

Directorate Briefing 24 March 2021

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Housekeeping





Do stay on mute to reduce any background noise when others are speaking



Do keep your camera off to allow presenters to be visible.



Feel free to use the chat for any questions / thoughts you have during the session

Q & A

Questions and comments posted in the chat will be collated and shared

Preparing for year end



Annual leave template

What do we need?

All staff need to complete and send the annual leave template to their line manager for any leave relating to 2020/21 that has been approved and needs to be carried forward into 2021/22. Directors need to send the completed template to their relevant finance lead.

Why do we need it?

To ensure we accurately report the cost of annual leave being carried over into 2021/22. This is even more important this year due to staff being able to carry forward up to 10 days of annual leave.

When do we need it?

5pm on Thursday 1 April 2021.

Preparing for year end



Year-end accruals log

What do we need?

The year-end accruals log needs to be completed for any goods and services expenditure, where you have received the invoice or supplier quote, but the invoice has yet to be posted onto the SBS purchase ledger system.

Why do we need it?

These costs, if appropriate, will be accrued in the 2020/21 financial year to ensure no prior year pressures occur on your budget in the new financial year 2021/22.

When do we need it?

5pm on Thursday 1 April 2021.

Preparing for year end



Who are your finance leads?

Primary Care: John O'Reilly (john.oreilly@nhs.net)

Delegated Primary Care: Tracey Lewis (<u>tracey.lewis9@nhs.net</u>)

Corporate Services: Stephen Carruthers (<u>stephen.carruthers@nhs.net</u>)

Mental Health: Beverley Tipping (beverley.tipping1@nhs.net)

Community Services: Charlie Boggis (charlie.boggis@nhs.net)

Acute Services: Sangeetha Mohanaruban (sangeetha.mohanaruban@nhs.net)

Complex Individualised Commissioning and Partnerships (including BCF): Mark Ruddy

(mark.ruddy@nhs.net



- The annual NHS Staff Survey was conducted between October and December 2020.
- NCL CCG had a good response rate of 69%.
- There has been an overall decline across the NHS in positive responses compared to previous years.
- This has largely been attributed to the impact of the COVID-19 pandemic and the challenges it has brought.
- This also applies to NCL CCG, and EMT is committed to driving improvement across a range of areas.
- Action planning will be undertaken to ensure this is achieved.



- Following publication of the results from the 2019 survey, several commitments were made that we have thus far been unable to implement due to the ongoing impact of the COVID-19 pandemic.
- The plan was for the areas of improvement to be addressed by a combination of forums and activities, including the Engaging our People Forum, Staff Networks, WRES action plan and organisational development support.
- Whilst the staff networks and forums are now established and running from September 2020, there was a delay with setting them up due to the COVID-related priorities.



Results are grouped into 10 themes

Equality and diversity

Immediate managers

Quality of care

Safe environment – bullying and harassment

Staff engagement

Health and wellbeing

Morale

Safety culture

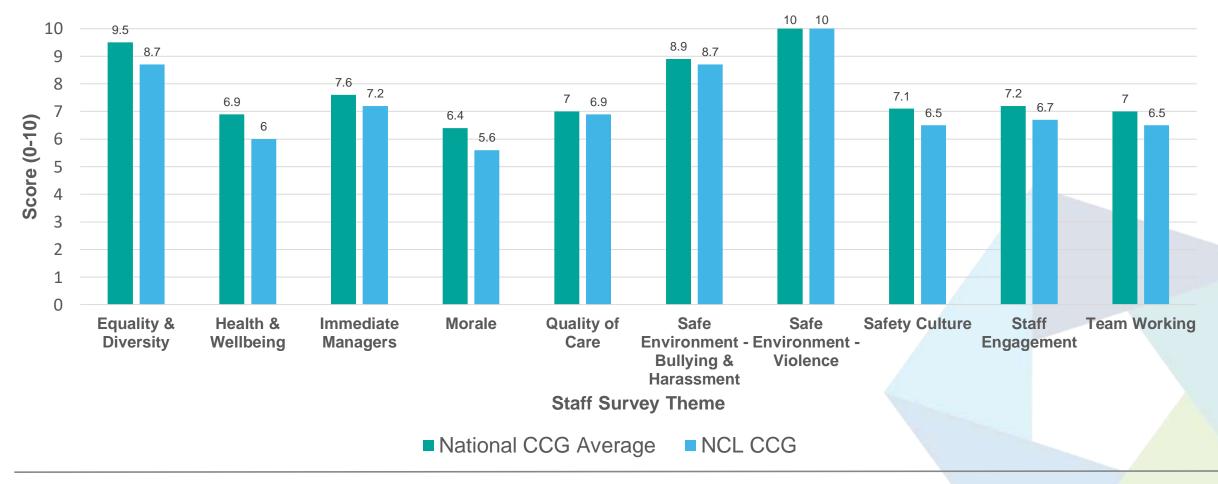
Safe environment – violence

Team working

CCG Highest Scored Themes	CCG Lowest Scored Themes
Equality and diversity	Morale
Safe environment – bullying and harassment	Health and wellbeing
Safe environment – violence	Team working



How we compared to other CCGs for each category.





- The CCG has scored below the national CCG average in the majority of questions.
- The following areas were our worst performing, compared to the national average.
- There were significant differences between Directorates, so there will be both NCL and Directorate-level focus on action planning.

Your organisation Your job **Health & wellbeing** Your manager Satisfied with the I know who my Would The CCG takes The CCG acts fairly Satisfied with the Feel safe to amount of senior managers recommend the with regards to positive action on opportunity to use speak up about responsibility CCG as a place are health & safety career progression skills any concerns given to work Communication The CCG The CCG treats between senior encourages I am unlikely to staff involved in I don't often think I have a choice in Team members managers and staff reporting of near look for a job in near misses, errors about leaving the deciding how to have a set of is effective misses, errors & the next 12 & incidents fairly do my work CCG shared objectives incidents months Senior managers try and involve staff The CCG takes Would feel safe I have adequate in important action to ensure raising concerns There are enough materials. decisions I am not planning errors/near misses about clinical staff to help me supplies and on leaving the are not repeated practice do my job equipment to do CCG properly Senior managers my work Would feel confident the CCG would address act on feedback concerns about clinical practice



When compared to local 2019 results, overall the CCG declined in most areas. There were however some improvements.

Most improved (compared to 2019)

More staff involved in deciding on changes that affect them

More staff satisfied with the amount of responsibility given to them

More staff satisfied with opportunities for flexible working

More staff feel their manager is supportive in a personal crisis

More staff feel that care of patients is the CCG's top priority

More staff feel the CCG takes positive action on health and wellbeing

In the last 12 months I have not felt well due to work related stress

Most declined (compared to 2019)

Always know what my work responsibilities are

Satisfied with the amount of responsibility given

Communication between senior management and staff is effective

The CCG acts fairly with regards to career progression

The CCG treats staff involved in errors, near misses and incidents fairly

The CCG takes action to ensure errors, near missed incidents aren't repeated



As part of the staff survey for the last two years, we have asked bespoke questions. The following table shows the areas the CCG has improved and declined the most:

Most improved (compared to 2019)

The setup of my display screen equipment (PC, laptop, tablet, mobile phones) and work space provides a comfortable working environment

There is adequate communications technology i.e. teleconference and video conference facilities

There is a clear and effective system of reporting health and safety issues across this organisation

Appraisal helped me to improve how I do my job

Appraisal helped me agree clear objectives for my work

Appraisal left me feeling more engaged

Appraisal left me feeling that my work is valued by my organisation

My manager and I discussed and agreed a personal development plan, including training, learning and development needs to support me undertake my role

My manager and I regularly reviewed progress against agreed objectives

Most declined (compared to 2019)

The leadership team in my organisation creates an inclusive culture that values the diversity of staff

The organisation actively engages staff in decision making

The NCL CCGs have a clear vision for the future

I feel I am kept up to date with developments and changes across the NCL CCG

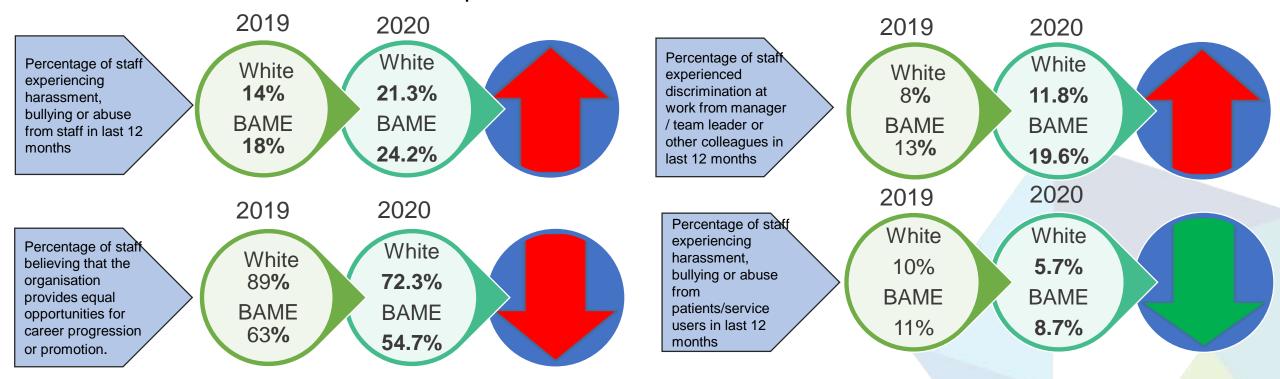
I feel the communication from the organisation is delivered in a timely way

In the last 12 months, have you had an appraisal

Staff survey results: Workforce Race Equality Standards (WRES)



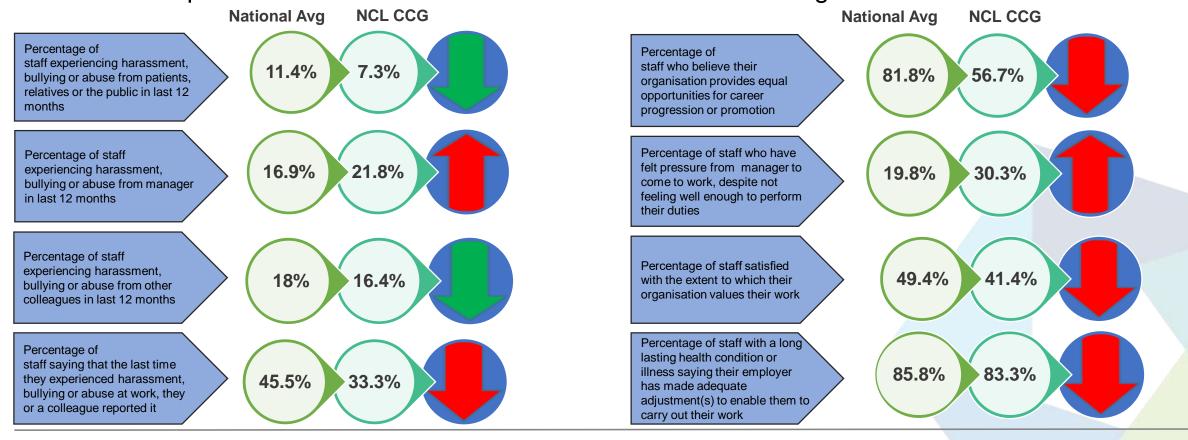
The following staff survey questions are used to assess NHS organisations performance against some of the WRES indicators. The following shows the areas that the CCG has improved in and the areas the CCG has declined in comparison to the 2019 results.



Staff survey results: Workforce Disability Equality Standards (WDES)



The following staff survey questions are used to assess NHS organisations performance against some of the WDES indicators. These are new standards the CCG will be measured against and therefore comparisons have been drawn to the national CCG average.



Staff survey actions



Whilst a more detailed action plan will be required for each Directorate and across the CCG to address the areas requiring improvement, there are already several activities underway in some of these areas identified in the staff survey:

- **CCG values:** have been developed with involvement from the Engaging our People Forum, staff and staff side representatives. These values will be presented to the Governing Body tomorrow, and if approved, will launch after Easter. Work will begin to develop a behavioural competency framework that will define acceptable and unacceptable behaviours to underpin the values.
- Equalities work with support from the Staff Networks: A WRES action plan has been developed for 2020/21. Work is underway to deliver the action plan and other equality priorities, such as greater inclusive recruitment panels, raising equality awareness, leadership conversations and implementing the requirements of the London Workforce Race Strategy.
- A single Raising Concerns at Work (Whistleblowing) Policy will be presented for approval at the March Audit Committee. The policy explains the process and details of the Freedom to Speak up Guardians (clinical & non-clinical). The plan is to introduce Freedom to Speak up Ambassadors to help support and advise staff if they have concerns, including how to raise concerns.
- An organisational wide health & wellbeing programme is being delivered NHSEI will be launching guidance to organisations on having health and wellbeing conversations with staff in line with People Plan this will be rolled out across the CCG with a requirement for all line managers to have these conversations.

• A senior OD lead role will commence with the HR and OD team soon.

Staff survey next steps



- We will publish the full NCL CCG results on the staff intranet after Easter.
- Discussions will take place within directorates.
- Engaging our people forum will hold an additional meeting in April to discuss results in further detail and actions required.
- Directorate and corporate action plans will be developed in the coming weeks, and will be shared with all staff.
- We will also undertake 'temperature checks' at intervals during the year to see how we are progressing, in particular in the key areas identified as requiring improvement.

HR updates



Pay Progression Arrangements – 2021/22

- In 2018, the NHS Staff Council agreed a 3-year fair pay deal from 1 April 2018 to 31 March 2021.
- As part of the agreed fair pay deal, a pay progression framework was agreed. The pay progression framework is underpinned by local appraisal policies.
- From 1 April 2021, the new pay progression framework requires all staff to meet the national required minimum standards before progressing to the next pay step on their anniversary incremental date (now referred to as your pay-step date), including the completion of the appraisals process in the last 12 months, statutory/mandatory training.
- Given the impact of the COVID-19 pandemic, it is recognised nationally that some staff have had limited capacity to undertake staff appraisals/statutory/mandatory training during the 2020/21 appraisal year.
- In recognition of the pandemic and limitations on capacity, the NHS Staff Council have confirmed the usual arrangements that require staff to demonstrate or show that they meet the requirements for the role will be paused.
- This means that the CCG will automatically action all pay progression arrangements (pay step/incremental increases) for staff that are due a pay step/incremental increase between 1 April 2021and 31 March 2022.
- Subject to national guidance, it is envisaged that pay progression arrangements and requirements will resume in accordance with agenda for change from April 2022.

HR updates



Vacancy Freeze

- The CCG has had a vacancy freeze in place for permanent appointments since 2019 due to the CCG being in a period of change. During this time, the CCG has filled a number of vacancies and additional resource requirements via temporary arrangements.
- Given the CCG is not currently in an organisational change process and following recent discussions with EMT, there has been agreement by EMT to lift the vacancy freeze and recruit to roles permanently, where required.
- Where a post is currently filled on a temporary basis and there is a requirement to fill the post on a permanent basis, the appointments process to the permanent post will be managed in accordance with the CCG's Recruitment & Selection policy, following the relevant approvals.

HR updates



Thank you leave

- As a mark of our appreciation for the incredible and much-valued work that you have undertaken
 over the past year in response to the pandemic, we will be giving all our employees an extra
 day's leave to be taken within seven days of your birthday.
- You will need to speak with your manager to agree which day to take off (pro-rata for part-time staff).
- The leave must be taken during the 2021/22 leave year i.e. between 1 April 2021 and 31 March 2022.
- All employees employed with the CCG at 1 April 2021 will be eligible for the day off.
- Further guidance on the arrangements, including how to record the additional day on the workforce system will shortly be made available to staff.

Keeping well



- Building on the success of the recent introductory 'Mental Health and Wellbeing in the Workplace' sessions attended by over 270 staff, the NCL Health and Wellbeing hub will be hosting three 'Keeping Well Groups' to start in mid-April.
- Each group will have 20 members, who will meet three times at a fortnightly interval.
- Booking details will follow shortly keep an eye out in the staff newsletter and on the intranet.
- Should these sessions prove popular, we will look at options to host additional sessions throughout the year.
- For more information please visit the Health and Wellbeing Hub website: https://keepingwellncl.nhs.uk/
- The site provides tailored original content in response to workforce feedback; curates existing resources and tools; and signposts to local, regional and national initiatives.

Pre-election period (Purdah)



- Elections are scheduled to take place in England on Thursday 6 May 2021, including those postponed in May 2020.
- The pre-election period is designed to avoid the actions of public bodies distracting from or having influence on election campaigns, and lasts six weeks.
- We are bound by local restrictions, though it is important to note that national organisations (including NHS E/I) only observe a three-week period, starting on 15 April 2021.
- During the pre-election period, there should be:
 - no new discretionary decisions or announcements of policy or strategy
 - no decisions on large and/or contentious procurement contracts
 - no participation by NHS representatives in debates and events that may be politically controversial, whether at national or local level.

Pre-election period (Purdah)



- Consultations: No consultations should be launched, unless they are considered essential. Ongoing consultations should continue but should not be promoted. Consultation periods can be extended if it is expected that the preelection period will impact negatively on the quality of the consultation. Consultation responses should not be published until after 6 May 2021.
- Media handling: Avoid proactive media work on issues that may be contentious.
- Campaigns: Do not undertake major publicity campaigns unless time critical (i.e. a public health emergency).
- The Cabinet Office has published <u>pre-election period guidance</u>.
- The Government <u>has published guidance</u> on its approach to elections and referendums during COVID-19.

• Guidance for NHS organisations has also been published.