

**REPORT TO TRUST BOARD**  
**24 March 2022**

<b>Title</b>	Progress Report ELFT People Plan
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<b>Accountable Executive Director</b>	Tanya Carter, Chief People Officer

**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.

**Committees/meetings where this item has been considered**

<b>Date</b>	This paper has not previously been discussed.
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**Key messages**

**What is going well?**  
The ELFT Learning Academy, the new Learning Management System which will house all of the trusts learning was launched and went live on 15<sup>th</sup> February 2022. This launch was accompanied with a trust wide communication plan and a series of launch events and training support to enable to transition from OLM to the new system. Prior to launch of the new system Statutory & Mandatory Training Compliance has risen to 84.43%.

In total, there are 113 live ER cases plus 4 Employment Tribunal cases, 3 ACAS, 128 long-term sickness cases, (This figure does not include long term Covid cases which are being managed informally) and 242 short-term sickness cases being managed by the People Relations team.

The Vitamin D campaign has run for a second year and was taken up by 2,020 members of staff.

ELFT staff have been keen to be proactive in response to war in Ukraine and to do what they can to support the humanitarian response. Some staff are personally affected as they have family and friends in Ukraine. Dr Mohit Venkataram has established a series of meetings for staff to come together to look at options to support fellow healthcare staff and the people of Ukraine. Some Ukraine and Polish staff members have networks in the affected areas so are in direct contact and aware of items and support needed.

**What are the concerns?**  
We are hearing concerns regarding increasing fuel costs, mileage rates. This has been raised nationally and is also being explored within the NEL and BLMK. We have received an update from NHS Employers that they are making a case for a national agreement to improve current arrangements with consideration to improving either the existing rate(s) and/or the 3,5000-mile cap. We have been advised by Department of Health and Social Care (DHSC) colleagues that any change may need treasury approval, given the impact for other parts of the public sector where arrangements are different to those found in the English NHS. We will however, explore what we can do locally to support staff.

### Agency usage

The agency costs continue to be an area of focus. The localities with the highest agency costs are Bedfordshire Mental Health, Specialist Services, Bedfordshire Community Health Services, Newham, and Tower Hamlets Community Health Services.

### Progress since the last report

The Government reversed its decision to mandate the Covid 19 vaccination as a condition of deployment (VCOD) as such, we have ceased putting the requirement for potential candidates to be vaccinated. The Trust have hosted a series of events to focus on the emotional impact of VCOD for People & Culture colleagues, managers and staff. The sessions were well received.

The Trust have received the results of the quarterly pulse survey. We received a 16% response rate, which is 1,487 completed surveys. The ELFT staff engagement score is 7.15, which is higher than the Picker average of 6.75.

### Strategic priorities this paper supports

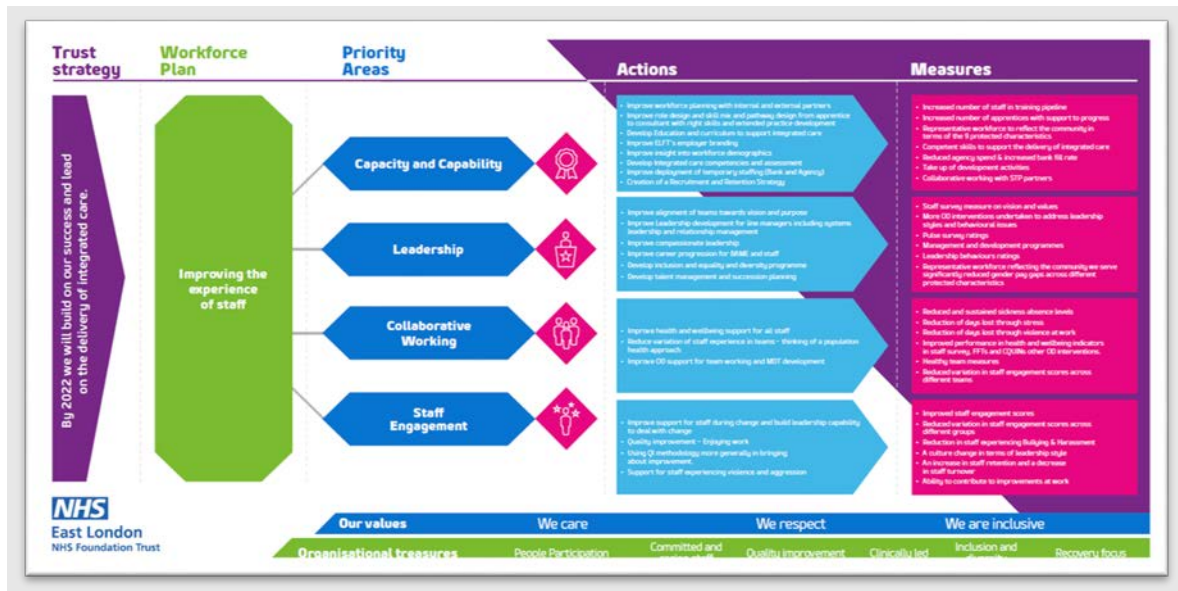
Improved population health outcomes	<input checked="" type="checkbox"/>	We have taken a population health approach to our staff wellbeing as many members of staff live and or work within the boroughs that we provide services in.
Improved experience of care	<input checked="" type="checkbox"/>	Research 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 are healthier and more 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.

## 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. The People and Culture team are reviewing the ELFT People Plan in support of the new Trust strategy for 2022-2026.



- 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. The people and culture team have continued to focus on supporting staff across the Trust in responding to the challenges of COVID-19.
- 2.2. The COVID testing programme requires staff to use the universal system to order their own kits via dedicated NHS England portal. However, the access to Lateral Flow Devices (LFTs) will come to an end from 1<sup>st</sup> April, meaning that the public will no longer be able to order free tests. We are still awaiting formal guidance on the provisions for NHS trusts and staff but intend to put arrangements in place to ensure that staff can access these tests so that robust testing arrangements remain in place.
- 2.3. Saliva based (Loop-mediated Amplification technology) LAMP testing has been decommissioned and the programme will stop on 31<sup>st</sup> March 2022.
- 2.4. Staff vaccination continues to take place with staff being able to access services at Stratford Westfield vaccination site in London and we continue to encourage staff to take advantage of the opportunity of vaccination.

- 2.5. ELFT has been confirmed to remain as the lead employer for mass vaccination programme for the North East London Integrated Care system. The revised draft for Lead Employer role has been submitted to Vaccinations and Immunisations Board for review and final sign-off.
- 2.6. The programme is now entering phase 4 of the vaccination programme and will focus on continuation of the COVID-19 booster programme for 75+, all 16-17 and 12–15 year-olds second doses, and healthy 5-11 years old.

### **3. Vaccination as a condition of deployment (VCOD)**

- 3.1. Following the Trust's significant preparation for Covid-19 vaccination as a condition of deployment to become effective from 1<sup>st</sup> April 2022, this requirement has now been revoked.
- 3.2. The process of implementing VCOD did cause some concern in terms within the Trust and to respond to this the People and Culture team have worked in partnership with the Trust executive to run conversations on the 'emotional impact of Covid and VCOD'. Circa 100 attendees have been to these sessions to date and further events are scheduled to take place.

### **4. NHS Health observatory report**

- 4.1. The NHS Health observatory report was published in February 2022. The report focused on the following areas:
  - access to, experiences of, and outcomes of, mental healthcare.
  - access to, experiences of, and outcomes of, maternal and neonatal healthcare.
  - digital access to healthcare; genetic testing and genomic medicine.
  - the NHS workforce.
- 4.2. The review found evidence of ethnic inequalities across a range of professions and settings in the NHS. Two large studies showed that Covid-19 infection was higher in ethnic minority staff in the NHS, particularly for Black and Asian staff. There was also evidence to suggest that the Covid-19 pandemic has disproportionately affected ethnic minority healthcare workers' working environment, in terms of access to adequate PPE and the greater negative effect of the pandemic on ethnic minority staff mental health.
- 4.3. The review found evidence of NHS ethnic minority staff experiencing racist abuse from other staff and patients and this was particularly stark for Black groups. Most of the qualitative studies on experiences of racist abuse in the NHS workforce have been undertaken with nurses (and particularly Black African nurses or those that have been internationally recruited), indicating a lack of research on the experiences of other ethnic minority groups working in the NHS.
- 4.4. The review found limited and mixed evidence on ethnic inequalities in NHS staff mental health and wellbeing. Notably, there was very limited evidence connecting the racist experiences endured by staff and their mental health, wellbeing and likelihood of burnout, and indeed other health outcomes. The studies on career progression

were largely qualitative and conducted mainly with women; these studies showed how racism played out in the workplace to hamper ethnic minority staff's career progression and professional development.

- 4.5. There was also evidence for an ethnic pay gap in most staff sectors in the NHS and which was evident for Black, Asian, Mixed and Other groups, but less so for Chinese groups. The findings of the report already align with some of the work being undertaken in the context of the Workforce Race Equality Standards (WRES) actions and the Equality Delivery Scheme (EDS2) action plan that is being drafted.
- 4.6. In addition, the Equality plan (for staff) 2022-2026 and the People plan 2022-2026 are in draft and will seek to address the inequalities highlighted in the internal action plans and the Race Observatory Report.

## 5. Employee Relations Activity Report – February 2022

- 5.1. In total, there are: 113 live ER cases plus 4 Employment Tribunal cases, 3 ACAS, 128 long-term sickness cases, (This figure does not include long term Covid cases which are being managed informally) and 242 short-term sickness cases being managed by the People Relations team.

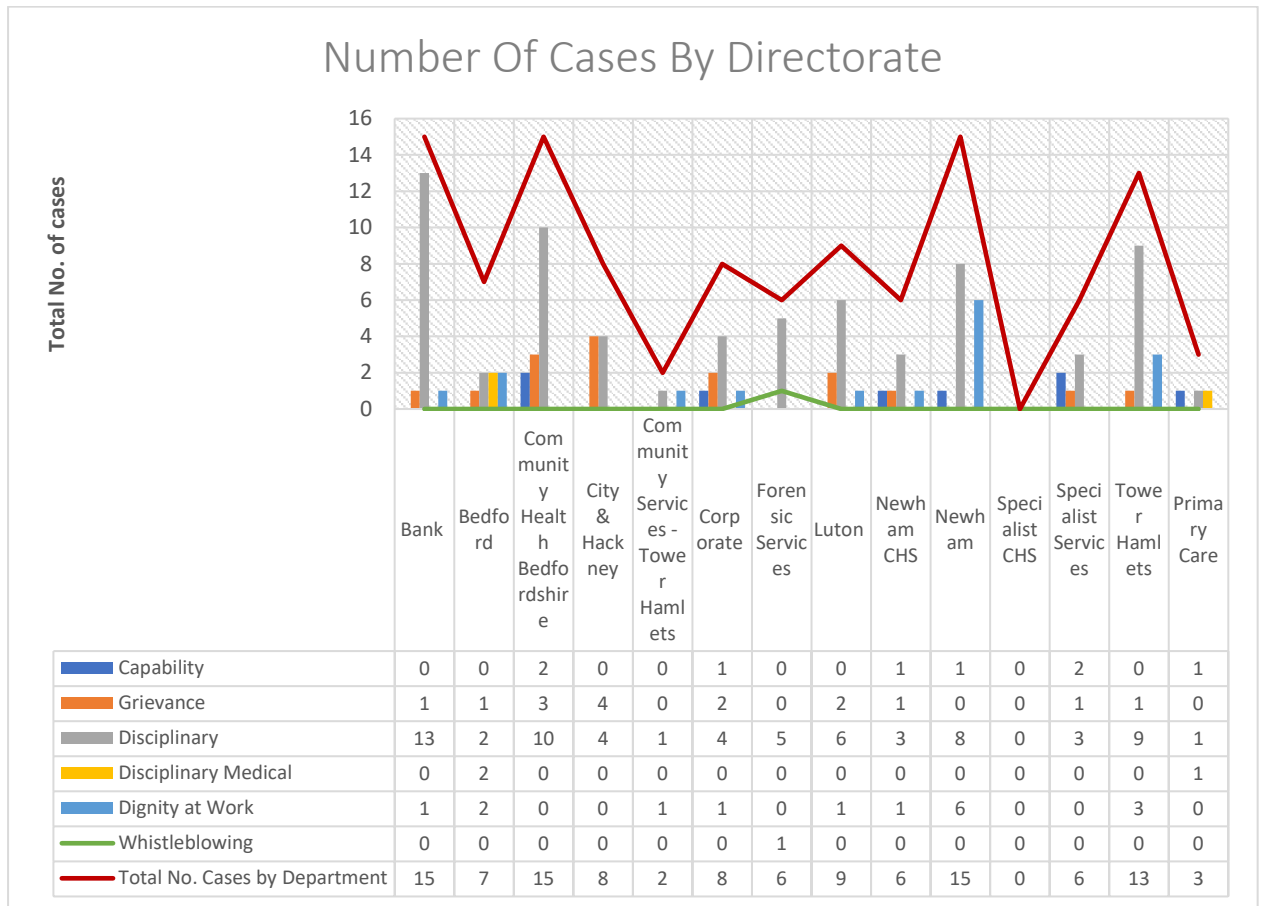
### ER Case Breakdown by Month

Case Type	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb
Capability	10	9	9	10	7	8	6	10	9	11	10	8
Dignity at Work	14	11	6	7	9	9	14	13	10	14	13	16
Disciplinary	53	49	51	53	47	46	40	42	56	62	58	69
Disciplinary (Medical)	2	1	2	3	2	2	2	2	2	3	3	3
Grievance	13	14	9	11	13	13	14	13	14	15	15	16
Whistleblowing									1	0	0	1
Tribunals	8	9	9	9	10	10	12	10	8	7	5	4
<b>Total</b>	<b>100</b>	<b>93</b>	<b>86</b>	<b>93</b>	<b>88</b>	<b>88</b>	<b>88</b>	<b>90</b>	<b>100</b>	<b>112</b>	<b>104</b>	<b>117</b>

- 5.2. Whistleblowing cases were previously reported separately as such none are recorded in this table pre November 2021. They are now logged in the central ER system and will be included in the overall ER case numbers going forward. That said, there has been a decline in the number of Whistleblowing cases and for the first time in a number of years there had been none to report in December and January. The Chief People Officer is working with the Freedom to Speak up Guardian to raise awareness as to how to raise the different kind of concerns.

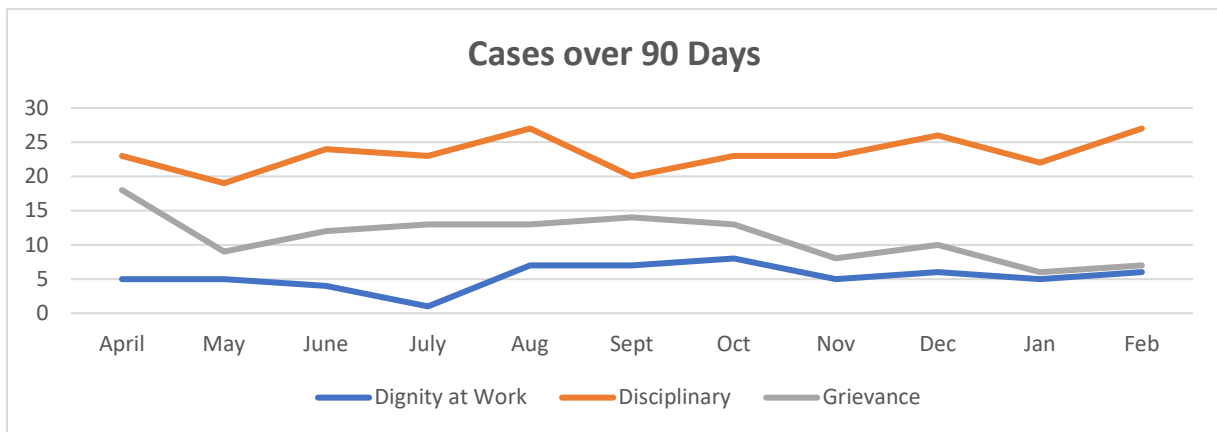
- 5.3. The Pastoral Care role that was implemented to support staff going through these cases has been really well utilised and we are receiving positive feedback from staff who are in receipt of support about the difference that it is making to them going through the process. The postholder was awarded employee of

the month in March 2022 based on feedback received for her input and and impact supporting staff.



### Average duration of open cases

Case Type	May (Days)	June (Days)	July (Days)	August (Days)	Sept (Days)	Oct (Days)	Nov (Days)	Dec (Days)	Jan (Days)	Feb (Days)
Dignity at Work	168	118	92	86	59	78	93	76	91	95
Disc	111	118	113	115	121	98	71	75	87	86
Griev	130	247	168	152	155	155	136	133	124	131

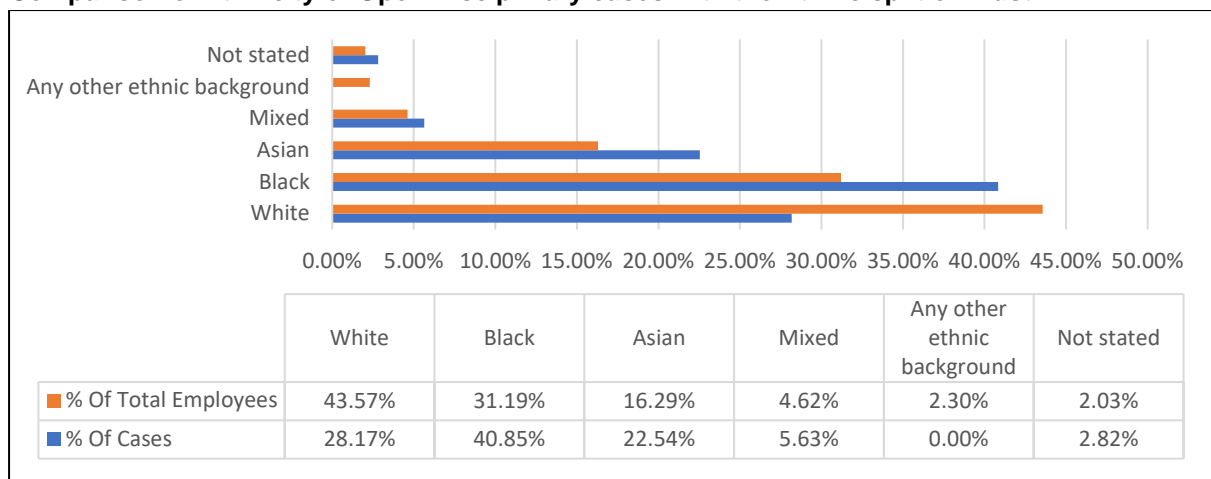


### 6. Number of suspensions per month

Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb
2	4	4	5	5	5	5	5	1	1	1	3	6	6	6

6.1 At present there are 6 employees suspended from the Trust. Allegations include Theft, sexual assault and 3 police arrests. There are also 24 people on restricted duties whilst issues are investigated.

### 7. Comparison of Ethnicity of Open Disciplinary cases with the Ethnic split of Trust



7.1. A review of the disciplinary data will be undertaken to ascertain whether the slight increase *the relative likelihood of staff entering the formal disciplinary process, from Black, Asian and Minority Ethnic backgrounds (BAME); in the 2021 WRES submission indicator 3* is more significant than normal variation.

7.2. This will be fed back to the next Appointments and Remuneration Committee.

## 8. Appeals

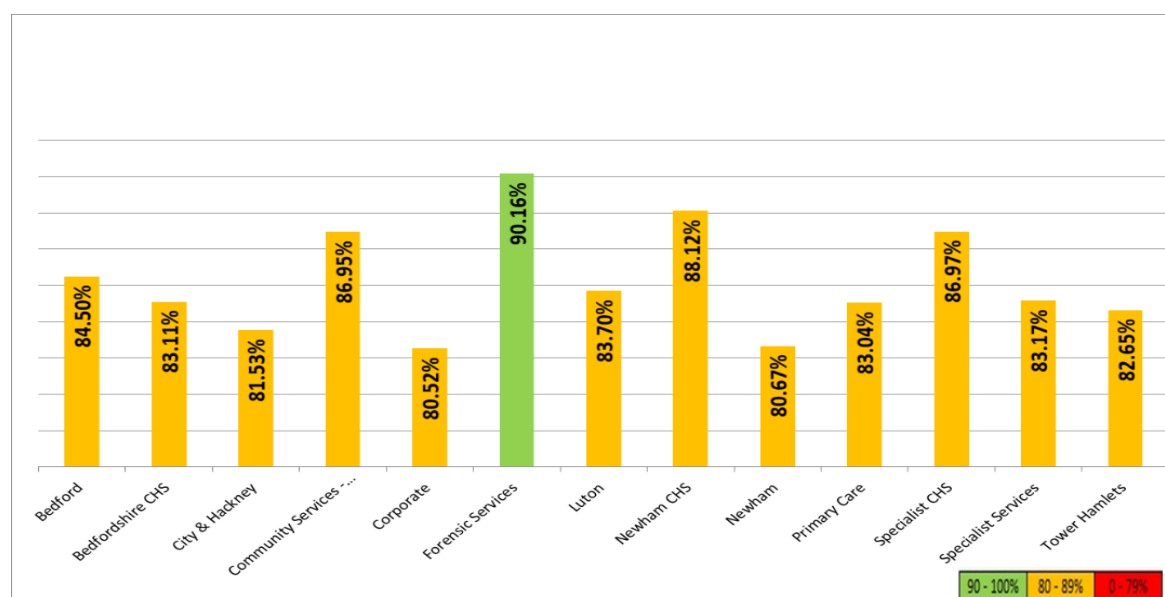
The Trust has 2 live appeals and closed 2 employee relations cases in February 2022.

Case Type	Total No. of closed cases for June	Total No. of closed cases for July	Total No. of closed cases for August	Total No. of closed cases for Sept	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
Capability	0	2	3	1	1	0	0	0	1
Dignity at Work	2	1	1	2	4	4	0	1	1
Disciplinary	9	9	14	11	15	12	9	10	3
Grievance	0	2	2	2	3	2	1	1	0
<b>Total:</b>	<b>11</b>	<b>14</b>	<b>20</b>	<b>16</b>	<b>23</b>	<b>18</b>	<b>10</b>	<b>12</b>	<b>5</b>

## 9. ELFT Learning Academy

9.1. The ELFT Learning Academy, the new Learning Management System which will house all of the trusts learning was launched and went live on 15<sup>th</sup> February 2022. This launch was accompanied with a trust wide communication plan and a series of launch events and training support to enable to transition from OLM to the new system.

9.2. Prior to launch of the new system Statutory & Mandatory Training Compliance has risen to 84.43%, split by directorate as follows:





- 9.3. As a result of the new functionality of this system, staff have been accessing and completing the core e-learning modules and completing them at a higher rate than in previous months which is expected to have a positive impact on overall compliance rates.
- 9.4. Once the launch phase has been completed and all launch system and data issues have been addressed formal reporting will recommence. At this time the next phase of the project will commence which has three strands:
- Work with the training teams across the trust to insert their training content into the system. This will include training 190 trainers and administrators across the trust.
  - Develop and implement a new appraisal process into the system
  - Develop and implement a new approach to Supervision within the system.
- 9.5. The Team have also been undertaking a series of Meetings with the Chief Operating Officer and the borough directors with the aim of understanding what if any local needs and issues may exist around access and uptake of Statutory and Mandatory Training with the aim of creating local provision of needed to address requirements and support the increase of compliance levels across the DMTs.

## **10. Apprenticeships**

- 10.1. A new Lead for Apprenticeships joined the People Development Team in February. The primary aim of ensuring the trust is maximising the use of apprenticeships and that the learner journey for the apprentice is to the highest possible level.
- 10.2. Initial data shows that 19% of apprentices who commence apprenticeships withdraw from their programme and work is underway to review the reasons and drivers for these withdrawals and to review the way that the Trust can best support the effective use of apprenticeships.
- 10.3. This review will include in the proposal an end-to-end process for apprenticeship management which will set the steps and gates that must be followed by functions wishing to commence apprenticeships to ensure that appropriate governance, support and processes are in place for the lifetime of the apprenticeship.

## **11. Medical Education Update**

- 11.1. 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 all ELFT staff (not just medics) can be found here: <https://www.homerton.nhs.uk/east-london-> ELFT's self-evaluation report on library services in line with the Quality and Improvement Outcomes Framework has been submitted. Within the next month the results will be released, and the Director of P&C, ELFT's Quality Lead, and the Chief Exec will receive an executive summary.

- 11.2. The Queen Mary Barts and the London Medical School Site visit to the Trust took place on 8<sup>th</sup> March, with the overwhelming majority of feedback from medical students being extremely positive in respect of the teaching we provide, along with their actual clinical exposure. The visit also covered the work that will be required to support the increasing number of students as this continues to expand.
- 11.3. Discussions are currently underway with clinical directors and Finance to establish if we can accommodate requests to take on additional Core and GP trainee placements. This will help support junior doctor rotas, demand on trainees. This will also in turn increase attractiveness to recruit to substantive Consultant posts and links in very well with the Consultant recruitment drive in L&B
- 11.4. The Medical Education and People Participation team have also teamed up again to prepare teaching to medical students where students can speak directly to those who have experience receiving direct clinical care and who are open to discussing their experiences with mental health. These sessions have continued to work well, and this is therefore being rolled out trust wide so students across the whole trust get the same opportunities.
- 11.5. An HEE quality visit is being planned for 5<sup>th</sup> May to meet with core trainees working in Tower Hamlets and Forensic services.
- 11.6. HEE also conducted a Learner and Educator review of Child and adolescent psychiatry at the Coburn Unit on 20 January 2022. They met with Trainees, Trainers, Educational Supervisors and senior management to discuss the training opportunities available at the Coborn Unit following some issues raised in the 2021 GMC National Training Survey. Agreed areas of action include involving trainees more in clinical decision making, ring-fenced supervision, and improved induction to set clearly set out expectations and objectives.
- 11.7. The GMC National Training Survey (NTS) will be open from Tuesday 22<sup>nd</sup> March to Tuesday 3<sup>rd</sup> May 2022. This is an opportunity for doctors in training to feedback on their experiences working in ELFT. More promotion will be shared in the coming weeks.

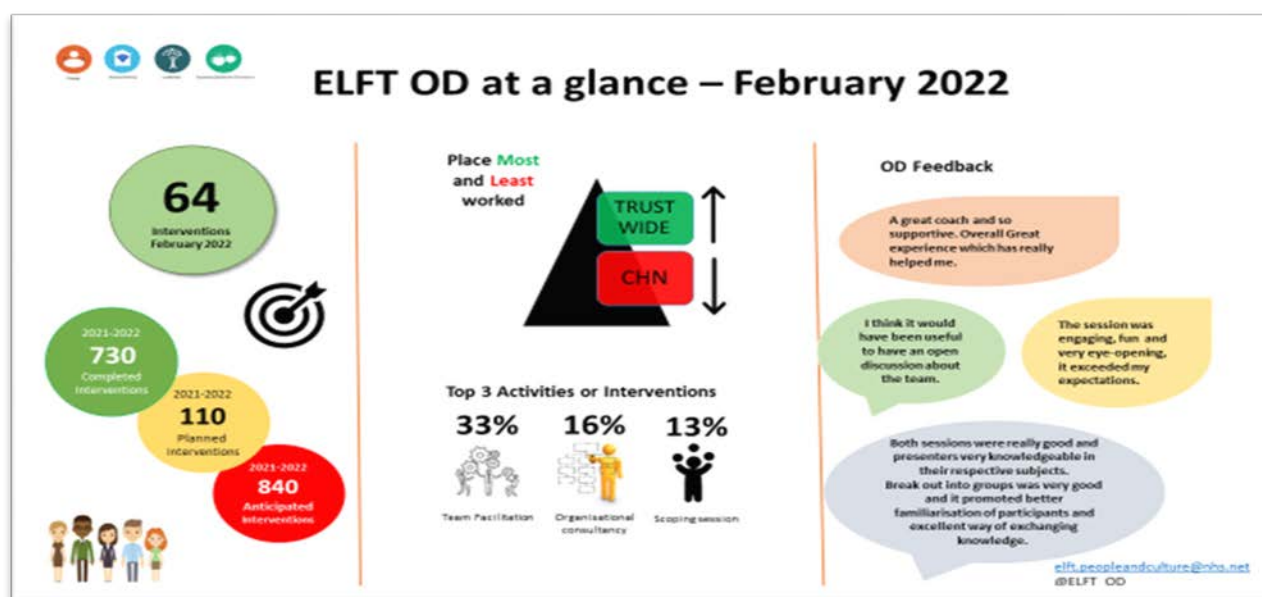
## **12. Digital Passports**

- 12.1. As part of Health Education England's (HEE) ongoing work to improving staff experience, and set out in the interim People Plan, NHS Long Term Plan and the 2016 Junior Doctors Contract negotiations, ELFT has signed up to work with HEE to enable Training Grade Drs to more easily move from one NHS employer to another.
- 12.2. The aim of the Enabling Staff Movement Strategy is to improve the experience of staff when they move between roles in the NHS, reducing the duplication of form filling, employment checks and mandatory training so that they can spend more time with patients.
- 12.3. At present, the procurement of suppliers for the NHS Digital Staff Passport Service (wallet providers) and the NHS Employing Organisations' Digital Staff Passport Portal are due to be finalised in the coming weeks. In preparation for implementation of the digital staff passport, ELFT has been asked to review current data quality in relation to the six employment checks, core skills training and immunisations and vaccination.

### 13. Organisational Development Activity

13.1. The Organisational Development (OD) Team completed 64 interventions in February, bringing the total number of interventions completed to date, to 730. The top three activities delivered in February were:

- Team facilitation (33%)
- Organisational Consultancy (16%)
- Scoping Sessions (13%)



In addition, the team:

- Have supported the selection of a number of senior appointments.
- Are developing leadership offer for 22/24, for leaders at all levels of the organisation.

### 14. Quarterly Pulse Survey

14.1. The first National Quarterly Pulse Survey (NQPS) campaign launched in January. Aligning to the National Staff Survey, we used Picker to run the survey & the NQPS ran from 4 January 2022 - 31 January 2022. In summary:

- We received a 16% response rate, which is 1 487 completed surveys.
- Of the 9 core questions, 7 received a positive score of 65.0% or higher.
- The scores for the two staff friends & family questions were:
  - I would recommend my organisation as a place to work – 71.0%.
  - If a friend or relative needed treatment, I would be happy with the standard of care provided by this organisation - 68.2%.
- Our staff engagement score is 7.15, which is higher than the Picker average of 6.75.

## National Quarterly Pulse Survey

### Response rate dashboard



Response rate for your organisation

16%

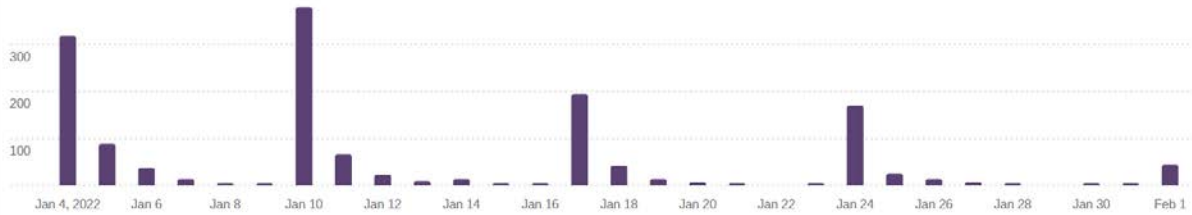
Distribution statistics

Invites sent	Survey completed	Response rate
9,137	1,487	16%

Picker Average response rate

23%

Response count by day for your organisation

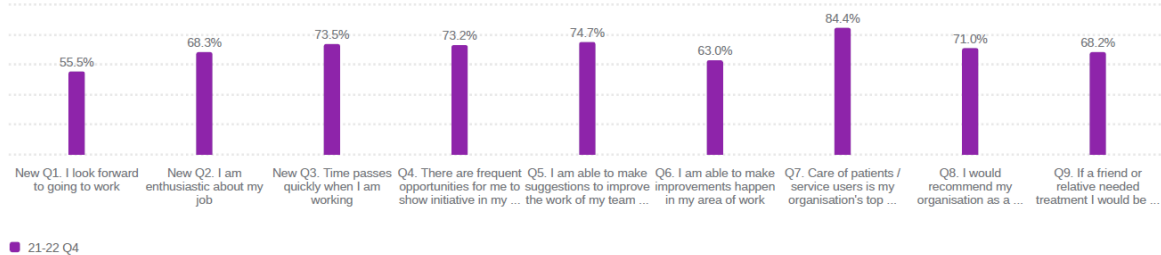


## National Quarterly Pulse Survey

### Core questions breakdown



Core question positive scores for your organisation by quarter

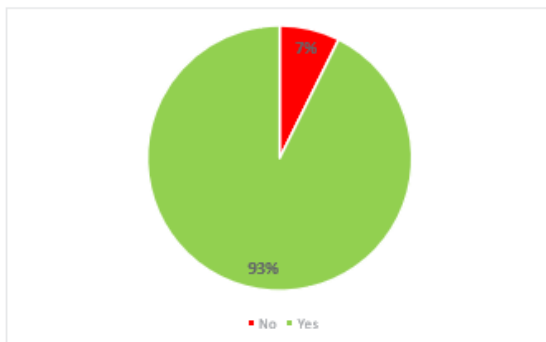


<p>Staff Engagement Score</p> <p>1,419</p> <p><b>7.15</b></p>	<p>Motivation score</p> <p>1,389</p> <p><b>7.10</b></p>	<p>Motivation question scores</p> <table border="1"> <tr> <td>Q1. I look forward to going to work</td> <td>Q2. I am enthusiastic about my job</td> <td>Q3. Time passes quickly when I am working</td> </tr> <tr> <td>6.45</td> <td>7.21</td> <td>7.63</td> </tr> </table>	Q1. I look forward to going to work	Q2. I am enthusiastic about my job	Q3. Time passes quickly when I am working	6.45	7.21	7.63
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6.45	7.21	7.63						
	<p>Involvement score</p> <p>1,421</p> <p><b>6.94</b></p>	<p>Involvement question scores</p> <table border="1"> <tr> <td>Q4. There are frequent opportunities for me to show initiative in my role</td> <td>Q5. I am able to make suggestions to improve the work of my team / department</td> <td>Q6. I am able to make improvements happen in my area of work</td> </tr> <tr> <td>7.06</td> <td>7.13</td> <td>6.62</td> </tr> </table>	Q4. There are frequent opportunities for me to show initiative in my role	Q5. I am able to make suggestions to improve the work of my team / department	Q6. I am able to make improvements happen in my area of work	7.06	7.13	6.62
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<p>Staff Engagement Score</p> <p>7.15</p> <p>6.75</p> <p>21-22 Q4</p> <p>Your organisation</p> <p>Picker Average</p>	<p>Advocacy score</p> <p>1,414</p> <p><b>7.40</b></p>	<p>Advocacy question scores</p> <table border="1"> <tr> <td>Q7. Care of patients / service users is my organisation's top priority</td> <td>Q8. I would recommend my organisation as a place to work</td> <td>Q9. If a friend or relative needed treatment I would be happy with the standard of care provided by this organisation</td> </tr> <tr> <td>8.01</td> <td>7.19</td> <td>7.00</td> </tr> </table>	Q7. Care of patients / service users is my organisation's top priority	Q8. I would recommend my organisation as a place to work	Q9. If a friend or relative needed treatment I would be happy with the standard of care provided by this organisation	8.01	7.19	7.00
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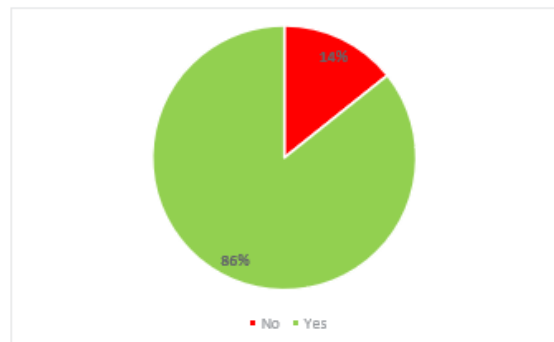
## 15. Wellbeing

- 15.1. During wave 1 of the pandemic the RSM audit that was planned for Wellbeing was amended to include surveys and to engage with staff to assess the effectiveness of the wellbeing initiatives and the communications surrounding these initiatives.
- 15.2. In summary, there is good feedback in terms of the Trust wellbeing offering and the two main actions are improving the access to these wellbeing offers, improve the communication and improving development for managers to be able to support staff.

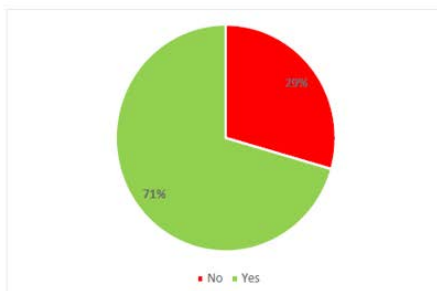
1) Do you feel there is a requirement for wellbeing initiatives at ELFT?



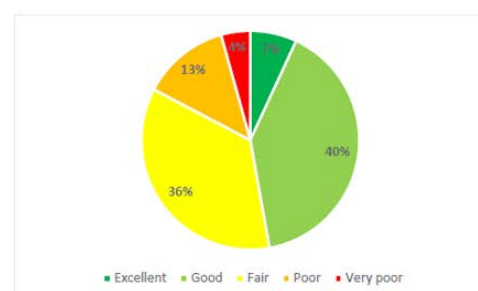
2) Have the previous 12 months placed more awareness of wellbeing on the Trust?



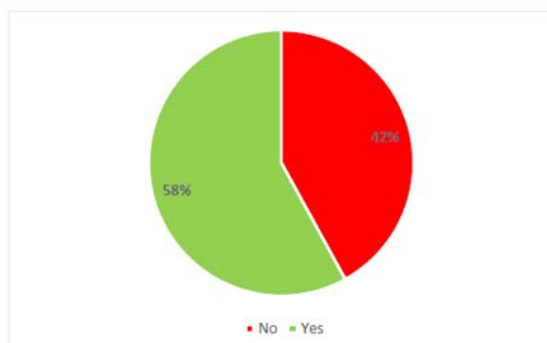
3) Are you aware of the work being undertaken on wellbeing at the Trust?



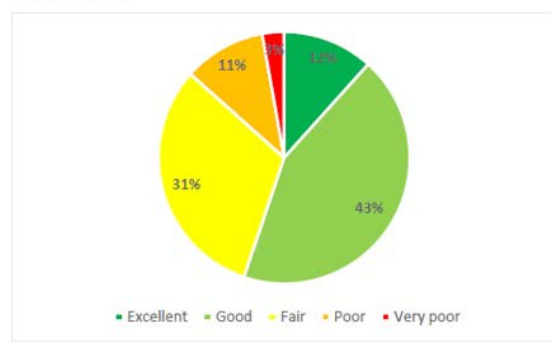
4) How would you describe the tools and resources available to you for wellbeing?



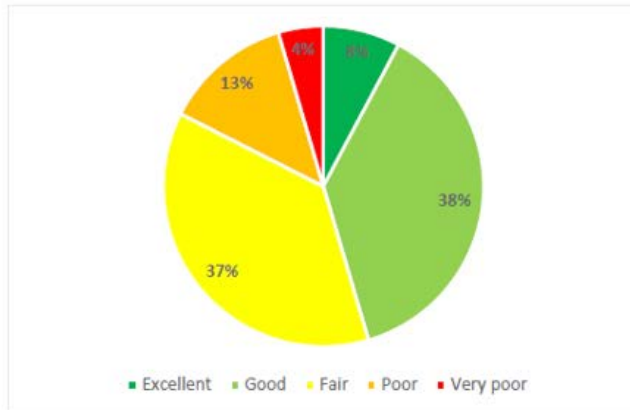
5) Are there effective channels in place to identify all wellbeing concerns?



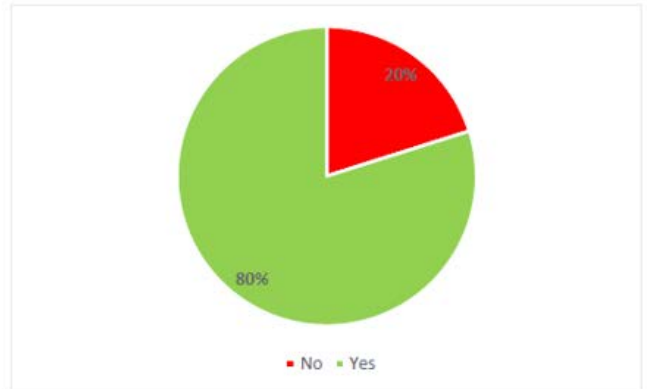
6) How would you describe the communication to staff on wellbeing in the past 12 months?



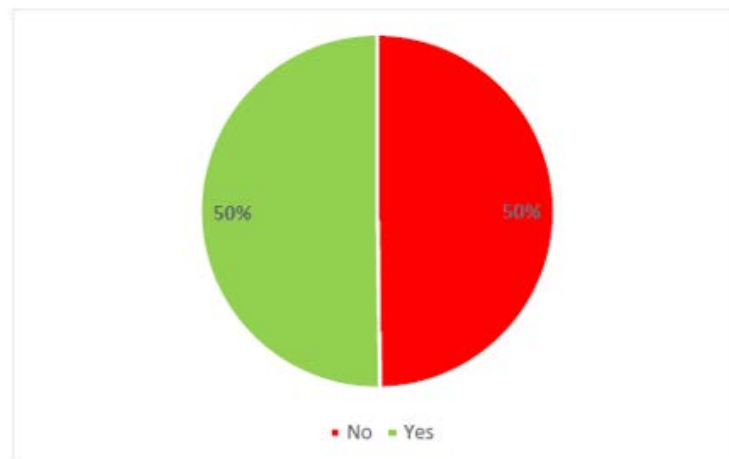
7) How would you describe the pace of delivery of wellbeing initiatives?



8) Has your line manager been accessible and in regular contact, providing any necessary support?



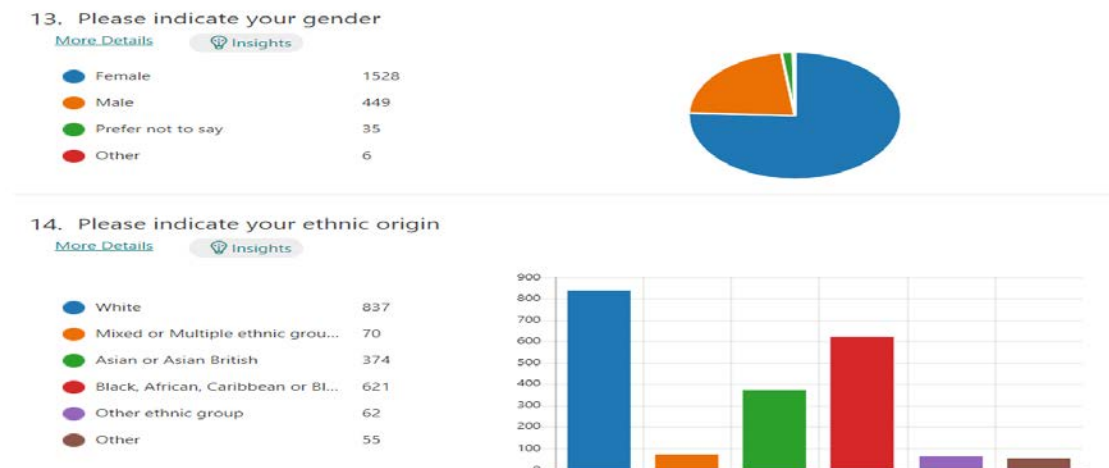
9) Do you feel managers have been appropriately trained to provide you with the relevant support regarding your wellbeing?



- 15.3. The Wellbeing & Engagement team have successfully recruited 4 more Bullying & Harassment advisors Trust wide and ACAS training has taken place (The Advisory, Conciliation and Arbitration Service).
- 15.4. The ELFT BE WELL newsletter, edition 15, was launched in February. The newsletter continues to receive a good read rate and positive feedback. It is proving to be a key tool in communicating what is on offer wellbeing-wise to the Trust.
- 15.5. Work on providing more relevant financial assistance to ELFT staff in the forms of financial education, savings and loans are being looked into. Two providers that we are currently working with include Salad Money & The Credit Union.
- 15.6. The Wellbeing & Engagement team continue to arrange the Covid Support Social Group (which has replaced the Shielding Social Group).

## 16. Vitamin D

- 16.1. The Vitamin D campaign is now closed for the Winter of 2021/2022. A free 3-month supply of Vitamin D was offered to all ELFT staff, and the Wellbeing & Engagement team worked closely with the Pharmacy team to ensure an efficient supply & demand ordering process. This time around the campaign received 2,020 requests, all of which have now been processed. Please see a more detailed breakdown of Vitamin D requests below:



## 17. Menopause Champion

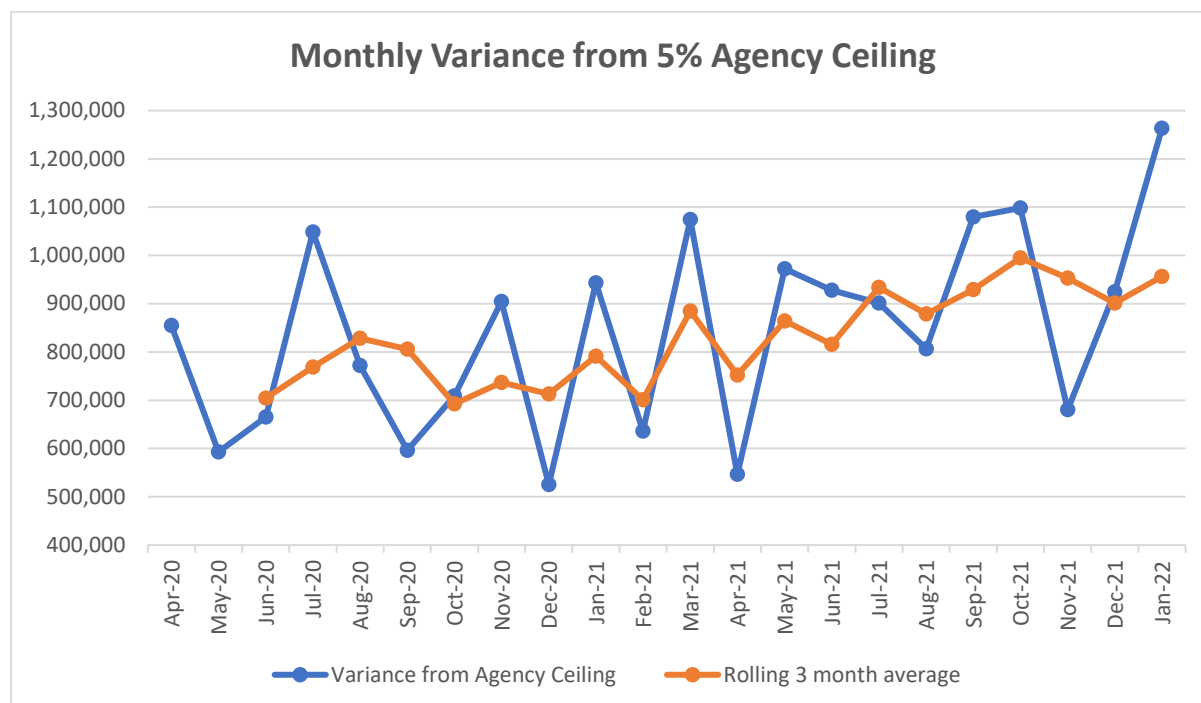
- 17.1. Philippa Graves, Chief Digital Officer was announced as the Trust's Menopause Champion. The Women's network under Philippa's leadership, will work with the P&C team to continue the work on Menopause offer to support women within the Trust.

## 18. ELFT Response to Ukraine Humanitarian Crisis

- 18.1. ELFT staff have been keen to be proactive and to do what they can to support the humanitarian response to war in Ukraine. Some staff are personally affected as they have family and friends in Ukraine. Dr Mohit Venkataram has established a series of meetings for staff to come together to look at options to support fellow healthcare staff and the people of Ukraine. Some Ukraine and Polish staff members have networks in the affected areas so are in direct contact and aware of items and support needed.
- 18.2. The Trust has established an intranet page with links to organisations and charities that are leading of the humanitarian effort. Staff have been asked to look in storerooms and stock cupboards to identify sealed items close to their expiry date that can be sent to organisations gathering key items.
- 18.3. The Trust has also issued a request to psychologists that speak Russian or Ukrainian on behalf of the British Psychological Society, to be part of a helpline rota for people to contact. We will continue to monitor the situation and offer appropriate support as needed.

## 19. Update on Agency Usage/Spend – January 2022

- 19.1. Agency costs continue to be significant. The graph below shows the monthly agency spend against the variance from the monthly 5% agency ceiling.



- 19.2. The localities with the highest agency costs are Bedfordshire Mental Health, Specialist Services, Bedfordshire Community Health Services, Newham, and Tower Hamlets Community Health Services. Across all services, vacant posts are being advertised to try and ensure that the workforce is fully and properly established.
- 19.3. Bedfordshire and Luton CAMHS continue to use agency staff due to the difficulties in recruiting to roles. There is also pressure in Specialist and Community Health Services to stand up services at short notice and for time limited period. As a result, agency staff are being used to provide short term support. To address the high vacancies within Community Services, the services are exploring the option of international recruitment via Capital Nursing and this project is being extended to Specialist Services. To date, there have been 4 nursing appointments using this scheme. It is expected that some of the new appointments will be placed in Bedfordshire CHS.

## 20. Freedom to Speak Up Update Report 1st January to 28th February 2022

- 20.1 26 concerns have been raised, an increase of 6 concerns raised from the last reporting period (November & December 2021). Amongst these, Bullying, Harassment and Negative Behaviours have seen an increase. Covid-19 related concerns have also seen an increase (which were related to the vaccination mandate)

The theme with the highest level of reporting was Processes / Organisational Structure / Other. These concerns relate to an Admin consultation, HR process, and bank staff employment and how shifts are allocated.

Worker safety concerns related to cleanliness, hygiene, equipment testing, safety for using, and personal safety concerning interactions with service users/patients.



- 20.2 All concerns raised have been escalated to Service Directors and/or P&C as appropriate to the nature of the concern raised.
- 20.3 Work continues to raise awareness of Freedom to Speak Up. This has included a session with Governors on creating a speak up, listen up, follow up culture in ELFT; a FTSU Champions training session, and team based training with pharmacy and Tower Hamlets teams.

**Table 1.1 FTSU concerns raised - by Themes**

<b>FTSU Concerns Raised - Data by Themes</b>	<b>1<sup>st</sup> January to 28th February 2022</b>
Patient Safety/Quality of Care	1
Bullying/Harassment/Negative Behaviours	7
*Worker safety	4
Processes/Organisational Structure/ Other	12
COVID-19 related	2
Others	0
Unknown	0
<b>**Total number of themes</b>	<b>26</b>
<b>Total Number of staff raising concern</b>	<b>20</b>
Number of concerns raised anonymously	1
***Disadvantageous and/or demeaning treatment as a result of speaking up	0

\***Worker safety** added as a category by the National Guardian Office as of July 2021.

\*\***Total number of themes** *does not always correspond* with the total number of staff raising concern, one staff concern can relate to multiple themes.

\*\*\* The term '**detriment**' now replaced with 'disadvantageous and/or demeaning treatment', though the term detriment is still used in brackets to avoid any confusion.

**Table 1.2 FTSU concerns raised - by Directorate.**

<b>FTSU Concerns Raised - Data by Directorate</b>	<b>1st January to 28th February 2022</b>
Bedfordshire	7
City & Hackney Services	0
Community Health Services - Bedfordshire	0
Community Health Services - Newham	1
Community Health Services - Tower Hamlets	0
Corporate Services	3
Forensic Services	1

Luton	0
Newham	0
Primary Care Directorate	2
Specialist Services	0
Tower Hamlets	6
UNKNOWN	0
<b>TOTAL</b>	<b>20</b>

The most notable increases in FTSU concerns from Directorates are:

- Bedfordshire (which relate to the admin consultation taking place and the vaccination mandate)
- Tower Hamlets (four of which relate to worker safety)

**Table 1.3 FTSU concerns raised - by Professional Group**

<b>FTSU Concerns Raised - Data by Professional Group</b>	<b>1st January to 28th February 2022</b>
Administration, Clerical & Maintenance/Ancillary	10
Allied Health Professionals	2
Corporate Services	1
Medical and Dental	0
Registered Nurses and Midwives	1
Nursing Assistants or Healthcare Assistants	0
Social Care	0
Not Disclosed	1
Other	5
<b>TOTALS</b>	<b>20</b>

The NGO definition of 'Other' is:

- Can include any professional group that does not fit with any other professional group category. It includes volunteers and students. All concerns from 'Other' were raised confidentially.

**Table 1.4 FTSU concerns raised - by Professional Level**

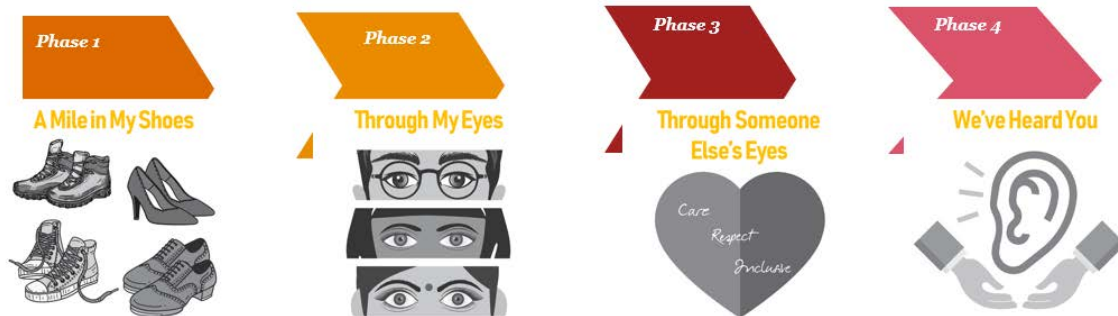
<b>FTSU Concerns Raised - Data by Professional Level</b>	<b>1st January to 28th February 2022</b>
Worker	12
Manager	7
Senior Leader	0
Not Disclosed	1
<b>TOTALS</b>	<b>20</b>

## 21. People Management Magazine article

- 21.1. The ELFT People & Culture team featured in the Chartered Institute of Personnel Development (CIPD), HR journal called People Management, showcasing the work around Race and Privilege and the Trust's work on wellbeing.

<https://www.peoplemanagement.co.uk/voices/case-studies/highlighting-race-privilege-key-wellbeing-east-london-nhs-foundation-trust>

## 22. Respect and Dignity at Work project



- 22.1. We are currently in phase 4 of the Respect and Dignity at work project 'We've heard you' / 'Creating Change'. The Trust have used the staff stories collated in phase 2 'Through My Eyes' to dramatize these stories.
- 22.2. The theatre production is inspired by staff experiences of the workplace and created by staff and service users from across the Trust. Using drama and the other performing arts, the film explores important themes through a creative and playful lens.
- 22.3. After the film screening, the London Playback Theatre Company the audience reflected on what was seen and heard in a relaxed way through spontaneous, improvised theatre. Screenings took place in Luton and Bedford on 21 March 2022. There is a session planned for Friday 25 March from 15.00-17.00 (online)  
<https://www.eventbrite.co.uk/e/creating-change-online-tickets-260327415307>
- 22.4. Creating Change London, Wednesday 30 March from 19.00-21.00  
<https://www.eventbrite.co.uk/e/creating-change-london-tickets-260346863477>

## 23. Action being requested

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