## Board of Directors in Public 28 November 2024 Agenda Item: 3.9



Report Title	People & OD Directorate: Highlight Report	
Author (name and title)	Dawn Adams, Associate Director of People Development Suzanne Hartshorne, Deputy Director of People	
Accountable Director	Mandy Wilcock, Director of People	
Previous committees/groups	N/A	
Recommended action(s) Approval, Assurance, Information	Assurance/Information	
Purpose of the paper	The report provides a brief overview of the highlights, lowlights, and risks within the services in the People Directorate. The paper aims to update the Trust Board on key successes and outcomes and current/future projects.	
Recommendation(s)	The Trust Board are asked to note the contents of the report.	

## Executive summary (overview of main points)

The report provides a brief overview of the highlights, lowlights, and risks within the services in the People Directorate. The paper aims to update the Trust Board on key successes and outcomes and current/future projects.

Trust Strategy Bold Ambitions	Our Patients	
Select the most relevant points from the bold ambitions.	Our People	Invest in developing our people (staff and volunteers), ensuring they have the skills, support and resources they need to deliver high-quality care and services, now and in the future. Improve staff health, wellbeing and attendance, reducing sickness rates to better than the NHS average.  Ensure our culture is one where our people are listened to, encouraged and enabled to speak up when they have concerns about patient or colleague safety and wellbeing, or when they have suggestions for how the Trust might be better run.
	Our Partners	
	Our Planet and Pounds	
Link to Board Assurance Framework Risks (board and level 2 committees only)		Develop and sustain an open and positive workplace culture.
		7. Support staff health and well-being effectively. 8. Deliver and sustain improvements in recruitment and retention. 9. Develop and sustain improvements in leadership and staff training and development.

## • Recruitment - A&E recruitment is on trajectory with a strong pipeline of applicants; 189 ASWs have started YTD (98% occupancy) and 188 Paramedics (104% occupancy). Adopting a quality improvement approach to addressing the issues of 'New Starters to YAS Academy' has been significant in realising the improved position from previous years' recruitment and training. Collaborative work with partner HEIs is ongoing to strengthen induction prior to Student Paramedic workplace placements for this high-risk group.

**Highlights** 

- Apprenticeships 726 apprentices (31 Oct, up from 661 on 31 Jul) undertaking a variety of clinical and non-clinical programmes [ASW (292), AAP (182) and Paramedic (151) staff apprenticeships (32) and Trainee Nurse Associate Apprentices (3)]. The percentage of apprentices as a proportion of overall headcount remains high at 9.7%.
- Apprenticeship Levy all remaining 24/25 apprentice cohorts covered by levy transfer with an overall total of £4.2M levy transfer predicted (saving £210K); a significant increase on the £2.7M levy transfer received in 23/24.
- International Recruitment six newly qualified Paramedics joined YAS in October with a further 15 currently in offer due to start before the end of Mar 2025 and further interviews taking place w/c 11 Nov.
- The OEG Absence Group continued focus on improved performance and compliance with the Supporting Attendance Policy. Monitoring of service line absence reduction plan has commenced with a focus on reducing the number of 'unknown' absences and increasing compliance of call backs and return-to-work interviews.
- Professional Standards Panel has now been running for 6 months and we are seeing greater consistency in decision making as a result.
   A full review of outputs of this group has commenced.
- Sexual Safety working group established and connections made with other Trusts and West Yorkshire Police to explore collaboration opportunities and shared learning. A communication strategy is being rolled out with a poster campaign of hard-hitting messages, myth busting and publishing the outcomes of cases. Senior managers (>40)

## Rapid Process Improvement Workshop (New starters to YAS Academy) - Phase two 'Readiness to Learn' delays due to limited availability of Robotic Automation Processes (RPA) specialist resource and capacity issues. The introduction of Recruitment

2024).

Lowlights

**Turnover** remains stable between 10.4-10.6% however IUC remains high at 34.1%. Ongoing retention work in IUC should see returns in future months.

Carousel Days will now start in Jan 2025 (originally planned for Oct

- Sickness Absence has seen a sharp rise in short term sickness absence which reflects the national position of norovirus appearing earlier than seasonally usual. Mental health reasons remain the biggest contributor to long term absence figures.
- Occupational Health budget overspend Significant work underway to ensure best use of OH provision and reduce the number of Did Not Attends/Short Notice Cancellations. The plan in place focuses on education and awareness. Working with Optima Health to finalise support. OH referral data being closely monitored with DNA/SNC chargebacks to service line being considered, if no significant improvements made.
- Seasonal Vaccination Programme launched on 30 Sept with 16.09% of staff receiving the flu vaccination (as of 11 Nov) despite continuous promotion and wide access to numerous clinics across the region. Joint roadshows promoting the NHS Staff Survey and flu vaccination are frequent and ongoing, alongside use of varied communication platforms to increase awareness and engagement.
- Senior Leadership Community Appraisal compliance rate is 91.8% (14 Nov) where the SLC appraisal window ran in Q1 (12 senior leaders in breach and 3 with no recorded appraisal). Contact has been made on an individual basis to enable completion or recording of completed appraisals on ESR.
- Equality Delivery System (EDS) 2022: WY ICB has moved to a
  thematic review of commissioned and provided services, this
  excludes YAS from taking part in the wider grading event that
  includes patients, and a YAS specific grading event will not be

Highlights	Lowlights
<ul> <li>received lawyer-led training on the management of sexual safety cases. NHS England products received and being reviewed for use.</li> <li>Appraisal compliance rates continue to improve, 83% (13 Nov) from 73.7% at end of Mar 24 (target is 90%). Chief Executive, Central Services and Quality and Professional Standards directorates are all over the 90% position with Deputy Chief Executive and Finance as the lowest at 70.2% (13 Nov).</li> </ul>	Policy development work impacted by capacity issues hindering progress. The barriers include lack of engagement from management representatives at Policy Development Group (PDG) and a continuing challenging relationship with trade unions.
<ul> <li>Health &amp; Wellbeing – focused mental health plan developed with consultation and approval underway via the Health &amp; Wellbeing Group. Successful workshop delivered reviewing the PIC process wit delivery against the identified actions continuing. Improved access to data through OH and specialist services resulting in better data sharing arrangements internally to inform service improvements to support staff health and wellbeing. Work started mapping out 2025/20 Health and Wellbeing priorities.</li> </ul>	in the diaries of managers in advance and match hearings/panel dates to this protected time. Further discussions are ongoing with Trade Union Colleagues regarding how the timescales can be
<ul> <li>Inclusive Recruitment Review Project Delivery Group workstreams underway to review baseline data, job descriptions/ adverts and marketing strategies. Phase 1 on track with recommendations expected in March 2025.</li> </ul>	
<ul> <li>Diversity Dashboard and Director Objectives - Dashboard with regional census data (2021) for comparison shared with all Directors. 1:1 meetings in progress with Directors and HR Business Partners to support data informed decisions to improve diversity within service areas. KPIs not provided for each directorate s each has their own challenges/needs and good practice. Follow-up actions and check-in in place for progress updates quarterly.</li> <li>Anti- Racism Framework – Pilot underway in South Yorkshire aligned to the NW BAME Anti Racist Assembly Framework. An action plan and proposal to implement Trust-Wide is underway following civunrest in the summer, highlighting this as a priority action.</li> </ul>	
<ul> <li>Engagement with the YAS Race Equality Network, as a key stakeholder, continues.</li> <li>Gender Pay Gap 2024 data collated and reviewed with stakeholder</li> </ul>	
engagement sessions in November to agree improvement actions.  Pay Gap has seen an increase for 2024 Mean: 9.78% (8.84%, 2023)  Median has decreased: 8.87% (9.07% 2023).	

	Highlights	Lowlights
•	National Staff Survey field work commenced from 16/09/24 with an extended period of 11 weeks and a response rate target of 55%. The response rate is 42.2% (14 Nov) with 15 days to go. An extensive communications plan, engagement roadshows as well as promotional materials and incentives to encourage increased engagement has been implemented. 51% response rate achieved in 2023.	

Key Issues/Risks to Address	Action implemented	Further actions to be undertaken
Employment checks for student paramedics – Trust partnership agreements with partner HEIs do not explicitly state the necessary employment check information and data sharing agreements to meet the NHS England Education Contract requirements (issue)	Assessment of the number of checks required.  Confirmation that completed checks need to be verified by the Trust not repeated.  Benchmarking to other ambulance service processes and clarification from NHS England.  Risk assessment of the issues; consequences assessed as low.  Letter sent to each partner HEI asking for details on the employment checks undertaken; all have responded, some with more information to follow.	Establish protocol required for checks to be undertaken.  Collation of information from universities for existing students.  Engagement with each partner HEI to review employment checks information shared and establish data sharing agreements. Meetings to be arranged in Q3 where HEI capacity allows.  Partnership agreements to be updated when processes are agreed.
Non-compliance with National Minimum Wage (NMW) for staff with salary sacrifice agreements (issue).  Over-reliance on Occupational Health provision	The implementation of the annual pay award left approximately 45 members of staff being paid under NMW.  Option to pay a top-up payment, rather than terminate the salary sacrifice arrangements, implemented with all affected staff informed.  Trade unions have been engaged and are supportive of this approach.  Plan in place focused on education and	Close monitoring of delivery against the plan
resulting in increased demand on OH with potential for budget overspend (risk).	awareness. Finalising support with Optima Health to successfully deliver against the plan.	and impact on usage and costs.

Key Issues/Risks to Address	Action implemented	Further actions to be undertaken
High number of Occupational Health DNAs and SNCs exceeding allocated budget (issue).	Subgroup with key stakeholders in place (first meeting held) to explore available approaches.  Better sharing of relevant data at a local level, monthly, to inform localised actions.  Increased communication to all staff to help raise awareness of the issue and impact.	Monitor and share data to inform actions.  Consider chargeback to service lines of SNC/DNA costs, if no significant improvements in the next 2 months.  Continue to engage and communicate with
Education and Skills Funding Agency (ESFA) Mock Audit commissioned to test the YAS apprenticeship levy systems and processes, and compliance against the rigorous ESFA standards. Like an Ofsted inspection, an ESFA Audit can take place at any time and can have significant implications regarding use of levy funds.  Key risks relate to administration of the apprenticeship processes (capacity issues) and the high number of AAP apprentices past their planned end date (40% with the ESFA threshold as 15%).	Quick win elements of the mock audit feedback addressed.  Successful recruitment to second fixed term Band 4 to strengthen the apprenticeship administration (until end Mar 25).  Monthly data dashboard shared with Managers to show progress of apprentices with Top Tips Guidance produced to support those past their planned end date.  Work with A&E Operations to trial ASW model of apprenticeship support in South Yorkshire; strong results seen with ASWs numbers past their planned end date now below 15% threshold at 9%.	managers across the Trust and in hotspot areas.  Critical review of YAS Academy budgeted roles, as part of Training Plan 25/26 work to ensure sufficient resource available to the apprenticeships team.  Support from HR sought to implement changes to AAP terms and conditions in time for new cohort starts in April 2025.  Engagement at Operations Leadership Meetings to identify support options recognising challenging operational environment.
Employee Relations Casework is very high (highest level in a 2-year period). It is increasing difficult to secure regular commitment from the pool of trained investigators due to capacity. There are currently 7 investigations outsourced to external investigators.	Specialist training delivered to a cohort of senior managers in Trust to commission, investigate and hear cases.  Constructive discussions have taken place with trade union colleagues to agree other measures that can be taken to reduce the timescales associated with employee relations casework.  Panels are now arranged on a schedule in advance to try and reduce timescales.	Rollout of further investigation skills training planned for December and Q4.  Exploring options to introduce a 'cab rank' model for allocating investigations rather than requesting a volunteer.  Options appraisal to take place to explore alternative models.