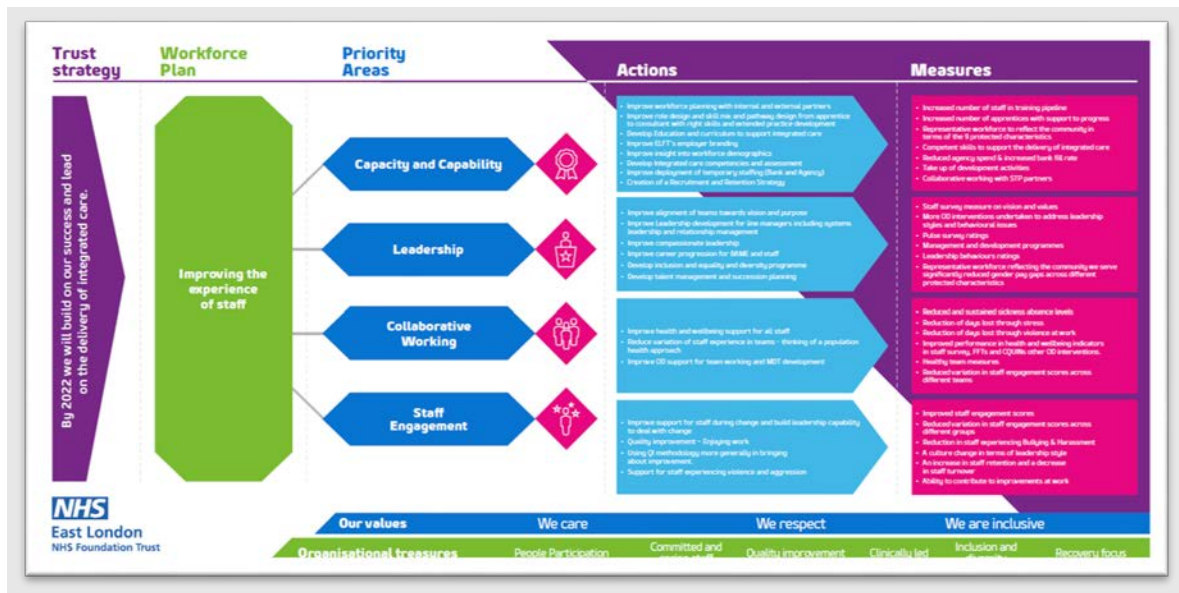
Improved population health outcomes	<input checked="" type="checkbox"/>	We have taken a population health approach to our staff wellbeing as many members of staff live and or work within the boroughs that we provide services in.
Improved experience of care	<input checked="" type="checkbox"/>	Research shows that if staff are engaged then they will be able to provide better care to patients and service users.
Improved staff experience	<input checked="" type="checkbox"/>	The approach to improvement sets out in this paper are designed to directly improve staff experience.
Improved value	<input checked="" type="checkbox"/>	There is a strong evidence base that engaged staff and more health and productive at work and, therefore, contribute to value for money

Implications

Equality Analysis	The Trust's action plan is designed to improve equality through the reduction in variation between different staff groups.
Risk and Assurance	If staff are not engaged at work, there is a clear risk that patient care will be adversely affected.
Service User/ Carer/Staff	As above, the work in this area is designed to improve staff experience. Evidence shows a clear link between staff experience and patient care.
Financial	Evidence shows that high staff engagement is strongly correlated with low sickness absence levels, which has a financial benefit to the Trust.
Quality	Evidence shows a clear link between staff satisfaction and patient care.

1. Background

- 1.1 Delivery of the Trust people plan (formally the Workforce plan) continues to progress well. Plans are being made for the refresh of the ELFT People Plan to support the Trust Refreshed Strategy.



1.2 This paper sets out to provide assurance as well as a progress report on the delivery against the People Plan. The Trust's four key priorities are:

- Improved Population Health Outcomes;
- Improved Experience of Care;
- Improved Staff Experience;
- Improved Value.

2. COVID-19

2.1 People & Culture Silver command meetings have been now cancelled. COVID-19 Ops and Mass Vaccination project team continues to focus on staff testing and staff vaccination programmes. Risk assessments will be absorbed back into HR Business Partners team.

3. Large Scale Vaccination Sites – North East London (NEL) Lead Employer

3.1 ELFT is the lead employer for large vaccination sites for NEL Integrated Care system which focuses on deploying staff across North East London. These include Homerton University Hospital (HUFT), Barking, Havering and Redbridge University NHS Trust (BHRUT), North East London NHS Foundation Trust (NELFT) and East London Foundation Trust (ELFT). Barts Health NHS Foundation Trust are excluded as they are responsible for staffing The Street vaccination site at Westfield.

ELFT lead employer programme team is currently preparing for the phase 3 vaccination programme which will include COVID-19 booster programme, all 16-17 and 12-15 year olds vaccination programme. We anticipate a significant impact of the 12 -15 year olds vaccination programme on the lead employer workforce pool due to substantial shortages of resources within the education system. Workforce planning discussions and arrangements are taking place within NEL. The future of the Westfield One vaccination site has not yet been confirmed. The site has significantly reduced its staffing levels due to a very low number of patients coming through.

The team continues to produce regular fortnightly executive report which focuses on updates, developments and activities on the programme.

Staff testing

- 3.2 Currently all asymptomatic ELFT staff have access to a regular twice-weekly lateral flow testing programme/ From 1st of September the testing programme will move into universal system where staff will be required to order their own kits via dedicated NHSE portal; Trusts will no longer be able to order and stock staff lateral flow devices. ELFT will continue using already established result reporting system to ensure we have an oversight of the testing compliance and are able to provide support locally when required. Staff with COVID-19 symptoms are required to access a test via national NHS testing service.
- 3.3 Since the start of the asymptomatic staff testing programme in November 2020, the trust received and distributed circa 16,000 lateral flow kits.
- 3.4 A pilot for saliva based LAMP (loop-mediated amplification (LAMP) technology) testing is currently taking place across NEL, prioritising staff who regularly visit care homes as part of their work. The pilot is coming to an end and has been taking place primarily in Tower Hamlets and Newham Community Health Services, and Community Learning Disability Service. It is anticipated that LAMP programme will be gradually extended to wider services across the trust.
- 3.5 As part of the LAMP project, East London Foundation Trust is also piloting LAMP testing for service users and patients who have a Learning Disability (LD), who are requiring a negative COVID-19 test prior to accessing respite services. To date fifteen patients have accessed the LAMP programme. An interim report on the pilot for patients with LD is currently in development for the submission to Department of Health. A full report is expected after the pilot phase finishes in October.

4. Staff vaccinations for COVID-19

- 4.1. Staff vaccination continues to take place with staff being able to access services at Westfield vaccination site in London and in Luton and Bedfordshire via a dedicated CCG route. 87% of front line staff have had their first dose and 85% have received their second dose.
- 4.2. NHSE has introduced new government regulations that come into force on 11 November 2021. It requires care home staff to refuse entry to anybody who cannot provide evidence that they have had two doses of a Medicines and Healthcare products Regulatory Authority (MHRA) approved COVID-19 vaccine, or that they come within a specified exemption. This applies to all Care Quality Commission (CQC) regulated care homes providing nursing or personal care in England. We are encouraging unvaccinated staff to receive their first vaccination prior to 16 September 2021 – staff entering care homes will need to have received their first vaccine by this deadline in order to be fully vaccinated before 11 November. A Task and Finish Group has been organised and is led by the Trust Executives and takes place weekly to ensure certain and directive actions taken place.

5. Communications

- 5.1. We continue to update our staff with communications related to ELFT's provision for staff during the pandemic. These updates reflect and relate to the developments in the wider environment as the country emerges from lockdown, as well as changes to some

of the arrangements that we put in place for staff at the start of the pandemic. We are seeking to reflect upon and learn from ELFT’s experience of supporting and protecting staff through the pandemic. We want to understand how we can best strengthen and build on this for the future.

6. Staff Awards Ceremony

- 6.1. After much deliberation as to whether or not to proceed with a face to face award ceremony, the Annual Staff Awards planned for 21 October will proceed. Advice has been sought from the Infection Prevention Control team in order to run the event as safely as possible.

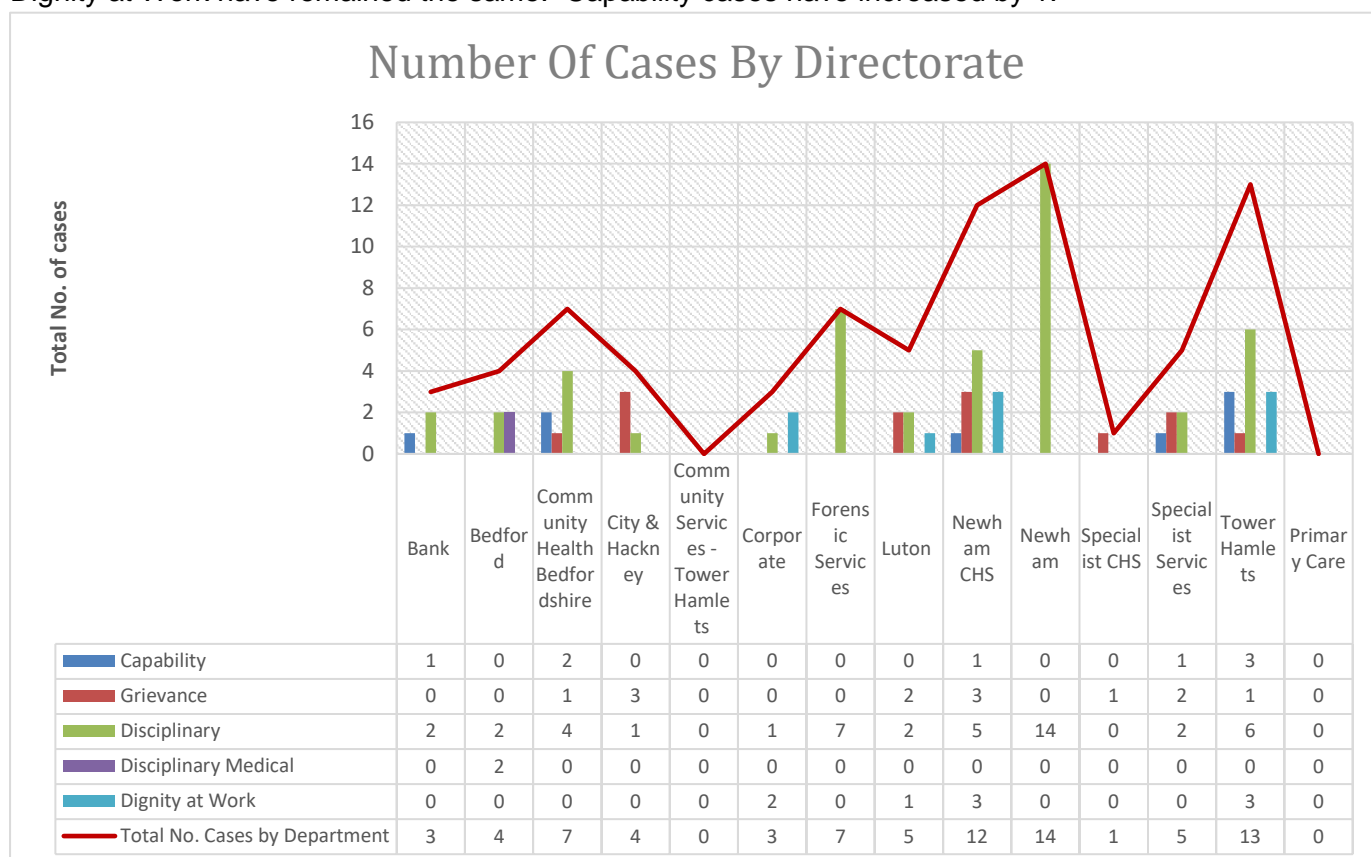
7. Employee Relations Activity Report –August 2021

- 7.1. In total, there are: 88 live ER cases plus 10 Employment Tribunal cases, 1 ACAS, 155 long-term sickness cases, (This figure does not include long term COVID19 cases which are being managed informally) and 237 short-term sickness cases being managed by the People Relations team.

ER Case Breakdown by Month

Case Type	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June	July	Aug
Capability	11	11	11	10	10	10	10	10	9	9	10	7	8
Dignity at Work	12	13	14	20	15	16	12	14	11	6	7	9	9
Disciplinary	41	41	38	36	40	40	55	53	49	51	53	47	46
Disciplinary (Medical)	1	1	1	1	1	1	1	2	1	2	3	2	2
Grievance	21	21	20	23	20	18	14	13	14	9	11	13	13
Tribunals	9	8	11	10	10	10	11	8	9	9	9	10	10
Total	95	96	95	100	95	95	103	100	93	86	93	88	88

The number of Disciplinary cases has reduced by 1, Medical disciplinary cases, Grievances & Dignity at Work have remained the same. Capability cases have increased by 1.



Average duration of open cases

Case Type	Jan (Days)	Feb (Days)	Mar (Days)	Apr (Days)	May (Days)	June (Days)	July (Days)	August (Days)
Dignity at Work	150	136	131	216	168	118	92	86
Disciplinary	115	102	116	124	111	118	113	115
Grievances	188	161	122	164	130	247	168	152

Allegation Type

Analysis has been done on the range of allegations that are at a formal stage of the Disciplinary process. The top 3 fall into the following:

Allegation Type	Number
Unauthorised absence	7
Negligent Behaviour	4
Breach of Confidentiality	5

Number of suspensions per month

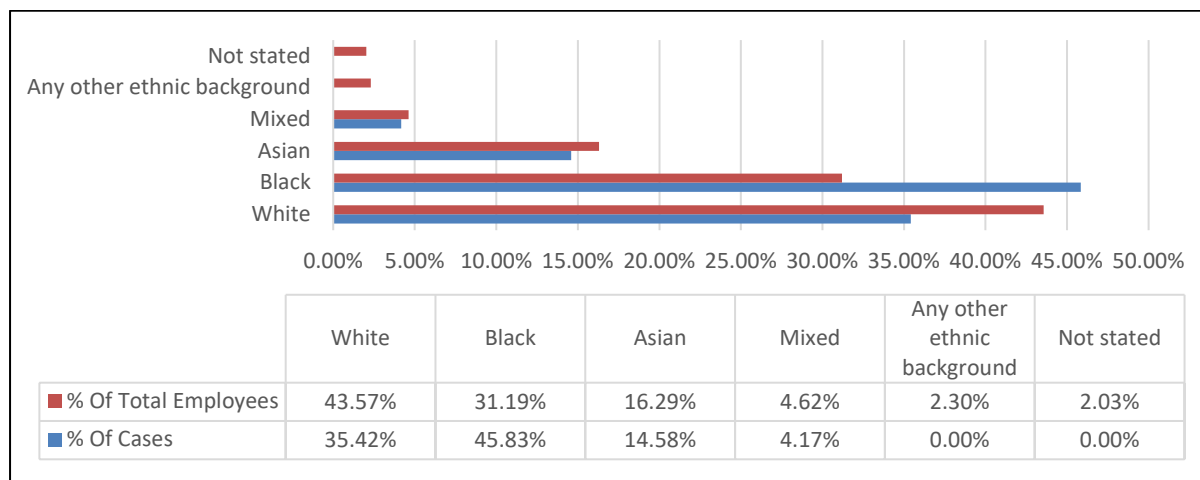
June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug
2	1	1	1	2	2	2	4	4	5	5	5	5	5	1

At present there is 1 employee suspended for an allegation of theft.

Number of People on Restricted duties per month

Nov	Dec	Jan	Feb	Mar	April	May	June	July	Aug
11	11	10	11	12	N/A	2	2	2	2

Comparison of Ethnicity of Open Disciplinary cases with the Ethnic split of Trust



Appeals

The Trust has 7 live appeals.

8. Closed cases

14 ER cases closed in August

Case Type	Total No. of closed cases for Oct	Total No. of closed cases for Nov	Total No. of closed cases for Dec	Total No. of closed cases for Jan	Total No. of closed cases for Feb	Total No. of closed cases for Mar	Total No. of closed cases for Apr	Total No. of closed cases for May	Total No. of closed cases for June	Total No. of closed cases for July	Total No. of closed cases for August
Capability	0	1	1	1	0	1	1	2	0	2	3
Dignity at Work	1	1	4	1	3	4	3	4	2	1	1
Disciplinary	9	10	7	4	4	12	16	13	9	9	14
Grievance	1	3	3	4	5	1	6	3	0	2	2
Total:	11	15	15	10	12	18	26	22	11	14	20

9. Summary of Employment Tribunal cases

9.1. There are currently 10 ET's since we reported to the last Board –

- one ET has reached a settlement and has received Treasury approval
- one is on hold due to the claimant being ill, noting that an application has been submitted to strike the claim out
- The Trust has received one new ET case

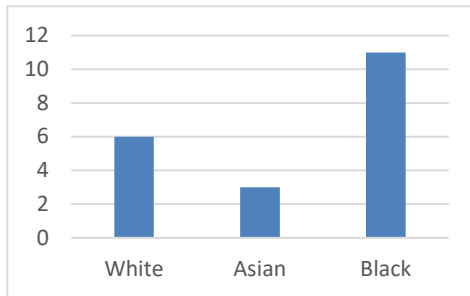
- Two further Settlements are pending that require COT3 Agreements, (which are legally binding documents signed via the Advisory Conciliation and Arbitration service (ACAS) Which are waiting to be signed by Claimants.

10. Disclosure and Barring Checks

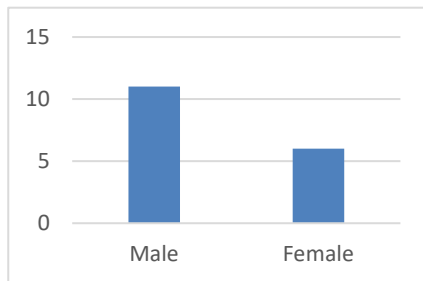
- 10.1. In March 2020, the extension to re-check period was increased from three to four years, due to COVID-19, which has resulted in a backlog of DBS rechecks. In addition, there are between 300 and 500 DBS checks requiring renewal each month alongside processing new starters. We are working to clear the back log and have prioritised all clinical areas. We reverted to three-yearly checks on 1 July 2021.
- 10.2. A 6 month trajectory was agreed on 25 June and we anticipate clearing the backlog by 25 December 2021 by increasing the resources non-recurrently. Datix reports have been completed and this has been reported to the Appointments and Remuneration Committee and included on the Board Assurance Framework (BAF). Weekly reporting is also in place to keep track of the progress and to update the trajectory.

11. Analysis of Band 6 staff = 17

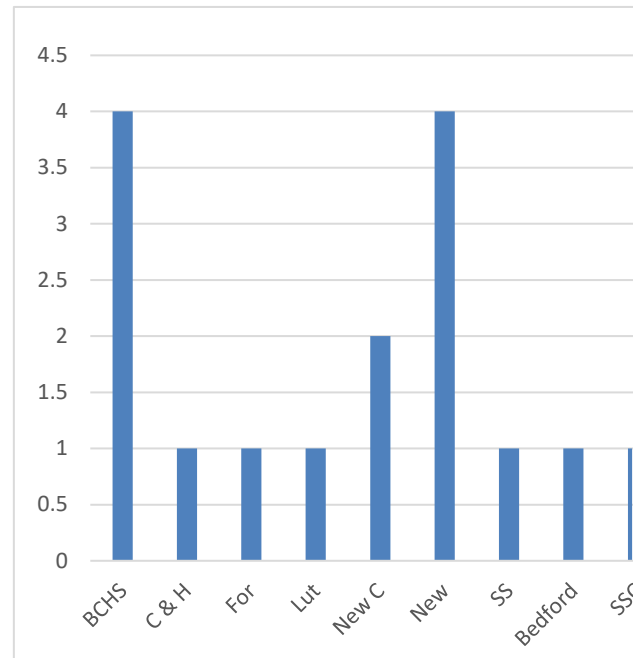
Ethnicity



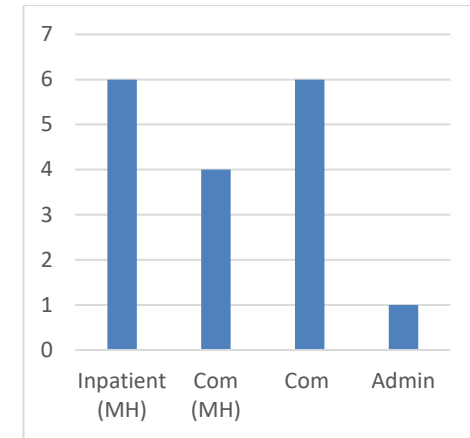
Gender



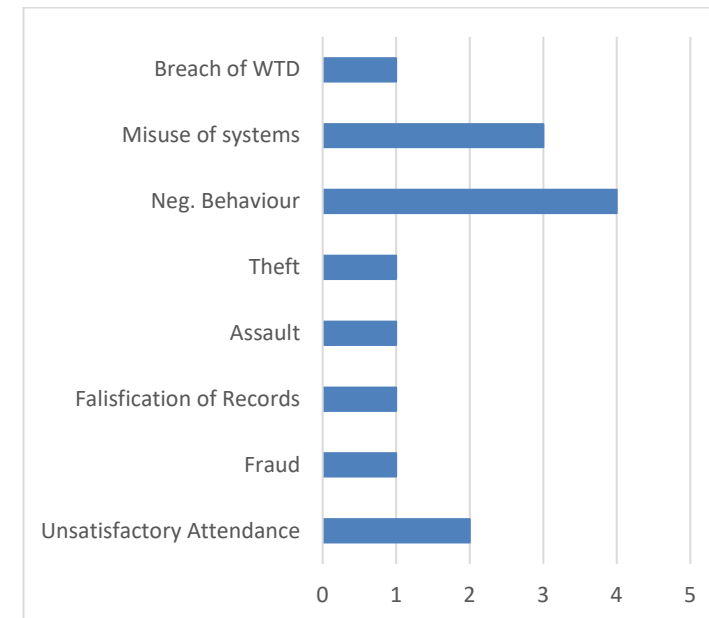
Directorates



Roles



Allegation



12. Workplace Race Equality Standard (WRES)

- 12.1. The Trust has made its WRES submission. Overall it is a relatively positive picture with some progress. The BAME network and People Plan Delivery Board have given input in terms of the action plan which will be published in October. ELFT had made some progress in 7 of the 9 indicators.

Indicator	Summary	Progress
Indicator 1	<p>In summary, this year, there is still an over representation of BAME staff in Bands 3-6, specifically in clinical roles. However, there have been further positive developments of BAME representation in non-clinical roles Band 7, 8A, 8B, 8C and 9. Similarly, in the clinical roles, there has been improved BAME representation in Bands 8A, 8B and in consultant roles.</p> <p>BAME representation in non-clinical roles Bands 8D & VSM appear to have deteriorated. However, this could be due to promotion of individuals. In the clinical roles, Bands 8C, 8D and 9 have seen a slight decrease in BAME representation.</p>	Some improvement
Indicator 2	<p>There has been an increase in the number of BAME staff that have been appointed from shortlisting from 562 candidates in 2020 to 620 candidates in 2021, compared to white staff with 605 appointments in 2020 to 508 appointments in 2021.</p> <p>In 2020, white staff were 1.34 times more likely than BAME staff to be appointed from shortlisting. This likelihood has seen a positive shift to 1.22 in 2021. This means that whilst white staff are still 1.22 times more likely of being appointed from shortlisting than their BAME colleagues, this gap has decreased over the past year, which is a shift in the right direction.</p> <p>S</p>	Some improvement
Indicator 3	<p>The overall number of disciplinary cases has reduced for both white and BAME staff in the latest report. The number of BAME disciplinary cases is still higher than white staff, and unlike last year's reporting where the relative likelihood of BAME staff entering the formal disciplinary process compared to white staff had reduced, this year this likelihood has increased from 1.19 in 2020 to 1.95 in 2021.</p> <p>Meaning that BAME staff are 1.95 more likely to enter the formal disciplinary process when compared their white colleagues. In 2020, the relative likelihood of BAME staff entering the disciplinary process had decreased from 2.44 in 2019 to 1.19.</p>	The likelihood has increased but the overall number of cases for White and BME staff have reduced by 50%
Indicator 4	<p>White staff are 1.02 times more likely to access Continuous Personal Development (CPD) Compared to BAME staff. This has increased from 0.78 in 2020.</p>	This has deteriorated and COVID19 is considered to be a contributing factor.

Indicators 5-8 lifted from the 2019 & 2020 National Staff Survey

National Staff Survey Questions	2019 White (%)	2019 BME (%)	2020 White (%)	2020 BME (%)
KF25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months	33%	38%	31%	37%
KF26. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months	24%	28%	16%	20%
KF21. Percentage believing that trust provides equal opportunities for career progression or promotion	85%	72%	87%	72%
Q17. In the last 12 months have you personally experienced discrimination at work from any of the following? b) Manager/team leader or other colleagues	8%	16%	8%	16%

Indicator 9

- The Trust board are 52.63% BAME, this has remained consistent since the 2020 report. This is positive.
- Voting membership of BAME has increased from 46.67% to 52.94% in the reporting year. This is an improvement.
- The non-voting board are 50% BAME. Last year this figure was reported on as 75% BAME. This is an improvement.
- The Executive team are 50% BAME, which has decreased from 63.64% in 2020.
- The number of BAME Non Executives has increased to 55.55% from 37.50% over the reporting period. This is positive.

NHS England have set out Model Employer Targets and a 10-year trajectory to increase the representation of Black, Asian and Minority Ethnic staff in Bands 8a-Very Senior Manager (VSM).

Table 3. Goal setting trajectory for bands 8a-VSM BME recruitment for East London NHS Foundation Trust

	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028
Band 8a	120	129	138	148	157	166	175	184	194	203	212
Band 8b	22	26	30	34	39	43	47	51	55	59	63
Band 8c	15	17	19	21	24	26	28	30	32	34	36
Band 8d	2	3	4	6	7	8	9	11	12	13	14
Band 9	3	3	4	4	5	5	5	6	6	6	7
VSM	4	4	4	4	4	4	4	5	5	5	5

The table above shows the 10-year trajectory to reach equality by 2028 for pay band 8a to VSM. The numbers show the required staff in post for each year.

Progress against the data in the above table will be looked at by the WRES team and national regulators, and therefore should also be focussed upon by the respective organisation, on an annual basis.

ELFT Progress against the 10-Year Trajectory

	2019 actual	2019 Ambition	Gap	2020 actual	2020 ambition	Gap	2021 actual	2021 ambition	Gap
Band 8a	135	129	6	166	138	28	196	148	48
Band 8b	34	26	8	23	30	-7	44	34	10
Band 8c	16	17	-1	14	19	-5	15	21	-6
Band 8d	3	3	0	6	4	2	5	6	1
Band 9	3	3	0	2	4	-2	4	4	0
VSM	6	4	2	6	4	2	6	4	2

13. Workplace Disability Equality Standard (WDES)

13.1. The Trust has made its submission and is in the process of finalising action plans with the ELFT Ability network.

Indicator	Summary	Progress
Indicator 1 Percentage of staff in each of the AfC Bands 1-9 or Medical and Dental subgroups and VSM (including Executive Board members) compared with the percentage of staff in the overall workforce.	There is still under-representation in some bands. 20% increase for staff in the Band 9 category for clinical staff.	Some progress
Indicator 2. Relative likelihood of disabled staff being appointed from shortlisting across all posts.	There has been some improvement from 1.15 to 1.09. A figure below 1:00 indicates that Disabled staff are more likely than Non-Disabled staff to be appointed from shortlisting.	Some progress
Indicator 3. Relative likelihood of staff entering the formal capability process, as measured by entry into a formal capability procedure. Note: This indicator will be based on data from a two year rolling average of the current year and the previous year.	<p>The relative likelihood of disabled staff entering the formal capability process is 3.38 compared to non-disabled staff. A figure above 1:00 indicates that Disabled staff are more likely than Non-Disabled staff to enter the formal capability process.</p> <p>383 staff employed have a recorded disability, compared to 5170 that have not. One member of staff who has a disability has entered the capability process compared to 4 staff who have not recorded a disability. Three staff members who entered the disciplinary process had a disability status unknown/not declared.</p>	This indicator has changed and this indicates a deterioration.
Indicator 4. Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from:	See below	

Indicator 4 lifted from the National 2020 & 2019 Staff Survey.

	2020 Staff Survey			2019 Staff Survey		
	Disabled	Non-disabled	Unknown	Disabled	Non-disabled	Unknown

% experiencing harassment, bullying or abuse	36%	33%	44%	40%	33.8%	0%
% experiencing harassment, bullying	16%	11%	18%	20.3%	12.8%	0%

Indicators 5-8 Lifted from the staff Survey

Indicator 5. Percentage of disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.

2020 Staff Survey			2019 Staff Survey		
Disabled	Non-	Unknown	Disabled	Non-	Unknown
77%	82%	75%	72.6%	80.6%	0%

Indicator 6. Percentage of disabled staff compared to non-disabled staff saying that they felt pressure from their manager to come to work, despite not feeling well enough to perform their duties

2020 Staff Survey			2019 Staff Survey		
Disabled	Non-	Unknown	Disabled	Non-	Unknown
26%	17%	41%	23.1%	15.9%	0%

Indicator 7. Percentage of disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their organisation values their work.

2020 Staff Survey			2019 Staff Survey		
Disabled	Non-	Unknown	Disabled	Non-	Unknown
51%	60%	48%	45%	56%	0%

Indicator 8. Percentage of disabled staff compared to non-disabled staff that their employer has made adequate adjustments to enable them to carry out their work.

2020 Staff Survey			2019 Staff Survey		
Disabled	Non-	Unknown	Disabled	Non-	Unknown
78%	N/A	N/A	69.7%	N/A	N/A

Indicator 9a. The staff engagement score for Disabled staff compared to non- disabled staff and overall engagement score for the organisation.

2020 Staff Survey			2019 Staff Survey		
Disabled	Non-	Overall	Disabled	Non-	Overall
7.1	7.5	7.3	7.0	7.4	7.3

Indicator 9b has your Trust taken action to facilitate the voices of disabled staff in your organisation?

Yes.

Indicator 10. Trust board. Percentage difference between the organisations' Board voting membership and its overall workforce. Note: Only voting members of the Board should be included when considering this indicator.

	2021 WDES Report					2020 WDES Report						
	Disabled	Disabled %	Non-Disabled	Non-Disabled %	Unknown	Unknown %	Disabled	Disabled %	Non-Disabled	Non-Disabled %	Unknown	Unknown %
Total Board Members	2	10.53%	17	89.47%	0	0%	3	16%	16	84%	0	0%
Of which: Voting board members	2	11.76%	15	88.24%	0	0%	2	18%	9	82%	0	0%
Of which: Exec Board Members	1	10%	9	90%	0	0%	1	13%	7	88%	0	0%

There has been a deterioration in terms of the number of board members with a disability.

14. London Healthy Workplace Award (LHWA)

- 14.1. The London Healthy Workplace Award (LHWA) is an accreditation scheme led by the Mayor of London's Office and supported by Public Health England. Full details can be found here: <https://www.london.gov.uk/what-we-do/health/london-healthy-workplace-award/about-london-healthy-workplace-award>
- 14.2. ELFT attended the verification day in August 2021 and were successful in achieving the next accolade from 'Achievement' in 2019, to Excellence in 2021.

14.3. Excellence - for organisations that demonstrate that health and wellbeing are embedded in their corporate culture and values. This was testament to the trust wide effort in achieving this award.

15. Healthcare People Managers Awards (HPMA)

15.1. The awards ceremony for the Healthcare People Managers Award (HPMA) takes place on 7 October 2021. ELFT are finalists for the Capsticks award for innovation for the online learning for children.

16. NHS Communicate Awards (NHS Providers and NHS Confederation)

16.1. ELFT are also shortlisted for the NHS Communicate Awards hosted by NHS Providers and NHS Confederation award for the Twitter campaign as part of the Race and Privilege project #MyNameReallyIs. The awards ceremony is on 16 September 2021.

17. Overview of Dignity at Work, Whistleblowing and Freedom to Speak up Cases

The People Business Partners compiled an overview of the cases which are live – focusing on Dignity at Work (Bullying & Harassment), Grievances, Freedom to speak up, Whistleblowing and Mediation cases.

Directorate	Narrative	Live Cases
Corporate Services	In order to challenge Bullying and Harassment and Inequality within the Corporate Directorate, the People Business Partner is setting up focus groups with each Corporate Team/Department to explore what we can do differently in regards to their well-being. The People and Culture (P&C) focus group was held on 29 th June 2021 and a P&C Team staff survey action plan is in the process of being discussed and developed. Ideas/suggestions include: buddy connections between different P&C Teams, in-house (P&C) mentoring scheme, holding project/learning debriefs, staff appreciation sessions, more listening forums, celebration events, explore more permanent roles/contracts.	Grievances – 2 Whistleblowing - 1
Specialist Services	The QI Team staff survey focus group is currently being arranged as are the other focus groups for other Corporate Teams.	Bullying & Harassment – 1 Whistleblowing - 1
Newham Mental Health	Extensive OD work is also ongoing for the Digital Directorate and a new away day is still being discussed and scoped for the Digital Directorate. The initial OD work will focus on Leadership Development within the Digital Leadership Team.	Freedom to Speak Up - 0
Tower Hamlets Mental Health	OD work is also being developed and arranged with the trust-wide Corporate Performance Team.	Mediation - 0
Specialist Services	In order to challenge Bullying and Harassment and Inequality within the Specialist Services Directorate, numerous bespoke unconscious bias workshops with an external facilitator have been held for CAMHS and are currently being arranged for IAPT staff to attend.	Grievances – 2
Community Health Newham	The CAMHS Equalities group function will be refreshed and a chair appointed.	Bullying & Harassment – 1 Whistleblowing 5
Community Health Tower Hamlets	A Freedom to Speak up (FTSU) champion has been appointed at Coborn and a staff wellbeing QI project has started at Coborn and also Newham and Tower Hamlets CAMHS (new local induction programme being trialled).	Freedom to Speak Up - 1

City & Hackney	Specialist Services have revised the Trust mentoring system and are encouraging staff to be part of new system and be part of reverse mentoring piloting.	Mediation - 2
Forensics	Bespoke Recruitment and Selection Training is currently being developed by the Resourcing Team Leader and will be rolled out to all CAMHS recruiting managers, which will include input from PP leads.	
Bedfordshire	The People Business Partners and Organisational Development Team are working with Specialist Services line managers to explore the importance of creating a positive work culture at ongoing OD interventions.	
Luton	The new ELFT CAMHS Equalities lead started in August 2021 and is in the process of meeting the senior leadership teams in each of the Specialist services. Discussing what they are doing locally to explore inequalities in terms of service provision and staff management and development. They will be attending the monthly CAMHS Quality committee and also linking in with People Participation leads in the trust to further link the Quality and equalities agenda with what young people are saying about their experiences – such as with the recent young people-led LGBTQ+ training events that we will be sharing with management teams for further learning shortly. They are working towards strengthening links with Trust equalities networks, and support the development of the new CAMHS Recovery College in Beds and Luton.	

18. Statutory and Mandatory Training Compliance

18.1 Statutory & Mandatory Training Compliance has seen a rise in line with plan for the previous three months and whilst it has held steady this month it has not increased in line with the trajectory. There are a range of reasons for this but is largely due to training attendances being down in August due to annual leave and staff availability to attend classroom training. This was expected and is an annual issue. It is expected to return to planned attendance levels in September. We have the following in place to try and achieve 90% compliance:

- Each L&D Officer have a directorate action plan to help increase compliance in their areas;
- L&D officers continue to send targeted emails to those out of date with training;
- L&D officers are running virtual facilitated eLearning sessions to help those who are not compliant to complete their training ;
- New starter emails sent to new staff, encouraging them to do their statutory and mandatory training ;
- User-guides including a video has been created and on the intranet and included in communications;
- We continue to run virtual statutory and mandatory for staff to be compliant with Infection Control Level 2, Data Security, Fire Safety;
- Created an electronic learning and development Bulletin via (SWAY) which is updated monthly and circulated to staff so they can see upcoming dates;
- Working with the MAPA team to look at how we can improve compliance
- Agreed for staff who do not have direct patient contact to undertake virtual resuscitation training to address the resuscitation backlog.

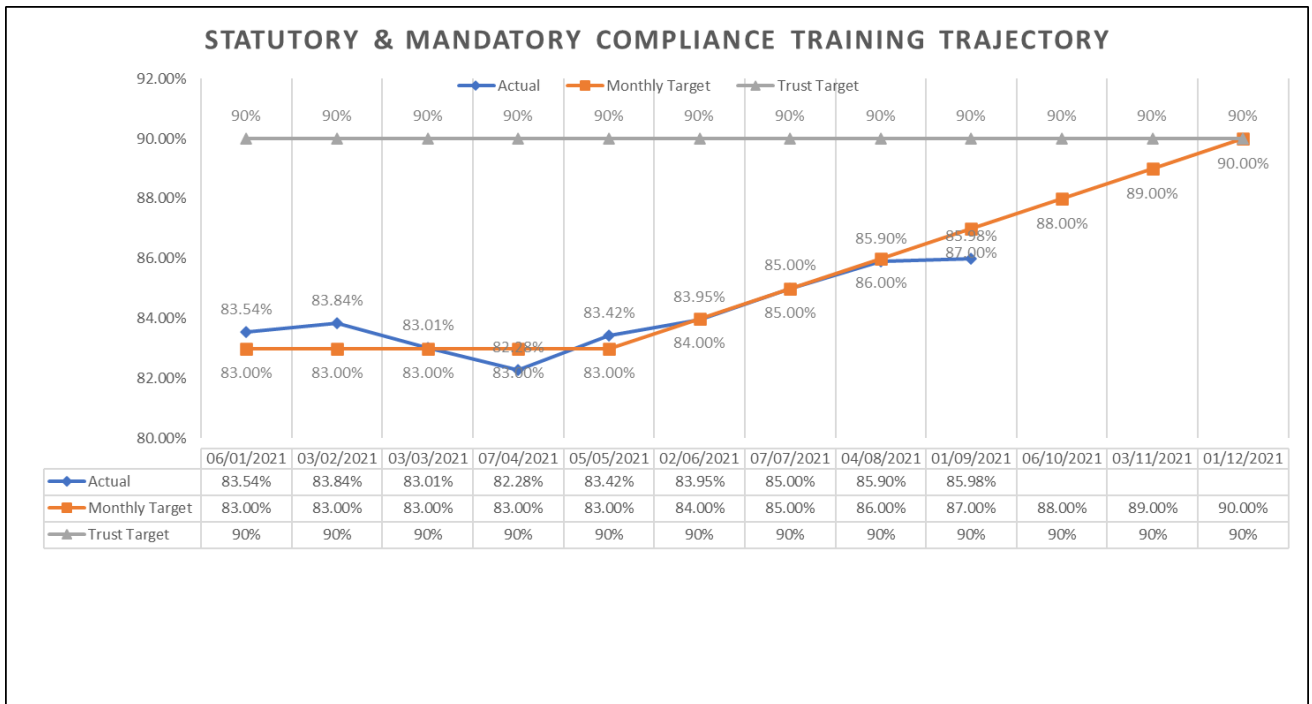
There are issues with staff who do not attend citing ward shortages or lack of awareness of booking process. We continue to engage with services via the Operations meeting. Reminders are sent to managers as reminders and also to Borough Leads to try and encourage staff to attend. This will be escalated to service directors.

Compliance figures are reviewed weekly at the P&C senior leadership team and are reported to the Service Delivery Board monthly. A new trust wide KPI dashboard is in draft will be taken to Department Management Team (DMT) meetings from October 2021. There will also be a communications campaign to impress the importance of completing statutory and mandatory training.

18.3 Work is gathering pace around the implementation of the new Learning Management System (LMS) which is expected to start full scale implementation in September (subject to contract completion) with a go live date in January 2022. On launch the system will be branded the ELFT Learning Academy and will provide a one stop shop for all compliance and elective learning, ensuring that the staff experience is further enhanced through access to a catalogue of available learning. The Learning Academy will also include a virtual appraisal process (non-medical) which will go live for the 2022 appraisal cycle.

18.4 The Learning academy will also allow for a change in the on-boarding process and the L&D team have commenced a project to utilise access to the system ahead of the individuals start date so that they can complete some core training but also connect to some induction materials and information. The project will look at the full -30:1:30:60 on-

boarding cycle and look at a new starter's journey from the 30 days before their start date through to the 60 days after.



19. Medical Education Update - Experiential Learning Centre (ELC) @ Trust Head Quarters

- 19.1 The new Experiential Learning Centre that consists of a large multi-purpose room to be used for simulation and arts-based education, including somatic learning opportunities (e.g. drama, movement and music work) and 2 simulation rooms equipped with cameras for short teaching videos and reflection exercises is almost complete.
- 19.2 We plan to have an 'opening event' late October to display how we intend to use the space.

20. GMC National Survey (NTS)

- 20.1 The GMC National Training survey results have been released. We are very pleased with the results, this will be the first time that we have been able to significantly improve our overall ratings, according to the mission of our Medical Education 5 year plan. Thanks to all the hard work of the entire Medical Education faculty, acknowledging that this was delivered during the pandemic.
- 20.2 These are some headlines re changes from 2019 to 2021:
 - High satisfaction levels across the board with clinical supervision (90-98%)

- Experiences from Higher trainees across the board has significantly improved
- Significant improvements also noted for GP, FY1 and FY2 trainees
- Further support required for Newham GPs, Forensic Core trainees and Core trainees in Tower Hamlets. The Coborn Unit has already undergone significant changes in the last few months, and we look to improve these results in the next year.

20.3 We would like to celebrate the successes of the entire Medical Education team/faculty who worked hard over the course of the pandemic. 18.4 Unfortunately we do not have enough data to represent Luton and Bedfordshire sites; however, we are liaising with the GMC so we can have a bespoke report for these services.

21. Medical and Physician Associate Students

21.1 During the summer, we organised placements for Physician Associate students for three weeks as part of their Psych experience. Feedback received has been the best we have seen so far, all credit to the amazing teams and Consultants who supervised their placements.

21.2 The new academic year for Medical Students started this month. We are expecting 50+ medical students from Queen Mary – this will occur 6 times a year - to recommence their placements pre-pandemic style. We recognise this is a significant amount of pressure on teams but it is reassuring to see teams recognising education and training as a priority to train future doctors with excellent psychiatry exposure.

22. Library and Knowledge services

22.1 The Medical Education Department are contracted with Homerton's Newcomb Library for all ELFT staff to have access to online and physical Library services. More information on what is available for ELFT staff can be found here:

<https://www.homerton.nhs.uk/east-london->

22.2 Following HEE request, all NHS Organisations are to prepare a self-evaluation report in line with the Quality and Improvement Outcomes Framework, which is a part of the HEE Quality framework assurance of the wider learning environment. Submission of the baseline self-assessment, put on hold last year, is now due by 24th September 2021.

23. Trusts are required to rate themselves against 6 domains:

- All NHS organisations enable their workforce to freely access proactive knowledge and library services that meet organisational priorities within the framework of Knowledge for Healthcare.
- All NHS decision making is underpinned by high quality evidence and knowledge mobilised by skilled library and knowledge specialists.
- Library and knowledge specialists identify the knowledge and evidence needs of the workforce in order to deliver effective and proactive services.
- All NHS organisations receive knowledge and library services provided by teams with the right skill mix to deliver on organisational and Knowledge for Healthcare priorities.
- Knowledge and library specialists improve the quality of knowledge and library services using evidence from research, innovation and good practice.
- Knowledge and library specialists demonstrate that their services make a positive impact on healthcare

23.1 The Medical Education Manager is working closely with the Library Manager at Homerton to prepare the self-evaluation report in time for the deadline. HEE will then

feedback on any recommendations for the Trust to improve Library and Knowledge accessibility and awareness, which will need to be reviewed at board level.

24. Medical Education Website

24.1 The Medical Education website <https://www.elft.nhs.uk/medical-education> is the outward face of Medical Education for prospective Students and Doctors where they can get information on the Medical Education team, details on the different training schemes we cover and job descriptions. We also have a resources section added for internal staff where we store all videos, articles, learning tools we have developed over the years, particularly all the e-resources during COVID-19.

25. Organisational Development Activity

25.1 The Organisational Development (OD) Team have facilitated 46 interventions in August 2021. Total number of interventions completed to date in 2021-2022 is 367.

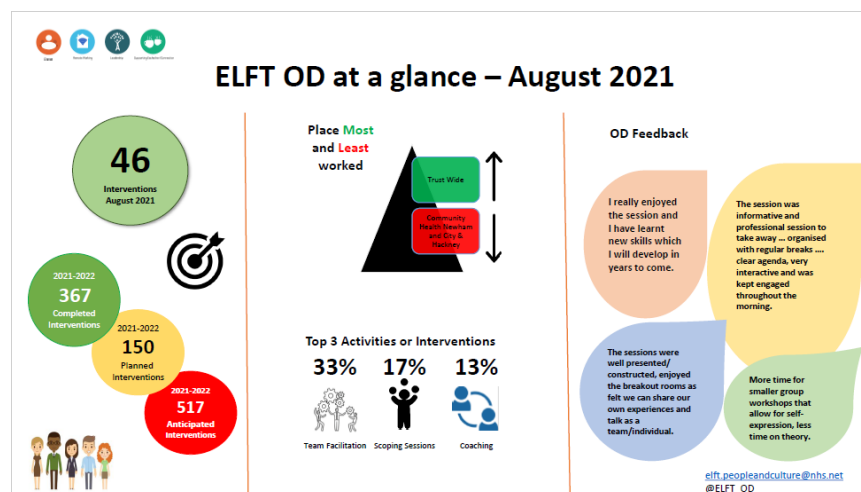
25.2 The number of planned interventions until March 2022 is 150 which brings the total number of anticipated OD interventions to 517 in 2021-2022.

25.3 The most interventions were facilitated Trust-wide and the least were delivered in Community Health Newham (CHN) and City & Hackney (C&H) Directorates.

25.4 Top 3 activities delivered were:

- Team facilitation (33%)
- Scoping sessions (17%)
- Coaching (13%).

The qualitative feedback (delegate quotes) from our recent sessions can be seen on the report – this is staying consistently positive month-on-month.



26. Freedom to Speak Up Update Report 1st July- 31st August 2021

Table 1.1: Number of concerns raised - by Themes

FTSU Concerns Data by themes	1st April to 30th June 2021	1st July to 30th August 2021
Patient Safety/Quality of Care	1	5
Bullying/Harassment/Negative Behaviours	6	11
Worker safety*	*New category	4
Processes/Organisational Structure/ Other	7	11
COVID19 related	0	0
Others	1	0
Total number of themes*		31
Total Number of staff raising concern	15	24
Number of concerns raised anonymously	1	0
Disadvantageous and/or demeaning treatment as a result of speaking up	0	0

*‘**Worker safety**’ has been added as a category by the National Guardian Office as of July 2021 (in addition to the existing ‘patient safety/quality’ and ‘bullying and harassment’ categories). The term ‘detriment’ has been replaced with ‘disadvantageous and/or demeaning treatment’, though the term detriment is still used in brackets to avoid any confusion. (The definitions for various categories have been updated for added clarity.)

***Total number of themes** doesn’t always correspond with the total number of staff raising concern, one staff concern can relate to multiple themes.

Table 1.2: Number of concerns raised - by Directorate.

FTSU Data for this reporting period by directorate	1st July to 30th August 2021
Bedfordshire	5
City & Hackney Services	1
Community Health Services - Bedfordshire	6
Community Health Services - Newham	0
Community Health Services - Tower Hamlets	1
Corporate Services	3
Forensic Services	2
Luton	0

Newham	0
Primary Care Directorate	1
Specialist Services	1
Tower Hamlets	2
UNKNOWN	2
TOTAL	24

Table 1.3: Concerns raised - by Professional Group

Concerns raised - by Professional Group	1 st July to 30 th August 2021
Administration, Clerical & Maintenance/Ancillary	2
Allied Health Professionals	0
Corporate Services	3
Medical and Dental	2
Registered Nurses and Midwives	10
Nursing Assistants or Healthcare Assistants	2
Social Care	0
Not Disclosed	1
Other	2 student nurses / 1 volunteer 1 apprentice
TOTALS	24

Highlights from Freedom to Speak Up

- 26.1. There has been an increase in reporting in this reporting period in comparison to the last reporting period. The increase in patient safety/ quality is directly relating to staffing level and its impact on patient care and staff's ability to manage caseload or provide quality care. **See Table 1.1**
- 26.2. Registered Nurses and Midwives have logged the highest number of concerns with FTSU this month. The concerns are in regards working conditions, workloads, staffing levels and the impact of staffing levels on quality of care provided. **See Table 1.3**
- 26.3. In this report, the theme with the highest reporting was Processes / Organisational Structure / Other. These concerns were in relation to managing the process of staff returning to the office vs working from home, unfair interview process/ recruitment, ability to speak up safely within services and support for work related stress. **See Table 1.1**
- 26.4. Staffing shortages concern was raised within the district nursing team in mid Bedfordshire. Several staff reported safety issues and low team morale as a result of staffing issues. Management aware of the issue and it has been picked up the local leads. Reassurance

given to the team about the staffing situation and plan of on-going recruitment communicated directly to the team. There is an active recruitment plan and the senior nurses are overseeing. There is slow and steady progress in recruitment. This is also an area of focus in the Trust wide Recruitment and Retention meeting. All temporary staff are well inducted and supervised. A daily huddle is in place – to ensure that the service is safe and any concerns are escalated to the Lead Nurse and as necessary to the Service Director and or Director of Nursing.

- 26.5. Themes of burnout picked up from clinical staff across the Trust. This relates to consequences of covid, staffing levels and the added pressure of an impending CQC inspection. Leadership and management within these areas aware and recognise the need to continue to support staff, encouraging staff to take leave and keep teams updated on actions to improve the staffing situation and wellbeing.
- 26.6. A new reporting category has been added for 'worker safety'. The themes for these criteria are related to staff working environment, specifically lack of ventilation and A/C which was described as a "health hazard". There is ongoing support from estates team to get these issues resolved as soon as possible. **See Table 1.1**
- 26.7. Concerns relating to behaviours in this reporting period has been less about bullying/harassment and more to do with communications with teams and individuals. Teams are being supported in conjunction with the work from People and Culture; The ELFT Speak Up Safely / Respectful Resolution. It is hoped that this resolution pathway supports all staff and managers to have conversations at an early stage, build confidence to discuss, defuse and ultimately defeat bullying through an informal process that creates a kinder culture and tackle poor behaviours.
- 26.8. There were no concerns received anonymously. All concerns escalated to the appropriate service directors with relevant details and themes shared.
- 26.9. There were no COVID19 related concerns. All concerns raised have been escalated to Service Directors and/or HR as appropriate to the nature of the concern raised.
- 26.10. A recent report from the National Guardian office highlighted some unique challenges that exist in primary care and how some individuals can feel particularly isolated because:
- Many work in small independent units and it is harder for them to raise concerns confidentially or anonymously
 - There is a sense of greater risk to their employment if they are raising concerns about someone who may be their direct employer
 - Working in ancillary and non-clinical roles, there are likely to be fewer options for raising concerns externally because they may not have access to a professional body or union.

FTSU Guardian working closely with the primary care directors to support staff, raise awareness of speaking up and develop a network of FTSU Champions within primary care service.

- 26.11. The FTSU team have recently recruited two new service users from People Participation who have started on the team.
- 26.12. FTSU continues to deliver FTSU awareness training at Trust Induction monthly via virtual sessions during the Corporate Induction Training day and facilitate virtual and face to face training to teams.
- 26.13. As part of the strategy to get the FTSU training rolled out, the FTSU team are developing a 3-part insight video into speaking up. The videos will be focusing on the following: Speaking Up: an insight into speaking up, being a Freedom to Speak Up Guardian and

why Speaking Up Matter. This work is being carried out in collaboration with staff who has used the FTSU services, FTSU people participation, Trust executives and managers across the Trust. The communication team will be supporting with this project.

27. Whistleblowing Cases

- 27.1. Since the last Whistleblowing update we have received the draft report for the East Ham Care Centre (EHCC) external review. This report covers 5 complaints with EHCC and the report is currently being finalised. There are two Whistleblowing concerns remaining this is one about ethics and one around patient safety and staffing concerns.

28. Organisational Changes

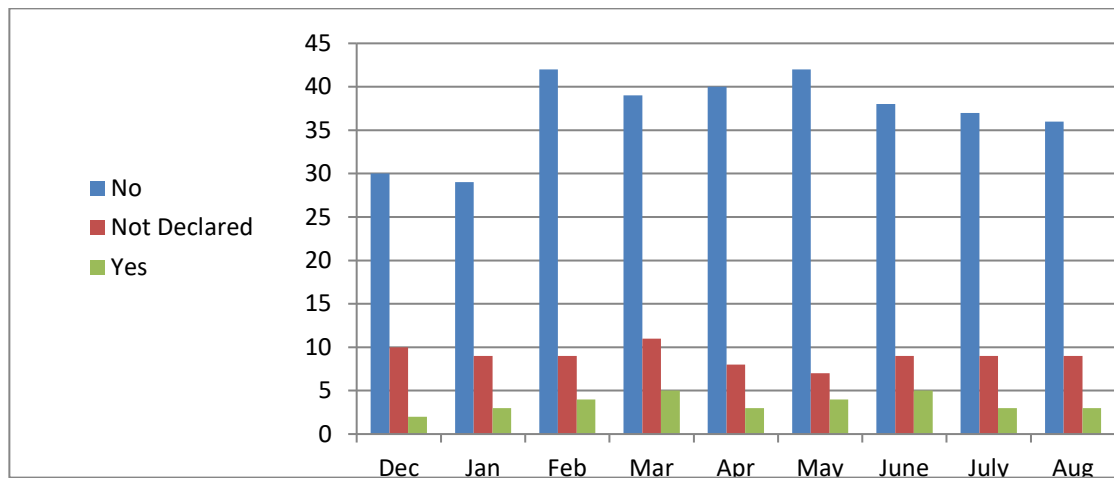
- 28.1. There are currently live 10 organisational changes across the Trust – a decrease from 20 since the last report. The reasons for the organisational changes are due to service redesign/reconfiguration and changes to ways of working. There are 178.2 staff affected, which has increased from 168.2 staff since the last report. These changes are placing 4.5 staff at risk of redundancy resulting in 1 actual redundancy.

29. Action being requested

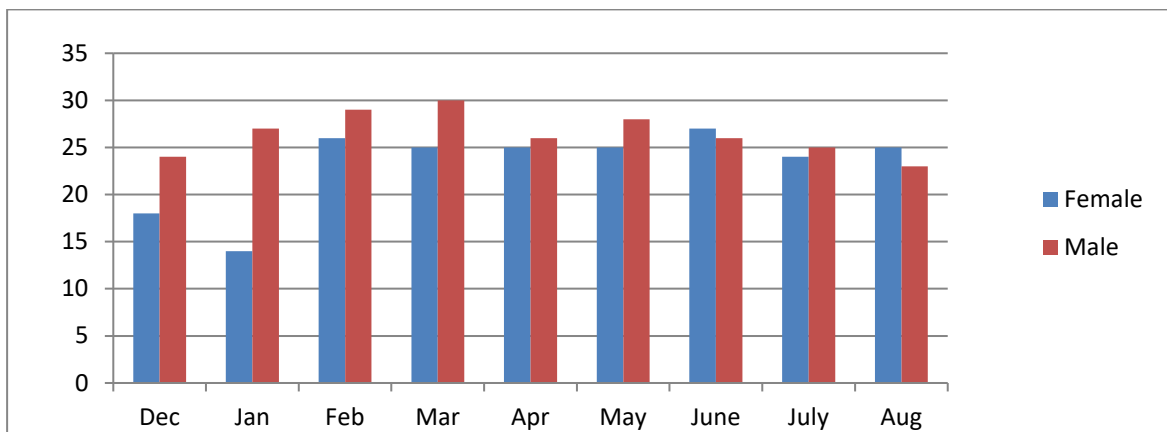
The Board is asked to **RECEIVE** and **NOTE** the report

Summary of Disciplinary cases by Demographics

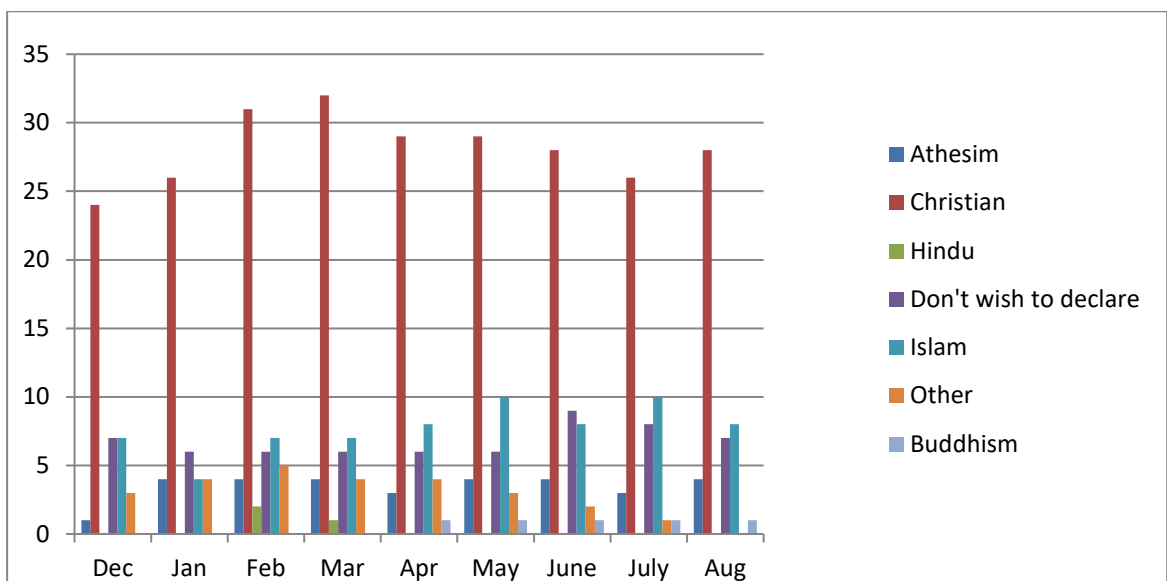
Disability



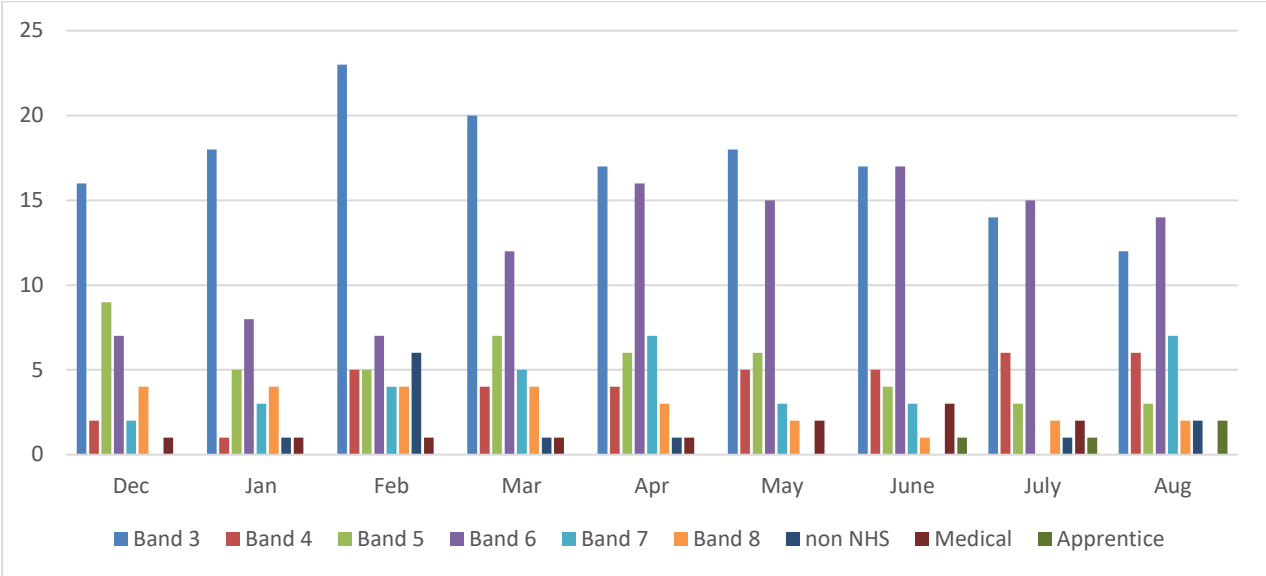
Gender



Religion



Pay scales



Sexuality

