

REPORT TO THE TRUST BOARD: PUBLIC 24 SEPTEMBER 2020

Title	Progress Report People Plan
Author	Tanya Carter, Director of People & Culture
Accountable Executive Director	Tanya Carter, Director of People & Culture

Purpose of the Report:

To update the Trust Board on the progress as outlined in the People Plan. This paper also provides assurance in terms of the response to COVID 19 as well as an update in terms of activities in relation to Respect and Dignity at work and Covid 19, Race and Privilege.

Summary of Key Issues:

This paper sets out to give an update in terms of the ongoing Covid 19 response in terms of staff swab and antibody testing, parking, accommodation and childcare.

We successfully submitted the Trust return in terms of Risk Assessments for all staff. We submitted the following:

- **94%** of all your staff have you risk assessed
- **95%** of risk assessment has been completed for staff known to be 'at risk', with mitigating steps where necessary
- **95%** of risk assessments have been completed for staff who are known to be from a BAME background with mitigating steps where necessary.

We continue to push Risk Assessments to ensure that we reach 100% of our staff, by the end of August 2020.

There is a reduction in the number of Disciplinary and Capability cases. Although, the data shows that a significant number of disciplinary cases are against band 3 and band 6 staff who are women. The number of suspensions remains low.

There is a large focus on well-being – we have launched the first Wellbeing newsletter and the first Menopause Guidance. In addition – we have launched a wellbeing toolkit which is in line with the People Action plan requirements.

The report also details updates in Medical Education activity and Junior doctor rotations which took place in August. In terms of organisational changes, there are currently 9 organisational changes affecting 56 staff. There are 3 staff at risk and 2 likely redundancies expected.

Building on the Respect and Dignity @Work project, we have run 9 Covid, Race and Privilege sessions. These have been well attended and we have run two of four sessions on Understanding White Privilege with the senior leaders within the Trust.

Whilst concerns have been raised via the Freedom to Speak Up Guardian, four new Whistleblowing complaints have been made in respect of the definition of the Whistleblowing Policy.

Strategic priorities this paper supports (Please check box including brief statement)

Improved patient experience	<input checked="" type="checkbox"/>	There is a strong evidence base that engaged staff provide better patient care and outcomes.
Improved health of the communities we serve	<input checked="" type="checkbox"/>	We are taking a population health approach to staff wellbeing.
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 for money	<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

Committees/Meetings where this item has been considered:

Date	Committee/Meeting
Various	Some aspects discussed at the June Appointments and Remuneration Committee

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.



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 4 key priorities are:

- Improved Population Health Outcomes
- Improved experience of Care
- Improved Staff Experience
- Improved Value

2. COVID 19

We have recruited an interim **Project Manager: Trust Covid-19 recovery programmes** to help us to create a sustainable infrastructure around Covid related functions such as staff testing, accommodation and car parking.

Staff testing

3. A programme of COVID-19 swabbing is under way in certain postcode areas in Luton and Bedfordshire. ELFT is delivering this programme at the request of NHS England in response to localised outbreaks of Coronavirus in these areas. Some 800 colleagues have been swabbed in the last 10 days.
4. ELFT continues to deliver COVID-19 antibody testing to NHS staff, staff from the wider local NHS system, and staff working in social care roles. This testing is currently available in east London, but plans are under way to reintroduce antibody testing in Luton and Bedfordshire. We will confirm via the usual communications channels when this service is available
5. **Staff accommodation**
Even as the Trust returns to a 'new normal' following lockdown, we want to ensure that we continue to support staff who need accommodation because they have relatives who are shielding, or because they are unable to use public transport to access their place of work. We are making changes to some aspects of our accommodation offer, but if staff need accommodation, we will endeavour to help them, working with our local partners. Staff should approach their managers to discuss their eligibility for accommodation.
6. **Car parking**
We understand that some local London Boroughs are continuing to support free car parking for healthcare staff if their travel is related to legitimate NHS business. However, not all London Boroughs are doing so. Staff are advised to check before they intend to park. We are in the process of engaging local authority parking teams to get an accurate picture of what is currently being offered. We will update our communications regularly with this information.
7. **People and culture policy and guidance**
During the main phase of the Coronavirus pandemic, some of our People & Culture policies were revised to make special, temporary provisions to support staff—for example, to support the taking of certain types of leave. We are reviewing these policies and guidance documents to ensure that these changes remain fit for purpose.
8. **Communications**
We are in the process of updating our staff-facing communications related to ELFT's provision for staff during the pandemic. These changes reflect 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 Coronavirus pandemic. We are seeking to reflect upon and learn from ELFT's experience of

supporting and protecting staff through the Covid-19 pandemic. We want to understand how we can best strengthen and build on this for the future as we return to a 'new normal', and at the same time maintain a state of readiness in the event of a second wave of Coronavirus in the population.

9. Risk Assessments for staff

- 7.1 The Trust had a deadline of 31 July 2020, from NHS England and Improvement to submit the return of completed Risk assessments. The target was 95% of all staff and 95% staff known to be 'at risk', in addition 95% of staff who are known to be from a BAME background with mitigating steps where necessary.

We have submitted the following figures by the deadline:

- Have you offered a risk assessment to all staff? **Y**
- What % of all your staff have you risk assessed **94%**
- What % of risk assessment has been completed for staff known to be 'at risk', with mitigating steps where necessary? **95%**
- What % of risk assessments have been completed for staff who are known to be from a BAME background with mitigating steps where necessary? **95%**

There is a further Trust target to get to 100% of staff by the end of August 2020. We have continued to review the Risk assessment process, form and guidance with our Occupational Health provider; Team Prevent and have engaged with the ELFT Ability Network. We are always working through how to sustain the Risk Assessments and to make it a part of the On-boarding process.

10. Childcare

Following an internal poll to assess the need for childcare provision, we signed up with an organisation called Yoopies which connects staff with childcare provision via an App. Since the launch on 9 July to 24 August there have been 316 sign ups. A more detailed report can be found in Appendix 1.

11. Hardship Fund

We have issued a number of hardship funds to staff as detailed by protected characteristics.

Age	Disability	Gender Reassignment	Marriage/Civil Partnership	Pregnancy /Maternity	Ethnicity	Religion	Gender	Sexual Orientation	Grant amount £
34	No	No	Single	No	N Black or Black British - African	Islam	Female	Heterosexual	1000
53	No	No	Legally Separated	No	J Asian or Asian British - Pakistani	Islam	Female	Heterosexual	1700
49	No	No	Married	No	K Asian or Asian British - Bangladeshi	Islam	Male	Bisexual	1056.17
52	No	No	Not Declared	No	PC Black Nigerian	Christianity	Male	Heterosexual	1000
56	No	No	Single	No	N Black or Black British - African	Christianity	Female	Heterosexual	100
42	Not Declared	No	Single	No	A White - British	Not Declared	Female	Not Declared	100
50	No	No	Single	No	PD Black British	Islam	Female	Heterosexual	100
59	Not Declared	No	Not Declared	No	N Black or Black British - African	Not Declared	Female	Not Declared	100
35	No	No	Legally Separated	No	M Black or Black British -	Christianity	Male	Heterosexual	100
								Total	5256.17

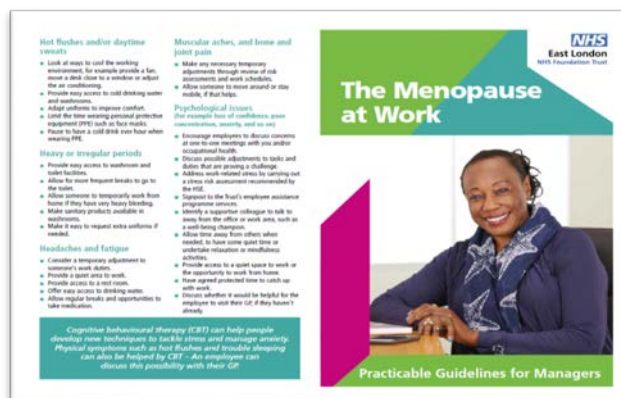
12. Wellbeing Conversations

As per the People Plan All staff are required to have a wellbeing conversation. We have taken the learning from the Risk Assessment process and have created an electronic tool kit for staff/managers to record their wellbeing form. The detailed form can be found here:

https://forms.microsoft.com/Pages/ResponsePage.aspx?id=sITDN7CF9Ueylqe0jXdO4_dxZfKfeDpJiUy-RhrJzdxUMDI3TFRJQkxDVk01UIJaU1M0MidYODRNWC4u

13. Wellbeing Newsletter and Menopause Guidance

We have launched our first Wellbeing Newsletter which can be found in appendix 2. We have also launched our first ever Menopause Guidance and are promoting Menopause Awareness month on 3 September and have distributed fans across the Trust.



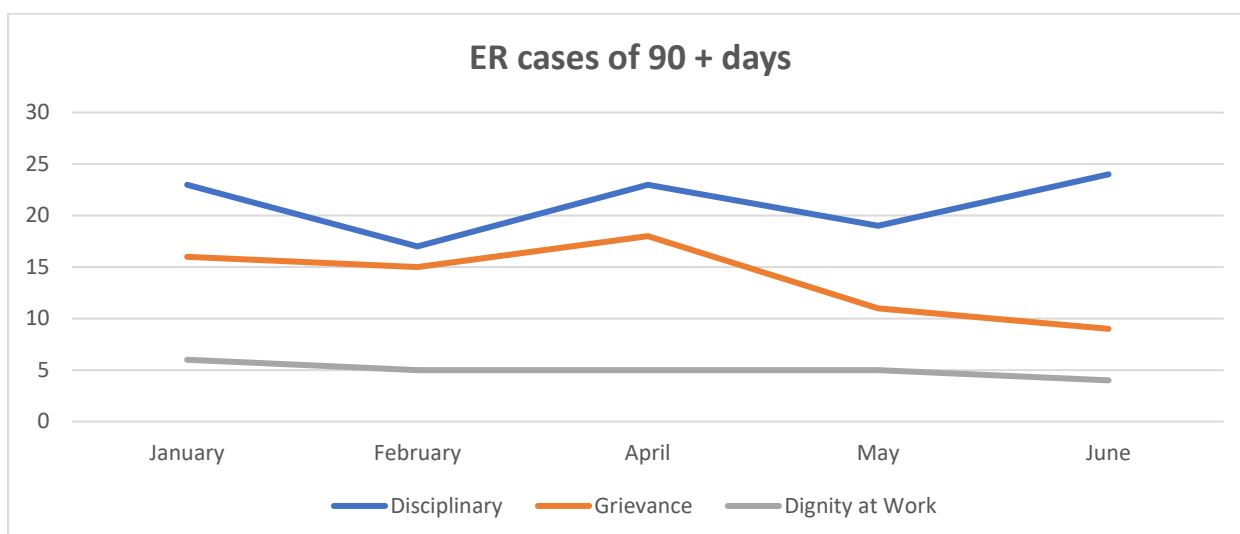
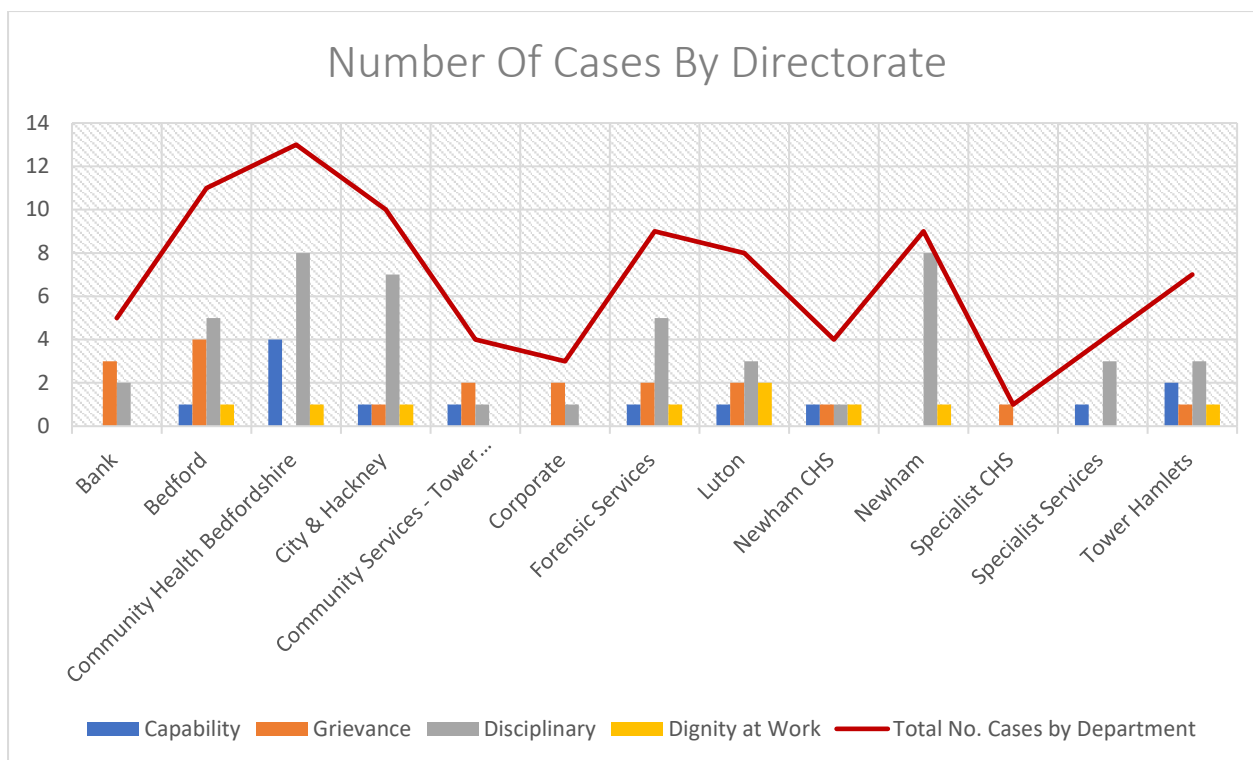
14. Employee Relations Report –July 2020

In total, there are: 86 live ER cases plus 9 Employment Tribunal cases, & 3 at ACAS, 109 long-term sickness cases, and 374 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	March	April	May	June	July
Capability	25	23	22	22	21	21	18	18	15	14	14	13
Dignity at Work	15	13	10	10	12	10	9	5	5	7	10	9
Disciplinary	37	35	37	31	31	34	34	41	42	43	48	46
Disciplinary (Medical)	0	0	0	0	0	0	0	1	1	1	1	1
Grievance	14	16	20	27	26	19	20	21	21	17	19	17
Tribunals	10	9	9	9	10	9	9	8	8	9	8	9
Total	101	96	98	90	90	93	81	94	92	91	100	95

The number of Disciplinary cases has decreased by 2 from June. Grievances have decreased by 2, Dignity at complaints by 1 and Capability by 1. The Director of People & Culture has joined a working group set up by NHS England specifically to focus on reducing the number of staff from Black, Asian and Minority Ethnic Communities (BAME) who are in formal disciplinary processes



The highest numbers of cases beyond 90 days are Disciplinary cases.

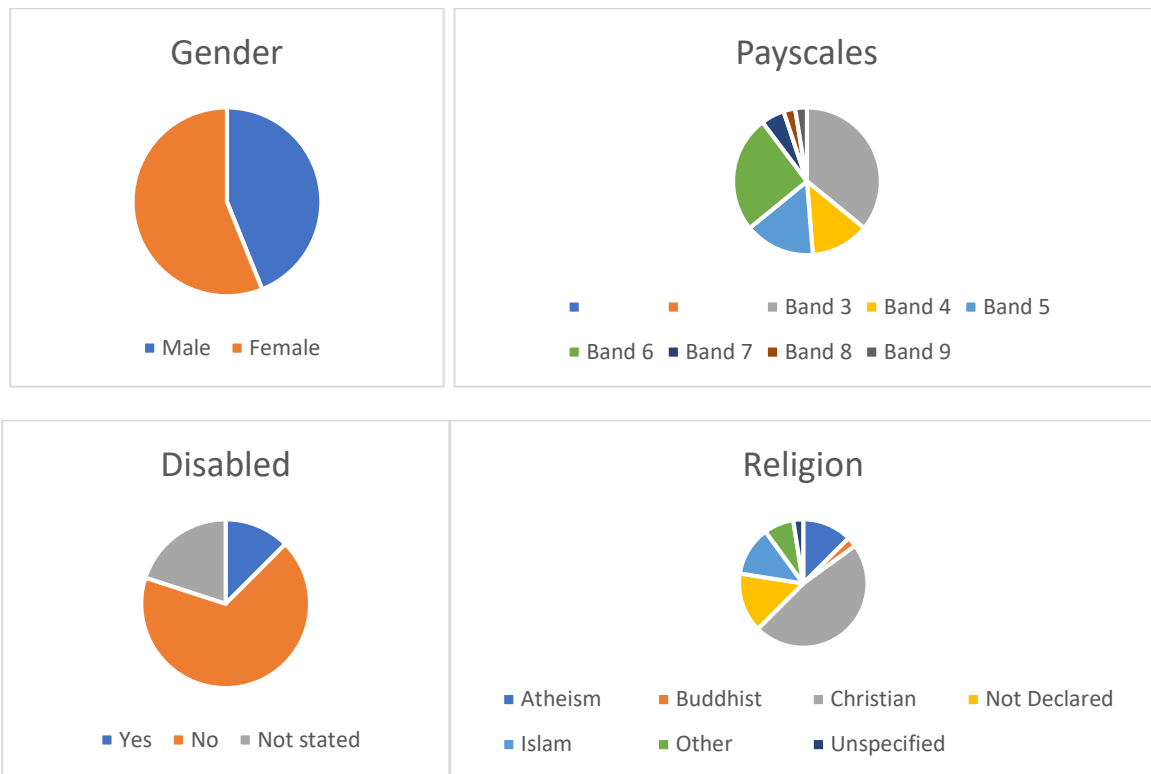
Allegation Type

An 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
Breach of Confidence	5
Fraud	6

Unauthorised absence	3
Assault	3
Negligent Behaviour	3
Inappropriate Relationship	3
Failure to Disclose	3

Summary of Disciplinary cases by Demographics



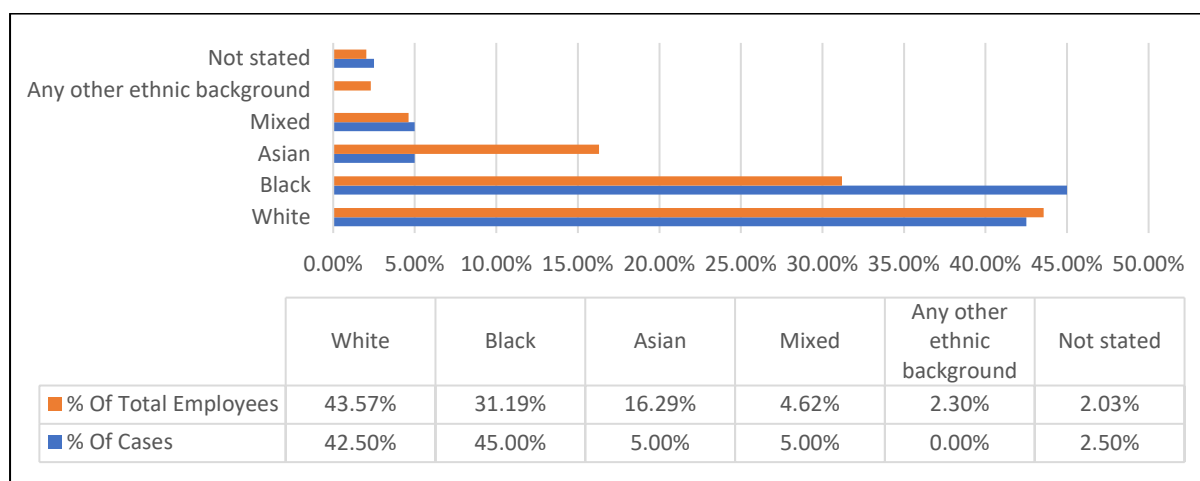
A significant proportion of Trust Disciplinary cases are against are against Band 3, and Band 6 women.

Number of suspensions per month

August	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July
4	5	5	3	2	2	2	2	2	2	2	1

At present 1 employee suspended from the Trust (Bedfordshire). Suspensions have remained consistently low since the implementation of the Fair Treatment process early 2019.

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



Appeals

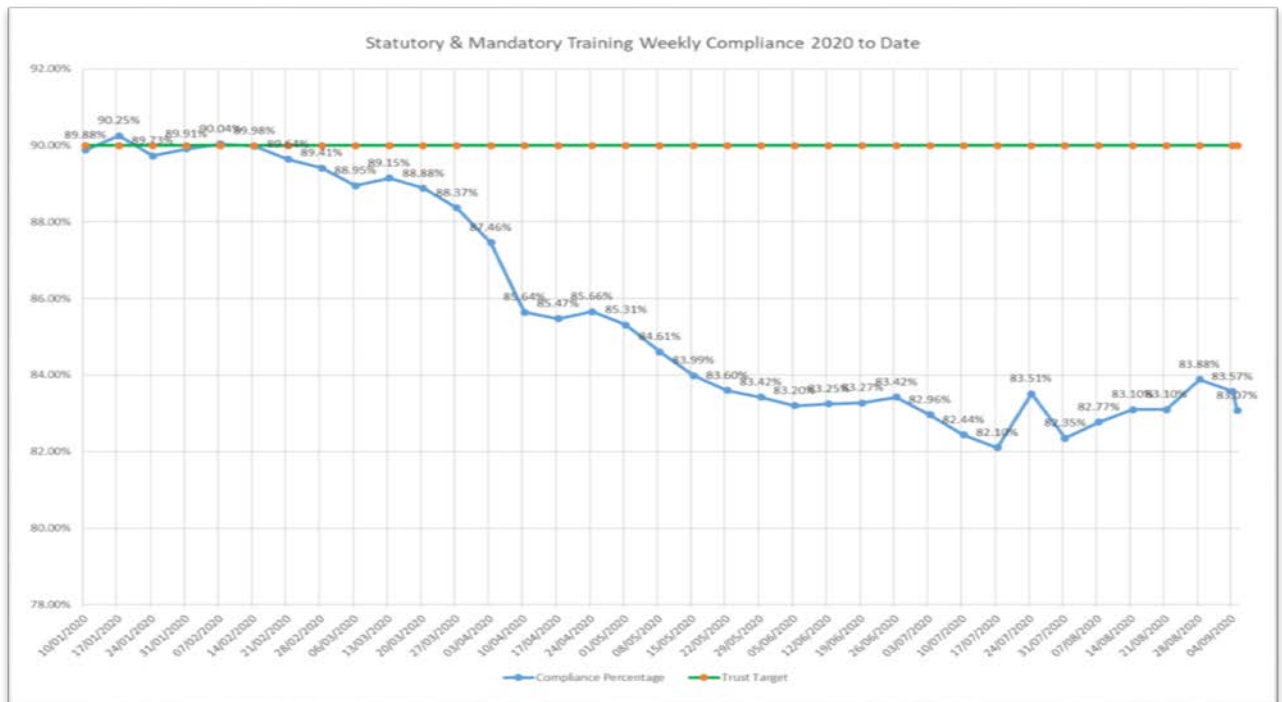
The Trust has 7 live appeals, 2 Disciplinary, and 5 Grievances. There were two cases closed. (One the appeal was upheld and the other not upheld).

Summary of Employment Tribunal cases

There are currently 9 Employment Tribunal cases. One employee has three live employment Tribunals. There are 3 ACAS certificates have been submitted and it is likely they will proceed to an ET.

15. Statutory and Mandatory Training

- Training compliance rose steadily over a 10-month period and reached the trust target in January 2020.
- Compliance levels dropped away during the COVID 19 reduction in classroom learning session. An increase in classroom sessions are planned over the next 3 months, along with a focus on the maintenance of e-learning training. The weekly compliance reports that were a large part of the improvement activity in 2019 restarted in August after being paused during the Covid response and these will now include a specific e-learning profile.



16. Medical Education Activity Update

- Induction meeting 50+ new trainees during the first week of August was virtual and went really well.
- SASG Dr virtual away day planned for 30th October
- We are looking to recruit a new Associate Director of medical education in Luton and Bedfordshire as Seanna Eisenhandler is stepping down. Two very good applicants have been shortlisted for interviews on Tuesday 25th Aug
- Usual Wednesday Local Academic afternoons are in full swing with the new cohort of trainees
- Work is underway to ensure medical students have the same experience of Psychiatry in their 2-week placement, reduced from 5
- We will be taking on Physician Associate students in L&B from Autumn, and in Spring for London placements
- Programmes, support networks are being put in place to better support our Educational Supervisors and we are looking to develop an appraisal process for the ES role across the Trust
- We have ongoing links with Homerton's Newcomb Library – anyone looking for their Athens account, or need help with article searches, or book loans can contact the library on huh-tr.NewcombLibrary@nhs.net – this is for all staff
- We are linking in with a theatre company called Playing ON to develop scenarios and role play for our staff to view, feedback and transform cultures in the Trust which can be quite challenging – this is really innovative, and will be exciting to watch.

17. Medical Staffing

The August 2020 Rotation ran efficiently which included, 68 new joiners, 72 rotated internally to their next placement, and 67 leavers. This year round all the core trainees' posts have been filled. We had 12 Higher Trainee (ST4-6) vacancies, but we have successfully filled 4 posts, which leaves us with 8 Higher Trainee vacancies and 1 FY2 vacancy (vacant for 4 months). All the pre-employments were completed through MS

Teams well in advance of the August rotation and all put on payroll well in advance of the payroll deadline.

18. The NHS People Plan and Promise

The NHS People Plan 2020-2021 was launched in August 2020 and the priorities are as follows. The People Plan sets out to address challenges now, and for the future, the NHS needs more people, working differently, in a compassionate and inclusive culture:

- **more people** in training and education, and recruited to ensure that our services are appropriately staffed;
- **working differently** by embracing new ways of working in teams, across organisations and sectors, and supported by technology;
- **in a compassionate and inclusive culture** by building on the motivation at the heart of our NHS
- **to look after and value our people**, create a sense of belonging and promote a more
- **inclusive service and workplace** so that our people will want to stay.

The People plan sets out practical actions that employers and systems should take, as well as the actions that NHS England and NHS Improvement and Health Education England will take over the remainder of 2020/21. It focuses on:

- **Looking after our people** particularly the actions we must all take to keep our people safe, healthy and well – both physically and psychologically.
- **Belonging in the NHS** highlighting the support and action needed to create an organisational culture where everyone feels they belong.
- **New ways of working and delivering care** emphasising that we need to make effective use of the full range of our people's skills and experience to deliver the best possible patient care.
- **Growing for the future** particularly by building on the renewed interest in NHS careers to expand and develop our workforce, as well as retaining colleagues for longer.

There is also a required action plan in support of the People Plan. An action plan will be presented at the next Committee meeting.

19. Organisational Changes

There are 56 staff affected by organisational changes include transfers under TUPE, relocation, restructuring and closures of wards and services. However, there are 3 staff at risk of redundancy and 2 actual redundancies.

Directorate	Organisational Change – Title/Service	Number of staff affected	No of staff at risk	Actual Redundancies if known	Summary of the change i.e. reason
SCYPS Administration Team	Organisational Change	27	Not expected	None	SCYPS Administration Team. Consultation ended in July 2020. Currently in the process of appointing to the new structure
Blood Borne Virus Service (London)	Closure of service	2	2	2	Blood Borne Virus Service (London) has been closed due to the TUPE transfer of the TH Addictions service
Bedfordshire and Luton MH – CMHT	CMHT Transformation	Not known	None	None	Creating and providing effective and integrated CMHT services across Luton, Central Beds and County Wide over next 3 years - to meet the holistic needs of service users (Early stages yet)
Bedfordshire & Luton MH - CMHT	Relocation	None	None	None	Relocate Bedford Older Peoples Community Mental Health Team and Memory Assessment Team from Florence Ball House, to the proposed Whitbread Building, Twinwoods Health Resource Centre. This includes staff across all bands
BCH – Admin & Senior Management Teams	Relocation	21	N/A	N/A	Relocate from Woburn Court to Queensborough or John Boyoun House as part of the Estate Management strategy urgently vacate WC Still ongoing
BCH – Discharge to Assess Pathway	TUPE-in	N/A	N/A	N/A	Discharge to Assess service from Beds Clinical Commissioning Group to ELFT to improve discharge from Bedford, Luton and Dunstable Hospital to community commissioned beds.

BCH – Speech and Language Therapy	TUPE-in	6	1	TBC	Transformational change/restructuring of the SaLT team (due to commence)
Bedfordshire and Luton MH – CMHT	CMHT Transformation	Not known	None	None	Creating and providing effective and integrated CMHT services across Luton, Central Beds and County Wide over next 3 years - to meet the holistic needs of service users (Early stages yet)
Bedfordshire & Luton MH - CMHT	Relocation	None	None	None	Relocate Bedford Older Peoples Community Mental Health Team and Memory Assessment Team from Florence Ball House, to the proposed Whitbread Building, Twinwoods Health Resource Centre. This includes staff across all bands + Deputy Team Manager
Totals		56	3	2	

20. Covid 19, Race and Privilege

In response to the Civil unrest in the United States, the Trust have run 8 'Covid, Race and Privilege' sessions and a Governor session. We've also run an externally facilitated session with the equality charity called BRAP for People Business Partner's, so that they are better able to support Department Management Teams and a session is pending for the whole People & Culture team.

The themes from these sessions were:

- People being stopped by the Police;
- People feeling that they must suppress how they are feeling because they don't want to be labelled as an angry Black man or Women;
- Lack of Career progression;
- Assimilation – changing names, style of dress, not speaking native languages etc;
- The everyday racism that people race in and outside of work.

The issue of career progression also comes up in the Workforce Race Equality Standard (WRES) and the National Staff Survey.

A Twitter Campaign was launched to address the issue of assimilation, specifically staff using an alternative name whether it's because is easier to spell and/or pronounce or whether it's to use a more English sounding name.

The video that launched the campaign has had more than 6,500 over two weeks. And encouraged staff to reintroduce themselves using their native name and explain its meaning and pronunciation. The campaign can be found here.

https://twitter.com/nhs_elft/status/1290645413469585416?s=12

21. Understanding White Privilege

We have run two sessions in a series of four, CEO discussion Group sessions with the Trust's most senior leaders called 'Understanding White Privilege'. These sessions covered:

- What does it mean to be white?
- White Fragility;
- White Privilege.

We also ran a menti poll after the first session to gauge people's level of comfort when addressing these issues. There were c 28 responses to the survey which will be repeated at the end of the last session.

No	How confident do I feel.....?	Average Score
1	Managing a dispute between a white and black member of my team	7.2
2	Managing disciplinary cases involving black women?	6.9
3	Intervening when I hear a racial slur being used by or against a member of staff?	8.7
4	Noticing and naming a microaggression when it occurs	6.4
5	Coaching or mentoring a member of my team who is racialised differently from me?	8.3
6	Recognising a talented black member of staff and helping them to get promoted?	9
7	While interviewing a white man for a management role, exploring his competence in anti-racism?	6.2
8	Managing an allegation of racial harassment against a high achieving white manager	6.7
9	Explaining to white members of my team why we must address systemic racism in ELFT?	8.2
10	That I wouldn't stay silent if a colleague was racially abused by a member of the public	8.4
11	That I can notice and acknowledge my privilege?	7.5
12	That I understand what is meant by systemic racism and can see instances around me.	7.6

Freedom to Speak Up update: July to August 25th 2020

There were 26 FTSU cases recorded from 1st July 2020 to 25th August 2020. This is one more than previously reported for the last quarter (April to June 2020). However, this current number is over a two-month period.

- 4 are related to Patient Safety / Quality
- 13 are related to Bullying / Harassment
- 15 are related to Processes/ Organisational Structure within services.
- 5 are related to COVID-19.

Bedfordshire reported the majority (10), with those issues mostly surrounding Bullying/Harassment and Processes/Organisational Structures within the services.

Concerns were shared locally with Line Managers or the Service Directors, and virtual meetings where relevant.

The table below shows the broad themes of concerns raised to Freedom to speak as categorised by the National Guardian's Office (NGO).

(*Please note that a concern raised may overlap more than one theme).

Month	Number of cases raised to Freedom to speak up	Themes of concerns			
		Element Patient safety/ Quality	Element of bullying and harassment/ behaviour	Processes/ Organisational Structure/others	COVID19 Related
July	13	3	6	9	3
August	13	1	7	6	2
Total	26	4	13	15	5
Anonymous concern	0				
Suffered Detriment	0				

The Communications team have supported FTSU by sharing information in their 'What's New' weekly email, such as the new FTSU poster and animated poster explaining what FTSU is and who to contact.

Virtual introductory meetings have continued to take place with the FTSUG and Directorate Leads. Virtual meetings are now starting to take place with leadership teams and team leads.

FTSUG completed FTSU training with colleagues on two Away training days in the John Howard Centre; East India Ward and Aldgate Ward.

FTSU People Participation has started to work with Service Users in Wolfson House on 'Speaking Up', with the support of the FTSUG, People Participation Lead and The Advocacy Project.

A new FTSU Ambassador has been recruited in Bedford Community Health.

Data is shared weekly with the Chief Nurse and the Director of People and Culture where FTSU concerns are related to COVID19.

22. Whistleblowing

There have been four Whistleblowing complaints since the last report (as per the Whistleblowing Policy definitions).

- One was in relation to patient care and bullying in the Forensics service.
- Another in relation to unfair recruitment practices in Tower Hamlets community.

- Another in relation to patient care and discrimination within City and Hackney.
- A collective complaint from Luton citing bullying and harassment.

23. Action being requested

The Committee is asked to **RECEIVE** and **DISCUSS** the report.

Appendix 1

Having trouble viewing this email? [View it online](#)



ELFT *Employee Wellbeing*



East London
NHS Foundation Trust

Hello

Welcome to the very first edition of ELFT, BE WELL.

With COVID-19 changing life as we know it, we have no doubt that ELFT employees are taking on a lot. An increase in service user needs, extra childcare responsibility, adapting to agile working, the never-ending house chores and a rise in work pressures... yet, are you taking the necessary time to look after yourself?

That's where we come in. In late 2019, the ELFT Engagement and Wellbeing Team began roadshows at various ELFT sites. We loved meet those of you who dropped by for a chat, however with the travel and social distancing restrictions, this newsletter will replace our roadshows for the time being.

We aim to not overwhelm you with more coronavirus coverage; rather provide clarity on all things ELFT wellbeing, in bite size chunks!



(And if newsletters are not your thing, please do follow us on Twitter @elft.employee.engage).



Wellbeing Wheel

There is always a lot on the go at ELFT and it can be overwhelming to stay on top of the continuous stream of benefits on offer. So to help you find the wellbeing benefits that may be most helpful to you, we have created the ELFT BE WELL wheel.

By clicking on the wheel, you'll be able to see a full list of what you may like to tap into to help you reach your full wellbeing potential.

*We apologise in advance as a few of these offers are on hold due to COVID-19 restrictions, with the hope that we'll pick them up sometime very soon! We have however supplemented these with COVID-19 specific offers... scroll down to see more.

[Read more ...](#)



Yoopies Childcare Platform

Our hats go off to the ELFT parents juggling increased work demands alongside home-schooling and childcare. To assist with this, we have called in backup! Yoopies.co.uk is a platform where childcare seekers and childcare providers can connect. Their multi-criteria search (location, experience, languages spoken and availability) as well as real parent reviews, make it easy to search for care. The platform operates in 10 countries, providing more than 2 million users with a wide range of services. With just a few clicks you can browse through profiles and connect with local childcare providers today. All you need right now is your NHS employee email and the Registration Code: **ELFT2020**

[Read more ...](#)



Health MOT Days Get Your Free Check-up!

The severity of COVID-19 has been found to have positive correlations with health aspects such as BMI and diabetes. Therefore, this couldn't be a better time to get these checked!

A private health MOT is a great way to ensure that your body remains fit and on the right track, which couldn't be more important given the current situation.

MOT stands for Measurements, Observations and Tests. A 15 minute one to one Health Screen covers height, weight, BMI, blood pressure, mental wellbeing, qRisk, diabetes risk and aerobic fitness (if other results suggest a need). These procedures will emphasise on different ways to improve your



Care First: 0800 174 319

A reminder that our Employee Assistance Programme is an anonymous call line directed to external registered counsellors and advisors who are available 24/7. The added stress brought about by pandemic can be extremely overwhelming, but you are not alone. We have had close to 200 employees make use of the Care First services since the start of the pandemic. The service is not only for emergency counselling, it can be used to gain advice on almost any aspect of life, in a work or personal capacity. Topics covered by Care First include work-life balance, national, international & human rights, taxes, travel, transport & holidays, landlord/tenant issues and legal enquiries (& these are just naming a

And finally ...

Your COVID eStaff Risk Assessment



The final date to complete your Staff Risk Assessment is this Friday, 31 July. This is a requirement from NHS England and Improvement for ALL staff to ensure heightened safety for yourselves and your colleagues during the COVID-19 pandemic.

[Click on the eStaff Risk Assessment Form here >>](#)

We have enabled the 'self-service' function so that you can complete the form yourself and agree any actions with your line manager. To do this, you will only need to set aside 10 minutes of your time. You will need your ELFT assignment number at hand. You can find your assignment number by logging into the Electronic Staff Record (ESR) and looking on your payslip.

Please contact your relevant People Business Partner if you have any concerns about completing the Risk Assessment or if you need any additional guidance.

Take Care and Keep Well!

The Engagement & Wellbeing Team

Written by Jill Dabbs, Di Aston and Amy Broadhead

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PEOPLE PLAN ACTIONS

Actions for employers, systems and national
bodies in the NHS People Plan 2020/21

In each area of the [NHS People Plan](#), the document sets out actions for employers, national bodies and systems.

Please find below a summary of these actions:

HEALTH AND WELLBEING

	Action	Who	Timeline (where provided)
1	Put in place effective infection prevention and control procedures.	Employers	
2	Ensure all staff have access to appropriate personal protective equipment (PPE) and are trained to use it.	Employers	
3	All frontline healthcare workers should have a vaccine provided by their employer.	Employers	
4	Complete risk assessments for vulnerable staff, including BAME colleagues and anyone who needs additional support, and take action where needed.	Employers	
5	Ensure people working from home can do safely and have support to do so, including having the equipment they need.	Employers	
6	Ensure people have sufficient rests and breaks from work and encourage them to take their annual leave allowance in a managed way.	Employers	
7	Prevent and tackle bullying, harassment and abuse against staff, and create a culture of civility and respect.	Employers	

8	Prevent and control violence in the workplace – in line with existing legislation.	Employers	
9	NHS violence reduction standard to be launched.	NHS England and NHS Improvement	December 2020
10	Appoint a wellbeing guardian.	Employers	
11	Continue to give staff free car parking at their place of work.	Employers	At least the duration of the pandemic
12	Support staff to use other modes of transport and identify a cycle-to-work lead.	Employers	
13	Ensure staff have safe rest spaces to manage and process the physical and psychological demands of the work.	Employers	
14	Ensure that all staff have access to psychological support.	Employers	
15	Continue to provide and evaluate the national health and wellbeing programme.	NHS England and NHS Improvement	
16	Identify and proactively support staff when they go off sick and support their return to work.	Employers	
17	Ensure that workplaces offer opportunities to be physically active and that staff are able to access physical activity throughout their working day.	Employers	
18	Make sure line managers and teams actively encourage wellbeing to decrease work-related stress and burnout.	Employers	

19	Every member of NHS staff should have a health and wellbeing conversation.	Employers	From August 2020
20	All new starters should have a health and wellbeing induction.	Employers	From October 2020
21	Provide a toolkit on civility and respect for all employers.	NHS England and NHS Improvement	March 2021
22	Pilot an approach to improving staff mental health by establishing resilience hubs.	NHS England and NHS Improvement	
23	Pilot improved occupational health support in line with the SEQOHS standard.	NHS England and NHS Improvement	

FLEXIBLE WORKING

	Action	Who	Timeline (where provided)
1	Be open to all clinical and non-clinical permanent roles being flexible.	Employers	
2	All job roles across NHS England and NHS Improvement and HEE will be advertised as being available for flexible working patterns.	NHS England and NHS Improvement	January 2020
3	Develop guidance to support employers.	NHS England and NHS Improvement	September 2020

4	Cover flexible working in standard induction conversations for new starters and in annual appraisals.	Employers	
5	Requesting flexibility – whether in hours or location, should (as far as possible) be offered regardless of role, team, organisation or grade.	Employers	
6	Board members must give flexible working their focus and support.	Employers	
7	Add a key performance indicator on the percentage of roles advertised as flexible at the point of advertising to the oversight and performance frameworks.	NHS England and NHS Improvement	
8	Support organisations to continue the implementation and effective use of e-rostering systems.	NHS England and NHS Improvement	
9	Roll out the new working carers passport to support people with caring responsibilities.	Employers	
10	Work with professional bodies to apply the same principles for flexible working in primary care.	NHS England and NHS Improvement	
11	Continue to increase the flexibility of training for junior doctors.	Health Education England	

EQUALITY AND DIVERSITY

	Action	Who	Timeline (where provided)
1	Overhaul recruitment and promotion practices to make sure that staffing reflects the diversity of the community, and regional and national labour markets.	Employers	By October 2020
2	Discuss equality, diversity and inclusion as part of the health and wellbeing conversations described in the health and wellbeing table.	Employers	From September 2020
3	Publish progress against the Model Employer goals to ensure that the workforce leadership is representative of the overall BAME workforce.	Employers	
4	51 per cent of organisations to have eliminated the ethnicity gap when entering into a formal disciplinary processes.	Employers	By the end of 2020
5	Support organisations to achieve the above goal, including establishing robust decision-tree checklists for managers, post-action audits on disciplinary decisions, and pre-formal action checks.	NHS England and NHS Improvement	From September 2020
6	Refresh the evidence base for action, to ensure senior leadership represents the diversity of the NHS, spanning all protected characteristics.	NHS England and NHS Improvement	From September 2020

CULTURE AND LEADERSHIP

	Action	Who	Timeline (where provided)
1	Work with the National Guardians office to support leaders and managers to foster a listening, speaking up culture.	NHS England and NHS Improvement	With immediate effect
2	Promote and encourage employers to complete the free online just and learning culture training and accredited learning packages, and take demonstrable action to model these leadership behaviours.	NHS England and NHS Improvement and Health Education England	With immediate effect
3	Provide refreshed support for leaders in response to the current operating environment.	NHS England and NHS Improvement	From September 2020
4	Work with the Faculty of Medical Leadership and Management to expand the number of placements available for talented clinical leaders each year.	NHS England and NHS Improvement	By March 2021
5	Update the talent management process to make sure there is greater prioritisation and consistency of diversity in talent being considered for director, executive senior manager, chair and board roles.	NHS England and NHS Improvement	By December 2020
6	Launch an updated and expanded free online training material for all NHS line managers, and a management apprenticeship pathway for those who want to progress.	NHS England and NHS Improvement	By January 2021
7	All central NHS leadership programmes to be available in digital format and accessible to all.	NHS England and NHS Improvement, Health Education England	By April 2021

8	Review governance arrangements to ensure that staff networks are able to contribute to and inform decision-making processes.	All NHS organisations	By December 2021
9	Publish resources, guides and tools to help leaders and individuals have productive conversations about race, and to support each other to make tangible progress on equality, diversity and inclusion for all staff.	NHS England and NHS Improvement	From October 2020
10	Publish competency frameworks for every board-level position in NHS provider and commissioning organisations.	NHS England and NHS Improvement	By March 2021
11	Place increasing emphasis on whether organisations have made real and measurable progress on equality, diversity and inclusion, as part of the well-led assessment.	Care Quality Commission	Throughout 2020/21
12	Launch a joint training programme for Freedom to Speak Up Guardians and WRES Experts, and recruit more BAME staff to Freedom to Speak Up Guardian roles.	NHS England and NHS Improvement	By March 2021
13	Publish a consultation on a set of competency frameworks for board positions in NHS provider and commissioning organisations.	NHS England and NHS Improvement	During October 2020
14	Finalise a response to the Kark review.	NHS England and NHS Improvement	No timeframe provided
15	Launch a new NHS leadership observatory highlighting areas of best practice globally, commissioning research, and translating learning into practical advice and support for NHS leaders.	NHS England and NHS Improvement	By March 2021

NEW WAYS OF DELIVERING CARE

	Action	Who	Timeline (where provided)
1	Use guidance on safely redeploying existing staff and deploying returning staff, developed in response to COVID-19 by NHSEI and key partners, alongside the existing tool to support a structured approach to ongoing workforce transformation.	Employers	
2	Continued focus on developing skills and expanding capabilities to create more flexibility, boost morale and support career progression.	Employers	
3	Use HEE's e-Learning for Healthcare programme and a new online Learning Hub, which was launched to support learning during COVID-19.	Employers and organisations	
4	Work with the medical Royal Colleges and regulators to ensure that competencies gained by medical trainees while working in other roles during COVID-19 can count towards training.	Health Education England	
5	Develop the educational offer for generalist training and work with local systems to develop the leadership and infrastructure required to deliver it.	Health Education England	During 2020/21
6	Support the expansion of multidisciplinary teams in primary care.	Health Education England	End of 2020/21

GROWING THE WORKFORCE

	Action	Who	Timeline (where provided)
1	Enabling up to 300 peer-support workers to join the mental health workforce and expanding education and training posts for the future workforce.	Health Education England	2020/21
2	Increasing the number of training places for clinical psychology and child and adolescent psychotherapy by 25 per cent (with 734 starting training in 2020/21).	Health Education England	
3	Investing in measures to expand psychiatry, starting with an additional 17 core psychiatry training programmes in 2020/21 in areas where it is hard to recruit, and the development of bespoke return to practice and preceptorship programmes for mental health nursing.	Health Education England	
4	Prioritise the training of 400 clinical endoscopists and 450 reporting radiographers.	Health Education England	2021
5	Training grants are being offered for 350 nurses to become cancer nurse specialists and chemotherapy nurses.	Health Education England	2021
6	Training 58 biomedical scientists, developing an advanced clinical practice qualification in oncology, and extending cancer support-worker training.	Health Education England	2021
7	HEE is funding a further 400 entrants to advanced clinical practice training.	Health Education England	2020/21
8	Investing in an extra 250 foundation year 2 posts, to enable the doctors filling them to grow the pipeline into psychiatry,	Health Education England	2020/21

	general practice and other priority areas, notably cancer, including clinical radiology, oncology and histopathology.		
9	Increase of over 5,000 undergraduate places from September 2020 in nursing, midwifery, allied health professions, and dental therapy and hygienist courses.	Health Education England	2020/21
10	Employers should fully integrate education and training into their plans to rebuild and restart clinical services, releasing the time of educators and supervisors; supporting expansion of clinical placement capacity during the remainder of 2020/21; and providing an increased focus on support for students and trainees, particularly those deployed during the pandemic response.	Employers	2020/21
11	For medical trainees, employers should ensure that training in procedure-based competencies is restored as services resume and are redesigned to sustain the pipeline of new consultants in hospital specialties.	Employers	2020/21
12	Ensure people have access to continuing professional development, supportive supervision and protected time for training.	Employers	2020/21
13	Establish a £10m fund for nurses, midwives and allied health professionals to drive increased placement capacity and the development of technology-enhanced clinical placements.	Health Education England	
14	HEE to further develop its e-learning materials, including simulation, building on the offer provided in response to COVID-19.	Health Education England	2020/21

15	Start delivering a pre-registration blended learning nursing degree programme. The programme aims to increase the appeal of a nursing career by widening access and providing a more flexible approach to learning, using current and emerging innovative and immersive technologies.	Health Education England /Universities	From Jan 2021
16	HEE to pursue this blended learning model for entry to other professions.	Health Education England	From Jan 2021

RECRUITMENT

	Action	Who	Timeline (where provided)
1	Increase recruitment to roles such as clinical support workers, highlighting the importance of these roles for patients and other healthcare workers as well as potential career pathways to other registered roles.	Employers	
2	Offer more apprenticeships, ranging from entry-level jobs through to senior clinical, scientific and managerial roles.	Employers	
3	Develop lead-recruiter and system-level models of international recruitment, which will improve support to new starters as well as being more efficient and better value for money.	Systems	
4	Primary care networks to recruit additional roles, funded by the additional roles reimbursement scheme, which will fund 26,000 additional staff until 2023/24.	Systems	Immediate

5	Increase ethical international recruitment and build partnerships with new countries, making sure this brings benefit for the person and their country, as well as the NHS.	NHS England and NHS Improvement and Health Education England	
6	HEE will pilot English language programmes – including computer-based tests, across different regions as well as offering English language training.	Health Education England	2020/21
7	Establish a new international marketing campaign to promote the NHS as an employer of choice for international health workers.	NHS England and NHS Improvement	2020/21
8	Encourage our former people to return to practice as a key part of recruitment drives during 2020/21, building on the interest of clinical staff who returned to the NHS to support the COVID-19 response.	Employers and systems	2020/21
9	Continue to work with professional regulators to support returners who wish to continue working in the NHS to move off the temporary professional register and onto the permanent register.	NHS England and NHS Improvement and Health Education England	2020/21

RETAINING STAFF

	Action	Who	Timeline (where provided)
1	Design roles which make the greatest use of each person's skills and experiences and fit with their needs and preferences.	Employers	
2	Ensure that staff who are mid-career have a career conversation with their line manager, HR and occupational health.	Employers	
3	Ensure staff are aware of the increase in the annual allowance pensions tax threshold.	Employers	
4	Make sure future potential returners, or those who plan to retire and return this financial year, are aware of the ongoing pension flexibilities.	Employers	
5	Explore the development of a return to practice scheme for other doctors in the remainder of 2020/21, creating a route from temporary professional registration back to full registration.	Health Education England	2020/21
6	Develop an online package to train systems in using the HEE star model for workforce transformation.	Health Education England	2020/21
7	Improve workforce data collection at employer, system and national level.	Health Education England	2020/21
8	Support the GP workforce through full use of the GP retention initiatives outlined in the GP contract, which will be launched in summer 2020.	Systems	

9	Strengthen the approach to workforce planning to use the skills of our people and teams more effectively and efficiently.	Systems	
10	Work with HEE and NHSEI regional teams to further develop competency-based workforce modelling and planning for the remainder of 2020/21, including assessing any existing skill gap and agreeing system-wide actions to address it.	Systems	2020/21

RECRUITMENT AND DEPLOYMENT ACROSS SYSTEMS

	Action	Who	Timeline (where provided)
1	Actively work alongside schools, colleges, universities and local communities to attract a more diverse range of people into health and care careers.	Systems	
2	Make better use of routes into NHS careers (including volunteering, apprenticeships and direct-entry clinical roles) as well as supporting recruitment into non-clinical roles.	Systems	By March 2021
3	Develop workforce sharing agreements locally, to enable rapid deployment of our people across localities.	Systems	
4	When recruiting temporary staff, prioritise the use of bank staff before more expensive agency and locum options and reducing the use of 'off framework' agency shifts during 2020/21.	Systems, employer and primary care networks	2020/21
5	Work with employers and systems to improve existing staff banks' performance on fill rates and staff experience.	NHS England and NHS Improvement	