

Minutes of the Investment and Workforce Committee – Part 1
Held on 4th April 2012 2:00 – 4:00pm
In AD77, East Surrey Hospital, Redhill

Present	Richard Durban	RD	Non-Executive Director (Chair)
	John Power	JP	Non-Executive Director
	Edward Cooke	EC	Non-Executive Director
	Paul Simpson	PS	Chief Financial Officer
In attendance	Yvonne Parker	YP	Director of Workforce
	Joe Chadwick-Bell	JCB	Director of Strategy and Transformation
	Ian Mackenzie	IM	Director of Information and Facilities
	Justine Stratfold	JS	Head of Service Line Reporting (Minutes)

1	<p>WELCOME AND APOLOGIES FOR ABSENCE</p> <p>Apologies Michael Wilson</p>
2	<p>MINUTES AND ACTIONS OF THE PREVIOUS MEETING</p> <p><u>MINUTES – Part 1</u></p> <p>The minutes of Part 1 were approved as an accurate record of the meeting.</p> <p><u>ACTIONS</u></p> <p><u>Meeting 01/02/12</u></p> <p>Action 1 - JCB to produce a timetable of TFA outputs against Board / Board sub-committee meetings. JCB reported that this will be brought back once the outputs are agreed with the SHA.</p> <p><u>Action 2 - IM to confirm all PIR dates. PIRs to use a standard template.</u> IM reported that there has been a much more robust response to these requests now that a standard template has been developed – action closed</p> <p>Action 3 - 2012/13 Workforce Plan and Training Plan to be reviewed at the April Committee meeting Workforce plan is tabled for discussion - action closed. The Training plan to be presented to the May Meeting.</p> <p><u>MINUTES – Part 2</u></p> <p>The minutes of the 7th of March 2012 meeting Part 2 were approved as an accurate record.</p> <p>There were no actions from Part 2 of the meeting to review.</p>

3 WORKFORCE

2012/13 WORKFORCE PLAN

YP advised that the workforce plan is a working document and will evolve as the clinical strategy is developed.

It was reported that the strategy looks at the workforce need, recruitment, retention and results of the staff survey

Paeds and Emergency Dept – undergoing a recruitment drive to India with an aim in time to grow our own.

RD commented on the need for a clearer distinction to be drawn between the workforce strategy which should cover 3 years and the 2012-12 annual plan. This is to be addressed in the next iteration of the document.

The plan was taken and discussed in sections.

Section 1 (Defining the Plan) and 2 (Mapping Service Change) comments and observations:

- EC commented that the objectives on pg 9 need to be measured to gauge performance against them. JCB stated that there will be a range of measures across many aspects of the organization however some of the measures requested by the NED's are not always possible to generate
- PS reported that a set of KPI's is required to measure delivery against the plan, WTE reduction, £savings and productivity. Currently there is a piece of work being undertaken by Mckinseys looking at productivity. A list of 10 key KPI's at workforce level would be useful.
- The KPI's should be consistent with SHA needs and appropriate subsections reported to management, the I&W committee and Trust Board.
- RD noted that many of the figures quoted and references made in the document are historic and as a planning document should be forward focused.
- JCB remarked that all the strategies in the organization need to be linked together and are thus still working documents.

Action – A set of Workforce KPI's to be developed and reported appropriately YP / PS

Section 3 (Defining Required Workforce) and 4 (Workforce Capability)

Comments and observations:

- JP commented that to aid the clarity a complete set of the information should be produced by division in tabular form.

- It was queried whether the bulk of the savings are clinical or non-clinical. After discussion it was agreed to clarify this in the next iteration. PS suggested that some of the wording surrounding the savings from Pg 63 should be revised. It was also confirmed by PS and YP that the workforce tables are consistent with the financial budget.
- RD expressed concern that the picture painted by the workforce and finance plans are not necessarily reflected in the divisional business plans. It was accepted that there is a need to get longer term plans embedded within the divisions.
- PS reported that the organization is still awaiting greater clarity from the PCT re activity/income which has a direct impact on resourcing requirements.
- The strategy of reskilling jobs was discussed together with the risk surrounding this. JCB advised that this is the product of roles evolving over time and is to align process driven tasks to lower banded posts in order to release higher skilled staff to perform tasks suited to their expertise. PS advised that it is also underpinned by AFC competencies and technological advancements. Most of these plans have come directly from the divisions but is also evidenced in SEC trend.
- PS discussed the need for the plan to link to best practice workforce models eg midwife to birth ratios and working pattern reviews (24/7) to provide further confidence that quality is not compromised
- The implications of an aging workforce were discussed and agreed to be addressed in the next iteration of the document

Section 5 (Action Plan)

- It was queried if E-Rostering is fully embedded. It was confirmed it is embedded although organizational ownership is under discussion
- Timescale of action 12 (review and sign-off of nursing establishments by 12-13) was queried as to whether already done. PS advised that there is an ongoing discussion re nursing establishment which will need to be reported back with the workforce and saving plans. PS further stressed that savings need to be linked to quality and safety
- JCB requested that the full savings plan not be included in the document, only the WTE reductions.
- Staff survey actions. It was felt that there is a very real need to improve moral at ground level.
- YP requested that performance management be included in the next iteration
- In summary RD thanked YP for the workforce plan and the hard work that has gone into it. The next iteration will be more streamlined and take full account of the actions agreed today to be presented to the June I&W committee.

Action – Comments from the discussion of the workforce plan to be incorporated in the document and presented to the I&W committee meeting in June YP

4 CAPITAL PROGRAMME AND ESTATES

Capital Report : Month 11

Capital is on track to underspend by £1.3M which is carried forward to next year. It was reported that the organization is on track to deliver its CRL for 2011-12.

2012-13 Capital Plan

The capital plan has been to the management board and been approved at £14.8M which is more than 2011-12. PS advised that the Board held on the 23rd of March approved the indicative budget and delegated authority to the I&W committee to make amendments.

IM reported that the Trust would be receiving an additional £6m of capital funding from the DoH. The intention was to use this to support the ward and clinical refurbishment programme as well as the proposed Radiotherapy Unit..

It was noted that there were 5 projects over £1M and 6 PIR's to be reported to the I&W Committee

The 12-13 capital plan was agreed by the committee

The committee then discussed the longer term estates plan:

IM circulated site plans and advised that Michael Wilson and he were meeting with Reigate and Banstead Borough Council to present the site development strategy.

It was agreed that the Estates Strategy would be discussed at the July I&W Committee.

Action – Estates Strategy to be tabled at the July I&W Committee meeting IM

5 BUSINESS PLANNING

12-13 Business Plan

JCB requested that the document be noted as Draft

The information contained within the document has been drawn from the clinical divisions and corporate departments.

The final version is to be brought back to the I&W committee for sign-off before being taken to the Trust board.

Work will then be undertaken with the divisions clinical/corporate to translate the strategy document into a detailed plan. These plans will be monitored through the divisional performance meetings.

It is also intended that the internal document will be shared with the CCG.

The following observations were made:

- links to Safety and Quality Strategy needs to be to the 12-13 strategy. RD to take this to the safety and quality committee
- Workforce (Staff Survey) plan timescales to be discussed between JCB and YP
- Clarity required over commercial function
- Wording requires refinement
- Focus should be on the most significant actions

**Action – Updated Business plan to be tabled at the I&W committee in May
JCB**

TFA Update

JCB informed the committee that a letter is expected from Sir Ian Curruthers advising that the TFA plan will be reviewed following the sign off of the SoA operating plan in mid may. The TFA plan will be endorsed by the SHA providing that there is real evidence of progress.

The SGA require assurance that a project plan, project leadership, programme governance and commissioner support will be in place. RD noted that the Trust board will require similar assurance.

Savings Plan

There is a Gap within current identified savings. Divisional savings will go into the divisional budgets and finance will link in with the PMO to achieve this.

Execs to meet to discuss an approach to addressing the Gap.

PS stated that there are still discussions going on with the Sussex Contract which could affect the position.

6 ANY OTHER BUSINESS

None noted

7 DATE OF NEXT MEETING

Next meeting is scheduled for 2nd May 2012 1pm-3pm AD77.