

Approved 24 May 2023

Minutes of the ICB People Board Held on Wednesday, 22 March 2023 in Boardrooms 1 and 2, Chorley House, Leyland

Name	Job Title	Organisation
<u>Members</u>		
Professor Ebrahim Adia (EA)	Chair/Non-Executive Member	L&SC ICB
Professor Jane O'Brien (JO'B)	Deputy Chair/Non-Executive Member	L&SC ICB
James Fleet (JF)	Chief People Officer	L&SC ICB
Professor Sarah O'Brien (SO'B)	Chief Nursing Officer	L&SC ICB
Kevin Moynes (KM) (Arrived during Item 6)	Provider Collaborative Workforce/People Director - PCB Workforce SRO	Lancashire Teaching Hospitals NHSFT
Peter Gregory (Also acted as named deputy for David Levy) (Left after Item 14)	Primary Care Workforce Lead	L&SC ICB
Debbie Corcoran (DC)	Chair, Public Involvement and Engagement Advisory Committee	L&SC ICB
Emma Davies (ED)	Director of Workforce Delivery	L&SC ICB
Aisha Chaudhary (AC)	Director of Culture and Inclusion	L&SC ICB
Andrea Anderson (AA)	Director of People - Place and Programmes	L&SC ICB
Lee Radford (LR)	Director of Organisational Development and Education	L&SC ICB
<u>Attendees</u>		
Mike Burgess (MB)	Northwest Head of Workforce	NHSE and Health
(represented Chris Cutts)	Transformation	Education England
Fiona Ball (FB)	Health Education England - Workforce Transformation Lead for Lancashire and South Cumbria	Health Education England
Joe Hannett (JH) (Left during Item 9)	Voluntary Sector Workforce Lead - Partnership Manager	Community Futures
Lisa Ward (LW) (Left during Item 9)	Director of People	North West Ambulance Service NHS Trust
Paula Roles (PR)	Strategic Workforce Lead	L&SC ICB
Rebecca Lumberg (RL)	Staff Side Representative	UNISON
Kate Smyth (KS)	Provider Non-Executive Director	Lancashire Teaching
	representing disability inclusion	Hospitals NHSFT
Stephen Sandford (SS)	Chief Allied Health Professions Officer	L&SC ICB
Naveed Shariff (NS)	EDI Representative	L&SC ICB
(Left after Item 9)	- Head of L&SC MCO/SVOC and	
	Population Health Equity	

	 Chair, North West NHSE/I Staff Race Equality Network National NHSE/I Staff Race Equality Network Executive 	
Anonymous member of staff provided a staff story (Item 6)	-	-
Louise Ludgrove (LL)	Workforce Priorities Senior Responsible	Blackpool Teaching
(Items 1-6 and Item 11)	Officer	Hospitals NHSFT
Robert Cragg (RC)	Workforce Priorities Senior Responsible	Lancashire and South
(Items 1-6 and Item 11)	Officer	Cumbria NHSFT
Alison Balson (AB)	Workforce Priorities Senior Responsible	University Hospitals of
(Items 1-6 and Item 11)	Officer	Morecambe Bay
,		NHSFT
Ruth Keeler (RK)	Strategic Lead ICB Careers	L&SC ICB
Louise Talbot (LJT)	Corporate Governance Manager	L&SC ICB

Item No	Item	Action
1.	Welcome and Introductions	
	The Chair welcomed everybody to the meeting of the People Board. Message of thanks - Members were advised that Maggy Heaton, staff side representative would be stepping down from the People Board and Bernadette	
	Miller would be taking over however, she was unable to attend the meeting. The People Board conveyed their thanks to Maggy for her valuable contribution and support and sent their best wishes.	LJT (✓)
	Update on Industrial action – E Davies provided a verbal update advising that work continued with provider organisations in terms of planning and whilst they presented challenges, it was being managed as best it could. The outcome of the national discussions was awaited. S O'Brien also referred to the junior doctors' industrial action, the dates of which were awaited. It was recognised that there were challenges in terms of the impact on planned care and financial pressures being faced for high-cost cover. She was not aware of any incidents due to the cancellation of operations and planned procedures. Messages had been conveyed to relevant staff side representatives to have protected time to be able to attend consultation meetings in connection with the industrial action discussions.	
2.	Apologies for Absence	
	Apologies for absence had been received from David Levy, Trish Armstrong-Child, Sam Baron, Bernadette Miller, Sonya Clarkson, Cath Whalley, Julia Owen and Chris Cutts.	
	Post meeting note: R Mullin and L Krisson who were due to attend the meeting to present were unable to attend due to traffic delays.	

3. <u>Declarations of Interest</u>

RESOLVED: That there were no declarations of interest made.

(a) People Board Register of Interests – A register of interests of members of the People Board was appended with the papers. As the register related to members only, in the event that those in attendance at meetings had a declaration to make, to advise the Chair either at the beginning or during the meeting as relevant.

4. Minutes of the Previous Meeting Held on 26 January 2023

RESOLVED: Subject to an amendment raised by J Hannett, the minutes of the meeting held on 26 January 2023 were approved as a correct record.

5. <u>Matters Arising and Action Log</u>

The updates to the action log were noted and those highlighted for closure were agreed.

6. Staff Story – Focus on Inclusion

Due to the confidential nature of a very powerful story provided by a staff member's career journey experiences in respect of the challenges faced from an inclusion perspective, their identity remained anonymous. People Board members and those in attendance were asked to maintain confidentiality.

Thanks were conveyed to the member of staff for their story and appreciation conveyed for having the courage to highlight the issues they faced and continued to face.

K Moynes arrived at the meeting.

The following comments were made:

- Shocked at the comments and perception.
- Institutional and structural elements need to address culture.
- Not a lived experience, it is a trauma.
- What is the WRES data telling us?
- The way we care for others is the maker of our own values and we need to work on shared values and behaviours.
- Concerning and disappointing and likely not an isolated story.
- Recruitment practices do not appear to be working as we would expect consideration for the People Board to address.
- Leadership a waste of talent with all the barriers presented to this member of staff. Need to be supporting people afterwards in terms of leadership roles.
- Still appears to be no independence in recruitment panels. There needs to be other colleague challenges and allies.
- A question was asked about 'allyship' and the member of staff advised that one ally was open to challenge and took the next step to become a mentor in order to fully understand the challenges being faced. Colleagues need

to be open to change.

 Next steps need to be considered and a whole wider inclusion piece taken forward

Thanks were conveyed to the member of staff for their story advising that further consideration would need to be given through the work being undertaken by A Chaudhary in terms of the practicalities as to how to take it forward.

The member of staff left the meeting.

The agenda was taken out of order.

11. ICS Workforce Priorities

J Fleet introduced R Cragg, L Ludgrove and A Balson, three of the five senior responsible officers (SROs) across the system who were able to attend the meeting in relation to the five high-impact workforce priorities for 2023/24 which were to:

- Increase our workforce capacity
- Develop the culture of equality, diversity, inclusion and belonging for our people
- Transform and innovate through people digital
- Improve the health and wellbeing of our people
- Optimise workforce productivity and transformation across our system

J Fleet advised that a lot of work had been undertaken with system partners to develop some immediate focused system level workforce priority workstreams for 2023/24, in advance of work to establish a 5-year Workforce Strategy and Training and Education Plan, for the LSC ICS, during the next 4-6 months. The 2023/24 workforce priorities had been segmented, to define key actions at individual organisation, PCB, Place and ICS/system level.

JF/ SROs (√)

- J Fleet had attended a Health Scrutiny Committee earlier in the day with M Burgess and E Davies and positive feedback had been received on the workforce priorities to be taken forward. The Health Scrutiny Committee welcomed a progress update in 12 months' time.
- J Fleet advised that each of the SROs across the system has an ICB 'buddy' to provide additional support for the workstreams. Introductions were made and they highlighted the outputs and targets for 2023/24 as detailed in the report. E Davies provided an update on workforce capacity in the absence of K Quinn, SRO for this priority area. L Radford provided an update on workforce productivity and transformation across our system in the absence of S Baron, SRO for this priority area. The following comments were made:
- J Fleet advised that Programme Initiation Documents (PIDs) would be developed and presented to the May meeting of the People Board.
- J Fleet advised that the ICB had secured ring-fenced monies from NHSE/HEE to support the work to develop the 5-year Workforce Strategy and Training and Education Plan. The ICB would be working closely with LA, voluntary sector

and wider system partners at Place and system level, to take forward this important work. J Fleet commented that the regional NHSE team had provided specific funding to enable the LSC ICB to commission external support/expertise to help take this work forward, which would involve extensive consultation with partners from across the system. The ICB People Team was keen to commission the external support and mobilise the work by June, working closely with partners and would be a 4-6 month programme of work. The People Board was fully supportive of the work that had been undertaken to establish in the immediate term (2023/24) workforce priorities, and also keen to support the proposed way forward to develop the 5-year Workforce Strategy and Training and Education Plan. Once the ICB had mobilised the work, the People Board would receive regular updates on progress, as well as the opportunity to feed into the emergent work.

Workforce Capacity:

- The capacity workstream will focus on driving collaborative, system level action to deliver the workforce plans that have been submitted to NHSE for 2023/24, which will include action to recruit to specific shortage occupations (ie, nursing and AHPs), as well as to improve the retention of staff. Where workforce plans profile a reduction in staff, this workstream will also support system-wide programmes, such as MARS and re-deployment opportunities.
- Clinical leadership to be included however, clarification was sought as to where it would sit.
- Primary care nursing was specific and recruitment was challenging particularly as terms and conditions for nurses were outwith those in other nursing professions. Consideration to be given around the work taking place across nursing, AHPs etc.
- A project plan would be drawn up and there was recognition that there
 needed to be strong clinical leadership. Clinical leaders would work with
 workforce leaders with two or three key areas of focus to be identified.
- Recognition of the national issues relating to NHS dental M Burgess and F Ball to pick up with the Postgraduate Dental Dean.
- KPIs to include transformation.
- F Ball was in the process of building a dashboard with a combination of metrics numerical and hard along with developmental metrics.
- Clarification was sought as to how to align workforce with the financial plans, which all include major CIPs. It was pointed out that head count increase was much higher than the funding available and further discussion would need to be held around this.

Equality, Diversity, Inclusion and Belonging:

- This workstream will enable the delivery of the imminent ICS Belonging Plan.
- The staff story earlier in the meeting brought to the fore the profoundness of belonging.
- Development of representation and induction across the system.
- Make a pledge to care leaders. Work was currently taking place on a Children in Care Strategy and Care Leaders Strategy with a view to it becoming a protected characteristic which could be part of this priority workstream area. This was welcomed and S O'Brien and her team would support this. The People Board were advised that scoping work relating to care leaders had been taking place over the last 15-16 months.

- In respect of the development of the metrics, A Chaudhary would oversee as part of the Belonging Plan. J Fleet stressed the importance of having no more than four/five metrics in order to stay focused in delivery during the next 12 months.
- Clarification was sought as to how they will develop the approach to wider participation, ie, schools, colleges, universities, local authorities etc, and promotion opportunities and making them accessible. Are we looking at the nature of the roles as some jobs were not accessible to children with particular background or barriers. It was commented that there was a lot of synergy across the first two workstreams and there was recognition of barriers which needed to be mutually explored. Work was being carried out at Place in Blackpool in deprived areas as there are a huge amount of people who do not have qualifications. The NHS was engaging with hard to reach groups.

People Digital:

- This workstream will focus on undertaking a robust baseline of digital awareness, capacity and readiness across all providers. This will inform the programme plan for driving implementation. M Burgess and F Ball were undertaking a piece of work with social care partners in respect of data processes and access to data.
- This priority area was likely to move quicker from a health perspective and some good early work had been undertaken across Blackpool over the last two years.
- It was suggested that a digital volunteer passport could be included.
- Clarification was sought as to whether primary care was included however, national systems were not including primary care. Learning was being taken from Wales who are part of the national programme. The contracting arrangements for England would not be involving primary care.

Health and Wellbeing:

- This workstream will build on some positive work already in train to level up OH services, but will focus on improving (ie, reducing) the negative impacts of sickness absence/presenteeism.
- A review of population health insights would open up opportunities to address individual sickness and wellbeing, which is particularly high in LSC.
- A piece of work was being undertaken across the North-West in respect of shifting the focus and creating a wellbeing culture and presenteeism. The productivity impact of presenteeism was much higher than sickness absence and it made the attendance management process more person centred.
- Work was taking place in building in objective measures and A Balson would share the link with members. R Lumberg advised that this was an area that was also being reviewed across staff side and it was suggested that it may be beneficial in providing an update to the People Board at a future meeting, as part of the health and wellbeing programme update and deep-dive.
- R Lumberg advised that the resilience hub was due to finish at the end of March and she sought clarification on the timeframe in terms of the group of staff going through the hub and what support they could gain as there could be an impact on presenteeism. L Ludgrove advised that NHS staff already engaged with the service would be able to continue. She further commented that the hub takes non-NHS staff and discussions were taking

AB/LJT (✓)

- place. R Cragg advised that there was medium term sustainability for a couple of years however, consideration would need to be given as to how sustainable replacement is embedded. The outcome will be a sustainable platform for psychological support for staff. R Cragg further advised that there was an intention of moving away from resilience hub branding and whilst it may look slightly different in going forward, referrals would continue to be the same.
- Reference was made to agile working and the downside of home working also recognising that staff attend meetings via MS Teams throughout their working day. It was important that home place assessments are carried out, particularly when staff are looking at screens all day. Staff are also fearful of returning to the workplace.
- Reference was made to the social care training hub and the work taking place across the local system which could be fed back to the health scrutiny committee.
- In respect of the resilience hub, it was commented that there are a number of care home staff within that portfolio who could be reviewed in more detail.

Workforce productivity and transformation across our system:

- This work stream will focus on immediate steps to focus on workforce productivity opportunities, as well as opportunities to transform roles, ways of working and employment models. James highlighted that the SRO for this workstream is Sam Baron for LCC.
- SROs have been appointed to lead these workstreams in order to have the right people involved and ownership of delivery in the right place. James Fleet stressed the importance of escalating any issues where SROs don't have capacity to provide the necessary leadership focus for the workstreams.

RESOLVED: That the People Board approve the workforce priorities and associated programmes of work.

Thanks were conveyed to R Cragg, A Balson and L Ludgrove and they left the meeting.

7. North West Regional Talent Update

As R Mullin was unable to attend the meeting, the item was deferred to the next meeting.

LJT (✓)

8. <u>Leading for Systems Change OD Programme Update</u>

L Radford spoke to a circulated report which provided an overview of the new Leading for Systems Change OD programme that is being delivered to key senior leaders across the LSC integrated care system. The development programme had been co-designed with senior system leaders from all providers and the national NHS Leadership Academy and commenced on 24 February 2023.

The programme had taken the principles of the national Leading for System Change Programme and tailored a bespoke development opportunity for the L&SC ICS. It would focus on extending the capacity for system-wide thinking

and action through practical application to enable colleagues to work together on deep-seated, complex 'wicked' issues that form part of the integrated care system priorities.

J Fleet advised that J O'Brien was the Non-Executive Member sponsor in this area and the next step was to establish five multi-agency groups wrap around the 'wicked' issues. The programme had the full support of the Chief Executives of both the ICB and Lancashire Teaching Hospitals NHSFT (PCB CEO Lead). It was acknowledged that the principles were very challenging and it was about accepting that there is not an answer for every problem and being comfortable with some element of chaos.

Members welcomed the programme and recognised the importance of helping individuals to transition from organisational leadership to system leadership. It was also important to have an equitable approach. Members were mindful that clinical attendance was limited.

Reflection was made to the valuable staff story heard earlier in the meeting and consideration would need to be given as to what a difference it will make and how it is captured in the meeting feedback to the member of staff. Consideration would be given in developing this further and operationalising talent. Having a diversity representative would be welcomed from a clinical perspective.

J O'Brien commented that it was about our ability to lead and work and helping people to reflect on the way they work and it was about learning through doing and was not a course.

RESOLVED: That the People Board note the report, welcomed the programme and look forward to receiving regular updates on progress.

9. Education Update – North West Careers Platform Launch

Introductions were made to R Keeler, Strategic Lead, ICB Careers who spoke to a circulated report which described the development of the ICB led NHS Careers platform to support a systems wide approach to widening participation and bringing in the next generation into the Health and Social Care workforces through work experience, apprenticeships, careers workshops and volunteering.

The success of the integrated platform had been used as a template by other ICBs in the North West and South West regions as a model of best practice.

R Keeler advised that on average over 1,000 people visit the platform every day and through this platform and its social media feeds the ICB Careers Service engaged with over 300,000 people during the Covid pandemic enabling the team to continue their important work of encouraging people to join the Health and Social Care workforces.

The ASPIRE Interactive e-Learning pillar of the platform launched in January 2023 and provides the opportunity for learners to work independently through

programmes of work and career pathways which are of interest in Health and Social Care.

In 2023/24 work would take place in looking to further develop the capability of the platform as part of the ICB's approach to talent management by offering CPD and career pathway advice which will enhance local talent and appraisal conversations and support the ICB's 'One Workforce' Vision.

J Hannett left the meeting.

R Keeler provided an overview on:

- The concept of the platform
- Successes so far
- New developments
- Future opportunities

Thanks were conveyed to R Keeler for the update on the work taking place and discussion ensued as follows:

- S O'Brien welcomed the platform and the concept of 'growing our own'
 however, she commented that people are then unable to secure jobs and
 whilst it was a challenge, she asked how we bring the system together to
 commit to those people? She was also mindful that nobody shares the list
 of those people who are rejected.
- S O'Brien also asked how we connect universities and trusts on the work being undertaken. J Fleet advised that as part of the workstream over the next 12 months, a major step would be having an employment commitment supported by all Boards. The work would need to be taken forward with R Keeler to address this via the priority workstream. The People Board asked for a further update on progress in 6 months' time.
- R Lumberg referred to records of achievement and whether they could be part of the digital passport which would then enable people being tracked through to interview and if individuals were unsuccessful. She also asked if they could then be fed back into the system?

RESOLVED: D Corcoran declared an interest relating to Lancashire Adult Learning, a delivery arm of Nelson and Colne College Group at which she is Director of Governance.

There was no requirement for D Corcoran to be excluded

There was no requirement for D Corcoran to be excluded from the discussion. The conflict would be recorded in the Board and Committee conflicts of interest log.

• D Corcoran welcomed the opportunities and sought clarification in respect of pipelines into health and social care and whether they gave insight to have more strategic conversations with providers to inform on delivery. She was also mindful that there would be a lot of best practice that may not be consistent across the system. D Corcoran suggested that the education and training plan could specify what is required, mapped and then signals flagged to the NHS in order to provide better offers. James Fleet supported this point and agreed with Lee Radford to incorporate this into the work on the 5-year Training and Education Plan.

LJT (✓)

	L Radford advised that there were a number of other areas around education and training across LSC including workstreams, groups and colleges and whilst discussions had been held, there did not appear to be a strategic co-ordinated approach. He welcomed the need for a strategic education and training plan. RESOLVED: That the People Board note the report, the positive work of the ICB Careers team and would receive further updates on progress in due course.			
	N Shariff left the meeting.			
10.	Belonging Workstream Update			
	RESOLVED: That the People Board received the update report noting that the full plan would be submitted to the meeting on 24 May 2023.	AC/ LJT (✓)		
The agenda reverted back to order.				
12.	ICB Workforce Insights Report			
	RESOLVED: That the People Board note the report and provide any specific comments to A Anderson.			
13.	ICS/Systems Workforce Insights Report			
	RESOLVED: That the People Board receive the report and provide any specific comments to F Ball.			
14.	Social Partnership Forum			
	E Davies provided a verbal update on the Social Partnership Forum (SPF): • Meets bi-monthly			
	 Updates taken through the SPF included a number of items on the People Board meeting agenda: Priority development Belonging update 			
	 Overview of staff survey and discuss in more detail at a future meeting of the SPF 			
	 Update on bank and agency work taking place across providers and common corporate service areas which was ongoing. Straightforward meeting in terms of escalation – no issues staff side colleagues in terms of escalation. 			
	J Fleet sought clarification in respect of the staff side view of engagement across the system. R Lumberg advised that there was recognition of the changes and colleagues were still going through a period of transition. There was recognition of the changing leadership mindset and culture and that unions were thinking more in this way. There appeared to be a positive approach in the changes which were taking place at a much quicker pace than previously			

undertaken and there was a understanding of how the system was working. R Lumberg welcomed the engagement and highlighted the importance of enabling staff side colleagues to have protected time to support the work. She advised that discussions were taking place at HR director level to address this.

RESOLVED: That the People Board received the update.

P Gregory left the meeting.

15. Staff Survey Reports 2022

E Davies spoke to a number of circulated reports which provided an overview of the 2022 annual staff survey results for LSC IB and Provider Trusts across LSC.

All NHS organisations were in the process of undertaking further analysis of their results and progressing with wider staff engagement on their findings with a view to agreeing joint action plans to improve upon their results.

The outputs of the work would be presented at People Board in May, with a focus on actions to be progressed at individual organisation, Provider Trust and system-level.

Overall, the results indicated either improvements had been made or there was stability. Some areas were challenged and it was anticipated that a heat map of all domains will provide more detailed information.

It was noted that the Health Scrutiny Committee was interested in staff engagement and the impacts around this.

Congratulations were conveyed to all organisations for the positive results.

J Fleet advised that a separate session would be held with HEE colleagues and providers in producing the heat map and a full action plan would be drawn up and a deep dive undertaken at the next meeting. There was a discussion about understanding how the LA staff survey results could be aligned with the NHS staff survey results, in order to develop a stronger single view of the experiences of health and care staff. This will be discussed further at the May meeting of the People Board.

RESOLVED: That the People Board note the data contained within the reports and would receive a further report from Provider Trusts on their staff survey action plans, at the meeting in May at which key actions would be outlined.

16. Committee Highlights Report to the Board

The following areas would be highlighted to the Board:

- Five workforce priorities
- Wellbeing presenteeism and shifting the emphasis
- Social care workforce deep dive
- Lancashire and South Cumbria system leadership development programme
- North West careers platform

17.	Items for the Risk Register	
	RESOLVED: That there were no risks identified.	
18.	Any Other Business	
	K Moynes announced that it was his last meeting as he was retiring. Thanks and best wishes were conveyed to him.	
19.	Date, Time and Venue of Next Meeting	
	The next meeting will be held on Wednesday, 24 May 2023 at 1pm-3.30pm in Boardroom 1, Chorley House.	