

# Board of Directors - Public

## SUMMARY REPORT

Meeting Date: 25<sup>th</sup> January 2023

Agenda Item: 16

<b>Report Title:</b>	<b>People Strategy (2022-2023) Annual Review</b>	
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<b>Accountable Director:</b>	Caroline Parry, Executive Director of People	
<b>Other meetings this paper has been presented to or previously agreed at:</b>	<b>Committee/Tier 2 Group/Tier 3 Group</b>	People Committee
	<b>Date:</b>	10 <sup>th</sup> January 2023
<b>Key points/ recommendations from those meetings</b>	<p><i>Reducing time to hire - improvement but still nursing vacancies.</i></p> <p><i>Sustained improvement in casework.</i></p> <p><i>Further review future risks that will be mitigated by the people plan.</i></p>	

### Summary of key points in report

Sheffield Health and Social Care's People Strategy sets out our ambition to create an environment in which our staff feel happy and safe at work and feel supported to fulfil their potential to provide the very best care for our service users. Staff who enjoy being at work provide better care, and when staff are more engaged, there is evidence of better service user care and higher levels of service user satisfaction.

The report provides details of our delivery against the strategy, the impacts, highlights, risk, issues and next steps. Key performance measures to note below:

#### Wellbeing

Our sickness absence levels are above our target of 5.1% with a 12 month average of 6.4% and 7.99% in month average for December. Sickness remains a critical issue which contributes to increased pressure on services, costs and overall wellbeing. Actions to mitigate the risks will be addressed in our 2023 – 2026 People Plan and a focussed project planned to commence this month.

#### Recruitment and Retention

Turnover is above our target of 10% although we have made progress with turnover reducing from 16.7% to 14.3%.

Our overall time to hire improved in the second half of 2022 with notable interventions including an increased focus on pre-employment checks and the introduction of additional recruitment assistants and further training and engagement with managers on the use of TRAC to support recruitment. Throughout 2022 vacancies remain above 9% although the workforce headcount has increased.

## Workforce Transformation

Our headcount has increased from 2558 to 2665 an increase of 4% from 2021. This is against an ICS target for 3%.

We are at 2% achievement towards the 2.3% public sector apprenticeship levy target, one of only two trusts in South Yorkshire at 2% and above.

## Culture, Leadership and Development

Participation in the three Pulse surveys during 2022, have seen a gradual decline over the year. January 19% (500), April 14% (365) and July 8% (200), against NHSEI minimum 10% participation target. The 2022 staff survey results are currently under embargo. Staff engagement plans were embedded within triannual service reviews from June 2022 onwards to progress NHS staff experience survey and pulse survey actions.

As part of our leadership development offer we launched *Team SHSC: Developing as Leaders* cohort 1 and 2 (60 leaders), and the Agile Mindsets and Behaviours Programme (30 senior leaders over 3 cohorts).

We have seen a sustained and significant shift in formal casework with a 45% reduction, from 35 cases at the end of 2021 to 19 by the end of 2022.

## Equality and Inclusion

We have increased the number of people in our Rainbow and Disability staff network groups. Progress has been made in reducing the number of ethnically diverse staff in formal disciplinary cases.

## Performance Overview

An overview is provided in the attached slide deck highlighting the key actions and outcomes. (Appendix 2).

Our People Strategy is currently being refreshed and a draft strategy is attached. The People Strategy will be supported by a people plan for delivery commencing April 2023.

### Recommendation for the Board/Committee to consider:

Consider for Action	Approval	Assurance	X	Information
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The Board is asked to agree sufficient assurance that progress has been made across the 5 key areas of the People Strategy and Plan 2020-2023. And note the outcomes against the key performance measures.

Please identify which strategic priorities will be impacted by this report:					
Covid-19 Recovering effectively	Yes	x	No		
CQC Getting Back to Good – Continuing to improve	Yes	x	No		
Transformation – Changing things that will make a difference	Yes	x	No		
Partnerships – working together to make a bigger impact	Yes	x	No		
<b>Is this report relevant to compliance with any key standards ? State specific standard</b>					
Care Quality Commission Fundamental Standards	Yes	x	No		<i>The People Strategy is an enabling strategy for the Clinical and Social Care Strategy and supports the Well Led domain</i>
Data Security and Protection Toolkit	Yes		No	x	
Any other specific standard?			No	x	
<b>Have these areas been considered? YES/NO</b>					
					If Yes, what are the implications or the impact? If no, please explain why
Service User and Carer Safety and Experience	Yes	x	No		<i>Safer staffing, healthy and happy workforce enables better quality care</i>
Financial (revenue & capital)	Yes	x	No		<i>Introduction of incentives, contracts to support employees e.g. Occupational Health, staff benefits and cost of living support (e.g. mileage rates increase)</i>
Organisational Development /Workforce	Yes	x	No		<i>Leadership development, refresh and embedding of our values</i>
Equality, Diversity & Inclusion	Yes	x	No		<i>Please see section 4.3.</i>
Legal	Yes	X	No		<i>Legal implications relating to employment and terms and conditions</i>
Environmental Sustainability	Yes	x	No		<i>Agile working and new locations, healthy lifestyles initiatives</i>

## Section 1: Analysis and supporting detail

### 1.1 Background

In 2020 the Sheffield Health and Social Care People Strategy for 2020 - 2023 was launched and we set out our ambition to create an environment in which our staff feel happy and safe at work and feel supported to fulfil their potential to provide the very best care for our service users. Staff who enjoy being at work provide better care, and when staff are more engaged, there is evidence of better service user care and higher levels of service user satisfaction.

Our strategy focussed on four key areas, which have enabled us to make progress to support our people to enable the best care for our service users. Equality and Inclusion was embedded in all elements of the People Strategy.

- Health and wellbeing
- Recruitment and retention
- Workforce transformation
- Leadership and development

In 2020/21 we recognised the Equality and Diversity agenda and created a 5<sup>th</sup> workstream to reflect the scale of strategic objectives to support diversity.

During the last 3 years (and the life of this strategy) we have faced a number of challenges for us as an organisation as well as in society more generally. The COVID pandemic, our CQC rating of inadequate, increased competition to attract and recruit staff and more recently the cost-of-living crisis. The learning from the last 3 years, feedback from leaders and key stakeholders and system developments which support the refresh of our People Strategy 2023-2026.

### 1.2 Health and Wellbeing

In response to our 2021 staff survey 50% of respondents said that SHSC takes positive action on health and wellbeing. Following this, in July 2022, out of 200 staff who took part in our People Pulse survey (8 months on from the 2021 NHS Annual Staff Survey), 38.8% of staff wanted to see improvement of support for employee wellbeing and within this nearly 50% identified Mental Health as an area to improve. These scores provided a basis for identification and ongoing development of areas for improvement for staff wellbeing.

In our 2022/23 plan we said we would do the following to support our staff wellbeing aims and objectives:

## **Work safely, differently and recover from COVID**

In 2022 we have vaccinated 54.9% of our staff for flu and 55.5% of our staff for COVID. This is a decrease on last year and we are taking additional actions to increase participation in our vaccination programme.

Our absence rates remain high warranting a review of our absence management. Our target is 5.1% for 2022 and our average for the 12 months has been 6.4% (as at November IPQR). RDASH as our closest Mental Health comparator benchmarked at 6% for 2022 according to their November public board report.

The implementation of E Roster has supported more accurate absence reporting, so we have greater confidence in the data insights. And we are further developing approaches with the ICS for a shared approach to support greater consistency and reduction in absence levels, essentials for good absence management.

## **Enable Networks and connections to promote wellbeing and self compassion**

We engaged in a trailblazer to sense check our maturity against the NHS Health and Wellbeing Framework, working with NHS England and Improvement (NHSEI).

This dashboard completed in January 2022 identified some key areas and these informed our 2022/23 people delivery plan. The data insights element was identified as an area for attention and this has informed our improvement plans on data quality and the development of the health and wellbeing networks. We are now in a position to revisit the self-assessment tool to support development of our roadmap for the 2023-26 People Strategy and focussing on where action can make the biggest difference.

We recognise that there are broader factors that influence wellbeing and create a culture where people feel well at work, and to support this we have recruited wellbeing champions. As with many other engagement groups, active participation is not as high as we would like, and we will be reviewing the strategy to support wellbeing champions and networks as part of the 2023-26 refresh.

## **Improve our wellbeing offer for all staff with a focus on prevention**

'Know your numbers' health checks were introduced this year, these include blood pressure, weight and other physical health checks, and signposting to support that may be available to enable a healthy lifestyle. Despite difficulties recruiting and retaining staff to run the health checks we have seen over 60 staff take up the offer with some positive individual outcomes that have supported wellbeing and better health.

We have developed our Menopause advocacy and our trained advocates have delivered Menopause Roadshows during the Autumn. We have trained 3 menopause advocates so far and are in the process of applying for accreditation, working with the ICS Health and Wellbeing lead.

We have less data on take-up of preventative resources and offers for Mental Health related wellbeing, again this will feature as a priority for 2023-26.

Our mental health related absence remains higher than the NHS national average. According to NHS digital Anxiety/stress/depression/other psychiatric illnesses is consistently the most reported reason for sickness absence, accounting for nearly 539,300 full time equivalent days lost and 19.9% of all sickness absence in January 2022. (Published May 2022). Our average for 2022 is 35% of all our sickness absence.

### **Embed wellbeing in our management practice, policies and processes**

Wellbeing conversations are a national initiative which we introduced along with the wellbeing conversations guidance this year, and we will further embed the requirement for wellbeing to feature in all supervisory discussions. Wellbeing conversations at SHSC happen in our PDRs and Supervision.

### **Develop skills to focus on wellbeing**

We have not progressed further Mental Health First Aid Training, although have explored ICS collaboration to train more mental health first aiders and we continue to promote all ICS Wellbeing Hub events and training. This includes access to the ICS employee assistance programme 'Vivup', as well as 'Eyes on You' wellbeing events and financial wellbeing resources.

## **1.3 Workforce Transformation**

### **Workforce Dashboard**

The SHSC Workforce Dashboard project, funded through CQC Improvement income, was completed on 16 December 2022. The Dashboard is simple to use and can be interrogated at organisation, service and team level to highlight risks, support workforce planning conversations, and develop scenarios for skill mix and different ways of working for the future. The next stage of development is to widen access to the Dashboard and to integrate information from other systems such as e roster, EDI and training data.

### **New roles**

An evaluation of new roles (Nursing Associates, Physicians Associate, Advanced Clinical Practitioners and Clinical Associate Psychologists) was completed by the Service Improvement team during the Autumn. The responses showed that most people had seen some clear and positive benefits from the introduction of new roles. The feedback highlighted that the roles were making a difference, could work across boundaries; provided more time and support to service users and relieved some nursing and medical time. Across all new roles, and from all respondents, there was feedback that new roles were not well understood by service users or the wider team, and people did not properly understand what the new roles could and could not do. An action plan has been developed to address the issues highlighted in the evaluation report.

### **Knowledge and Libraries Service**

We successfully appointed a Libraries and Knowledge Services Manager. This new role is already having a positive impact promoting the service, developing a strategy, and contributing to the Research, Innovation and Evidence Strategy implementation plan.

## **Apprenticeships**

We currently have 45 staff studying on 17 different apprenticeships within SHSC with 18 more in the pipeline for 2023 ranging from Level 3 to Level 7. We are at 2% achievement towards the 2.3% public sector levy target, one of only two Trusts in South Yorkshire at 2% and above.

As part of the trailblazer group we developed the apprenticeship standard for Clinical Associate Psychologists (CAPs), and we have supported 22 apprentices through Sheffield Hallam University. The high quality and collaborative way of working led to a Health Service Journal award for this excellent piece of work.

The first Registered Nurse Degree Apprenticeships (RNDA) have successfully completed the 4 year programme this year.

## **Welcome to SHSC**

In 2022 we have welcomed new staff (213 virtual and 84 face to face) via our Welcome to SHSC Events. A successful return to face-to-face Trust wide induction has included a review of content and delivery, resulting in greater engagement from a wide range of services, and a more varied session including the “market place” which offers informal opportunity for questions, support and signposting. The new content and structure have received positive feedback from participants.

## **Agency reduction programme**

As part of the agency reduction programme, we are focusing on more effective use of our temporary staffing this includes incentivising more people to join our temporary staffing bank, utilising E Roster more effectively to manage agency use, providing additional support converting agency staff to bank or substantive contracts, and optimising our recruitment to reduce vacancies.

## **1.4 Recruitment and Retention**

### **Improve the effectiveness of our recruitment processes**

We have developed a comprehensive recruitment improvement plan based on a review of need, feedback from managers and an evaluation of the implementation of our TRAC system. We can now track recruitment volume, effectiveness and improve campaigns to optimise recruitment. Our recruitment improvement plan is also a workstream in our agency reduction project.

We created 3 new HR Administrator posts to support recruitment in 2022. These posts have made a significant difference to time to hire and the responsiveness of the recruitment team. Our time to hire has reduced by 7.7 days in the second half of 2022. This is combined with integrating recruitment with the Business Partnering Team allowing a more joined up approach to vacancy management, workforce development and planning and recruitment. Through more effective TRAC monitoring we can more accurately see not only the points in process where we may have delays, but also the areas and roles where time to hire is slower than we want it to be. One such area was preceptor recruitment, and we are working with the preceptor leads to understand the reasons for this more closely.



## **International recruitment**

21 offers have been made and we have welcomed our first International nurses to the UK, with more arriving by February 2023 where they will receive training and assessment of clinical competence. We continue to work with other partners to secure opportunities for international recruitment and to support interested applicants to complete the necessary training and assessments to enable them to practice in the UK.

## **Improve retention across all disciplines**

We have undertaken a self-assessment of our nursing workforce retention using the NHSEI nursing retention tool. We will be developing an action plan once we have completed our GAP analysis and will utilise the tool with some adaptations to support retention in other disciplines. We are also members of the ICS retention network.

The nursing plan has been completed and the actions for development of the profession will align with the revised People Strategy 2023-2026.

We need to utilise our flexible working options more effectively, and we are in the process of improving our understanding of flexible working take-up and usage.

We have improved the offer for our bank staff and increased the bank rate for all bandings at the end of last year and are proactively recruiting to this group of staff who work flexibly and provide a significant contribution to our registered and non-registered workforce.

## **Improve the reward and benefits offer**

We have introduced a Recruitment and Retention Premia for all band 5 registered nurses who are below the mid pay point. This is in direct response to local competition for recruitment to band 5 nurses and to encourage our band 5 nurses to stay with us for longer by rewarding them for progressing through their preceptorship and in their first two years.

We have audited the staff benefits offer and have developed our offer as a comprehensive information guide for staff and to support onboarding. We will use opportunities including induction to promote the support and benefits available to staff.

## **1.5 Leadership and Development**

In 2022 we established our Organisation Development (OD) Assurance Group – membership includes diverse representation from different staff groups, staff network groups and Staff Side. Our OD Framework has been established to identify priority areas of action which enable the delivery of the People Strategy and in turn the Clinical and Social Care strategy.

### **Leadership, Talent and Management skills development**

Our 2021 staff survey told us that 49% of staff said that there were opportunities for them to develop their career at SHSC (NHS average 52.9%). 52% of staff said that they felt supported to develop their potential and 74% of staff advocated frequent opportunities for them to show initiative in their role. When surveyed again in the July 2022 People Pulse, over 70% of staff continued to



advocate this. We sit above the NHS average in both surveys. We have introduced the following to improve these figures -

### **SHSC Developing as Leaders:**

In July we launched *Team SHSC: Developing as Leaders* (Cohort 1) with external facilitators Arden & GEM March – July 2022. 27 leaders completed the programme, and it was very well received.

#### Cohort 2 of Team SHSC: Developing as leaders

The content for Cohort 2 of *Team SHSC: Developing as Leaders* was designed and delivered by SHSC staff for SHSC staff with improved focus on developing compassionate and inclusive leaders who enable delivery of our strategic aims, priorities and values. Includes focus on person-centred leadership, inclusive leadership and service improvement leadership. 30 leaders participating October 2022 – March 2023 and waiting list established due to demand.

The multidisciplinary approach to recruitment with leaders at different stages in their leadership journey from aspirant to executive level enabled a great networking experience, helping to build Team SHSC relationships and break down silos. This will continue through future cohorts.

Dates for Cohort 3 and 4 for 2023/24 will be released Q1 2023 and we are developing an application process in order to ensure transparency in accessing this development opportunity on a sustained basis. Executive colleagues have participated in Cohorts 1 and 2 and are secured to participate in Cohorts 3 & 4. Our Chief Executive also continues to actively support the delivery of the programme.

**Agile Mindset & Behaviours leadership development:** 3 Cohorts including 31 senior leaders will have participated in this programme by end of January 2023. This has equipped leaders with tools and understanding of archetypes which they can apply to problem-solving, change and maximising performance.

**Performance Development Reviews (PDRs):** We have refreshed the documentation for the Performance Development Review 2022 and training was launched for the April – June focal point window. Post-window evaluation provided rich data to inform improvements for 2023. Focus will be on upskilling to ensure managers can offer a high-quality experience and encourage take up to improve participation rates from 80.4% on rolling 12-month figure at end of focal point window to the national aim of 90%.

We continue to support the development and delivery of the 'Leading Sheffield' programme and will have 5 members of staff participating on the next cohort in 2023. We also keep a watching brief on accessing Leadership Academy offers and have 5 new participants on Mary Seacole local in 2023 and have advertised leadership apprenticeship opportunities. Systems working is also a new feature within Cohort 2 of *Team SHSC: Developing as Leaders*.

### **Staff engagement**

We continue to promote our listening strategy through the use of the annual staff survey and three times a year People Pulse. Analysis of the 2021 results and work on promoting participation for the 2022 annual staff survey (results currently embargoed) has highlighted key areas for us to address on an organisational basis, e.g. confidentiality and showing evidence of the impact of the surveys closer to team

level, not just organisational level. We will continue to work on these in 2023, and we will focus more on developing purposeful data and support for action at team level so staff can really see the impact of using their voice.

We introduced reporting on staff engagement/experience activity within Performance Reviews in 2022.

## **Culture and Our values**

In 2022 the refreshed SHSC values were embedded into recruitment, PDR and leadership development. In the interactive Culture session with Board 21.12.22, we discussed progress on developing our culture and areas for further development and will build on this input through engagement across SHSC with our people during 2023. This will include a range of activity to further embed restorative just and learning culture in all our people processes and beyond, continuing to embed compassionate and inclusive leadership development within our programmes and begin work on turning our values into behaviours. These actions will have positive impact on evidencing how we 'live our values' at SHSC and give each member of staff clarity on seeing this in practice.

## **Partnership**

There has been a significant amount of change activity during the year. Staff Side have worked with us to manage change effectively and in line with our policy. We have introduced evaluation and learning reviews to continue to develop our approaches. Notable change has included the Estates and Facilities review, CMHT changes, Leaving Fulwood, Learning Disability Services, 12-hour shifts and the Substance Misuse Service change.

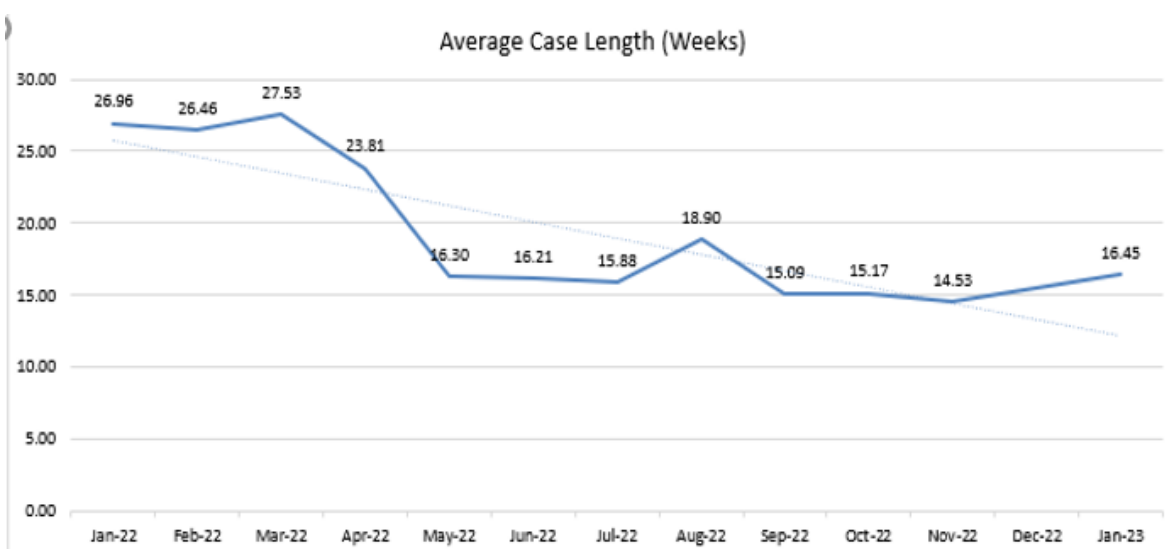
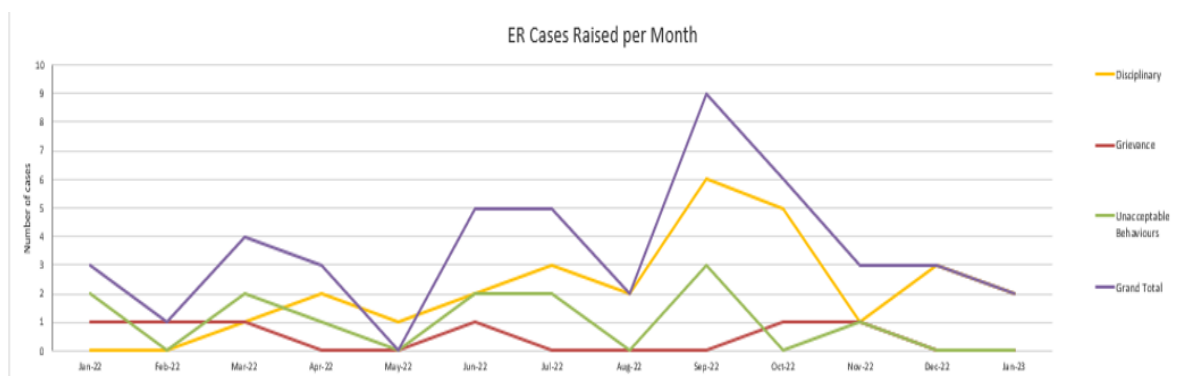
## **Just and Learning**

We reviewed the Disciplinary Process in June 2021 and made significant changes to advise managers to think about incidents – wider picture perspective, focus beyond individual blame. We made a number of changes which are now beginning to make impact.

- 'independent checkpoints' to give a fresh perspective and challenge
- case review meetings following closure of each case to review what went well, what could have gone better and what actions are needed to make improvements

### **The impact of these changes is significant.**

- reductions in the number of cases taken through formal process (see below) over 50% reduction in live cases. (7 cases were closed between reporting to People Committee and reporting to Board)
- provided a significant positive impact on health and wellbeing.
- benefits felt by those at the centre of the case, plus witnesses and the team as a whole as they saw in action a restorative and learning focussed approach in practice.



## 1.6 Equality, Diversity and Inclusion

The EDI element of the People Strategy Implementation Plan (people plan) has generally progressed well, only 5 of 54 actions due (relevant to workforce /leadership only) are outstanding.

Key achievements:

- We have significantly progressed action to respond to hate incidents experienced by our staff and have improved our liaison with South Yorkshire Police.
- We have Increased the number of staff that are members of our staff networks.
- Our staff networks have been involved in leading a number of initiatives including:
  - Phase 11 Rainbow Badge audit
  - Working Together Conference – Allyship - unity in diversity
  - Establishment of the Reasonable Adjustments Task and Finish group
  - Focus on Dyslexia
  - Focus on Disability

Improving our governance of EDI priorities through the Inclusion and Equality Group has been a priority. This is progressing, however, we have recognised the challenges of aligning this activity across our governance structures.

We are progressing the reduction in disciplinary cases involving ethnically diverse staff, the Equality and Inclusion engagement lead is working with HR business partners to review cases and learning to make changes to enable a decrease in formal cases where possible.

Further work is progressing to develop more targeted metrics and involvement in the development of the workforce dashboard from an EDI perspective (see Appendix 2 slide 9).

The People Strategy did not originally include a separate section focused on Equality Diversity and Inclusion (EDI); the intention was for EDI to be a golden thread running through all areas of the strategy. In practice this made progress on EDI difficult to identify and align to the strategy. In 2021/22 EDI has been identified as a separate area of strategy implementation. It is proposed that this will continue to be the case as the strategy is refreshed There are a number of legal and policy areas that define our organisational EDI priorities (Appendix 3).

The People Strategy Implementation plan now aligns with the equality delivery system actions (see Appendix 3).

The following reports have been presented to People Committee and Board providing detailed updates in addition to this report.

- The 2022 Workforce Race Equality Standard Report
- The 2022 Workforce Disability Equality Standard Report
- The Annual Equality and Human Rights Report 2022/23
- The Gender Pay Gap Report

## Section 2: Risks

- 2.1 **BAF 0013:** There is a risk that we fail to identify key cultural and work pressures impacting on staff health and wellbeing and delivery of services, leading to ineffective interventions; caused by failure to engage with staff in a meaningful way around concerns raised in the staff and pulse surveys as well as through engagement with, and demonstration of the values; and failure to implement demonstrable changes resulting in low scores on the staff survey (low morale), high sickness absence levels and negative indicators for quality of care.
- 2.2 **BAF 0014:** There is a risk of failure to undertake effective workforce planning to support recruiting, attracting and retaining staff to meet current and future needs caused by ineffective workforce planning, insufficiently attractive flexible working offer, competition, limited availability through international recruitment, reluctance of staff to remain in the NHS post Covid19, any national ICS requirements resulting in a negative impact on delivery of our strategic and operational objectives and provision of high-quality safe care.
- 2.3 **BAF 0020:** There is a risk of failure to enable a paradigm shift in our culture through delivery of the overarching cultural change programme, caused by a lack of engagement in the wide range of leadership activity and opportunities for development provided, inability to adapt and engage to enable organisational change, resulting in failure to improve the culture of the

organisation, ineffective leadership development, application of learning, engagement with our values, emergence of closed subcultures and low staff morale which in turn impacts negatively on service quality and service user feedback.

- 2.4 There is a risk that the current industrial relations climate nationally has a negative impact on morale, delivery of care and negatively impacts on the wellbeing of staff.
- 2.5 We do not make an impact on the levels of absence which continue to impact on morale, wellbeing and finances including agency spend.
- 2.6 There is a risk of insufficient reductions in vacancy rates and turnover.
- 2.7 There is a risk that our staff experience as measured by the annual staff survey does not improve.

## Section 3: Assurance

### Benchmarking

- 3.1 The Staff survey and People Pulse is used as a data source and we receive benchmarks against comparator groups and ICS partners. These were reported to People Committee within OD Assurance Group deep dive in November 2022.
- 3.2 Regional and national benchmarking for recruitment and vacancies.
- 3.3 Trailblazer community of practice and health and wellbeing framework and self-assessment tool.
- 3.4 Nursing retention self-assessment tool.
- 3.5 Engagement with NHSEI to support initiatives and participation in networks to develop practice.
- 3.6 NHS futures and people promise progress at ICS level

### Triangulation

- 3.7 IPQR and triangulation with people dashboard and reports to the People Committee from tier 2 sub-groups.

### Engagement

- 3.8 Assurance group and tier 3 engagement groups, support engagement and input from a cross section of our workforce.
- 3.9 ICS working groups and engagement with regional forums.
- 3.10 Co-production with staff of the *Team SHSC: Developing as Leaders* programme.
- 3.11 Race Equality Commission, system EDI and place EDI level groups.

## Section 4: Implications

### Strategic Priorities and Board Assurance Framework

1. Covid-19 - Recovering effectively.
2. CQC – Continuing to improve
3. Transformation - Changing things that will make a difference
4. Partnerships – Working together to have a bigger impact

4.1 the BAF risks are considered in the narrative above with actions and controls relating to delivery of our people plan.

### Equalities, diversity and inclusion

4.3 Equality, Diversity and Inclusion is a key focus for all aspects of our People Strategy delivery plans. As set out in the delivery of our aims and impacts above.

### Culture and People

4.4 The Culture of our organisation is a key area of focus for our people strategy.

### Integration and system thinking

4.5 As set out above our plans in all areas of focus rely on our partnerships with the wider NHS and our ICB.



### Financial

4.6 Financial impacts in relation to the delivery of our plans will be set out in our business planning and business case processes..

### Sustainable development and climate change adaptation

4.7 The SHSC Green Plan sets out our commitment to:

- Target the emissions we control directly (our carbon footprint) to be net zero by 2030 and for the emissions we can influence to be net zero by 2045.
- To provide sustainable services through ensuring value for money, reducing wastage and increasing productivity from our resources
- Continuously developing our approach to improving the mental, physical and social wellbeing of the communities we serve through innovation, partnership and sharing
- We will promote a culture of collaboration, supporting our people and suppliers to work together to make a difference
- We will innovate and transform to provide high quality care and support as early as possible in order to improve physical, mental and social wellbeing

Our refreshed People Strategy will provide greater focus to sustainability, particularly in relation to the wellbeing of our workforce.

## Compliance - Legal/Regulatory

4.8 Any legal implications are set out in the relevant sections above.

### **Section 5: List of Appendices**

Appendix 1 - People Delivery Plan (2023-2026)

Appendix 2 - People Strategy Highlights and KPIs document

Appendix 3 - EDI policy and legal requirements



## Recruitment and Retention

### Aim

*To recruit and retain the right staff with the right skills*

**Objective: Improve the effectiveness of our recruitment processes**

### Reduce the time taken to recruit

Task	Owner	Timeframe - Start	Timeframe - End	Revised Timeline	Status
Recruit 3 additional posts to support pre employment checks	Debra Butterworth	28/02/2022	30/04/2022		Complete
Establish how long it takes us to recruit - setting metrics	Annaleise Patrick	31/01/2022	20/04/2022		Complete
Identification of areas of improvement	Annaleise Patrick	01/03/2022	30/06/2022		Complete
Address areas through improvement forums	Annaleise Patrick	01/05/2022	30/07/2022		On Track
review effectiveness	Annaleise Patrick	01/10/2022	17/12/2022		Not started

### Improve campaign effectiveness

Task	Owner	Timeframe - Start	Timeframe - End	Revised Timeline	Status
Recruitment campaign training for HR team	Annaleise Patrick	31/01/2022	30/06/2022	31/12/2022	On track
Recruit Band 6 Project Manager for Employability to support widening access	Sarah Bawden	14/02/2022	30/03/2022		Complete

Maximising links with partner organisations	Sarah Bawden	01/02/2022	17/12/2022		Complete
Diversity training for managers	Liz Johnson	01/04/2022	30/10/2022		On track
Develop new candidate packs and materials for Sheffield as a place to work	Annaleise Patrick	01/02/2022	30/06/2022		Complete

### Skills and expertise to support recruitment

Task	Owner	Timeframe - Start	Timeframe - End		Status
Refresh recruitment training for managers	Annaleise Patrick	01/06/2022	30/09/2022	31/12/2022	On track
Include core competencies in HR Business Partner Team development	Sarah Bawden	01/03/2022	30/07/2022		On track

### Expand the range of recruitment sources (international, national, apprenticeships)

Task	Owner	Timeframe - Start	Timeframe - End		Status
Business case for international recruitment investment approved	Sarah Bawden	15/02/2022	15/02/2022		Complete
Engage NHSP to support international recruitment	Neil Robertson	16/02/2022	16/03/2022		Complete
Ensure detailed project plan agreed	Joanne Simms	09/02/2022	28/02/2022		Complete
Ensure resource to support the recruitment and training	Sarah Bawden	17/02/2022	05/03/2022		Complete
First interviews for international nurses	Joanne Simms	17/03/2022	30/03/2022		Complete

First cohort to arrive in UK	Joanne Simms	01/11/2022	30/11/2022		On track
First cohort to be trained	Joanne Simms	01/12/2022	28/02/2022		On track
First cohort commences work	Joanne Simms	01/03/2023	01/03/2023		Not started

## Objective: Improve retention of staff across all disciplines

### Range of options to support staff to continue their career

Task	Owner	Timeframe - Start	Timeframe - End		Status
Run career transition workshops for staff who are considering future career options	Sarah Bawden	01/01/2022	01/07/2022		Complete
Complete Flex for the Future programme	Liz Johnson	01/09/2021	30/03/2022		Complete
Set up flexible working task and finish group	Liz Johnson	09/02/2022	28/02/2022	31/03/2023	On Track
Task and finish group complete identified actions	Liz Johnson	01/03/2022	30/06/2022	31/03/2023	On Track

### Address the causes of staff leaving

Task	Owner	Timeframe - Start	Timeframe - End		Status
Analyse the reasons and factors for staff leaving	Steve Sellars	01/02/2022	10/05/2022		ON Track
Put in place a system for regular tracking of leavers feedback	Steve Sellars	01/04/2022	30/09/2022		ON Track

Develop compassionate leadership capability	Charlotte Turnbull	01/04/2022	30/03/2023		On Track
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### 1st 365 days support

Task	Owner	Timeframe - Start	Timeframe - End		Status
Define and implement Stay Interviews with Nurses and hard to recruit groups	Joanne Simms	01/03/2022	30/09/2022		delayed
Refresh the SHSC wide and local inductions	Jennie Wilson	04/01/2022	30/04/2022		Complete
Agree incentives for completion of preceptorships	Sarah Bawden	09/02/2022	30/04/2022		On track

### Objective: Improve the rewards and benefits offer

#### Comprehensive rewards and benefits offer

Task	Owner	Timeframe - Start	Timeframe - End		Status
Audit of current rewards and benefits and identify gaps	Annaleise Patrick	01/04/2022	30/06/2022		Complete
Create a rewards and benefits handbook	Annaleise Patrick	01/07/2022	31/08/2022		Not started

#### Staff benefits pack for recruitment

Task	Owner	Timeframe - Start	Timeframe - End		Status
Define and promote the benefits of working at SHSC for nurses and support workers	Joanne Simms	09/02/2022	31/05/2022		Complete

Define and promote the benefits of working at SHSC for all other staff groups	Annaleise Patrick	01/05/2022	31/06/22		Not started
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### Benefits and rewards for hard to recruit areas

Task	Owner	Timeframe - Start	Timeframe - End		Status
Create task and finish group to recommend benefits and rewards for hard to recruit areas	Annaleise Patrick	09/02/2022	30/06/2022		Complete

Dependencies

Retention - Dependent on HWB - physical health, social and teams and psychological contract

Retention - Dependent on Workforce Transformation - Career pathways

## Workforce Transformation

### Aim

*Deliver workforce transformation to expand / grow the workforce to meet service needs both now and in the future*

**Objective: Respond to workforce shortages / gaps through new and different ways of working**

### New role evaluation

Task	Owner	Timeframe - Start	Timeframe - End	Status
Evaluation of the new roles in the inpatient bedded areas to be completed by the Continuous Improvement Team	Angela Davies	05/01/2022	31/07/2022	Complete
Review outcomes and create action plan to address the findings	Karen Dickinson	08/01/2022	09/01/2022	Complete

### Development and expansion of new roles

Task	Owner	Timeframe - Start	Timeframe - End	Status
Enable the recruitment and training for planned new roles for 2022/23	Karen Dickinson	04/01/2022	31/03/2023	On Track
Recruit to the Workforce Development Lead role	Karen Dickinson	07/01/2022	10/01/2022	Not started
Define the framework and approach to provide tools and support for Operational Managers to improve workforce planning	Karen Dickinson	08/01/2022	30/12/2022	On Track
Delivery of outcomes for ICS Mental Health Workforce Transformation Bid- peer support workers	Zoe Dodd	28/02/2022	30/09/2022	On Track

### Widening Participation

Task	Owner	Timeframe - Start	Timeframe - End	Status
Recruit to ICS hosted Employability Lead post	Karen Dickinson	03/01/2022	30/06/2022	Complete
Agree the objectives and scope of the Employability project with system partners	Employability Lead	07/01/2022	31/08/2022	Complete
Recruitment of Healthcare Support Worker Recruitment Project Manager	Sarah Bawden	03/01/2022	30/06/2022	Complete
Agree the objectives and scope of the project with system mental health partners	Project Manager	07/01/2022	31/08/2022	Complete

**Objective: Equip our current workforce with the skills they need to deliver the Mental Health Transformation priorities**

### Career progression pathways

Task	Owner	Timeframe - Start	Timeframe - End	Status
Define and implement Support Worker progression pathway	Stephanie Allen	04/01/2022	31/03/2023	On Track
Evaluation and lessons learned to inform career pathways for other staff groups	Karen Dickinson	01/01/2023	31/03/2023	On Track

Recruit to Project Officer post to support the Support Worker progression pathway	Stephanie Allen	05/01/2022	07/01/2022	Complete
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### Learning needs analysis and training plan for existing staff

Task	Owner	Timeframe - Start	Timeframe - End	Status
Provide further information on Jarvis for staff in preparation for PDR window	Karen Dickinson	04/01/2022	30/06/2022	Complete
Review and improve the annual process for collecting learning needs	Karen Dickinson	05/01/2022	09/01/2022	On Track
Improve the governance and scrutiny of training budgets to ensure equity of access and highlight risks and gaps	Karen Dickinson	05/01/2022	09/01/2022	Complete

### Objective: Establish the workforce planning framework and data quality to achieve this

#### Agreement of a workforce planning framework and provision of quality data

Task	Owner	Timeframe - Start	Timeframe - End	Status
Define workforce planning framework project with supplier	Karen Dickinson	05/01/2022	30/05/2022	Complete
Define current workforce planning activity to enable development of workforce planning framework	Karen Dickinson	05/01/2022	31/08/2022	Complete
Implement workforce planning framework	Workforce Development Lead	09/01/2022	30/03/2023	On Track

### Library knowledge service

Task	Owner	Timeframe - Start	Timeframe - End	Status
Recruit to Library and Knowledge Services Manager	Karen Dickinson	04/01/2022	30/09/2022	Complete
Define and establish Library and Knowledge service within SHSC	LKS Manager	10/01/2022	30/03/2023	On Track
Develop partnership connections for LKS across Sheffield	LKS Manager	01/01/2023	30/03/2023	On Track

#### Dependencies

Recruitment and Retention - appointment of Healthcare Support Worker Recruitment Project Manager

Recruitment to identified posts

Availability of workforce data

Engagement from clinical operational representatives



## Health and Wellbeing

### Aim

*Prioritise and support staff to feel healthy, happy and well at work*

### Outcomes

*Staff know what we have on offer and how it can support their mental, physical and emotional wellbeing*

*Staff believe that we take positive action on Health and Wellbeing*

*Our people can easily engage with H&W available services and resources*

*Our organisation works together to build and engage in meaningful and valuable offers*

*The wellbeing of our people seamlessly threads through other People strategies & policies*

### Objective: Work safely, differently and recover from Covid

#### Agile working

Task	Owner	Timeframe - Start	Timeframe - End	Status
Establish framework to embed the agile working policy	HRBP	01/12/2021	30/08/2022	Complete
Produce guidance on homeworking risk assessments	Sally Hockey	01/12/2021	31/03/2022	Complete
Evaluation of agile working arrangements for new HQ's	Sally Hockey	01/06/2022	31/07/2022	Delayed

#### Controls to ensure staff are working safely

Task	Owner	Timeframe - Start	Timeframe - End	Status
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Review of Covid risk assessments	Maria Jessop	01/04/2022	30/06/2022	Complete
Establish networks to support staff who are working at home	Sally Hockey	01/03/2022	31/05/2022	Delayed
Put Covid recovery plan in place	Sarah Bawden	01/04/2022	30/09/2022	Complete

**Objective: Enable networks and connections to promote wellbeing and self compassion throughout the year**

**Seasonal wellbeing campaigns**

Task	Owner	Timeframe - Start	Timeframe - End	Status
H&W Festival engagement 2022	Sally Hockey	01/02/2022	30/04/2022	Complete
H&W Festival evaluation 2022	Sally Hockey	01/04/2022	31/05/2022	Complete
Covid and Flu vaccination delivery 2022	Steve Sellars / Neil Roberston	01/06/2022	28/02/2023	On Track
Other wellbeing seasonal/national campaigns to be added as time progresses	Sally Hockey	01/04/2022	31/12/2022	On Track

**Health and Wellbeing Network**

Task	Owner	Timeframe - Start	Timeframe - End	Status
Proposal for establishing health and wellbeing network	Sally Hockey	04/01/2022	28/02/2022	Complete
Action plan agreed by Health and Wellbeing group	Sarah Bawden	01/09/2021	31/03/2022	Complete
Action plan implementation	Sally Hockey	01/04/2022	31/10/2022	Delayed
Develop a virtual community for sharing physical development opportunities	TBC	31/05/2022	31/10/2022	Not started

**Objective: Improve our wellbeing offer for all staff with a focus on prevention**

Physical Health, Activity & Wellbeing activities & opportunities				
Task	Owner	Timeframe - Start	Timeframe - End	Status
QUIT programme for staff established	Pete Stewart	01/11/2021	31/03/2022	Complete
QUIT programme promotion & inclusion on H&W intranet	Pete Stewart		31/03/2022	Complete

### Wellbeing offer for shift workers

Task	Owner	Timeframe - Start	Timeframe - End	Status
Develop action plan from 360 Assurance Audit	Sarah Bawden/Sally Hockey	01/04/2022	31/05/2022	Not started
Engagement activities with shift workers to establish requirements	HRBPs/Sally Hockey	01/05/2022	30/06/2022	Delayed

### Health and wellbeing offers

Task	Owner	Timeframe - Start	Timeframe - End	Status
Promote ICS wellbeing offer	Sally Hockey	31/03/2022	31/03/2023	On Track
Evaluate ICS wellbeing offer	Sally Hockey	31/03/2022	31/03/2023	On Track

Establish SHSC menopause advocates network	Sally Hockey	01/02/2022	30/04/2022	Complete
Train menopause advocates	Sally Hockey	01/12/2021	31/03/2022	Complete
Develop and publish menopause guidance	Sally Hockey	01/02/2022	30/06/2022	Complete

### Psychological health

Task	Owner	Timeframe - Start	Timeframe - End	Status
Staff mental health action plan in place aligned with Stevenson Farmer recommendations	Peter Sandford	01/02/2022	31/03/2023	On track
Ensure all staff are aware of Workplace Wellbeing support and accessibility arrangements	Kevin Simmons	01/02/2022	31/03/2023	On Track

### Know your numbers

Task	Owner	Timeframe - Start	Timeframe - End	Status
Agree communications and engagement plan	Sally Hockey	31/01/2022	28/02/2022	Complete
Implement know your numbers project	Sally Hockey	01/03/2022	31/01/2023	Complete
Project evaluation	Sally Hockey	01/11/2022	31/01/2023	On Track

### Objective: Embed wellbeing in our management practice, policies and processes

#### Leadership

Task	Owner	Timeframe - Start	Timeframe - End	Status
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Ensure Health & Wellbeing agendas align with staff feedback and the staff survey results	Sally Hockey	01/04/2022	30/06/2022	On Track
Encourage inclusion of Health & Wellbeing agendas on local action plans	Sally Hockey	30/04/2022	30/06/2022	On Track

## Culture

Task	Owner	Timeframe - Start	Timeframe - End	Status
Establish inclusion of H&W on team/directorate governance structure/meetings	Deborah Cundey/Sally Hockey	31/03/2022	30/06/2022	Completed
Ensure health and wellbeing conversation is part of every PDR and supervision or line management 1:1 (to include discuss individual HWB, flexible working, support and EDI)	Charlotte Turnbull/Sally Hockey	01/02/2022	30/06/2022	Completed
Organise celebration and events for International Women's Day (updated to reflect new financial year)	Sally Hockey	01/10/2022	01/02/2023	On Track

## Objective: Develop skills to support a focus on wellbeing

### Increasing skills and knowledge

Task	Owner	Timeframe - Start	Timeframe - End	Status
Roll out of Mental Health First Aid training	Sally Hockey	01/07/2021		On Track
Design & delivery of training on workplace wellbeing	Sally Hockey	01/03/2022	31/07/2022	On Track
Online learning resources to support workplace wellbeing	Sally Hockey	31/12/2022		Not started

Wellbeing induction for new starters	Karen Dickinson/Sally Hockey	31/05/2022		On track
Design & Delivery of 'Enabling a wellbeing culture' training programme	TBC			Not started
Develop H&W Managers briefing/forums	Sally Hockey	01/06/2022	30/09/2022	Not started
Promote the HWB offer from the ICS as part of our support system for HWB	Sally Hockey	01/03/2022	ongoing	On Track
Investment case for additional HR practitioners (Assistant business Partner level)	Sarah Bawden	01/01/2022	31/03/2022	Complete
Recruit additional Assistant Business Partners to support and develop strong management of absence	Debra Butterworth	01/04/2022	30/05/2022	Complete

Dependant on resources available to support the build, facilitation and delivery of activity and offers

Dependant on the capability of systems access for all staff to Jarvis

Dependant on capability and skills of workforce to develop content

Dependant on workforce priorities

## Equality, Diversity and Inclusion

### Aim

*Promoting and ensuring equality, diversity and inclusion in all that we do within a diverse organisation*

**Objective: To achieve the highest possible rating for Domain 2 of the NHS Equality Delivery System (Workforce Health and Wellbeing )**

**\* Staff with Protected Characteristics (Age; Disability; Gender Reassignment ( identity) ; Race; Religion or Belief; Sex; Sexual Orientation; Marriage or Civil Partnership; Pregnancy and Maternity)**

**When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions\* (EDS Outcome 2A)**

Task	Owner	Timeframe - Start	Timeframe - End	Status
Ensure that <i>Know Your Numbers</i> includes a focus on staff with Protected Characteristics where evidence shows they are disproportionately affected.**	Sally Hockey	28/02/2022	30/04/2023	on track
Embed use of our Health and Wellbeing Passport and Carers Passport including measuring take up by gender, ethnicity, and disability.	Peter Sandford	01/03/2022	30/09/2022	Not Started
Provide training to managers on the Health and Wellbeing Passport and Carers Passport	Peter Sandford	01/05/2022	30/09/2022	Not Started
Identify action with the Workplace Wellbeing Manager to Increase the number of people from Black and Asian groups accessing workplace wellbeing	Peter Sandford	01/03/2022	30/09/2022	Complete
Develop Digital Stories using the WDES Innovation Fund	Peter Sandford	01/01/2022	30/09/2022	Complete



Develop a plan to use the Digital Stories to support the WDES Action Plan	Peter Sandford	01/01/2022	30/09/2022	Complete
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**When at work, staff are free from abuse, harassment, bullying and physical violence from any source\* (EDS Outcome 2B)**

Task	Owner	Timeframe - Start	Timeframe - End	Status
Continue to implement the Zero Tolerance Group Action Plan working as a sub group of the Violence and Aggression standards policy development group	Phil Jonas	01/01/2022	31/03/2023	on track
Ratify the new Zero Tolerance Protocol (with SYP)	Liz Johnson / Phil Jonas	30/03/2022	30/08/2022	Complete
Ratify the Hate Incident SOP Implement with management guidance and visual resources	Liz Johnson / Phil Jonas	31/03/2022	31/08/2022	Complete
Introduce a system for administering Hate Incident reporting through EDI team as a pilot	Liz Johnson / Phil Jonas	01/04/2022	30/09/2022	Complete
Develop hate incident reports to be shared with services and consider potential for us as part of triangulated data	Liz Johnson / Phil Jonas	01/04/2022	30/11/2022	Overdue review

**Independent support and advice for staff when suffering from stress, abuse, bullying harassment and physical violence from any source\* (EDS Outcome 2C)**

Task	Owner	Timeframe - Start	Timeframe - End	Status
Approve and implement Staff HR Liaison process	Sharon Booth	31/03/2022	31/08/2022	Complete
Involve staff networks in any review of policy related to abuse bullying harassment or physical violence (to note if any relevant policies are due for review in 22/23)	Policy Author	01/01/2022	31/12/2022	Ongoing

Review the effectiveness of systems and the role of staff networks in sign posting members to support and guidance	Liz Johnson	01/04/2022	31/10/2022	Complete
Review 'Able Futures' offer	Liz Johnson	02/03/2022	31/05/2022	Complete

### SHSC recommended as a place to work and receive treatment\* (EDS Outcome 2D)

Task	Owner	Timeframe - Start	Timeframe - End	Status
Develop an EDI dashboard with information broken down by protected characteristics	Liz Johnson	01/04/2022	30/09/2022	Complete
look at how to use the EDI dashboard with teams to support improvement	Liz Johnson	30/09/2022	31/03/2023	on track
Produce a report broken down by Ethnicity, Disability and Sexual Orientation of the following staff survey question; would recommend as a place to work: would choose to use our services, would recommend to family or friends. Identify action where less than 85% positive for the group.	Liz Johnson	01/04/2022	30/06/2022	Complete

**Objective: To achieve the highest possible rating for Domain 3 of the NHS Equality Delivery System (Inclusive Leadership )**

### Board members, system leaders (Band 9 and VSM) and those with line management responsibilities routinely demonstrate their understanding of, commitment to, equality and health inequalities (EDS Outcome 3A)

Task	Owner	Timeframe - Start	Timeframe - End	Status
Provide development opportunities to senior leaders focused on equality and health inequalities **	Charlotte Turnbull / Liz Johnson	01/01/2022	31/12/2022	Complete
Review the effectiveness of the governance structure in facilitating the voice of staff network group members and leads	Liz Johnson	01/09/2022	01/01/2023	Complete

Interface with Leadership Development Programme Development	Charlotte Turnbull / Liz Johnson	01/02/2022	31/12/2022	Complete
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**People Strategy Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed (EDS Outcome 3B)**

Task	Owner	Timeframe - Start	Timeframe - End	Status
Complete EQIA for Business Cases associated with the People Strategy Delivery Plan	SMT Mandate leads	01/01/2022	31/12/2022	Complete
Identify equality and health inequalities related impacts and risks and how they will be mitigated and managed in all People Strategy Delivery Plan associated papers to People Committee	SMT Paper author	01/01/2022	31/12/2022	Complete
Support directorate leaders to identify equality and health inequalities related impacts and risks and how they will be mitigated and managed	Liz Johnson	01/01/2022	31/12/2022	Complete
Provide development opportunities to senior leaders focused on equality and health inequalities **	Charlotte Turnbull / Liz Johnson	01/01/2022	31/12/2022	Complete

**Board members, system and senior leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients (EDS Outcome 3C)**

Task	Owner	Timeframe - Start	Timeframe - End	Status
Complete implementation of the Inclusion and Equality group and reporting to People Committee to meet Committee aspirations	Liz Johnson	01/04/2022	31/12/2022	complete
Introduce an EDI performance dashboard	Liz Johnson	01/04/2022	30/11/2022	complete
Work with the PMO office to continue to develop clarity on strategic overview re People related EDI	Liz Johnson	01/04/2022	30/11/22	complete

**\*\*Dependencies**

*Improved access and experience dependent on workforce transformation, widening participation*

*EDI workstream supports delivery of Leadership and OD talent management objective*

*EDI workstream supports delivery of Leadership and OD just and learning culture objective*

*EDI workstream supports delivery of Recruitment workstream, ensuring recruitment is inclusive*

*EDI workstream supports delivery of Health and Wellbeing Objectives*

## Leadership and Organisational Development (OD)

### Aim

*Develop compassionate and inclusive leadership at Team SHSC which enables a just and learning culture*

### Outcomes:

Staff know their voice counts  
 Staff know how to give their input  
 Staff are well led  
 Staffed are supported by skilled and engaged managers  
 Getting the best out of everyone - potential and capability  
 Supportive teams that understand and deliver clear goals  
 Feeling part of Team SHSC and seeing your value - multiple contributions person and role  
 Just and learning opportunities  
 Quality Team development materials  
 Opportunities for talent development - progress / refresh / give back  
 Values in action: tangible behaviours

### Objective: To establish good governance for the workstream

#### Establish and run the OD Assurance Group

Task	Owner	Timeframe - Start	Timeframe - End	Status
Identify initial membership of group	Caroline Parry	01/02/2022	15/02/2022	Completed
Review refreshed ToR and remit of OD Assurance Group at inaugural meeting	Charlotte Turnbull	15/02/2022	18/03/2022	Completed
Set meeting frequency	Charlotte Turnbull	15/02/2022	18/03/2022	Completed
Inaugural meeting	Charlotte Turnbull	18/03/2022	18/03/2022	Completed
On-going meeting activity	Charlotte Turnbull	18/03/2022	On-going	Completed

### Objective: To have an OD Framework that enables delivery of the SHSC vision, strategic priorities and values

#### Establish an accessible OD Framework

Task	Owner	Timeframe - Start	Timeframe - End	Status
Review of existing data/materials from prior diagnostics consultations e.g. the Big Conversation, refreshed values work and away days etc	Charlotte Turnbull	01/02/2022	31/03/2022	Completed
Develop an OD framework which offers support to the development of individuals, leadership and managements, talent, engagement and culture	Charlotte Turnbull	01/03/2022	30/06/2022	Completed
Develop a supporting Jarvis web page presence	Charlotte Turnbull	01/07/2022	31/07/2022	Delayed
Develop a range of resources for key areas via Jarvis e.g. repository of team development materials	Charlotte Turnbull	01/08/2022	31/07/2023	Delayed
Creating comms and engagement routes beyond the website/email approach to ensure access by staff not online active	Charlotte Turnbull	01/07/2022	31/07/2022	Delayed
Consult with Staffside and Staff Network Groups as part of the development process	Charlotte Turnbull / Staffside/Chairs of SNGs	20/04/2022	On-going	Completed

### Objective: To embed the refreshed SHSC values within our behaviours

#### Roll-out an implementation plan that brings the refreshed values to life across SHSC

Task	Owner	Timeframe - Start	Timeframe - End	Status
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Identification of areas within People Directorate remit to embed the refreshed values e.g. recruitment, training, engagement, PDR , HR Policies etc	Charlotte Turnbull	21/02/2022	21/02/2022	Completed
Develop implementation plan with confirmed roll-out dates during 2022	Charlotte Turnbull/HRBPs/Recruitment Lead/Training Lead	01/03/2022	31/05/2022	Completed
Consult with Staffside and Staff Network Groups as part of the development process	Charlotte Turnbull / Staffside/Chairs of SNGs	27/01/2022	31/12/2022	Completed
Liaison with colleagues outside of People Directorate to identify action needed to embed the refreshed values in other areas of SHSC	Charlotte Turnbull/HRBPs	01/05/2022	30/06/2022	Delayed
Organisational comms plan re. refreshed values updates to core HR/People Directorate and other area activity (launch and on-going activity).	Charlotte Turnbull/HRBPs/Recruitment Lead/Training Lead/Holly Cubbitt	01/05/2022	31/05/2022	Completed

**Objective: To create a just and learning culture**

**Establish a range of activity that introduces and supports a just and learning culture at SHSC**

Task	Owner	Timeframe - Start	Timeframe - End	Status
Participation on 'Just & Learning Culture' University of Northumbria programme and Mersey Care programme	Emily Seville/Neil Robertson/Dr Michael Ludlum	01/01/2022	Summer 2022	Completed
Establish working group to define and support implementation action	J&L Culture Advocates/Charlotte Turnbull/Caroline Parry	01/05/2022	30/06/2022	On track
Review of HR policy and process to enable restorative focus	Emily Seville/HRBPs	01/05/2022	31/12/2022	Complete
Agree just and learning culture definition and priority areas of activity at Exec/Board level	J&L Culture Advocates/Charlotte Turnbull/Caroline Parry	30/06/2022	31/08/2022	Completed
Collaboration with Speak Up Champion activity	Charlotte Turnbull/Wendy Fowler	03/03/2022	On-going	Completed
SHSC Coaching Service refresh	Dave Palfreyman/Charlotte Turnbull	01/05/2022	01/09/2022	Delayed

**Objective: To establish a leadership and management (L&M) development offer**

**Create a menu of offers which enables compassionate and inclusive leadership at SHSC**

Task	Owner	Timeframe - Start	Timeframe - End	Status
Team SHSC: Developing as Leaders - (a) development of programme by Co-Design Team with Arden & GEM (b) cohort 1 delivery and evaluation	Simon Hann/Caroline Parry/Charlotte Turnbull	01/12/2021	31/08/2022	Completed
(c) Preparatory work, Development of future offer and Delivery plan for future cohorts	Charlotte/Turnbull	01/04/2022	31/07/2022	Completed
(d) Delivery of Team SHSC: Developing as Leaders roll-out of multiple cohorts	Charlotte Turnbull/Delivery team	15/10/2022	2023/2024	Completed
Becoming a more inclusive leader' - leadership development programme with Kings Fund	Liz Johnson	01/11/2021	10/03/2022	Completed
Agile Mindset & Behaviours Programme (GSA Change Consultancy) implementation action	Jan Ditheridge/Caroline Parry/Charlotte Turnbull	01/04/2022	31/01/2023	Completed

Cohort 1 Strategic Leaders	Jan Ditheridge/Caroline Parry/Charlotte Turnbull	28/04/2022	06/09/2022	Completed
Cohort 2 Delivery Leaders	Jan Ditheridge/Caroline Parry/Charlotte Turnbull	12/05/2022	22/09/2022	Completed
Cohort 3 Portfolio/Single Subject Leaders	Jan Ditheridge/Caroline Parry/Charlotte Turnbull	07/09/2022	31/01/2023	On track
ICS Compassionate Leadership programme - next steps	Charlotte Turnbull	01/06/2022	31/08/2022	Completed
Leading Sheffield (Sheffield system) - future cohort	Charlotte Turnbull/Sheffield HCP Group	25/05/2022	31/07/2023	On track
Mary Seacole Local - future plans	Karen Dickinson/Charlotte Turnbull	01/08/2022	31/10/2022	On track
L&M apprenticeship offers	Karen Dickinson/Charlotte Turnbull	01/08/2022	31/10/2022	On track
Review and promotion of NHS Leadership Academy offers	Charlotte Turnbull	On-going	On-going	On track
Contribute to Monthly Leadership Meeting (leadership call) and Leadership Away Days	Holly Cubbitt	On-going	On-going	On track
Development of accessible comms plan and web-based repository of information	Charlotte Turnbull/Holly Cubbitt	01/08/2022	31/07/2023	Delayed

**Objective: To develop and implement a team development offer**

Create a menu of offers which support team wellbeing and effective performance in challenging, uncertain times

Task	Owner	Timeframe - Start	Timeframe - End	Status
Staff Survey 2021 results (embargoed until 30.3.22) will identify priority areas for team development and direct material development and delivery plan	Charlotte Turnbull/Sally Hockey	01/05/2022	31/12/2022	Completed
Promotion of team support developed by other People Strategy workstreams e.g. Health & Wellbeing, EDI, Workforce etc	Charlotte Turnbull/Sarah Bawden/Liz Johnson/Karen Dickinson	01/06/2022	31/12/2022	Completed

**Objective: To develop and implement a talent development offer**

Align SHSC talent development offers to provide clarity and opportunity for staff

Task	Owner	Timeframe - Start	Timeframe - End	Status
PDR - refresh re. new values and promote development plan	Charlotte Turnbull/Jennie Wilson	01/03/2022	31/03/2022	Completed
Run PDR management support sessions for 2022 season	Jennie Wilson	01/04/2022	30/06/2022	Completed
Supervision - review quality of experience and evaluation process	Linda Wilkinson	01/07/2022	30/09/2022	Completed
Establish data on leadership pipeline to gauge staff numbers and diversity position	Simon Hann/Nin Uppal-Graves	01/04/2022	31/05/2022	Completed

**Objective: To enable quality staff engagement across SHSC that makes staff feel 'We each have a voice that counts'**

Use the outcomes of the People Pulse surveys and Staff Survey 2021 to set OD priorities for 2022-23

Task	Owner	Timeframe - Start	Timeframe - End	Status
Establish a Staff Engagement tracker to support activity for 3 People Pulse surveys and Staff Survey pa	Sally Hockey/Charlotte Turnbull	15/01/2022	15/02/2022	Completed
Share key themes from Staff Survey 2021 outcomes with Team SHSC: link to People Promise/Morale/Engagement themes	Sally Hockey/Charlotte Turnbull	24/02/2022	30/06/2022	Completed
Create Team:SHSC Staff Engagement/Experience Action Plan (based on Staff Survey/People Pulse results)	Sally Hockey/Charlotte Turnbull	01/04/2022	30/04/2022	Completed
Create template for local Staff Engagement Action Plans (based on Staff Survey/People Pulse results)	Sally Hockey/Charlotte Turnbull	01/04/2022	30/04/2022	Completed
Hold support meetings with individual teams	Sally Hockey	20/04/2022	30/06/2022	Completed
Begin Staff Survey 2022 planning	Sally Hockey	01/09/2022	31/12/2022	Completed

Dependencies for example (please delete if not necessary)

Dependent on recruitment to form OD Team (B5, B7, B8a posts)

Dependent on EDI - compassionate and inclusive leadership, EDI content for programmes

Dependent on HWB - physical health, social and teams and psychological contract

Dependent on Workforce Transformation - career pathways, talent development opportunities

Dependent on Recruitment and Retention - management training

Dependent on contributions from in-house experts outside of PD- Improvement, PMO, Governance, IMST, Finance, Sustainability and Clinical Operations



# Our People Strategy 2021/22 - 2023

## Our Vision

To improve the mental, physical and social wellbeing of the people in our communities.

## Strategic aims

▶ Deliver outstanding care.

▶ Create a great place to work.

▶ Effective use of resources.

▶ Ensure our services are inclusive



### Health and Wellbeing

Prioritise to support staff to feel healthy, happy and well at work;

- Work safely and differently
- Refreshed HWB group
- Winter wellbeing campaign
- Appoint a wellbeing guardian
- Training
- Physical and mental health
- HWB discussion
- Environment



### Workforce Transformation

Deliver workforce transformation to meet service needs both now and in the future;

- New roles
- Workforce Plan
- Learning needs analysis / training plan
- Apprenticeships
- New ways of working
- Improved workforce data
- Develop clear career pathways

### Leadership and Development

Collective, inclusive and compassionate leadership with equal opportunity for growth and development;

- Leadership development
- Talent management
- Management skills development
- Partnership working



### Recruitment and Retention

Recruit and retain the right staff with the right skills;

- Improved recruitment practice
- Great place to work / employer of choice
- Flexible working
- Reward and benefits
- Career opportunities



### **Recruit and retain the right staff with the right skills**

Promoting the NHS as the best place to work, selling the benefits of Sheffield as a destination, and publicising the unique offer the Trust presents, will widen our reach and attract people to roles. Engaging and supporting our existing experienced people to stay with us, by listening, offering flexible options and alternative opportunities through career pathways, new roles and ways of working. Attract a diverse range of people into wider workforce roles to establish and retain a strong and representative future workforce supply.

### **Prioritise health and wellbeing to support staff to feel healthy, happy and well at work**

Staff wellbeing has a big impact on patient care, on how engaged people are and whether they stay or look for work elsewhere. There is evidence that happy staff are more compassionate and provide safer care. Building stronger, happier teams also leads to benefits in terms of patient outcomes, innovation and financial expenditure.

Commitment from Trust leaders to prioritise and role model good health and wellbeing, will embed a culture where staff are valued, listened to and able to make choices to keep them happy, resilient and well at work.

Psychological and physical safety are paramount to creating an environment where staff feel empowered to fulfil their potential, are free from bullying and harassment and able to speak up in a fair and just culture.

## **Key areas 2020 - 2023**

### **Deliver workforce transformation to meet service needs both now and in the future**

Addressing shortages in staff numbers and or skills needed now and supporting the development of a workforce which is responsive to more integrated care in the future.

To meet these challenges we need to attract and secure future supply, upskill our existing staff, create and embrace new types of roles mobilise innovation and create new ways of working based on future models of care,

### **Collective, inclusive and compassionate leadership across the whole organisation with equal opportunity for growth and development.**

The right numbers of diverse, appropriately developed people to fill current and future senior management vacancies with a recognition that leadership takes place at all levels of the organisation and opportunities for progression and targeted talent development **are important for everyone**. 'The way we do things around here' – shapes the behaviour of everyone in the organisation and directly affects the quality of care they provide. Research shows the most powerful factor influencing culture is leadership. Leaders who model compassion, inclusion and dedication to improvement in all their interactions are the key to creating cultures of continuous improvement in health and care. Where leaders act with compassion, staff feel valued, engaged and enabled to show compassion themselves. They feel obliged to speak up when something is wrong and empowered to continuously improve.

## Wellbeing

Trailblazers -  
Health and  
Wellbeing  
Framework

Physical health  
checks over 60  
staff

500 Wellbeing  
packs  
for staff during  
COVID

New Occupational  
Health provider –  
stronger  
partnership from  
Jan 2023

Menopause  
Roadshows,  
Advocates,  
Accreditation

Wellbeing network  
development

Significant  
Assurance for  
Wellbeing Audit

## Recruitment and Retention

TRAC

Recruitment  
improvement and  
Optimisation plan

Agency reduction  
plan

Improvements to  
temporary staffing  
capacity

International  
recruitment 21  
offers

HCSW widening  
access

Incentives for  
recruitment and  
retention of  
nurses

Reduction in time  
to hire

831 offers made  
683 started in  
post

## OD and Leadership

OD Assurance  
Group and Staff  
Engagement  
Steering Group

Developing as  
leaders -27 leaders  
completed the  
programme.

Agile Mindset &  
Behaviours  
leadership  
development – 31  
senior leaders  
PDR 2022 – refresh

Staff engagement –  
reporting in  
Performance  
Reviews

Refreshed values –  
embedded into  
recruitment, PDR  
and leadership  
development

Culture Framework

## EDI

Increased  
participation  
in staff networks

Phase 2  
Rainbow Badge

Working Together  
Conference

Reasonable  
Adjustments Task  
and Finish group

Hate Incident  
Reporting SOP

Reduction of  
Ethnically diverse  
staff in formal  
processes

EDI workforce  
measures  
developed

Established EDI  
assurance group

## Workforce

Just and Learning  
Formal case length  
reduced and  
significant  
reduction in ER  
cases





Workforce  
Dashboard  
Development

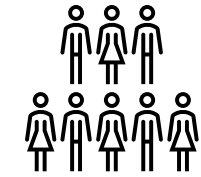
Completed the  
rollout of E Roster  
98% at Dec 2022

Apprenticeship  
levy 2 utilised  
against target of  
2.3%

Career pathway  
support workers

Highlights of 2022

Measures	2021	2022	Target	Benchmark	Comparator data
Reduce time to hire advert to unconditional offer (pre employment checks complete)	-	38 days	45 days 	45	National Benchmarking (SYB project) TRAC
Reduce turnover*	16.7%	14.97% 	> 10%	10%	SYB Trusts
Sickness absence rates (12 month average)*	5.93%	6.4%	5.1%	5.4% (Pre covid national Avg.)	SYB Trusts and National averages NHS Digital and Model Hospital
Vacancy rates	9.04%	10.7%	10%	8%	SYB Trusts
Headcount	2558	2665	TBC	92% of total establishment	National Metrics
Agency spend as a percentage of WTE spend		43%	20%	23%	National Average across all NHS Specialisms
Casework length	25.8 weeks	14.53 weeks 	22 weeks	N/A	
Casework numbers	35 (Dec 21)	19 (Dec 22)	<20	N/A	
Staff at band 7 and above from non white backgrounds (Disparity Ratio)	2.29 (middle to upper band ratio)	2.49 (middle to upper band ratio)	1.25	N/A	WRES disparity ratio



# Summary KPI Measures and Performance 2022



# SHSC Sickness January 2022 – December 2022



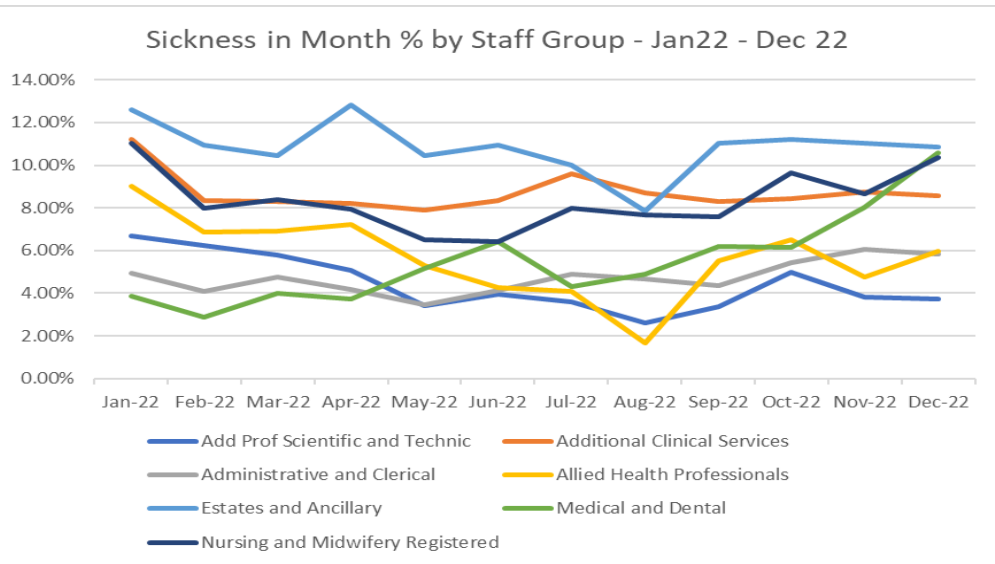
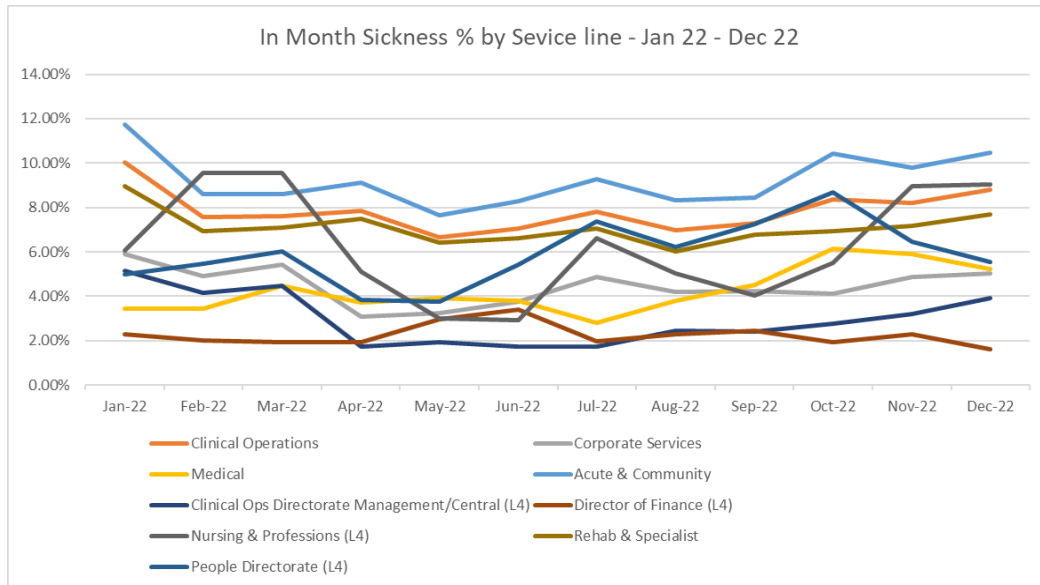
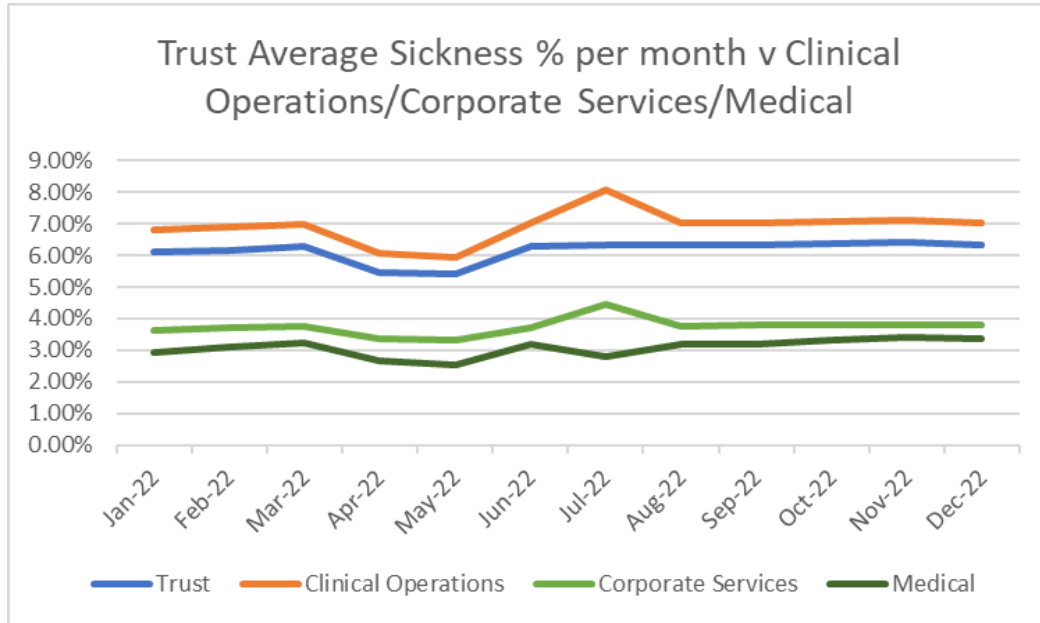
**Sheffield Health and Social Care**  
NHS Foundation Trust

Trust Sickness Absence has remained high throughout 2022. Starting at 6.3% in Jan 22, compared to year to date sickness rate of 6.34% for Dec 2022. Overall Trust in month Sickness for December 2022 was 7.99%. Clinical operations are consistently recording an average sickness above the trust average.

Our highest rates of sickness are amongst our Clinical service lines with Acute and community, Clinical operations and Rehab & Specialist all reporting the highest levels of sickness % for the majority of months from Jan 22 – December 22.

Broken down by staff group we can see that Estates and Ancillary have high sickness levels throughout followed by additional clinical services and Nursing professions.

Our sickness target is 5.1% which has not been achieved across the organisation but was achieved by corporate services and Medical directorates both reporting less than 4% sickness. This concludes that a more focused approach needs to be aimed towards our clinical areas.



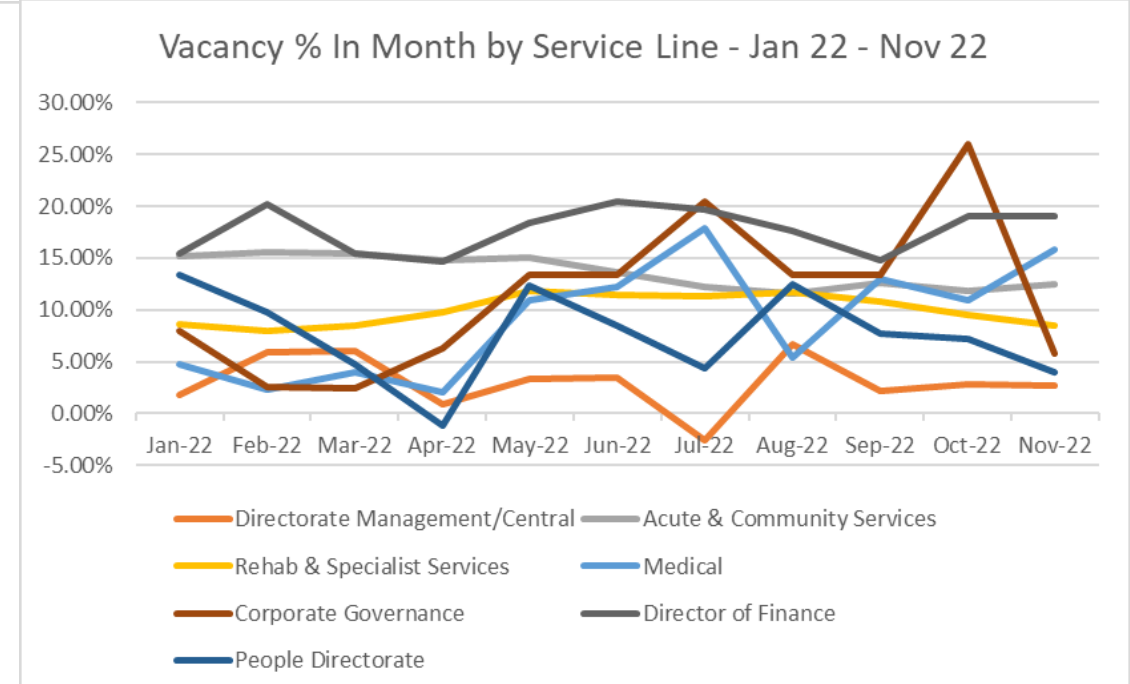
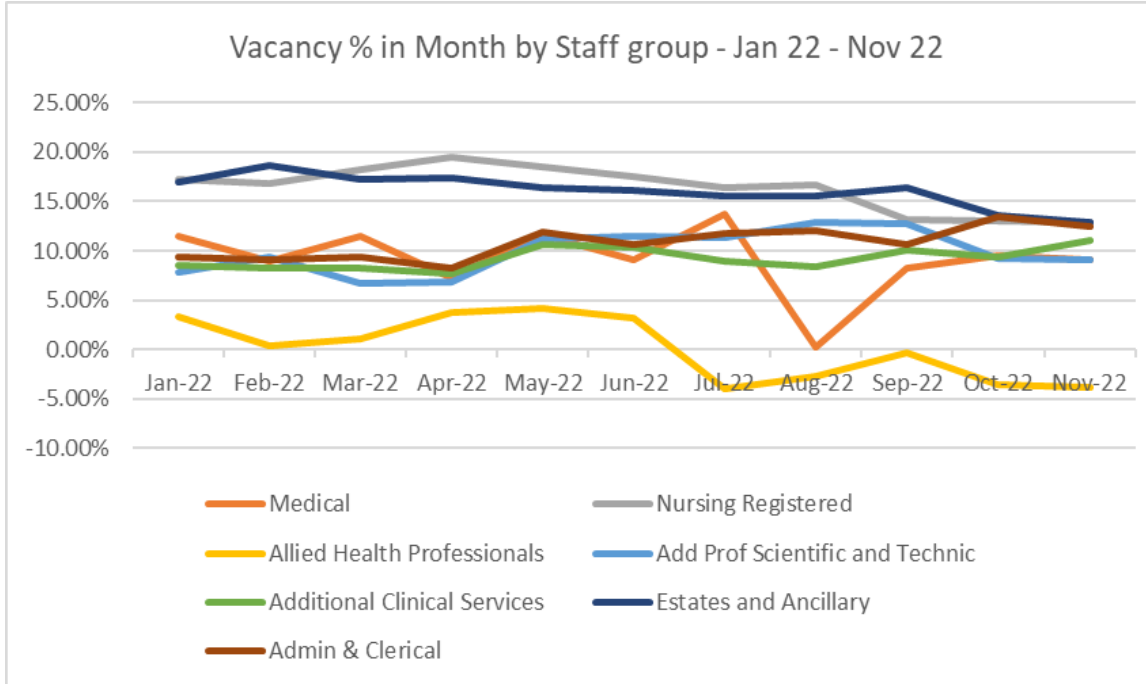
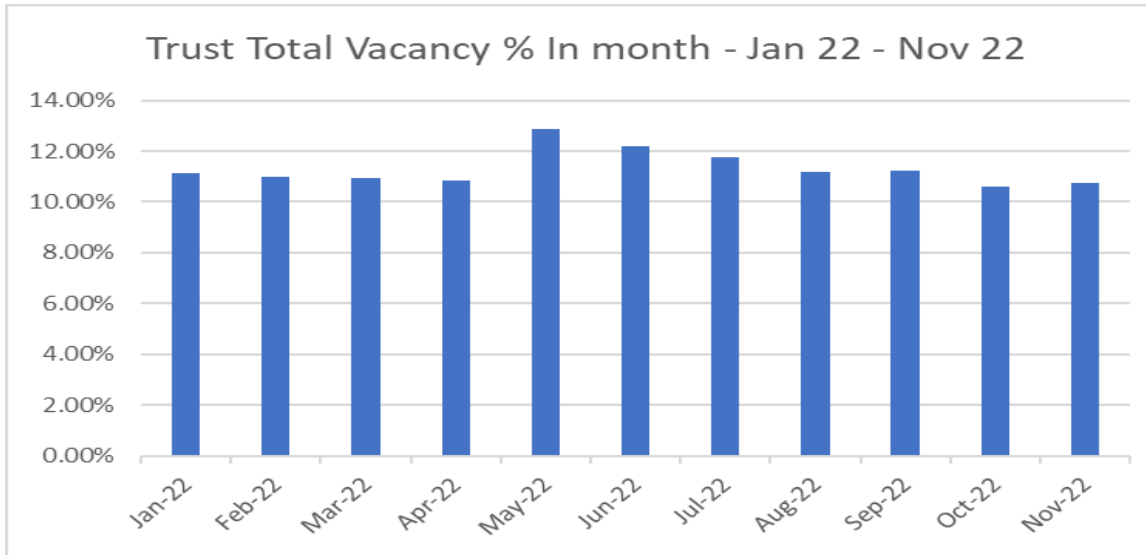
# SHSC Vacancies January 2022 – November 2022



**Sheffield Health and Social Care**  
NHS Foundation Trust

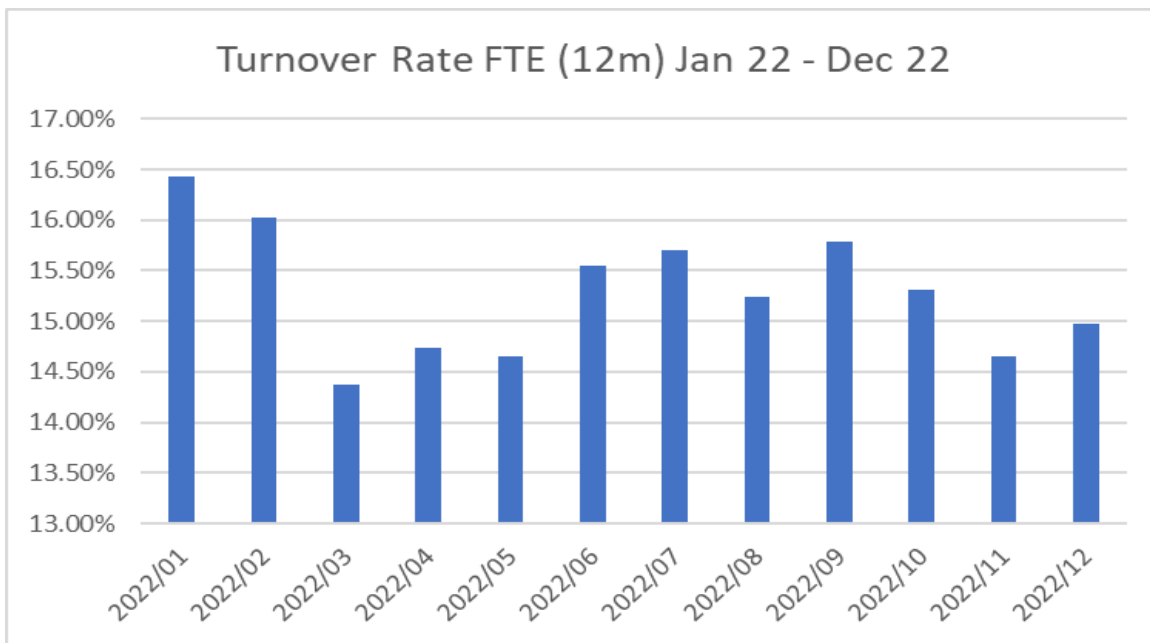
Total Trust Vacancies have dropped since Jan 22 from 11.15% to 10.73% in Dec 22.

There has been progress made in reducing Vacancies across Registered Nursing where vacancies have dropped from 17.3% in Jan 22 to 12.84% in Dec 22. There has also been a drop across all service lines since the beginning of 2022 apart from Medical.





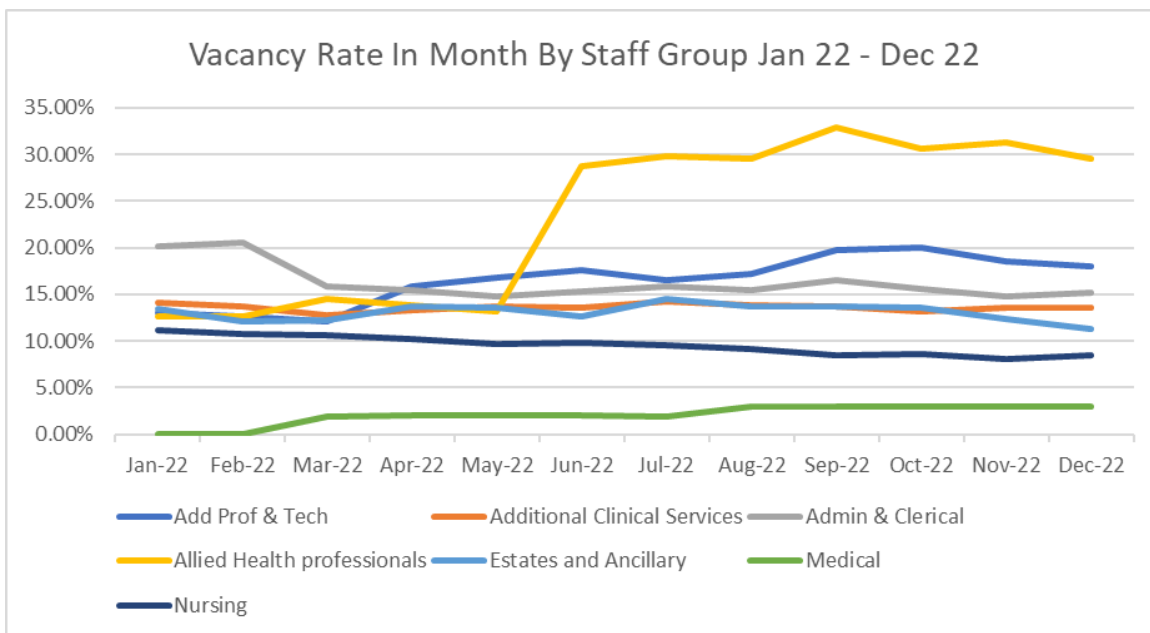
## SHSC Turnover January 2022 – December 2022



Overall, Trust turnover has decreased from 16.42% In January 2022 – 14.97% in December 22.



There are outliers that are contributing towards this such as an increase to 30% turnover in Dec 22 from 14% in Jan 22 in AHP turnover. Although as previously seen AHP's have maintained low vacancies. The turnover is not a cause for concern and related mainly to continuing professional development and progression.



There has been a focus on Recruitment and retention in clinical areas which has seen an overall reduction in turnover for registered nurses from 11.13% down to 8.46% which brings us below our target and close to the national benchmarking figure for this staff group.

Admin & Clerical, as well as Estates, have also reduced the turnover % year to date from January 2022 – December 2022.



# SHSC HR Employee Relations Casework Dashboard

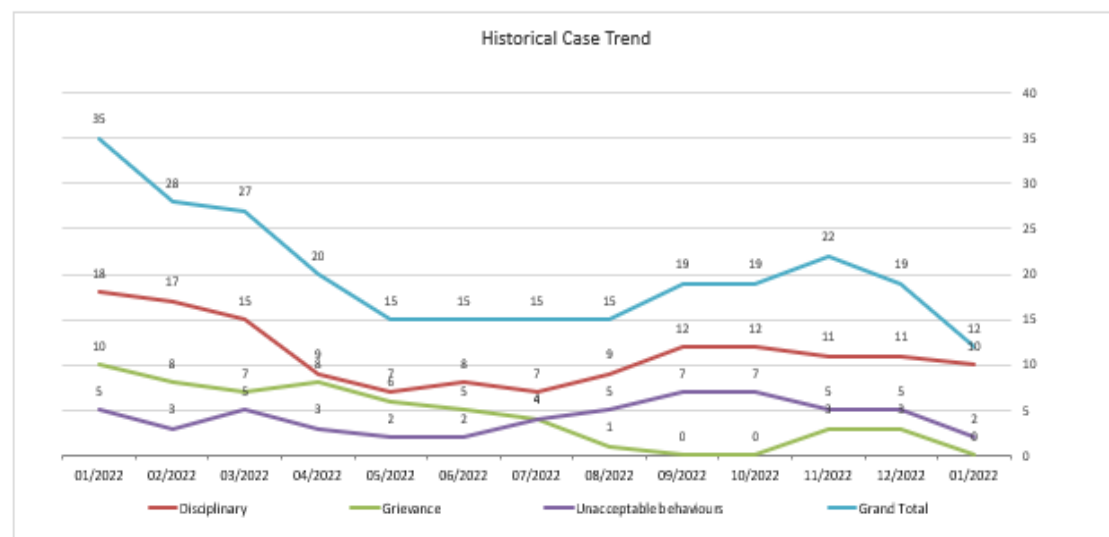
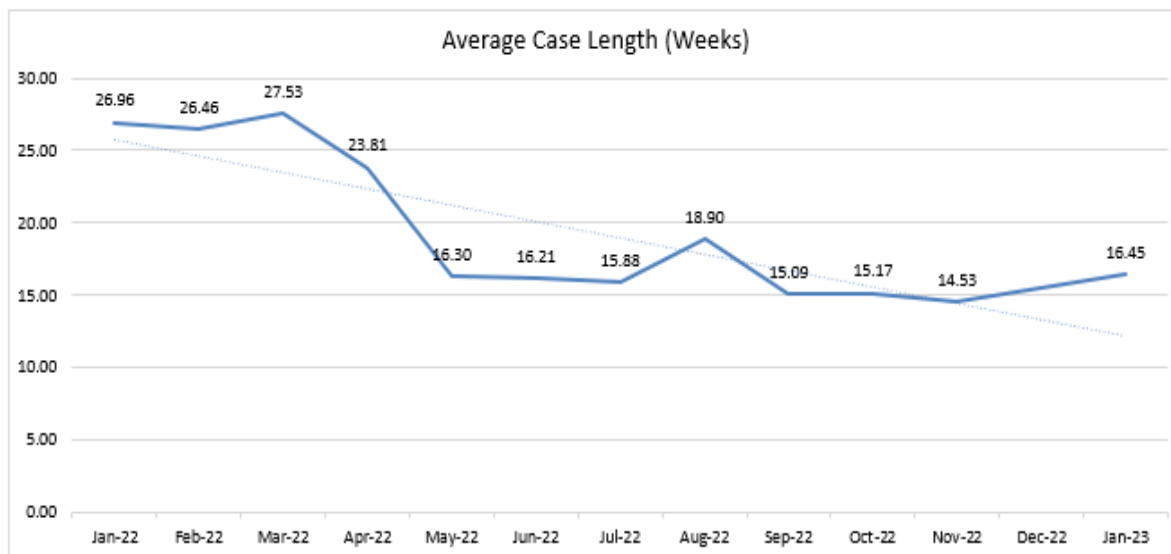
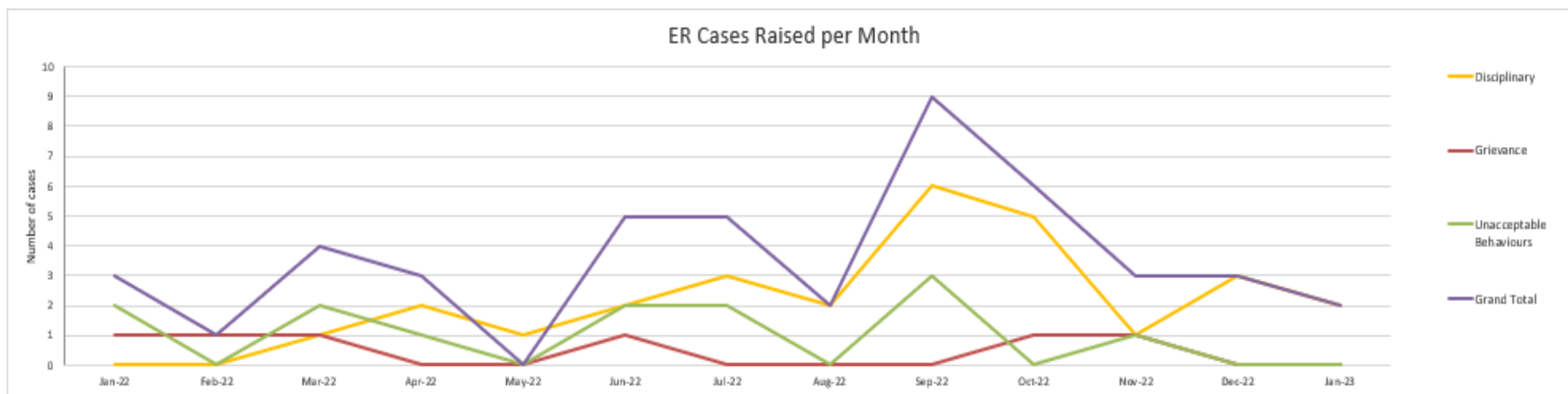
13/01/2023

## Total Cases

Policy Area	Fact-find	Hearing	Investigation	Grand Total
Disciplinary	3	1	6	10
Unacceptable behaviours	1		1	2
Grand Total	4	1	7	12

Trust Area	
Community & Acute	8
Rehabilitation & Specialist	2
Corporate	2
Grand Total	12

Total Suspensions	2
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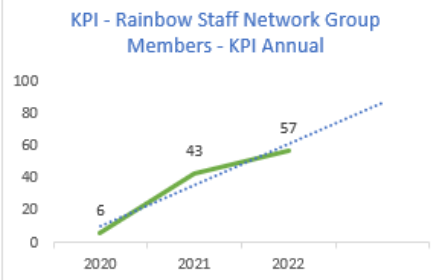
## Average Number of Weeks Case Open

Policy Area	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Jan-23	Current v 22 week target
Disciplinary	31.52	29.17	35.69	30.67	22.53	18.38	14.04	15.81	15.82	14.33	16.87	17.41	79%
Grievance	15.33	22.94	21.14	21.32	16.23	18.25	27	27	0	0	5.14	0	0%
Unacceptable behaviours	23	13.81	12	9.86	10.14	12	9.61	13.89	14.36	16.59	13.96	12.14	55%
Grand Total	26.96	26.46	27.53	23.81	16.30	16.21	15.88	18.90	15.09	15.17	14.53	16.45	75%

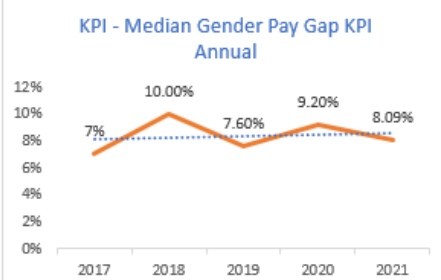
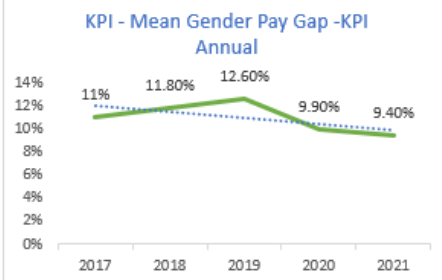


# Key Performance Measures – Equality Objectives (Workforce)

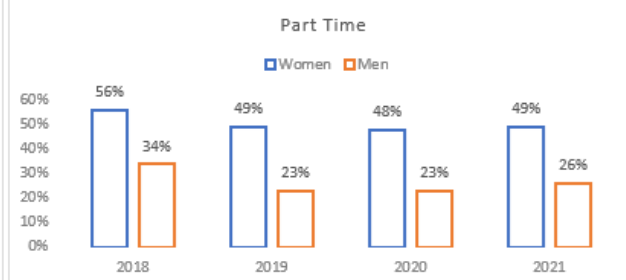
## Improve the Voice of LGBTQ staff - KPI Annual



## Reduce Our Gender Pay Gap – KPI Annual

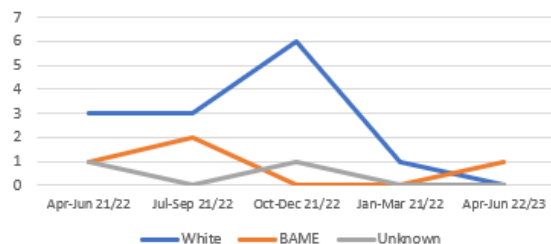


## Improve Opportunities for Flexible Working

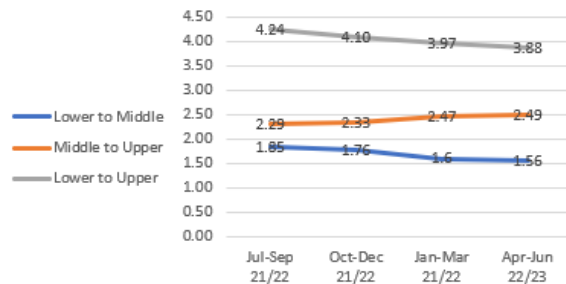


## Improve our Workforce Race Equality Standard Metrics

### Disciplinary - New Cases Started in that Period - KPI quarterly

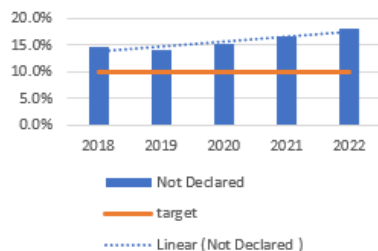


### Disparity Ratio - Interim Target 1.25 - KPI Quarterly

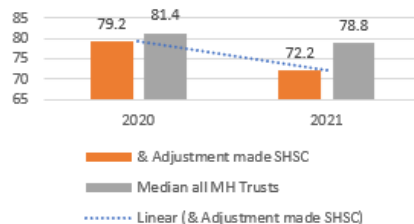


## Improve our Workforce Disability Equality Standard Metrics

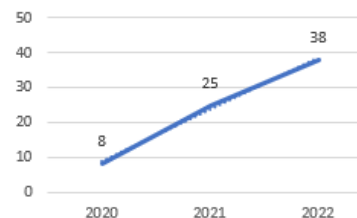
### Not Declared - Target 10% by 2024- KPI Quarterly



### % staff saying they have had adjustments made - KPI Annual



### Disabled Staff Network Members



## EDI DASHBOARD

Our EDI Dashboard represents data to support progress against our EDI Equality Objectives.

**Membership of Networks** – membership of only two of the staff network groups is reported because these metrics support progress in reflecting engagement which in these to cases are an objective relevant to this group.

**The Disparity Ratio** – This is a national measure introduced through the Workforce Race Equality Standard programme, a focus on reducing this ratio is included in the 2021/2022 NHS Operational Guidance

The metric is improving but there is a risk that the national target of 1.25 across all three strands may not be met by 2025.

**Reasonable Adjustments** – this is an area of concern highlighted in the Staff Survey 2021 results and by our Staff Network Group. A task and Finish group has been established and improving the experience of Disabled staff identified as an objective led by the Executive Director of People. As part of this work additional metrics to measure progress in year will be identified.

**Disciplinary** – new disciplinary cases are reducing.

**Flexible Working** – measuring access to flexible working is part of the action we are taking this measure may be improved as a result of this i.e. development of a better indicators (s) of progress.

**Disability** – not declared is increasing – targeted action is planned to improve disclosure rates in 22/23.

## Appendix 3

### Legal and Policy areas that define organisational EDI priorities

The legal requirement to identify measurable Equality Objectives to support achieving the Public Sector Equality Duty and review these at least every four years.

- Gender Pay Gap Reporting
- NHS contractual and policy requirements specifically -
  - The NHS Equality Delivery System (Domains 2 and 3 are specific to our People Strategy)
  - The NHS Workforce Race Equality Standard
  - The NHS Workforce Disability Equality Standard

### Actions included in People Strategy Delivery plan

#### Enabling Action

- The four outcomes of Domain 2 and the three outcomes of Domain 3 of the Equality delivery System
- 2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions
- 2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source
- 2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source
- 2D: Staff recommend the organisation as a place to work and receive treatment
- 3A: Board members, system leaders (Band 9 and VSM) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities
- 3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed
- 3C: Board members, system and senior leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients
- A Disparity Ratio Action Plan and a Recruitment and Retention Action plan (both Required by the WRES)



# External Influences for Equality Diversity and Inclusion in the NHS



Sheffield Health  
and Social Care  
NHS Foundation Trust

Legislation  
The Equality Act 2010

NHS Policy  
The NHS Equality Delivery  
System

NHS Policy  
The NHS Standard  
Contract and the  
Annual  
Operational  
Guidance

Legislation  
The Health and  
Social Care Act  
2012

Gender Pay  
Gap  
Reporting

Equality  
Objectives  
and Annual  
Reporting

The Public  
Sector  
Equality Duty

Domain 1  
Focus  
Services

Domain 2  
Focus  
Workforce

Domain 3  
Focus  
Leadership

The  
Workforce  
Race  
Equality  
Standard  
(WRES)

The  
Workforce  
Disability  
Equality  
Standard  
(WDES)

Information  
Standards

