AAAD: Effective Oversight: Escalation and Assurance

NHS
Bradford District Care
NHS Foundation Trust

Report to:	Board of Directors (Public)	Meeting date:	05/06/2025
Report from:	People and Culture Committee	Meeting date:	22/05/2025
Quorate?	Yes ☒ No ☐		
Members present	Mark Rawcliffe (NED/Chair) Sally Napper (NED), Bob Champion, Kelly Barker, Phil Hubbard		
In attendance	Jess Greenwood-Owens, Michelle Holland, Fay Davies, Lisa Wright, Timed business: Claire Ingle, Emma Stott, Danielle Stephenson, Stuart Scarfe, Chris Farquhar		
Observers	Cornelle Parker (Audit Yorkshire)		
Apologies	Jo Wilson; Fran Stead; Rachel Trawally; David Sims; Jeanette Homer Mike Woodhead		

Best Place to Work	**Theme 1** – Looking after our people	**BP2W:T1**
	Theme 2 – Belonging in our organisation	**BP2W:T2**
	Theme 3 – New ways of working and delivering care	**BP2W:T3**
	Theme 4 – Growing for the future	**BP2W:T4**

Agenda items	- Matters Arising Items approved via email following the previous meeting. - Strategic Assurance Report including; Strategic Narrative Report/ - Integrated Strategic Performance Report; Recruitment Activity Update; Employee Relations Activity; Rostering Activity; Staff Survey results - Workforce Race Equality Standard Report - Workforce Disability Equality Standard Report - Apprenticeship Levy Annual Report - Alert, Advise, Assure + Decision AAA+D Report/s including; Senior Leadership Team, People, Planning & Innovation; Strategic EDI Partnership Group; AAA Staff Partnership Forum - Strategic Risks - Confirmation of Escalation Reporting including: - Annual Governance Report including committee annual effectiveness review - Committee Workplan 2025-26
Alert items agreed by Committee	Model roster – impact of junior members of staff developing within acute inpatient and the impact on model roster. Training and education development.
Advise items agreed by Committee	- Digitally enabled workforce was discussed and the potential to close the gap with the work alongside the PMO and Digital Transformation Strategy. - Return-to-work interview activity was reduced, work was ongoing to address this.

better lives, together

	• Appraisal activity has risen to 4%. • Currently utilising more temporary workers than are budgeted for in clinical areas, this was being looked into. • Mandatory training required improvement. • Employee Relations activity has increased; however, cases were dealt with in under 65 days. • Targeted activity required to address response rates for the staff survey from all teams (e.g. wards). Utilising the responses and putting actions into place was key. • Workforce Race Equality Standard – 2 areas of data had reduced 'likelihood of being appointed after shortlisting' - 4.66 times more likely if you are white and 'likelihood of entering into a disciplinary' BME staff have a disproportionate representation to be in one. Projects were underway to address. Discussion followed regarding incident reporting and disproportionate amount of service users making complaints/reporting incidents about BME staff. Benchmarking should be undertaken to other Trusts. • Impact of political environment and what this means for the workplace.
Assure items agreed by Committee	• Achieved 5.78% sickness absence rates, this was the first time in 5 years that this has been below 6%. Work ongoing around support for reducing absence and improving well-being in the workplace. There was a direct correlation between staff in substantive posts and reduced staff sickness • NHS England has noted that the Trust has showed improvement across all 10 areas of measurement, the finance team had been identified as having significant improvement within their staff survey (fourth in the country). • Performance indicator noted; unconditional offer has reduced to 25.4 days from 51.72 in January 2024. This should be celebrated and promoted more. • Labour turnover had reduced to 11.44%. • Leavers within 12 months had reduced to 16% - the Trust was applying for a Healthcare People Management Association award with regard to excellence in OD for the work in this area. • Clinical supervision reduced slightly 2%. • There would be a refreshed 3-day Essentials of Leadership programme which covers all of the elements within Bradford Manager and the Leadership and Management of Attendance. • Update provided on the Assessment Centre for the recruitment of Band 2 Healthcare assessment workers. • Staff Survey - Leading Better Lives; pledges to address staff survey were provided. Support was offered by the OD to address any gaps. • Workforce Race Equality Standard – steady and significant improvements have been made within bullying for BME staff. • Workforce Disability Equality Standard 2025 – for staff informing the Trust about a disability - 14% in 2024 and 16% now 2025; Disability leave and absence has led to a 7% reduction; Reasonable adjustments had new and consistent processes put into place; the

	Trust had been asked to be a case study around their metric 1 improvements; Counselling around disability, the Trust was working with the West Yorkshire Mental Health Collaborative. • An Apprenticeships Update was provided, there were a number of different courses covered and included data on ethnicity, gender and ages. The Trust would continue to collaborate with a range of providers and to look into maximising the use of the apprenticeship levy.
Decisions made by Committee	The following items were approved: • Workforce Race Equality Standard 2025 • Workforce Disability Equality Standard 2025 • Strategic Risk Report • People & Culture Committee Annual Governance Report (recommend approval to Board)
New risks identified by Committee	• None were identified
Items to be considered by other Committees/Groups	• None were identified
Feedback following discussion at 'parent' meeting	
Report completed by	Jess Greenwood-Owens Corporate Governance Officer	**Date**	**23/05/2025**
On Behalf of Chair	Mark Rawcliffe (NED/Chair)