

Cover Sheet

Trust Board Meeting in Public: Wednesday 13 July 2022

TB2022.054

Title: People Plan 2022-25

Status: For Decision

History: Trust Management Executive, People & Communications
Committee

Board Lead: Chief People Officer

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Confidential: No

Key Purpose: Strategy

Executive Summary

1. The purpose of this paper is to share with the Trust Board the final content of the Trust's People Plan 2022-25 and seek Board approval to finalise and publish the Plan.
2. The first national NHS People Plan was published in 2020 and has set the direction of travel for our people around the key themes of: health and wellbeing; a culture of belonging; growing the workforce for the future; and new ways of working. The OUH People Plan 2022-25 aims to ensure consistency with this overall direction of travel, whilst tailoring the themes so that they resonate with our people.
3. The OUH People Plan 2022-25 has been developed through an extensive process of stakeholder engagement taking the depth and breadth of the organisation. The Appendix includes the engagement timeline and stakeholders we have involved.
4. The OUH People Plan content presented here includes: an overarching vision for our people; three key strategic themes, with underpinning actions; a set of commitments to delivery, to and from the organisation; and a set of metrics to measure success.
5. As a result of feedback, the vision statement for our People Plan is: ***Together we make OUH a great place to work where we all feel we belong.***
6. The key strategic themes and sub-themes are:
 - a. ***Health, Wellbeing and Belonging for all our people***; the sub-themes are:
 - i. A physical and psychological environment that enhances wellbeing.
 - ii. Happier working lives – autonomy, flexibility and relationships.
 - iii. A culture where everyone feels they belong.
 - b. ***Making OUH a Great Place to Work***; the sub-themes are:
 - i. Living our values.
 - ii. Great reward and benefits for working at OUH.
 - iii. Supporting our leaders, teams and managers to shine.
 - iv. Careers our people feel excited by.
 - v. Making continuous improvement a priority.
 - c. ***More People Working Differently***; the sub-themes are:
 - i. Plan how best to use our workforce at OUH and beyond.
 - ii. Right skills in place to deliver our services.
 - iii. Improved recruitment processes and onboarding.
7. There are four key enabling workstreams, developed and expanded as a result of the feedback:

- a. Creating a suitable environment and estate.
 - b. Digital Fundamentals in place.
 - c. Communications and Engagement.
 - d. Fit for purpose OUH people function.
8. We heard from stakeholders that they wanted a clear statement of who needs to commit to do what to ensure delivery of our People Plan and the shaping of our culture. The consensus from the listening events was that our people would like to see some agreed 'commitments', framed around each of the following:
- a. The organisation.
 - b. Our line managers and leaders.
 - c. Each individual.
9. Detailed implementation plans for all three years of the Plan will be brought back to TME and the Trust Board. However, the key priorities for Year 1 are:
- a. Getting the basics right in relation to wellbeing.
 - b. Streamlining and improving recruitment processes.
 - c. Management training and support.
 - d. Great reward and benefits for working at OUH, with a focus on practical support such as cost of living support.
10. We have developed a set of metrics to measure the impact of the Plan that we will report to TME and the Trust Board. These consist of:
- a. Continuing to report key workforce metrics (turnover, sickness, vacancy, core skills training, appraisal) to the Trust Board and at Divisional level - our ambition is to be consistently within target for all these metrics by the end of Year 3 of our Plan.
11. An additional 15 specific metrics that we will use to track the impact of the themes of our Plan, drawn from the Model Hospital, Staff Survey and some additional, internal measures related to sickness and turnover.
12. Many initiatives within the People Plan are already funded and/or we expect to deliver from existing resource across the People and Communications Directorate, other Corporate functions and clinical Divisions.
13. Where specific initiatives are not yet costed, the development of implementation plans and business cases will follow. There is no available surplus for any net investment at present nor can we expect recurrent additional income to fund any additional staff related costs. We may need to reprioritise our future spending commitments in order to achieve some of the environmental goals of the People Plan. NHSE or HEE income may be available non-recurrently via bids to fund one-off implementation costs.

14. The delivery of the People Plan be overseen by the People and Communications Committee, which reports to the TME and, in turn, the Trust Board. There will be a single Delivery Board with key membership from divisions and corporate leadership teams. This will be supported by Working Groups, for the strategic themes, led by designated Divisional Heads of Workforce, and for the enabling workstreams, with core membership/leadership from the corporate functions as follows:
- a. *Creating a suitable environment and estates*: Director of Estates, or deputy; Director of Nursing, or deputy; Head of Wellbeing; Hospitals Charity.
 - b. *Fit for purpose digital and IT*: Director of Digital; Assistant Director of Workforce – Resourcing.
 - c. *Communications and Engagement*: Director of Communications & Engagement; Head of Engagement, Inclusion and Experience.
 - d. *Fit for purpose OUH people function*: Director of Workforce; Director of Culture and Leadership; Assistant Directors of Workforce; Heads of Workforce.
15. The next steps after approval of the People Plan content will be to will implement the plan to share the Plan and actions within it across a range of media.

Recommendations

16. The Trust Board is asked to:
- Approve the OUH People Plan 2022-25 for finalisation and publication.

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People Plan 2022-25

1. Purpose

- 1.1. The purpose of this paper is to share with the Trust Board the final draft content of the Trust's People Plan 2022-25.
- 1.2. The paper seeks Board approval for the final proposed content, subject to any further amendments that may be requested.

2. Background and context

- 2.1. The first national NHS People Plan, including the People Promise, was published in 2020 and has set the direction of travel for our people around the key themes of: health and wellbeing; a culture of belonging; growing the workforce for the future; and new ways of working. The Future of NHS HR and OD Review has further developed these themes and set a vision for how the NHS people profession needs to develop and ensure the capability across all leaders to deliver this agenda.
- 2.2. The themes of health and wellbeing; belonging; growing the workforce; and new ways of working are consistent with those that we have set for our people in the Trust Strategy, and we have also seen them replicated in the Integrated Care System (ICS) people plan and workstreams.
- 2.3. The starting point for the OUH People Plan 2022-25 was therefore to ensure consistency with this overall direction of travel, whilst tailoring the themes so that they resonate with our people and by developing actions that will make them meaningful in our organisation.

3. Stakeholder engagement

- 3.1. The OUH People Plan 2022-25 has been developed through an extensive process of stakeholder engagement taking the depth and breadth of the organisation. The Appendix includes the engagement timeline and stakeholders we have involved.
- 3.2. As well as engaging formal groups and meetings, the CPO and his Directors led four Trust-wide Listening Events that were attended by over 600 staff. These listening events have been influential in shaping the final draft plan and the changes made as a result of feedback were shared with staff in two follow up event held in the week beginning 20 June 2022. Over 200 staff attended these follow up events.

- 3.3. The final draft content of the Plan has been shaped by what we have heard from our stakeholders. The Appendix shows the specific feedback we had and the changes we made as result.

4. Final draft content

- 4.1. This section of the paper sets out the final key proposed content for the People Plan in the following areas:
 - 4.1.1. An overarching vision for our people.
 - 4.1.2. The final proposed themes, sub-themes and enabling themes.
 - 4.1.3. The final proposed actions.
 - 4.1.4. A proposed set of commitments between the organisation, line managers and individual staff to deliver the Plan.
- 4.2. Each of these areas of content are described below.

A vision for our people

- 4.3. We heard from stakeholders that an overarching vision statement is important for the Plan, to:
 - 4.3.1. Link to the Trust vision.
 - 4.3.2. Make the case for why staff would want to stay in the NHS post-pandemic.
 - 4.3.3. Make the case for why people would want to work at OUH.
- 4.4. We also heard from staff that they wanted a simple, clear vision statement that is succinct, jargon-free and easy to understand.
- 4.5. We presented different options for a vision statement to the People & Communications Committee in June 2022 and also shared with staff at the two follow-up listening events to get feedback.
- 4.6. As a result of this feedback, the proposed vision statement for our People Plan is:

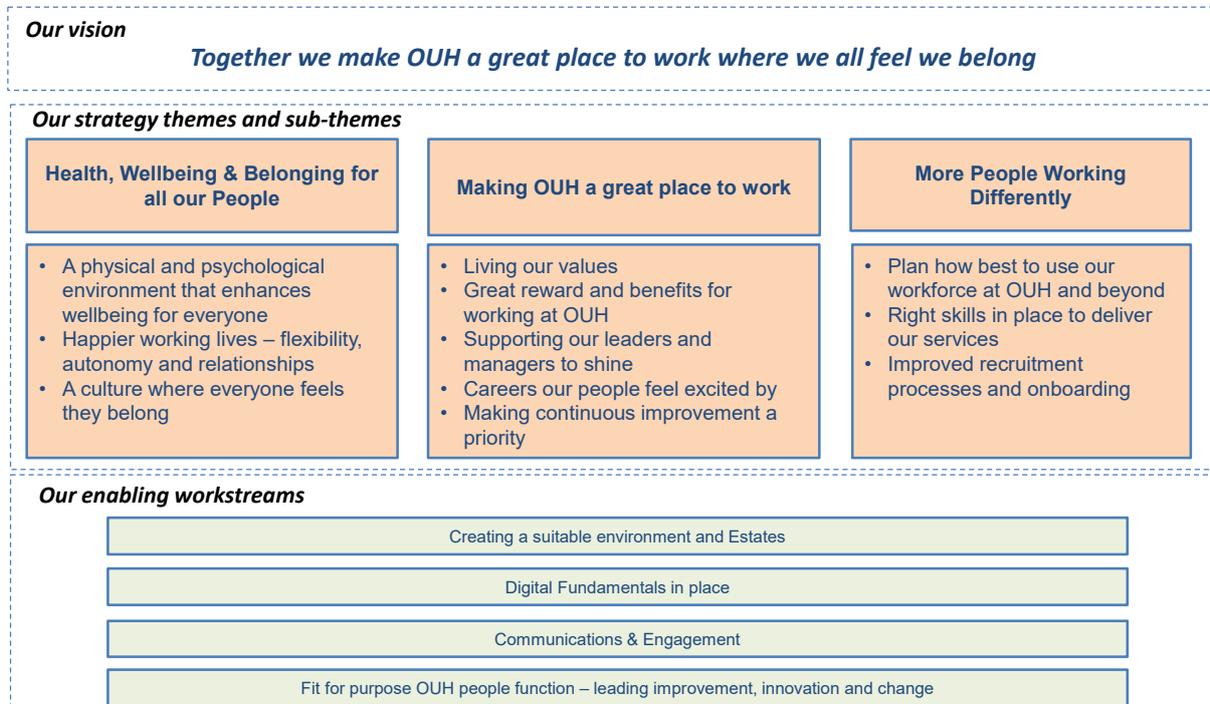
Together we make OUH a great place to work where we all feel we belong

Final proposed strategic themes, sub-themes and enabling themes

- 4.7. We heard from stakeholders that they wanted fewer overall themes (initial proposals included five themes) and clearer sub-themes. We also heard that we needed greater emphasis on enablers such as digital and estates.

4.8. The final themes, sub-themes and enabling themes are shown below, together with the vision.

Figure 1 Final 'Plan on a Page': vision, themes, sub-themes and enablers

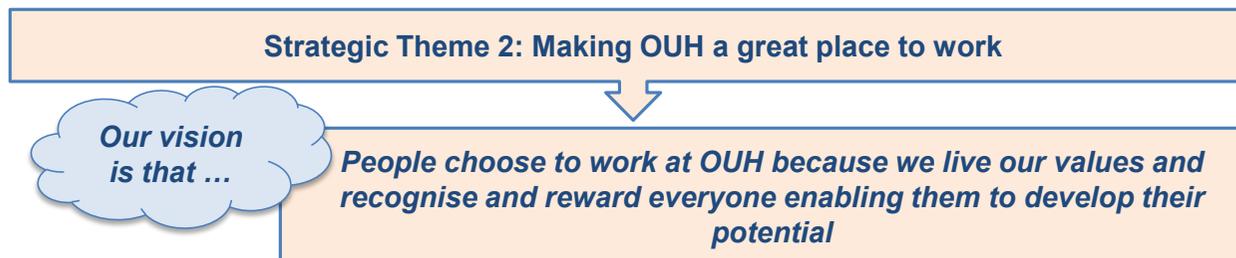


Key themes, actions and 'I statements'

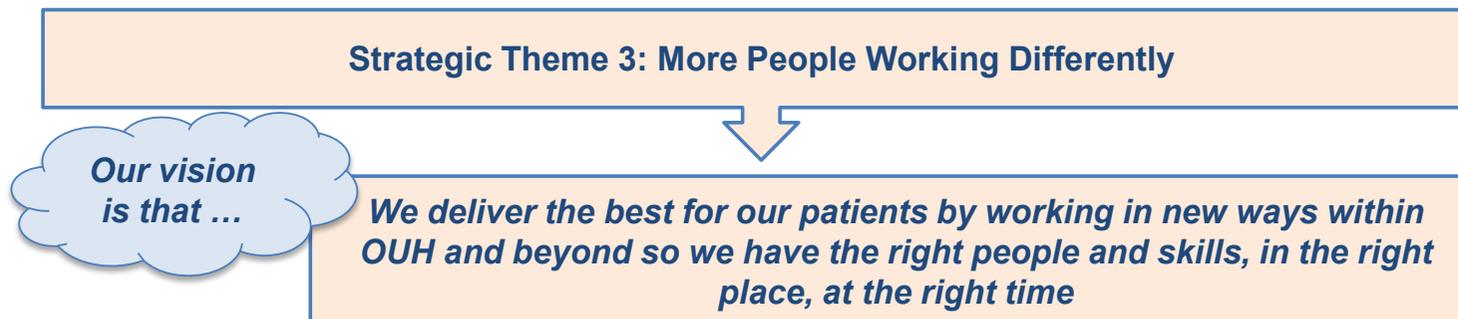
4.9. The following pages set out the final proposed content by theme.



Sub-theme	What we'll do	We'll know we've achieved this when our people say ...
Create a physical and psychological environment that enhances wellbeing for everyone	<ul style="list-style-type: none"> Identify and implement initiatives to meet basic physical needs in the workplace where these are not met, e.g., relation to hydration, nutrition and facilities Implement initiatives to tackle violence and aggression towards staff Continue to expand our offer to meet psychological needs through wellbeing check-ins, safety to speak up, Leading with Care, and post-pandemic trauma recovery Ensure our leaders and managers have the knowledge and resources to support and signpost people to wellbeing support 	<ul style="list-style-type: none"> I have adequate time and space to rest during my breaks I am able to switch off when not working I take my annual leave at regular intervals I know where and how to access wellbeing support I work flexibly with hybrid options where possible I feel included and that I belong I am assured all will be treated equally in our recruitment processes I see everyone being valued for their role in patient care
Happier working lives	<ul style="list-style-type: none"> Enable people to have open conversations and resolve difficulties at an early stage Introduce initiatives to support working lives with flexibility and autonomy Implement the NHS Civility & Respect Framework 	
Culture where everyone feels they belong	<ul style="list-style-type: none"> Targeted initiative to address the discrimination and inequities we know about from our data, e.g., in relation to race and disability Ensure all teams and leaders have measurable objectives on Equality, Diversity & Inclusion (EDI) Support equal value and recognition for everyone for their role in patient care, 'no more nons', e.g., non-clinical ! 	



Sub-theme	What we'll do	<p style="text-align: center;"><i>We'll know we've achieved this when our people say ...</i></p> <ul style="list-style-type: none"> I am proud to work at OUH I had a great new starter experience I feel recognised and fairly rewarded for my contribution I know I have a voice that counts and I feel safe to raise concerns I am always learning and so is the Trust I have a PDP that I'm excited by I am empowered to develop my own career within OUH I am excited about the development opportunities available to me in my career As a leader or manager I feel supported and developed to be the best I can be
Living our values	<ul style="list-style-type: none"> Be clear about expected standards and the roles everyone needs to play Embed our values in all our processes, e.g., recruitment Enable our people to feel safe to speak up when standards fall short 	
Great reward and benefits for working at OUH	<ul style="list-style-type: none"> Offer a best in class NHS benefits package for our people Support our people with the practical challenges that they face e.g. Cost of Living Focus on rewarding and recognising everyone 	
Support to allow our leaders, managers and teams to shine	<ul style="list-style-type: none"> Provide training and ongoing support to our managers for the role they do Deliver compassionate, collective, inclusive leadership programmes and team development 	
Careers our people feel excited by	<ul style="list-style-type: none"> Develop everyone's talent through career pathways, career conversations and succession planning Support diverse careers and across all staff groups, including research Ensure our people have development plans (PDPs) that are personalised to them Support team development opportunities and objective setting that everyone contributes to at all levels 	
Making continuous improvement a priority	<ul style="list-style-type: none"> Enable our people to contribute to quality improvements within their working area 	



Sub-theme	What we'll do	<p><i>We'll know we've achieved this when our people say ...</i></p> <ul style="list-style-type: none"> I know that my team can influence how we deploy our workforce and this improves patient safety and supports staff wellbeing I see the Trust collaborating across the local area and with all partners for the benefit of our people and patients I see new and more effective ways of delivering services being implemented I see better patient care being delivered through a workforce with new roles and different skill mix I know the recruitment process is as quick as it can be to support my vacancies I had a great recruitment experience I have increased opportunities to work in new and different roles
Plan how best to use our workforce at OUH and beyond	<ul style="list-style-type: none"> Provide high quality workforce information that enables decisions to be made about how to resource our services Develop and support our managers and teams to plan their workforce and to work in the most efficient way Collaborate with our partners to allow the workforce to be deployed where patients need it most 	
Right skills in place to deliver our services	<ul style="list-style-type: none"> Make best use of our temporary and permanent workforce across OUH and other Trusts Understand how best to grow and attract the talent we need in all staff groups Support leaders at all levels to develop and adopt new workforce models and new roles 	
Improved recruitment process	<ul style="list-style-type: none"> Improve recruitment processes to get people in post as quickly as possible Deliver the best candidate experience and welcome/induction to OneTeamOneOUH 	

5. Delivering the People Plan – commitments to and from our people

- 5.1. We heard from stakeholders that they wanted a clear statement of who needs to commit to do what to ensure delivery of our People Plan and the shaping of our culture. We explored in the listening sessions various terms for describing this, including ‘contract’, ‘covenant’, ‘pledges’ and ‘promises.
- 5.2. The consensus from the listening events was that our people would like to see some agreed ‘commitments’, framed around each of the following:
 - 5.2.1. The organisation.
 - 5.2.2. Our line managers and leaders.
 - 5.2.3. Each individual.
- 5.3. The final draft commitments are shown below.

Figure 2 Delivering the People Plan – our commitments to one another

Our commitments to delivering the People Plan...

...from the organisation – <i>Leading OUH</i>	... from our leaders and managers – <i>Leading Others</i>	... from individuals – <i>Leading Self</i>
<ul style="list-style-type: none"> ✓ Develop our people at all levels ✓ Create a safe, trusting, transparent and open culture ✓ Encourage opportunities to innovate ✓ Recognise and celebrate our successes & positive stories ✓ Make our processes simple and efficient ✓ Prioritise the delivery of the People Plan within budget, whilst seeking opportunities for external investments and efficiencies. 	<ul style="list-style-type: none"> ✓ Define clear purpose, objectives and role clarity with your team ✓ Facilitate regular team communication, learning and development ✓ Take positive action to ensure colleagues are treated with civility and respect ✓ Ensure people have time and opportunity for development • Act on data that relates specifically to how you can improve the environment in your team ✓ Support choice and flexibility in work 	<ul style="list-style-type: none"> ✓ Invest time in building and maintaining relationships ✓ Treat colleagues with civility and respect and challenge uncivil behaviour ✓ Demonstrate acceptance of others who are different ✓ Be responsible for the impact of your actions and in proactively resolving issues ✓ Recognise you do not have to have leadership responsibility to lead ✓ Be open to opportunities presented by the organisation for ongoing personal development

6. Implementation plan and deliverables for Year 1

- 6.1. Following the agreement to the overall Plan, we will bring the detailed implementation plans and timelines for all three years back to the TME and Trust Board.
- 6.2. The key priorities for Year 1 are:
 - 6.2.1. Getting the basics right in relation to wellbeing.
 - 6.2.2. Streamlining and improving recruitment processes.
 - 6.2.3. Management training and support.
 - 6.2.4. Great reward and benefits for working at OUH, with a focus on practical support such as cost of living support.

7. Proposed approach to measurement

- 7.1. Measuring the impact of the People Plan is essential for measuring success. We had feedback from stakeholders that our measures should stretch us, as well as articulate interim milestones to demonstrate progress.
- 7.2. Our proposed approach to measurement has two planks:
 - 7.2.1. We will continue to **report key workforce metrics** to the Trust Board and at Divisional level – our ambition is to be consistently within target for all these metrics by the end of Year 3 of our Plan.
 - 7.2.2. We have selected an **additional 15 specific metrics** that we will use to track the impact of the themes of our Plan. We will report these to the People and Communications Committee, TME and the Trust Board.

Measuring impact through our key workforce metrics

- 7.3. The table below shows the current key workforce metrics we will continue to measure at Trust and Divisional level. By Year 3 of the Plan we will be consistently achieving target performance at Trust and Divisional level.

Measure	Current Performance (M1)	Target Performance
Core Skills Training	88.6%	85%
Appraisal	46.5%	85%
Turnover	12.5%	12%
Vacancy	6.9%	7.7%
Sickness absence	4.4%	3.1%

Measuring impact through our 15 specific People Plan metrics

7.4. The table below shows the specific additional metrics that we will track to monitor the impact of the Plan.

#	Metric	Current performance	Theme covered	Target Year 1	Target Year 2	Target Year 3
1	Temporary staffing expenditure: Mitigate the impact of the expected 30% increase in mental health absence (combined with a reducing Covid effect) so that our bank/agency spend is brought back to the current baseline (£579,224) ¹	TBC	Theme 1 and Theme 2	TBC	TBC	£579, 224
2	Leavers Rate (Turnover) across AHPs, Medical and Dental (M&D); RNs; and Support to Nurses	Model Hospital Quartile 4 (red) for AHPs and Quartile 3 (red/amber) for M&D, RNs and Support to Nurses	Theme 2 (Making OUH a great place to work)	Model Hospital Quartile 3 (red/amber) across all these groups	Model Hospital Quartile 2 (green)	Model Hospital Quartile 1 (green)
3	Reduce leavers in the first 12 months from 20% to 10%	Internal measure; 20% of new starters leave in the first 12 months (all staff groups)	Theme 2 (Making OUH a great place to work)	18%	15%	10%
4	Meet the NHSE/I target for HCSW vacancies/Vacancy Rate for Support to Nurses	Model Hospital Quartile 3 (red/amber)	Theme 3 (More People, Working Differently)	Model Hospital Quartile 3 (red/amber)	Model Hospital Quartile 2 (green)	Model Hospital Quartile 1 (green); in top three in Shelford
5	Staff Survey: I have experienced harassment, bullying or abuse at work from other colleagues	Model Hospital Quartile 4 (red)	Theme 1 (Health and Wellbeing and Belonging)	Model Hospital Quartile 3 (red/amber)	Model Hospital Quartile 2 (green)	Model Hospital Quartile 1 (green)
6	Staff Survey: My organisation takes positive action on health and wellbeing	Model Hospital Quartile 2 (red/amber)	Current performance is weak in	Model Hospital Quartile 3 (red/amber)	Model Hospital Quartile 3 (green)	Model Hospital Quartile 4 (green)

¹ As agreed in the Investment in People & Communications Directorate Structure Business Case in March 2021

			comparison to peers; clear Model Hospital benchmark; Theme 1			
7	WRES2: Recruitment: Relative likelihood of white staff to Black, Asian and Ethnic Minority staff	Model Hospital 1.55 (above the benchmark red)	Theme 1; performance is red Model Hospital	1.45	1.40 (peer median)	Move to best in Shelford (0.93) Model Hospital (green)
8	WDES2: Relative likelihood of non-disabled staff compared to Disabled staff being appointed from shortlisting across all posts	Model Hospital 1.43 (above the benchmark red)	Theme 1; performance is red Model Hospital	1.30	1.19 (peer median)	Move to best in Shelford (1.07) Model Hospital (green)
9	Reduction in recruitment time to hire (TtH)	55.6 days Model Hospital (bottom of Quartile 2)	Theme 3 (More People, Working Differently)	53 days Model Hospital (middle Quartile 2)	48 days Model Hospital (bottom Quartile 1)	42 days Model Hospital (Quartile 1; current best performing Shelford Trust)
10	Medical staff cost per weighted activity unit (WAU)	Model Hospital Quartile 4 (red); 6 th worst performer in Shelford	Theme 3 (Working Differently)	Model Hospital Quartile 4 (red)	Model Hospital Quartile 3 (red/amber)	Model Hospital Quartile 2 (green)
11	Professional, Technical and Therapies staff cost per weighted activity unit (WAU)	Model Hospital Quartile 3 (red/amber); 6 th worst performer in Shelford	Theme 3 (Working Differently)	Model Hospital Quartile 3 (red/amber)	Model Hospital Quartile 2 (green)	Model Hospital Quartile 2 (green)
12	Staff Survey: Relationships at work are strained	Model Hospital Quartile 3 (red/amber); 6 th worst performer in Shelford	Themes 1 (Health and Wellbeing) and Theme 2 (Making OUH a great place to work)	Model Hospital Quartile 2 (green)	Model Hospital Quartile 2 (green)	Model Hospital Quartile 1 (green)
13	Staff Survey: Recommend my organisation as a great place to work	Model Hospital Quartile 3	Theme 2 (Making OUH	Model Hospital Quartile 3 (amber/green);	Model Hospital Quartile 4	Model Hospital Quartile 4 (green); move

		(amber/green); 5 th worst in Shelford	a great place to work)	move to 4 th in Model Hospital	(green); move 3 rd in Shelford	to the top in Shelford
14	Staff Survey: I feel safe to speak up about anything that concerns me in this organisation	Model Hospital Quartile 3 (amber/green); 5 th worst in Shelford	Theme 1 (Health and Wellbeing) and Theme 2 (Making OUH a great place to work)	Model Hospital Quartile 3 (green); move up one place in relation to Shelford peers	Model Hospital Quartile 3 (green); move to top three in Shelford	Model Hospital Quartile 4 (green); move to the top in Shelford
15	All staff booking 80% of leave by October each year	Internal measure; no external benchmarks available	Theme 1 (Health and Wellbeing)	100%	100%	100%

8. Financial implications of the Plan

- 8.1. Many initiatives within the People Plan are already funded and/or we expect to deliver from existing resource across the People and Communications Directorate, other Corporate functions and clinical Divisions.
- 8.2. Where specific initiatives are not yet costed, the development of implementation plans and business cases will follow. There is no available surplus for any net investment at present nor can we expect recurrent additional income to fund any additional staff related costs. We may need to reprioritise our future spending commitments in order to achieve some of the environmental goals of the People Plan. NHSE or HEE income may be available non-recurrently via bids to fund one-off implementation costs.
- 8.3. Improving the experience of working for the Trust should pay for itself out of the existing pay budget several times over if there is a relentless focus on the benefits that will arise from implementing the People Plan. There are operational drivers to avoidable workforce cost resulting largely from sickness absence and turnover, which drive temporary staffing expenditure and lost productivity, as well as efficiency gains to be made through new ways of working.
- 8.4. In developing business cases for implementation, the Trust will need to ensure a continued focus on opportunities to reduce costs via the People Plan.

9. Proposed approach to governance

- 9.1. The delivery of the People Plan be overseen by the People and Communications Committee, which reports to the TME and, in turn, to the Trust Board. People Plan updates will be provided to the Committee and also directly to the TME and Trust Board.
- 9.2. The specific form and membership of the governance structure will be discussed and agreed with the People & Communications Committee.

Proposed delivery groups

- 9.3. People Plan implementation will be co-ordinated by a single Delivery Board with key membership from divisions and corporate leadership teams. This will be supported by Working Groups, for the strategic themes, led by designated Divisional Heads of Workforce, and for the enabling

workstreams, with proposed core membership/leadership from the corporate functions (see below).

- 9.4. We will also ensure links with Divisional, Trust-wide and system-wide Groups where there are key dependencies and particularly for the enabling themes. Through these groups we will ensure effective monitoring of People Plan outcomes as well as risk identification and mitigation.

Proposed core membership of enabling groups

- 9.5. The following core membership is has been agreed with TME:
 - 9.5.1. ***Creating a suitable environment and estates***: Director of Estates, or deputy; Director of Nursing, or deputy; Head of Wellbeing; Hospitals Charity.
 - 9.5.2. ***Fit for purpose digital and IT***: Director of Digital; Assistant Director of Workforce – Resourcing.
 - 9.5.3. ***Communications and Engagement***: Director of Communications & Engagement; Head of Engagement, Inclusion and Experience.
 - 9.5.4. ***Fit for purpose OUH people function***: Director of Workforce; Director of Culture and Leadership; Assistant Directors of Workforce; Heads of Workforce.

10. Next steps and communications strategy

- 10.1. Assuming Trust Board approval in July 2022 we plan the following next steps:
 - 10.1.1. OMI will develop the final published Plan for publication on the intranet and for sharing across the organisation. As well as the content set out here, this will also include a foreword from the Trust CEO/Chair and an introduction from the Chief People Officer (CPO).
 - 10.1.2. The Director of Communications and Engagement will implement the plan to share the Plan and actions within it across a range of media, including:
 - 10.1.2.1. Print versions, full and pocket sized.
 - 10.1.2.2. Internet and intranet, with supporting materials such as animations, videos and other accessible versions.
 - 10.1.2.3. Social media.

11. Recommendations

11.1. The Trust Board is asked to:

11.1.1. Approve the OUH People Plan 2022-25 for finalisation and publication.



DEVELOPING A PEOPLE STRATEGY: THE STORY SO FAR

People Strategy OUH – initial plan on a page

Our overarching strategic people priorities – aligned to the NHS People Plan

1. Looking after our people

2. Belonging at OUH

3. New ways of working and delivering care

4. Growing for the future

Our strategy workstreams

Prioritising the health & wellbeing of all our people

Ensuring inclusion and belonging for all

Enabling new ways of working and planning for the future

Harnessing the talents of all our people

Creating a great employee experience

Our enabling workstreams

Fit for purpose people function – leading improvement, innovation and change

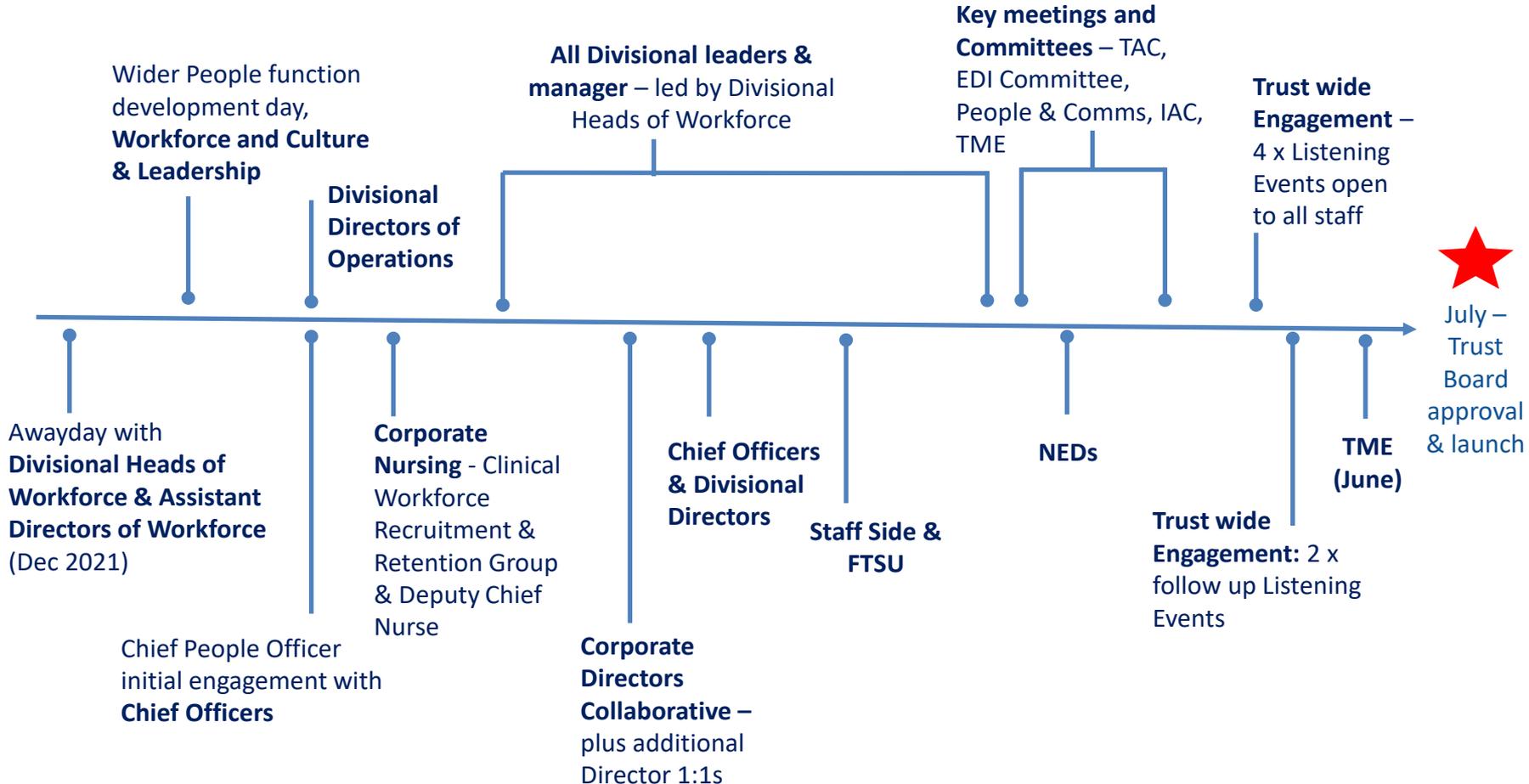
Digital people solutions

Collaborating across the system

Communications & Engagement



Developing the People Strategy – key stakeholders





WHAT WE HEARD FROM OUR PEOPLE



SUMMARY OF PEOPLE PLAN GAPS FROM LISTENING EVENTS (1)

Theme	Sub-theme
1. Environment / estates	(a) Prioritise the basics – pleasant changing facilities and working toilets, water, hot food etc as per NHS Employers graphic
	(b) Space to relax and recharge during breaks
	(c) Access to the resources to do a good job
2. Well-being	(a) Everyone has basic human needs met – sufficient rest, nutrition – As above, reference NHS Employer graphic
	(b) A work environment that enhances well-being (e.g. no-smoking policy enforced, MSK support / desk set-up, proactive OH support)
3. Process improvement / automation	(a) Streamline processes (and involve staff in doing so)
	(b) Digitise where possible
	(c) Clear communication of sign-off processes / what's required
4. IT	(a) Modernised IT equipment to promote productive working
	(b) IT resources to provide more support in resolving issues



SUMMARY OF PEOPLE PLAN GAPS FROM LISTENING EVENTS (2)

Theme	Sub-theme
7. Safe staffing	(a) Sufficient time to complete (mandatory) training
	(b) Feel safe to speak out about any concerns
8. EDI / inclusion	(a) Less divide between staff on different pay grades. Job roles, not bands. No more 'non-clinical'
9. Collaboration / teamwork	(b) Breaking down team boundaries to truly embrace OneTeamOneOUH (focused around patient pathway)
	(c) Equal value and recognition for role in patient care whether clinical or 'non-clinical' (and find a different term to non-clinical!)
	(d) Awareness of the front line no matter your role
	(e) Department goals / strategy developed with opportunity to contribute from all and understand where they fit in
11. Retention	(a) Provide more job security
	(b) Creating an employee experience that matches expectation
12. Ways of working	(a) Getting the basics right as a springboard to more innovative practices

Updates to content

1. **Fewer overall themes** with **clearer sub-themes**
2. Greater **emphasis on enablers like IT and Estates**
3. Proposed **'I statements'** from our staff
4. **Refined actions** to show what we'll do
5. An **overarching vision** for our people
6. Development of an **overarching 'contract'** to set out the contributions and responsibilities needed from:
 - a. The organisation
 - b. Line manager
 - c. Individuals



REVISED THEMES AND SUB-THEMES

People Plan Amendments

Overarching Vision– Highlighting why our people should stay in the NHS and how we will help the acclimatise to the new normal

Our strategy workstreams

Prioritising the health & wellbeing of all our people

Health, Wellbeing & Belonging for all our people

Harnessing the talents of all our people

Making OUH a great place to work

Ensuring inclusion and belonging for all

Creating a great employee experience

Enabling new ways of working and planning for the future

More People & Working Differently

Our enabling workstreams

Change to Creating a suitable environment and Estates

Fit for Purpose IT and Digital solutions

Communications & Engagement

Fit for purpose OUH people function – leading improvement, innovation and change



Amended People Plan overview – themes and sub-themes

Health, Wellbeing & Belonging for all our people

Create a working environment that enhances well-being

Recover from the effects of the pandemic

Happier working lives (flexibility, autonomy, culture)

Everyone understands what Equality Diversity and Inclusion (EDI) is and the role they play

Recognise how everyone contributes to the care of our people & patients

Making OUH a great place to work

Living out our values

Great reward and benefits for working at OUH

Support to allow our leaders, managers and teams to shine

Careers our people feel excited by

Everyone enabled to support quality improvement

More People, Working Differently

Plan how best to use our workforce at OUH and beyond / across the System

Right skills in place to deliver our services

Improved recruitment processes