

| Report Title   | People and Organisational Development Highlight Report   |  |
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| Author (name and title)                                | Suzanne Hartshorne, Deputy Director of People Dawn Adams, Associate Director of People Development   |  |
| Accountable Director                                   | Mandy Wilcock, Director of People and Organisational Development   |  |
| 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 Board of Directors on key successes and outcomes and current/future projects. |  |
| Recommendation(s)                                      | The Board of Directors 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 and Organisational Development Directorate. The paper aims to update the Board of Directors key successes and outcomes and current/future projects.

| Strategic ambition(s) this  | Our Patients          |  |
|---|-----------------------|--|
| supports. Provide brief bullet point details of link to Trust strategy. | Our People            | 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.  Value difference and improve equality, diversity and inclusion of our people at all levels of the organisation, to reflect the population we serve. Improve progress towards Workforce Race and Disability Equality Standards and eliminating our Gender Pay Gap Become a great place to work and volunteer, with staff survey engagement and feedback scores above average for the NHS. |
|   | Our Partners          |  |
|   | Our Planet and Pounds | Develop and deliver improvement, through learning and adoption of best practice.   |
| Link to Board Assu<br>Risks (board and le<br>only)                      |                       | Develop and sustain an open and positive workplace culture.      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.                        |

Highlights Lowlights

- A&E Core Workforce Development 2024/25 new starters are complete with outstanding success, achieving 96% course occupancy. This includes 253 ASW new starts, all 12 Assistant Ambulance Practitioner (AAP) programmes running at full occupancy (74 AAP apprentices) and 242 Paramedics.
- A&E Core Workforce Development 2025/26: a strong pipeline is in place to fulfil the reduced workforce numbers (reduction of 60 Ambulance Support Worker (ASW) to 192 and a reduction of 60 Paramedics to 168) with 34 ASWs allocated to Q1 courses. Currently, 148 ASWs and 78 Paramedics are in pre-employment checks, with an additional 100 Paramedic applicants in the shortlisting and interview stages.
- International Recruitment: The next cohort of 5 International Newly Qualified Paramedics (NQP) join the Trust on 24 March, with a further 9 expected in May 2025.
- Apprenticeships: 692 apprentices (28 Feb 2025) are undertaking a variety of clinical and non-clinical programmes (ASW (276), AAP (166), Paramedic (150) and staff apprenticeships (100)). The percentage of apprentices as a proportion of overall headcount remains high at 9.2%.
- The vacancy rate within the Trust is currently 6.7%, the same as January 2025. This is the lowest the Trust has seen since 2022. The highest vacancy rate within Emergency Operations Centre is 23.5% (up from 17.6% in February 2024) and IUC is 21.8% (down from 37.3% in February 2024). A&E directorate staffing is at threshold, which correlates with the excellent achievement of reaching the target for recruitment to the A&E workforce plan (96%).
- **Sexual Safety:** Phase 2 of the communications plan includes screen savers depicting the same messaging as the series of 'Let's Talk Sexual Safety'. We continue to see a rise in concerns being reported which indicates that people are using the process hence feel that the Trust are taking issues seriously.
- Inclusive Recruitment Review: Phase 1 & 2 of the recruitment review have now been completed. A report incorporating findings

- **Sickness Absence:** the Trust sickness rate for February 2025, is 7.8% with 3.13% short-term sickness and 4.69% long-term absence (January position was 8.2% overall with 3.61% short-term and 4.64% long-term). This is significantly above the Trust threshold of 5% and higher than same period last year. Higher rates of short-term absence are attributed to gastrointestinal and cold/cough/flu causes and broadly in line with the sector. For long-term absence anxiety/stress/depression/ other psychiatric illness continue to be the highest reason for absence. Further target planning is underway to address sickness absence via the Organisational Efficiency Absence Sub-Group.
- Occupational Health (OH): departmental chargebacks implemented as of 1<sup>st</sup> Feb 25 due to the increased costs associated with Did Not Attends and Short Notice Cancellations (DNA/SNC). Chargebacks are being closely monitored with support provided at a local level to reduce these costs over time. The number of repeated referrals remains high. The year-end position has resulted in cost pressure against the allocated budget. Work is ongoing raising awareness of the Attendance at Work policy and appropriate access to OH services. Joint structured delivery is planned with Optima Health (OH service provider) to further strengthen improvements areas.
- Staff Turnover is steadily improving and currently stands at 9.5%, compared to 10.4% in February 2024. 111 Call Centre turnover remains high at 26% but is a reduction from 33.2% in February 2024. EOC (999 call centre) is 19.3%, a slight improvement from 20.8% In February 2024. Ongoing work in 111/999 call centres on retention should impact this in future months.
- Appraisal and Career Conversations: compliance rate at 77% (17 March 2025) which is a decrease of 4.9% from January 2025 (target is 90%) and shows a continued downward trend from a Year To Date peak in October 24 (83.10%). Six of the eleven directorates have a compliance rate of 84% or more. Targeted support is being provided with access to the Appraisal Dashboard data by all managers. Compliance is monitored monthly at the Performance Improvement meetings.

| Highlights  | Lowlights  |
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| and recommendations will be shared for review in April 2025 to People & Culture Group. Service lines will be encouraged and supported to implement the review recommendations following approval.  • Disability (DPG) and Ethnicity Pay Gaps (EPG) 2024: Disability: Mean: 1.51% Median: 3.70%, Ethnicity: Mean: 6.53% Median: 5.20% approved at People and Culture Group 25 February and published to the external website. EPG & DPG are mandated by NHSE for all NHS Trusts and reporting is not required for the Equalities Office.  • Equality Delivery System (EDS): EDS was completed and published following P&C Group Approval by deadline of 28 February:  • Domain 1: Commissioned Services  • 111 Call Centre: Graded Achieving  • EOC: Graded Achieving  • Mental Health Response Vehicles: Graded Developing  • Domain 2: Health & Wellbeing – Graded Achieving  • Domain 3: Inclusive Leadership – Graded Achieving  • Overall Rating: 20 – High Developing.   | • Essential learning compliance is showing a downward trend, dropping below the 90% target for the first time since January 2023, with all but one service line (Corporate 92.5%) below the target. The competency requirement for Trust Board members has been reviewed with a proposed reduction to essential only. Moving and Handling Patients 3-year recovery plan compliance at 92.73% (year 3). Compliance rates reviewed at respective Portfolio Governance Boards with targeted work ongoing with Subject Matter Experts to raise compliance rates where needed. The Compliance Dashboard is available to all managers and refreshed twice a week. Plans to reinvigorate the Essential Learning Champions are in development. Compliance to be discussed as part of Performance and Improvement meetings. |
| <ul> <li>A lessons learned review is to be undertaken to ensure the outputs are proportionate to the significant evidence collation and process required to implement the framework.</li> <li>Allyship Campaign: A robust campaign is ready for launch in 2025/26 featuring a range of resources that include, custom MS Teams backgrounds, educational resources, eLearning module and posters, distributed to all stations. To support the launch, a video has been created in collaboration with all Trust Support Networks that will direct staff to the online module.</li> <li>Health &amp; Wellbeing: good year end position against the 24/25 Health and Wellbeing (HWB) Plan, three amber rated priorities carried forward. Health promotion campaigns delivered as per plan. 25/26 HWB Plan drafted and progressing through approvals process supported by two sub-plans. Overall good first year performance against contracted services. Occupational Health services survey currently live to capture staff feedback.</li> </ul> |  |

|   | Highlights  | Lowlights |
|---|---|-----------|
| • | Seasonal Vaccination plan: flu programme ran from 30 September 2024 to the end of February 2025 following NHS England (NHSE) correspondence (original plan was to conclude the programme on 15 December 24). As of 13 February, the Trust uptake was 34.8% (NHSE figures) - 2,226 staff. 222 clinics advertised with further pop-up clinics at Emergency Departments and stations across the region. Meeting planned in early April to share learning to inform next round of planning.  Appraisal and Career Conversations: The new YAS online Appraisal and Career Conversation has launched for use by the SLC. This is in readiness for the SLC appraisal window that runs April-June of each year.  National Staff Survey: 2024 results have been published with YAS |           |
| • | improving in all People Promise theme as well as staff Engagement and Morale. The most improved aspects are in the health and safety, working flexibly and morale themes. YAS is first in sector for 'We are compassionate and inclusive' and 'Engagement'.  Volunteer Compliance: Successful launch of volunteer learning management system. YAS247 is now used for all Statutory and Mandatory eLearning completion for volunteers only (not staff). YAS247 has been well received by all users and team leaders who manage volunteers.   |           |
| • | YAS Academy Safeguarding strengthened for learners, through close collaboration with the Safeguarding Team to ensure safeguarding governance is in place and effective, with continuing professional development in progress for named 'YAS Academy Safeguarding Advocates'.  XVR Simulation (Virtual Reality) (high fidelity training): innovative immersive learning technology used as part of Commander training and assessment, with YAS-specific scenarios created. Showcased to South East Coast Ambulance Service to support the development of XVR in their Trust.   |           |

| Key Issues/Risks to Address   | Actions Implemented  | Further Actions to be Undertaken   |
|---|--|--|
| Workforce policy development – due to an employee relations matter, the approval and engagement processes of HR policies are  | Discussions with stakeholders taking place.  Policies near expiry have been extended and   | Further discussions with stakeholders to take place.   |
| currently on hold.  | risk assessed to ensure there is no risk to legal or operational compliance.   | Plan for priority policies to be developed to ensure future compliance.  |
|   |  | Awaiting national policies to be published and then the Trust can determine if local policies can be discontinued.   |
| Over-reliance on Occupational Health (OH) provision resulting in increased demand on OH which has resulted in budget overspend (risk).  | Joint delivery plan agreed with Optima Health (OH service provider) to support managers, including educating managers on when and how to make a quality OH referral. | Start joint delivery against the OH Services Engagement and Awareness sub-plan.  First manager feedback session delivered with further engagement and awareness sessions planned in for all staff. |
|   |  | Priority within the 2025/26 HWB Plan to develop and deliver an internal immunisations programme to deliver efficiencies.   |
| Sickness absence – current absence levels are significantly above the 5% threshold. Whilst it is accepted that levels are usually high during this quarter, and has decreased since December 2024, it remains high. | Organisational Efficiency Group – Absence Sub-Group remains operational and working through a programme plan.  | Absence programme plan is being refreshed.  Work has commenced on the development on a different approach to day one absence.  |
|   |  | Manager training and guidance is being refreshed and published.  |
| Administration of apprenticeship processes due to Apprenticeships Team capacity and the high number of AAP apprentices past their planned   | YAS Academy Apprenticeships Team resource requirements built into Training Plan 25/26.   | Extend Band 4 secondment post March 2025 whilst recruitment for permanent post is ongoing to strengthen the apprenticeship   |
| end date (increasing trend at 48% exceeding the Education Skills Funding Agency (ESFA) threshold of 15%).   | Qualitative data gathering and analysis to establish trend data and reasons for non-completion.  | administration team.  Continue to utilise Alternative Duties staff to provide local support to apprentices to enable   |
|   | Secondment Policy change agreed, so apprentices do not undertake secondments   | completion.  |

| Key Issues/Risks to Address | Actions Implemented  | Further Actions to be Undertaken   |
|-----------------------------|--|--|
|                             | during their apprenticeship as per the funding   | Regularly attend The Heads of A&E Operations   |
|                             | rules.   | Group to share data and work collaboratively to  |
|                             |  | support.   |
|                             | Regular communication directly to apprentices outlining the support options, withdrawal process, and possible consequences of noncompletion. | Work collaboratively with the new Awarding Organisation (autumn implementation) to streamline the AAP assessment requirements. |
|                             |  |  |