

# **REPORT TO THE TRUST BOARD 30 January 2014**

Wendy Brewer, Director of Workforce and Education
Stella Pantelides, Chair Workforce and Education Committee
Regular workforce report to update the board on workforce issues.
For information
Workforce Committee
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# **Executive summary**

# 1. Key messages

The November workforce report includes the following items:

- Workforce Planning
- Mast Update
- Incremental Progression
- Work Experience

## 2. Recommendation

That the Trust Board receives the report.

### Workforce and Education Committee Meeting 21 January 2014- Chair Report

The Committee's main focus for this meeting was workforce planning —one of the key strands in the workforce strategy. In addition, updates were received on live issues and projects on which the Committee's steer was required. What follows is not an exhaustive account of everything that was considered- that's the role of the minutes. It is instead, a summary of key issues judged to be of sufficient importance to be brought to the attention of the Board.

### **Workforce planning**

**Methodology:** Wendy Brewer shared with the Committee the contents of a presentation given to the trust board on this topic as part of the board development programme. She highlighted in particular the division of responsibility between, on the one hand, the divisions who master the detail of their workforce needs and that of the Corporate HR function, on the other, whose role is to (a) identify broad/longer term trends that are likely to impact the trust as a whole (e.g. mental health nursing, junior doctor numbers); and (b) to help divisions take account of those in their plans in a meaningful way.

**Workforce modelling:** Members of the Committee expressed concern as to whether the WTE forecasts contained in the LTFM, especially those relating to consultants and junior medical staff 'rang true'. It was well understood that these reflected assumptions in the CIP programme, which although judged as highly challenging, were the ones agreed and adopted for the purposes of the LTFM. However, going forward and in the light of emerging trends that are likely to put pressure on medical resource (such as 24/7, consultant led obstetrics, reduced numbers of doctors in training) it was suggested that Finance and HR, co-sponsor some expert workforce planning and modelling resource to support them, and the divisions, to devise and apply planning assumptions on numbers and salary costs that facilitate**credible** bottom-up modelling of the medical workforce.

Junior Doctors: The increasing anxiety over the potential reduction in trainee posts and the impact this might have on service provision, pursuit of alternative ways of resourcing (PAs, ANPs) and salary costs has been debated in many different fora and has been logged on numerous risk registers. However, the reality, evidenced by a paper prepared by the HR function (table attached) is that the trust's response to date has been pragmatic but ad hoc. The table shows that the employment of trust doctors is one of the key ad hoc solutions to this issue. Members of the Committee were concerned as to whether this is a viable route longer term and whether indeed it is a desirable one, given that these can be 'dead end' roles, that might be pursued by people who cannot get into training with implications for quality, etc. The Committee acknowledged that there is considerable uncertainty, at the national level, over this issue that is perhaps the key reason the trust has not as yet looked to develop a coherent response to it. However, it was thought that the time was, perhaps, right to attempt to do so. It was suggested that a small senior working group is set up, involving senior representatives from some of the divisions (e.g. Medicine and Surgery) the Medical Director, the HR Director and a few others, possibly working under the steer of Judith Hulf whose expertise and knowledge would be of huge value in this matter.

## **MAST Update**

Diane Morgan introduced a paper updating the Committee on progress with the implementation of a new learning management system, a new e-learning and compliance reporting system. She commented on the scale of the change that was embarked upon and on the consequent



implementation issues that the teams have been dealing with. Unsurprisingly all of that had caused some disruption to users and impacted adversely MAST compliance rates.

The Committee noted the progress made and acknowledged the conscientious efforts of the team to overcome all the implementation issues. Diane reported that in her judgement it will take a further six months before reported compliance rates reflect actual training undertaken as opposed to user access, recording and reporting issues to do with the implementation.

#### **Incremental Progression**

Wendy Brewer updated the Committee on progress with this project. She confirmed that project resource will now be deployed to ensure that the proposed changes (linking the incremental progression for senior staff to the completion of appraisals for all staff under their managerial scope) will be ready for implementation on 1 April 2014. Members commented on the need to ensure that sufficient time and care be dedicated to the communication effort and to all other points on which assurance was sought by the Committee (minutes of 14 November 2014) so that no staff are taken by surprise over this.

#### **Work Experience**

The Committee was asked to consider a paper on the Trust's Work Experience programme for 2014/15 which included a number of recommendations that would enhance the rigour of the process and ensure that the programme benefited more closely the communities served by the trust. The Committee was content to endorse the recommendation that the trust should proactively recruit students from two maintained schools in Wandsworth. There was more unease, however, with the proposed proportion of placements offered to friends and relatives of Trust staff, in the light of national concerns over social mobility and inclusion. The Committee recommended that any paper on this issue that goes to EMT for approval, considers the principles behind the scheme and clarifies its purpose. It would then be a little easier, perhaps, for the HR Team that administers the Scheme to enforce it on the ground and ensure that there is proper governance around it.

Stella Pantelides

22 January 2014