

**Minutes of the Investment and Workforce Committee**  
**Held on 1st June 2011 13:00 – 15:00**  
**In AD77, Maple House, East Surrey Hospital, Redhill**

<b>Present</b>	Richard Durban	RD	Non-Executive Director (Chair)
	John Power	JP	Non-Executive Director
	Joe Chadwick-Bell	JCB	Director of Strategy and Transformation
	Yvonne Parker	YP	Director of Workforce
	Alan McCarthy	AM	Chairman
	Shaun Cunningham	SC	Head of Capital Projects
<b>Apologies</b>	Ian Mackenzie	IM	Director of Information and Facilities
	Edward Cooke	EC	Non-Executive Director
	Michael Wilson	MW	Chief Executive
	Paul Simpson	PS	Chief Financial Officer
<b>In attendance</b>	Julie Wells	JW	Head of Financial Planning (Minutes)
	Helena Posnett	HP	KPMG

<b>1</b>	<p><b>WELCOME AND APOLOGIES FOR ABSENCE</b></p> <p>Apologies for the meeting were received and noted.</p> <p>Alan McCarthy was welcomed to the meeting, together with Shaun Cunningham (in place of Ian Mackenzie).</p>
<b>2</b>	<p><b>MINUTES OF THE PREVIOUS MEETING</b></p> <p>The minutes of the previous meeting were accepted as accurate.</p> <p>Actions from the last meeting were reviewed.</p> <p><b>Actions carried forward :</b></p> <p><b>Action 6</b> : Timeline to be added to the flowchart on page 4 of the Strategic Development and Business Planning Process paper – <b>Joe Chadwick-Bell to circulate.</b></p> <p><b>Action 7</b> : Translate the timetable outputs against the appropriate committee, in the Strategic Development and Business Planning Process paper. <b>Joe Chadwick-Bell to circulate.</b></p> <p><b>Action 10</b> : Post implementation review date to be inserted in the tabular summary of key projects, in the Monthly Capital Report. <b>Ian MacKenzie/Shaun Cunningham to add in, together with FBC date.</b></p> <p><b>Action 13</b> : PS to give JW proforma to notify Capital Project Managers of the approval of Outline Business Cases. <b>Julie Wells to follow-up with Paul Simpson.</b></p> <p>The other actions were all noted as completed.</p>

### 3 WORKFORCE UPDATE

#### Workforce Plan

YP introduced the Workforce Plan, and stated it is currently a brief strategic overview.

YP updated the Committee on her visit to the SHA the week before, where she felt adequate assurance was given to them. The SHA will be issuing a Monitoring tool, which YP will bring to the Committee when available.

**Action 1 : YP to bring the SHA Monitoring tool to a future Committee meeting, when available and received.**

YP updated the Committee on the Leadership programme currently in place for Band 8a's and above, and informed the Committee that HR are mirroring this internally for Band 6 and 7 staff.

RD suggested that the 'Key Action' Column within the document is split to what? when? and who? JCB suggested the plan uses the same documentation as the PMO.

RD also suggested the 'Detail' column is re-named to 'Objective / Desired Outcome' (to give more precision).

**Action 2 : YP to add in What, when and who to the 'Key Actions' Column, and re-name the 'Detail' column to 'Objective / Desired Outcome' within the Workforce Plan.**

All agreed the Plan can continue to be developed, including staff survey action plan and then sense-checked once the future plans of the Trust are known.

**Action 3 : Workforce Plan to be populated and to come to every Committee meeting.**

#### Appraisals

YP informed the Committee that she has committed to a 90% achievement of appraisals throughout the Trust, to the SHA.

YP stated that she did not think that managers understood the importance of appraisals (such as to identify training needs) and that appraisal master classes were being run (with classes being fully booked at present).

YP advised the appraisal form is a 4 page document, and was simple but effective, and available electronically.

**Action 4 : YP to circulate the Appraisal form to Committee members, for information.**

YP highlighted that HR Business Partners will monitor appraisal achievement at Divisional Meetings. YP suggested that she will review in 4 weeks time, and will be proposing to Michael Wilson that formal disciplinary action is taken against managers who are not carrying out appraisals.

JP suggested that as appraisals within the NHS are not linked to pay/promotion, staff may think "why do them?" YP responded that it was possible for the Trust to link performance to spinepoints in Agenda for Change.

**Action 5 : YP to further develop the possibility of introducing a link between movements on the agenda for change scale and performance (as evaluated through appraisals).**

RD questioned how the Committee could inject pace into the process? It was agreed that HR have done/are doing all that they can do, and that it is a line manager issue now. YP stated that she was confident with the data collection, however the quality of the appraisals will be unknown.

**Action 6 : YP to update the Committee at the September meeting on appraisal achievement within the Trust.**

#### Recruitment and Retention Strategy

YP introduced the 1<sup>st</sup> draft of the Recruitment and Retention Strategy. The Trust does not have one currently in place (though there are localised ones in some areas within the Trust).

JP questioned who does recruitment? YP responded that HR are the processing people and that PS and YP currently sign off all request to fill forms. Jobs are advertised – usually on NHS jobs (cheap and effective source of advertising). The manager shortlists and HR arrange the interviews etc.

JP suggested that we should recruit to generic posts rather than specific posts. YP agreed and highlighted this would give more flexibility across the Trust. YP also advised the new Chief Nurse is supportive of this approach.

YP confirmed that she will work with the Chief Nurse to progress, however stated that the Trust has recently filled most of its' vacancies.

RD suggested the strategy should provide greater analysis around number and types of people needed over the 3 year period. RD also commented that the strategy was, as a Board paper, too detailed in places, however YP responded that the document is for use by managers and therefore the detail was appropriate.

YP concluded that this strategy is going to the next Management Board for feedback.

**Action 7 : YP to bring finalised Recruitment and Retention Strategy to the next Committee meeting, once approved by the Management Board.**

#### Training Plan

YP introduced the draft training plan and highlighted it was brief at present, and will be more detailed once the workforce plan is complete.

RD questioned how much training funding the Trust gets, where from and how it is allocated?

YP responded that the Trust receives training funding in both cash terms and in allocated places on courses (non-cash).

YP summarised the main sources of funding as :

£137k     SHA – Cash – Trust to allocate  
£27K     BSUH – Allocated places  
£14k     University of Greenwich – CPD only  
£30k     SHA – Band 1 – 7

Plus training set aside in departmental budgets and other non-cash funding, such as Macmillan.

**Action 8 : Finance and HR (JW/YP) to put together a schedule of training income and expenditure (including source and whether it is ringfenced etc).**

RD suggested that the role of this committee is to gain assurance on what funding is available, that

	<p>appropriate training time is made available and the priorities allocated by the Trust.</p> <p>YP highlighted that mandatory and statutory funding is the number one priority within the Trust. These training courses are delivered in-house. YP stated the time element in releasing staff for training means they are considering taking training out to wards etc.</p> <p>YP highlighted that the Training Needs Exercise drives the training plan. JP commented that the list of services who responded to the training needs exercise seems low and that failure to respond should not be an option. YP stated that the closing date was 31<sup>st</sup> May and so more may come. YP will also follow-up on those departments that did not respond.</p> <p>YP concluded that the Training plan will be going to a Management Board in 2 weeks time.</p> <p><b>Action 9 : YP to draw the bids for training together under broad headings and in priority order e.g statutory and mandatory training , professional development and management and leadership. Final Training Plan to be presented at the next Committee meeting.</b></p>
4	<p><b>BUSINESS PLAN TIMETABLE UPDATE</b></p> <p>JCB updated the committee that key deliverables and associated timescales will be reflected in the Board and Committee planner, which she will review with AM and then circulate.</p> <p><b>Action 10 : JCB to circulate the Committee planner once finalised and agreed with the Chairman.</b></p> <p>JCB confirmed the BAF will be updated by July. The Board have agreed new objectives which need to be sent out and put on the website.</p> <p>JCB requested that the Committee meetings be held monthly from September – March, to ensure the Business Planning process runs to plan.</p> <p><b>Action 11 : JW to ensure monthly Committee meetings are set up from September 2011 to March 2012.</b></p>
5	<p><b>FINANCIAL MODELLING UPDATE</b></p> <p>Helena Posnett (HP) from KPMG attended the meeting and talked through the KPMG Update paper (issued with the agenda).</p> <p>HP walked the Committee through the options being modelled, and KPMG's modelling approach, and took questions from the Committee members.</p> <p>JP asked whether KPMG were using a generic modeling tool? HP responded that they are using a tool previously used, however adapting it to SaSH. JCB confirmed that the Unscheduled Care Model has been fed in. HP added that interviews held with key staff within the Trust (Clinical leads etc) have helped to develop the model.</p> <p>JP also asked whether KPMG are doing sensitivity analysis, and HP confirmed they are.</p> <p>AM asked what level of detail costings were being done at – bottom up costing?. HP responded to</p>

	<p>speciality level only. AM suggested that the model needs sufficient granularity to provide assurance.</p> <p>AM questioned what assumptions the model is making on the wider health world, and that the model needs to be done for the south east region, not just SaSH.</p> <p>JCB added that the Trust needs to understand the timeline and next steps – option appraisal by the Board and Implementation etc.</p> <p><b>Action 12 : The Committee requested that the KPMG output includes a view on implementation of options e.g. ease.</b></p>
5	<p><b>UPDATE ON BETTER, SAFER, CLOSER AND ANY QUALIFIED PROVIDER</b></p> <p>JCB updated the Committee on the Strategic Programme Board and the two sub-groups – Scheduled Care and Unscheduled Care.</p> <p>Both lead to an income reduction for SaSH. In Contract negotiations for 2011/12, PCTs have issued us notice on some specialties.</p> <p>Due to the meeting over-running, RD asked JCB to issue summary papers covering scope, status and issues, to the Committee members, on this agenda item. To be discussed further at the next meeting.</p> <p><b>Action 13 : JCB to issue summary papers on Better, Safer, Closer and Any Qualified Provider.</b></p>
6	<p><b>CAPITAL PROGRAMME AND ESTATES</b></p> <p>SC confirmed the Main Entrance Business Case will be discussed at the Board Seminar in June.</p> <p>JP requested that the Capital schedule within the Monthly Capital Report includes information on whether the project is on schedule – both in terms of time and cost. Option may be to include a tick if all is well and a cross if not.</p> <p><b>Action 14 : SC to speak to Ian about including whether the project is on schedule – both in terms of time and cost, in the monthly capital paper.</b></p> <p>SC confirmed a new project board (Capital Projects Management Board) has been set up and starts Monday 5<sup>th</sup> June 2011, where dashboards on progress of major projects and exception reports will be discussed.</p>
8	<p><b>ANY OTHER BUSINESS</b></p> <p>There were no AOBs.</p>
9	<p><b>Date of next meeting</b></p> <p>Next meeting is set for 12th July 2011 2pm-4pm, Maple House, Room AD77.</p> <p><b>Any papers and apologies to <a href="mailto:julie.wells@sash.nhs.uk">julie.wells@sash.nhs.uk</a></b></p>

**Action Log : Meeting 28/04/11 c/fwd**

<b>Action :</b>	<b>By :</b>
<b>Action 6</b> : Timeline to be added to the flowchart on page 4 of the Strategic Development and Business Planning Process paper.	Joe Chadwick-Bell
<b>Action 7</b> : Translate the timetable outputs against the appropriate committee, in the Strategic Development and Business Planning Process paper.	Joe Chadwick-Bell
<b>Action 10</b> : Post implementation review date and FBC date to be inserted in the tabular summary of key projects, in the Monthly Capital Report.	Ian McKenzie / Shaun Cunningham
<b>Action 13</b> : PS to give JW proforma to notify Capital Project Managers of the approval of Outline Business Cases.	Julie Wells / Paul Simpson
<b><u>Action Log : Meeting 01/06/11</u></b>	
<b>Action 1</b> : The SHA HR Monitoring tool to be brought to a future Committee meeting, when available and received.	Yvonne Parker
<b>Action 2</b> : To add in What, when and who to the 'Key Actions' Column, and re-name the 'Detail' column to 'Objective / Outturn' within the Workforce Plan.	Yvonne Parker
<b>Action 3</b> : Workforce Plan to be populated and to come to every Committee meeting.	Yvonne Parker
<b>Action 4</b> : To circulate the Appraisal form, for information.	Yvonne Parker
<b>Action 5</b> : To develop the possibility of introducing a link between movements on the agenda for change scale and performance (as evaluated through appraisals).	Yvonne Parker
<b>Action 6</b> : To update the Committee at the September meeting on appraisal achievement within the Trust.	Yvonne Parker
<b>Action 7</b> : To bring finalised Recruitment and Retention Strategy to the next Committee meeting.	Yvonne Parker
<b>Action 8</b> : Finance and HR to put together a schedule of training income and expenditure.	Yvonne Parker / Julie Wells
<b>Action 9</b> : To draw the bids for training together under broad headings and in priority order e.g statutory and mandatory training , professional development and management and leadership. Final Training Plan to be presented at the next Committee meeting.	Yvonne Parker
<b>Action 10</b> : To circulate the Committee planner once finalised and agreed with the Chairman.	Joe Chadwick-Bell
<b>Action 11</b> : To ensure monthly Committee meetings are set up from September 2011 to March 2012.	Julie Wells
<b>Action 12</b> : The Committee requested that the KPMG output includes a view on implementation of options e.g. ease	KPMG
<b>Action 13</b> : To issue summary papers on Better, Safer, Closer and Any Qualified Provider.	Joe Chadwick-Bell
<b>Action 14</b> : To include whether the project is on schedule – both in terms of time and cost, in the monthly capital paper.	Ian MacKenzie / Shaun Cunningham