

Approved 31 July 2024

Minutes of the ICB People Board Held on Wednesday, 24 April 2024 in Lune Meeting Room, ICB Offices, County Hall, Preston

Position on Committee	Name	Title/Role
Members and	Jane O'Brien	Chair/Non-Executive Member
representatives	Helen Williams	Interim Associate Non-Executive
	Lee Radford	Acting Chief People Officer
	Sarah O'Brien	Chief Nursing Officer
	Stephen Sandford	Chief Allied Health Professions Officer
	Andrea Anderson	Director of People - Place and Programmes
	Joe Hannett	Lancashire & South Cumbria (LSC) Voluntary, Community, Faith and social enterprise (VCFSE) Alliance Lead
	Fiona Ball	Health Education England Representative
	Alison Higgins (Deputised for Mike Burgess/Chris Cutts)	Health Education England Representative
	Bernie Miller	Staff Side Representative
	Rebecca Lumberg	Staff Side Representative
	Naveed Sharif	EDI (Equality, Diversity, Inclusion) Representative
	Paula Roles	Strategic Workforce Lead
In attendance	Sarah Mattocks	Head of Governance
	Claire Moore (Item 7)	Head of Risk Assurance and Delivery
	Jessica Boothroyd (Item 8)	Delivery Director (Midlands and Lancashire Commissioning Support Unit)
	Louise Coulson (Minutes)	Committee and Governance Officer

Item No	Item	Action
01 24/25	Welcome and Introductions	
	The Chair welcomed everybody to the meeting of the People Board.	
	Changes to Terms of Reference (ToR) Changes to the Terms of Reference of the People Board would be presented and discussed in detail at Item 6 of the agenda.	
02 24/25	Apologies for Absence / Quoracy of meeting	
2-1/20	Apologies for absence had been received from Julia Owen, Debbie Corcoran, David Levy, Peter Gregory, Chris Cutts, Cath Whalley, Claire Richardson, Jane Scattergood, Kate Quinn, Joel Burchett, Kate Smyth, Aisha Chaudry, Lorna Krisson, Robert Cragg, Mike Burgess and Tracy Hopkins.	

	The meeting was quorate.	
03	Declarations of Interest	
24/25	RESOLVED: That there were no declarations of interest made.	
	(a) People Board Register of Interests - Noted.	
04 24/25	(a) Minutes of the meeting (formerly People Board) Previous Meeting Held on 22 November 2023 and Matters Arising	
	RESOLVED: That the minutes of the meeting held on 22 November 2023 be approved as a correct record.	
	(b) Action Log L Radford referred to the action log and invited updates as items progressed.	
	(22/23)28Sept2022-01 - Terms of Reference of the People Board — The terms of Reference of the People Board were currently under review and would be presented at the next meeting on 31 July 2024 meeting for final approval pending membership.	
	(23/24)24May2023-02 - Priority 1: Delivering sustainable workforce capacity – Scheduled for presentation at the 31 July 2024 meeting of the People Board. This was an old priority and can be removed as this work is now part of the new workforce strategy.	
	(23/24)24May2023-03 - Priority 5: Optimise Workforce Productivity and Transformation — Scheduled for presentation at the 31 July 2024 meeting of the People Board. This was an old priority and can be removed as this work is now part of the new workforce strategy.	
	(23/24)24May2023-05 - Implementation of the Lancashire and South Cumbria Integrated Care Strategy - Directors of Health and Care Integration contributed to the development sessions in January and March 2024. An update would be tabled at the 31 July 2024 meeting of the People Board. Update requested from Jane Scattergood and Clare Richardson.	
	(23/24) 22Nov2023-06 - Integrated Care System (ICS) Belonging Plan — Verbal update was provided by Lee Radford and it was noted that the implementation plan would be tabled at the 31 July 2024 meeting of the People Board.	
	(23/24) 22Nov2023-07 - Proposed Integration of the Lancashire and South Cumbria Clinical Academy into the Lancashire and South Cumbria Integrated Care Board – Lee Radford and Joe Hannett had met and agreed that representation would be included as part of the Voluntary Sector sub-group – Completed.	
	Actions for People Board from ICB Board and other committees:	
	Update requested from Quality Committee on 21/02/2024 - 01 - Infection, Prevention and Control –Lee Radford advised that vaccinations had been discussed with CPOs (Chief People Officers) across the system. The process for update and monitoring was through the monthly Improvement and Assurance Groups (IAG) – Completed.	
	Update requested from Quality Committee on 21/02/2024 – 02 – Maternity – Lee Radford advised that the updated metrics and workforce data would be submitted to the People Board and would be fed into the IAGs. Sarah O'Brien commented that	

due to the imminent publication of a third Ockenden Report, the Quality Committee was closely monitoring the position. – **Completed.**

RESOLVED: The action plan is noted and approved.

05 24/25

Reflections of the Development Session held on 27 March 2024

The Chair introduced the item for noting. Internal audit had sought clarification on the purpose and function of the People Board given that it had not met as frequently as planned. The Chair advised that two engagement sessions had been held, the outcomes of which were a review of the People Board terms of reference, acknowledgement that there needed to be a refocus on transformation, review of the ICB workforce and the oversight role of the People Board. It was also highlighted that the aims of transforming care and the way agencies work together required a re-set. There was a requirement for the People Board to ask itself if it was moving forward with strategic change and that people needed to work together in all groups. The revised terms of reference would reflect a forward looking strategic purpose.

The Chair took the opportunity to thank everybody for their contributions to the engagement sessions and the outcomes to be taken forward.

RESOLVED: That the People Board note the actions being taken forward.

06 24/25

Revised Terms of Reference

Following on from the recent engagement decisions, work had taken place to reflect the proposed amendments and updates to the terms of reference which included: Change in name to People Committee

- Increased focus in purpose for the committee to provide a strategic oversight and direction of workforce matters across the Integrated Care System
- Included a role for the committee to receive updates regarding Freedom to Speak Up, including themes and trends and shared learning
- Revised membership (to be agreed subject to further engagement)
- Establishment of four sub groups
- Revised meeting occurrence to quarterly

It was intended that following agreement; the proposed changes would be included in a triple A report to the Board for approval.

Discussion ensued and the Chair sought clarification as to why the People Board had oversight on Freedom to Speak Up (FTSU). L Radford advised that the responsibility of the LSCICB to ensure that Freedom to Speak Up was implemented for primary care, it was key to the one workforce ethos and would be useful to have oversight from Trusts.

- S Mattocks added that there was an update expected from NHS England regarding the responsibility of the ICB in relation to primary care FTSU. It was anticipated that once received by the ICB Board that the FTSU would report into the People Board on a quarterly basis.
- J Hannett commented that the new ToRs were less of a top down approach, therefore, there was less challenge but was not stating that this approach was better just different. He still did not believe that the one workforce as a system was clear.
- S Sandford enquired how Trusts had responded and L Radford advised that there had been a positive response to the changes in the ToRs and that the Chief People Officers (CPO) would discuss system workforce matters at the Workforce Forum. S Sandford also asked the People Board to consider engagement with the wider

community, for example, what makes life unique to this area, commenting that it would be useful to capture the experiences of staff who work at BAE (British Aerospace) in the interface as this is one of the largest employers in South Cumbria.

N Sharif sought clarity in relation to the EDI (Equality, Diversity, Inclusion) element and how it would be assured. L Radford advised that it would be monitored via the Inclusion and Wellbeing sub-group reporting into the People Board.

The Chair requested that section 2.1 of the proposed ToRs was strengthened to specifically outline the requirement of the EDI agenda.

Action: Lee Radford to update section 2.1 of the ToRs to reflect the specific mandated requirement of EDI to People Board.

LR

RESOLVED: That the People Board approve the revised terms of reference as they stood, pending clarification of the membership and subsequently submitted to the ICB Board via the triple A report for approval.

07 24/25

ICB Risk Management Update

C Moore spoke to the report advising that to support the continued development of the Board Assurance Framework (BAF) and strengthen the assurance provided to the Board on progress towards the achievement of the ICB's strategic objectives, the Executive Management Team (EMT) was currently undertaking a full review of all BAF risks held. This would include a review of the current risk descriptions as well as the controls, assurances and gaps in controls/assurances, risk scores, and their alignment with the Board's risk appetite/risk tolerance levels.

The report included an extract of the risks held on the BAF (Appendix A) which related to the work of the People Board (Risks ICB 009 and 033), and one risk which was currently being overseen through the Executive Management Team (Risk ICB 006). The People Board was advised that the risks were being collectively reviewed with the aim of capturing one overarching workforce risk aligned to the achievement of the ICB's strategic objective 3:

• SO3: Make working in Lancashire and South Cumbria an attractive and desirable option for existing and potential employees.

Further work was also underway following the Board's approval of the new Risk Management Policy, to fully review and align the risk management systems and processes as described in the in the policy: LSC ICB Risk Management Policy.

The Chair thanked C Moore for the presentation of the report and opened the meeting for discussion. She asked L Radford and S O'Brien to provide an update in respect of their BAF risks currently under review.

Risk ID ICB-009 Workforce Transformation:

L Radford noted the 5 system priorities moving into the workforce long term plan. The recovery and transformation, for workforce, was still being worked through and dependent on the outcome of the review would inform the future reporting metrics. Other staff groups would need to be sighted which would also assist with the work in respect of the workforce transformation plans.

J Hannett had not previously seen the risk set out in this way and made particular note of the issues that apply to the voluntary sector, specifically the commissioning impact. L Radford acknowledged this and noted that an inclusive view was required.

H Williams understood the methodology but wished to highlight the potential gaps in service provision and potential delays to treatment and added the need to strengthen this within the risk. The recruit and retain elements required metrics to support this risk.

Risk ID ICB-033 Recruitment and retention of workforce in non-statutory NHS organisations (including primary care) S O'Brien explained the difference in the terms and conditions of Primary Care nurses (compared with nurses employed by Trusts) who were not on the Agenda For Change (AFC), therefore, they do not have the same maternity rights, holiday entitlement etc. with social care employees having even less entitlements. This particular workforce groups was also ageing without a detailed succession plan. However, the Fuller Report was less clear as to how those inequalities are to be addressed. S Sandford noted that future opportunities for staff including rotational and matrix working, to enhance staff careers were being worked through as some potential areas for change.

RESOLVED: That the People Board:

- Note the contents of the report and the significant work currently underway via the EMT to review all risks held on the BAF.
- Note that the risks relating to the business the committee. Note the development of the overarching workforce risk aligned to the delivery of SO3.
- Note the Board's approval of the new Risk Management Policy and the work to support its implementation.

08 24/25

LSC Five Year Workforce Strategy and Training and Education Plan

L Radford spoke to the report asking the People Board to note that it was the first time the ICB had developed a strategy setting out how we will work together as one workforce as a whole health and care system comprising health, social care and our voluntary, community, faith and social enterprise partners.

L Radford advised that it was now an opportunity to develop and embed a coordinated, aligned and truly cross-sector approach involving health, social care and our voluntary, community, faith and social enterprise partners to address our workforce challenges. He commented that by adopting this joined-up cross-sector ethos, it was anticipated that it would benefit everyone who lives or works in Lancashire and South Cumbria and would help to deliver our workforce ambitions, as well as our system Joint Forward Plan.

The step-change in our approach would be delivered by:

- Working as one to deliver a 'one workforce' ethos and approach
- Working as one to attract and retain a diverse and skilled workforce
- Working as one to train and grow our own workforce

It was also commented that shifting our approach, our focus and our mindset in this innovative way would require us to be brave and bold and we would not be able to deliver our priorities without changing the way we approach our work. We need to embrace new and innovative ways of working, breaking down traditional barriers and mindsets, to achieve our common goals. The Five-Year Workforce Strategy outlined the approach to be undertaken and to implement fundamental change.

J Boothroyd presented the implementation plans which were welcomed. L Radford thanked Jessica for the work undertaken and asked the People Board to note the next phase of the plan. It was noted that the Education and Training would be submitted to the next meeting July 2024. It was noted that the lessons learned

would include the journey undertaken which would also be included in the ICB Board report.

The Chair opened the floor to comments and questions.

H Williams welcomed the implementation plans and conveyed her thanks to L Radford and J Boothroyd for producing an excellent document. N Sharif also conveyed his thanks and asked if an easy read version could be produced.

S Sandford enquired how the business planning element was linked to the role of the People Board in guiding how we are going to use the money for training and education. L Radford advised that the shift in funding from NHS England would enable money into the system and that all partners were signed up to this.

RESOLVED: That the People Board approved the strategy for recommendation to the ICB Board.

09 Development of People Board Oversight Reporting and Metrics of the 10 ICB 24/25 Mandated People Functions

The Chair spoke to the report explaining that the People Board would ensure that strategies and delivery plans were in place to achieve the ICB 10 mandated People Functions across the LSC system. To achieve this, the People Board must define what type of oversight and assurance reporting and metrics it requires to fulfil this requirement.

L Radford requested views on the document and welcomed suggestions and reflections.

H Williams stated that more qualitative data would prove useful and enquired how it could be captured. For example, in the form of exit interviews; why people are leaving, student satisfaction surveys and Deanery feedback. L Radford advised that the strategic collaborative would look at this and welcomed the suggestion of student surveys.

The Chair requested the reintroduction of the staff story, to include all staff not just NHS staff and believed it would prove beneficial.

S O'Brien used the example of Quality Committee and noted that there was a deficit of softer data, which needed to be captured. The socioeconomic data and the number of people employed in local areas, with a breakdown i.e., in local Trusts and, as S Sandford had enquired earlier, other employers such as BAE. The number of students that do not take up a post once training had completed and how many drop out in their first year of studies was also noted. It is a point of note that national data reflects that if students procure their first choice of university, they are likely to stay and work in the area.

S Sandford added that the story element was key, it provided the balance about people and was essential. If the membership owned its own agenda via intersectionality, it would enable understanding of the ways that inequality or disadvantage can sometimes compound themselves and create obstacles that often are not understood amongst conventional ways of thinking. Representation from all groups in the membership was necessary. A Anderson added that data from Lancashire County Council highlighted the effectiveness of the pipeline i.e., 70% of people will move around given the opportunities.

The Chair asked that consideration be given as to how such data capture could prove

useful and could be implemented as part of student projects.

F Ball asked that the purpose around oversight and direction (a 'can do') metric needed to be clarified and that it needed to be clear what is to be assured and what the risk was. There needed to be a clear direction of travel to capture such metrics, for example, around the stories and how much description the People Board is seeking which needed to be measured now and in the future. L Radford asked F Ball to consider this and submit an initial report as a starting point at the next meeting.

Action: Fiona Ball to produce an outline for capturing qualitative data to the next People Board in July 2024.

FB

J Hannett enquired how the information highlighted in section 2.3 of the report could be captured and received from the voluntary sector as there was no financial resource to support this. L Radford stated the People Board needed to demonstrate the worth of capturing this data, the added value of engaging with us [the ICB] will help to drive the change. N Sharif raised the point that the 'so what?' element was missing and there was a need to identify what had been improved. L Radford suggested a baseline be produced and anticipated that the 'so what?' would then come out of this. A report would be drawn up and submitted to the next meeting in July 2024.

RESOLVED: The People Board noted the report and the actions being taken forward.

10 24/25

Overview of staff survey findings for LSC NHS Providers

L Radford spoke to the report which provided an overview of the cultural findings for all NHS providers in the LSC system. The oversight and intelligence in relation to the one workforce culture was about assurance or areas of focus. The report was based on the National Staff Survey and the three Pulse Staff surveys published throughout the year.

S O'Brien asked the People Board to note that some of the answers were specific to some local organisations. Where there were common themes, there may be a need to capture them from a system perspective. Recruitment into nursing was poor, nursing had a poor image currently and she asked that consideration be given to commit to two or three areas as a system to improve the position anticipating that the locality would reap the rewards. L Radford commented that the work around the antiracism framework would help.

F Ball advised how staff are feeling, from a purely data perspective, in terms of delivery and asked how we help providers do better along with keeping and building up on quality standards. Holding ground was not an aspiration.

L Radford stated the first dashboard linking all elements may be able to progress this work. A Anderson noted the People Promise elements and the People Promise Managers projects which would come though. F Ball would submit the GP Staff Survey data to the People Board meeting in July 2024 which shows how the quality of care has directly impacted on staff morale.

RESOLVED: That the People Board note the report and presentation findings, also noting the further work to be undertaken and presented at the next meeting.

11 24/25

Update on Freedom to Speak Up

S Mattocks spoke to the report and explained that Freedom to Speak Up (FTSU) was an important part of improving the culture within the Lancashire and South Cumbria

(L&SC) Integrated Care System. The report provided a quarterly update on themes and trends relating to speaking up and against progress made in this area since the committee was last updated in November 2023. There had been a drive to recruit Champions in the last month and an update would be provided at the meeting in July 2024.

The Chair thanked S Mattocks for the report and asked the People Board to consider what they believed the reasons were that stopped people from speaking up.

S Mattocks believed a key component of people not using the FTSU was due to lack of awareness of the service. It had now been added to the corporate induction and input from the Culture and People Steering Group would also be feeding into the People Board.

N Sharif asked consideration to be given to staff with a protected characteristic as they would be more likely to step forward if they could see representation from said groups.

S O'Brien believed assurance had been achieved in relation to the system work. It was noted that the transition to the ICB had been challenging and having this was such a real strength and testament to the team involved with FTSU. She conveyed her thanks, particularly as it had been taken on in addition to their current roles. She went on to say that FTSU on its own does not tackle the issues faced culturally however, good progress had been made and that it was the responsibility of the People Board to drive it forward. Staff do still feel there will be repercussions if they speak up and their lived experience was that they feel frightened of repercussions. In relation to the system, clarification was sought as to whether it was an assurance or an oversight. S Mattocks advised that it would be developed over time and that a more formal assurance would be achieved.

S Sandford expressed the need for more stories and for senior leaders to get involved to model speaking up. S Mattocks replied that the FTSU was still new however, there was an ICB Board development tool available and that the next step would be to form an action plan.

P Roles asked the People Board to note that it was a difficult area and that what is internal to the ICB and what is external to system activity needed to be clear in terms of the remit of GPs.

J Hannett commented that in parallel, the Quality Committee had noted that patients also have a fear of speaking up. S O'Brien addressed the cultural issue of staff fear to speak up as revealed in a recent report and added that she was not sure that senior leaders were demonstrating a positive approach, for example, in relation to work/life balance the issues being where leaders keep saying yes to more work load rather than challenging when working at capacity; this was a form of collusion. That said, a big theme within the system was how do we eradicate corridor care where the quality of care directly impacts on staff morale.

B Lumberg added that staff do go to their unions and S Mattocks commented that that when staff use FTSU, they are asked if they are affiliated to a union.

RESOLVED: That People Board note the report.

12 24/25

Committee Escalation and Assurance Report to the Board

Alert

Overview of staff survey findings for LSC NHS Providers.

	- Note the contents of the presentation findings and to identify what further reporting from providers is needed to provide assurance that cultural improvements are being made to colleagues lived experience in the LSC workplace.	
	Advise ICB Risk Management Update - Note the contents of the report and the significant work currently underway via the EMT to review all risks held on the BAF Note the development of the overarching workforce risk aligned to the delivery of SO3.	
	Development of People Board Oversight Reporting and Metrics of the 10 ICB Mandated People Functions - The People Board is asked to define the necessary oversight reporting and assurance metrics needed to provide the ICB Board that the ten mandated ICB People Functions are being delivered across LSC in all sectors.	
	Assure Revised Terms of Reference - The People Board approve the Terms of Reference noting that further consideration was required in respect of the membership.	
	LSC Five Year Workforce Strategy and Training and Education Plan - The People Board approved the strategy.	
	Freedom to Speak Up - The ICB Board are asked to note that the quarterly report by the Freedom to Speak Up Team will be reported into the People Board.	
	RESOLVED: The items to alert, advise and assure the ICB Board were agreed.	
13 24/25	Items referred to other committees.	
24/23	RESOLVED: That there were no items to be referred to other committees.	
14 24/25	Any Other Business	
24/23	RESOLVED: That there were no items raised under any other business.	
15 24/25	Items for the Risk Register	
24/23	RESOLVED: That there were no items identified for the risk register.	
16	Reflections from the Meeting	
24/25	H Williams thanked the People Board as it was her first attendance. She believed the People Board had great representation and enquired as to the membership. She thought the meeting was interesting and thought provoking.	
17 24/25	Date, Time, and Venue of Next Meeting	
24/23	Wednesday, 31 July 2024, 1:00pm - 3:30pm, Lune Meeting Room, ICB Offices,	