



**MINUTES OF THE PEOPLE, FINANCE AND ORGANISATIONAL  
DEVELOPMENT COMMITTEE HELD AT 9.30AM ON  
WEDNESDAY 6 DECEMBER 2023 IN THE BOARDROOM, NIAS HQ**

**PRESENT:** Mr J Dennison Committee Chair  
Ms M Larmour Non-Executive Director (Trust  
Chair)

**IN**

**ATTENDANCE:** Mr M Bloomfield Chief Executive  
Ms M Lemon Director of Human Resources &  
Organisational Development (HR  
& OD)  
Mr P Nicholson Director of Finance, Procurement,  
Fleet & Estates  
Ms M Paterson Director of Planning,  
Performance & Corporate  
Services  
Ms L Gardner Asst Director HR  
Ms S Watters Senior Learning & Development  
Officer (observer)  
Mrs C Mooney Board Secretary

**APOLOGIES:** Ms V Cochrane Asst Director HR

**1 Apologies & Opening Remarks**

The Committee Chair thanked Ms Larmour for facilitating the quorum.

The Chair noted that the HR Assurance Framework (agenda item 9) had not yet been finalised and said that Ms Lemon hoped to be in a position to present the final draft to the February meeting.

Ms Lemon noted that an update on the rebaselined plan would also be provided to the February meeting.

## 2 **Procedure**

### 2.1 **Declaration of Potential Conflicts of Interest**

The Chair asked those present to declare any potential conflicts of interest now or as the meeting progressed.

No declarations of conflict of interest were made.

### 2.2 **Quorum**

The Chair confirmed the Committee as quorate.

### 2.3 **Confidentiality of Information**

The Chair emphasised the confidentiality of information.

## 3 **Previous Minutes (PC06/12/23/01)**

The minutes of the previous meetings held on 16 and 19 October 2023 were **APPROVED** by the Committee.

## 4 **Matters Arising (PC06/12/23/02)**

Ms Lemon advised that, following discussion at the October meeting, the Delivery Plan had been reviewed with a view to reordering and reprioritising the objectives therein.

Ms Lemon reported that the work in relation to providing dashboard data on a Divisional basis continued and said the Committee would be kept apprised of this work.

## 5 **Finance Update (PC06/12/23/03)**

Mr Nicholson drew the Committee's attention to Page 2 of the report which forecast a breakeven position at October 2023 and at the year end. He explained that the Trust had reviewed initial allocations and had identified £1.366 million which had originally been earmarked for training. Mr Nicholson said that this, as well as a forecast reduction in the annual leave creditor of £0.864 million, meant that the Trust would be in a position to cover its original forecast deficit of £2.2 million.

Mr Nicholson said that there were some indications of expected additional allocations around deficit support, PPE and the Integrated Clinical Hub. He explained that the Hub was based in EAC and had been designed to manage some of the additional operational pressures experienced by the Trust.

Continuing, Mr Nicholson pointed out that, in addition to the breakeven position, the Trust had been set a savings target of £1.975 million. He indicated that the proposals identified to make the savings were non-recurrent in nature as well as non-repeatable and had been progressed through the Resource Optimisation workstream of the Trust's Delivering Value Programme.

He also highlighted that the management of overtime and management of expenditure on IAS had shown marked changes to previous years and were broadly in line with the forecast within the initial plan. He said it would be important to recognise this and the collaborative approach shown by Assistant Directors across the financial elements of this work, particularly through the workstreams within the Trust's Delivering Value Programme.

Mr Nicholson highlighted the salient points within the various sections of the Finance Report.

Mr Dennison said that, while he welcomed the positive outturn to 2023-24, he recognised the challenges ahead.

Mr Bloomfield provided a brief update on discussions at the recent Performance and Transformation Executive Board meeting where it had been made clear that the financial outlook was extremely challenging.

Mr Bloomfield agreed with Mr Nicholson in relation to recognising the efforts of all staff to bring expenditure under control. However, he stressed the importance of balancing this against safety and quality. He noted the increase in complaints with regard to non-emergency transport not just from service users but also from other Trusts. Mr Bloomfield said it would be important to monitor the position to ensure expenditure was not reduced so far as to result in the Trust not delivering the service to an acceptable standard.

Ms Paterson acknowledged the fine balance to be struck as well as increasing productivity within the same envelope.

Mr Bloomfield welcomed the current financial position and said that the positive outturn was a result of DoH support as well as allocations to offset deficits. He pointed out that the NIAS savings target had been proportionate to the other Trusts which had indicated that it was becoming increasingly difficult to achieve savings.

Ms Larmour said she was a member of the Public Sector Chairs' Forum and discussions there had reflected the significant challenges ahead. She said it was clear from a recent briefing from the Head of the Civil Service, Ms J Brady, that there would not be any additional funding available in the 2024-25 year.

She sought further clarification about the reduction in the annual leave creditor.

Mr Nicholson alluded to discussions at the Trust's ARAC meetings and references to the liability of outstanding annual leave. He explained that, prior to Covid-19, staff on average carried forward five days' annual leave which accounted for around £1.5 million of a liability. However, he said, over the period of Covid-19, this liability increased as staff had been unable to take holidays as well as accruing leave due to sickness absence. He said that this had increased the liability to the order of £4 million which had been funded previously from Covid-19 allocations. Mr Nicholson indicated that, as this reduced, it had the effect of reducing expenditure in the current year. However, he pointed out that this would not be repeatable in subsequent years and the exact detail would not become clear until 31 March 2024.

Ms Larmour referred to Page 6 of the report which showed total overtime spend per area and asked why one station's spend would be significantly more than others.

Mr Nicholson explained that this could be for a number of reasons. He cited the example of the changes to surgery at the South West Acute Hospital and the requirement on the Trust to provide additionality or particular stations having higher absence levels which linked to the requirement for overtime.

Mr Nicholson also pointed out that, for example, staff based in Altnagelvin station could undertake overtime in other stations but that this would not necessarily be reflected in movements between Divisions.

Responding to a question from Ms Larmour on whether Area Managers controlled the provision of overtime to staff, Ms Byrne explained that Area Managers had authority to approve overtime to ensure core staffing levels. She said that there had been a much more focused approach on identifying those areas where overtime would be required.

Ms Larmour acknowledged the culture shift in terms of moving away from the significant levels of funding available throughout the pandemic.

Mr Bloomfield said that that change had resulted in staff expressing concern re the availability of overtime. However, he stressed that the Trust could only staff up to its funded establishment. He said it was important to strike the right balance in terms of reducing staff offers to undertake overtime.

The Committee **NOTED** the Financial Report as presented by Mr Nicholson.

5 **Maximising Attendance:**  
**- Progress Report**  
**- Delivery Plan Update (PC06/12/23/04)**

Ms Lemon drew the Committee's attention to the Progress Report and highlighted the salient points. She explained that the paper also attempted to describe the actions in place and to what extent the Trust had achieved traction in relation to attendance management.

Ms Lemon acknowledged that it would be challenging to meet the DoH target which was to reduce absence rates to 92.5% of the sickness absence levels reported in 2022-23, by the end of the 2023-24 financial year. This represented a target of 11.24% for NIAS.

Mr Dennison referred to the significant focus on stress and asked whether this was a major contributing factor to short-term and long-term absence.

Ms Lemon explained that both stress and musculo-skeletal (MSK) injuries were major causal factors of stress and she described the actions taken by the Trust to address these areas. These included a MSK pathway to physiotherapy and additional manual handling training.

Mr Dennison sought further detail on what would make an overall change to the cumulative total of absence.

Ms Gardner referred to the cyclical nature of absence and the use of secondary Key Performance Indicators (KPIs) to measure improvement. She explained that, while ultimately the measures may result in reductions and measures of success, absence may not necessarily reduce.

Ms Lemon alluded to the variation in practice and believed that KPIs would allow the actions taken by managers to be monitored to determine to what extent change was being delivered and whether it was more prevalent in some areas than others.

Ms Byrne said she would expect the same rigor to be applied through the management tiers.

Mr Bloomfield referred to the monthly meetings he held with Ms Lemon and Ms Byrne at which they discussed information around how many staff had been returned to work from long-term absence; how many staff had left NIAS employment; how many staff had been referred to Occupational Health Services (OHS) and were there plans in place to manage these staff.

Ms Lemon emphasised the importance of management intervention and said the Trust was implementing a huge cultural shift and placing expectations upon managers which were not there previously. She said that the Trust was at an early stage of identifying good practice with a view to showcasing this to managers.

Ms Lemon said that the Trust had recently provided more opportunities to bring managers together than had existed previously.

Ms Byrne highlighted the establishment of the Assistant Director Forum and the linkages between that and the Trust's Senior Management Team.

Ms Larmour said that there was a clear commitment to progressing this work and she highlighted the importance of face-to-face interaction and engagement. She suggested that further clarity needed to be provided to Area Managers and Station Officers around how they would be held to account in terms of staff management.

Ms Byrne alluded to the regular Assistant Director/Area Manager meetings and the re-commencement of the Station Officer Forum.

Ms Larmour welcomed these meetings. She noted that the Trust Chief Executive had been clear in his engagement with various management groups of the priority attached to attendance management. Ms Larmour asked how governance and accountability had been incorporated into the internal structure.

Ms Lemon suggested that the standardisation of meetings and clarity that managers were responsible for managing absence.

Mr Bloomfield confirmed that managers were clear on the responsibilities placed upon them around attendance management and the need for them to be aware of the detail. However, he acknowledged that this had not yet translated into improvement.

Ms Lemon clarified that the KPIs were clear at Area Manager level, not at Station Officer level. She said that, while Area Managers had been advised of the expectations around staff management, it would be important to introduce some KPIs with a view to standardising the approach.

Ms Byrne referred to the involvement of HR Advisers and the considered advice provided at Divisional level. She pointed out that every operational manager had a nominated HR Adviser as a point of contact.

Mr Bloomfield acknowledged the point re accountability lying with Area Managers and said he believed further clarity was still required about how this operated at Station Officer level.

Responding to a question from Mr Dennison as to when the Trust might expect to see a reduction in numbers and the forecast position in March, Ms Lemon said that the focus was on seeing a clear trajectory around those members of staff currently off being brought back to work. She added that she would also like to see some traction around the processes referred to by Mr Bloomfield, for example, numbers of staff applications for ill-health retirement as well as an improvement in the numbers of staff returning to work.

In terms of seasonal absence, Ms Lemon stressed the importance of managers having early leadership discussions with the relevant staff with support from HR Advisers. She suggested it would be interesting, after the Christmas break, to compare staff absence with the previous Christmas figures.

Ms Gardner suggested that the development of a HR Assurance Framework would be helpful and would ensure there was no ambiguity in terms of what staff were responsible for.

Alluding to a case management approach, Ms Gardner acknowledged that the process was not as time-bound as it needed to be. She recognised that there was case drift and, in the past, management meetings had not taken place on a timely basis. Ms Gardner referred to the backlog of redeployment considerations and confirmed that nine had been actioned since April and acknowledged that the process needed to be more dynamic.

Ms Larmour said that the redeployment process needed to be accelerated and more agile.

### **Delivery Plan Update**

Ms Lemon explained that there would be significant emphasis on the Delivery Plan in the next Quarter and added that she hoped to report on the secondary information at that stage.

She highlighted a number of barriers encountered with the delivery of the Plan. She cited the example of OHS and the need to hold providers to account through KPIs. Ms Lemon noted that there was



currently a five-month turnaround in relation to applying for ill-health retirement and consideration of the application and said this delay was outside of the Trust's control. She pointed out that the delay often led to staff taking sick leave during the interim period.

Ms Larmour asked if there was any information in relation to the number of staff applying for ill-health retirement and also in relation to those staff who were on sick leave pending consideration of their application.

Ms Lemon advised that the DoH was aware of the position and had sought information from all Trusts.

Ms Lemon stressed the importance of the health and wellbeing of the workforce and alluded to the Health and Wellbeing Strategy which had been approved by the Board in August 2022 and which reflected actions in terms of mental health support and physical fitness support.

Alluding to governance and accountability, Ms Lemon highlighted the importance of effective communications and said work was being undertaken in this regard. She pointed out that Trade Union colleagues continued to highlight the issue of safe staffing.

Mr Bloomfield said that the actions being taken were appropriate to deliver the outworkings of the Strategy. However, he acknowledged the linkages between the actions and starting to see an improvement in the overall absence levels and said that this would take time to see the desired outcomes.

Ms Lemon pointed out that, front and centre to this work, was the mainstreaming of the management role. She explained that this had involved a significant cultural shift and reminded the Committee that, in the past, staff did not have to speak to their manager to report being absent from work. She added that this had also been an Internal Audit recommendation and said that significant work had been required to ensure a reversal of this practice. Ms Lemon pointed out that some Trade Union colleagues were not supportive of this new practice.

Ms Larmour said that the Board would like to have a level of assurance that mechanisms were in place to demonstrate that those staff responsible for managing staff were accountable. She

suggested that there would always be a certain level of inconsistency of approach. Ms Larmour acknowledged that there was insufficient evidence to assure her that there was accountability at the right level and a recognition that managers were regularly meeting to discuss such issues. She suggested that there needed to be a mechanism to allow managers to come together and be supported with a view to educating and learning from each other.

Ms Larmour highlighted that the aim was to ensure a healthy and happy workforce and said that issues needed to be addressed in a collaborative manner.

Ms Lemon alluded to performance management in terms of managers being clear around the areas for which they would be held accountable for across the organisation.

Ms Byrne highlighted the need to support managers and remove some of the more administrative tasks and said the Trust was working to address this.

Ms Larmour was of the view that the Trust needed to be more agile in the current environment.

The Committee **NOTED** the updates provided.

7 **HR & OD Balance Scorecard as at October 2023**  
**(PC06/12/23/05)**

By way of summary, Ms Lemon acknowledged that sickness absence continued to be a significant challenge for the Trust and said that the earlier discussion referred. She advised that the use of overtime was being considered within the Delivering Value Resource Optimisation Project and had been covered in Mr Nicholson's earlier Finance Report.

She advised that headcount, turnover and use of non-permanent staff had remained relatively static since the previous report. Ms Lemon reported that there were currently no whistleblowing cases and general Employee Relations (ER) activity remained at a steady level. She noted that, with the introduction of a new Learning Management System (LMS) in April 2023, all statutory and mandatory training records had now been migrated to allow for compliance monitoring in future scorecards.

Referring to ER, Ms Lemon acknowledged the potential impact on absence. She said she would like to be able to present to the Committee what performance might look like in this area, for example, how many cases; the timeframes involved and whether any trends in relation to grievances had been identified.

The Chair noted that KPIs 11-14 never appeared to be populated and sought clarification around this.

Responding, Ms Lemon stressed the importance of not relying on the engagement score from the previous staff survey. She advised that the Trust was planning to undertake some Pulse surveys in Quarter 4 which, it was hoped, would provide a better understanding of staff satisfaction. Ms Lemon acknowledged that further work was required around the quantitative data needed for the dashboard. She alluded to the introduction of the new LMS and said the Trust was now in a better position to report on this.

The Chair referred to the short-term absence information and said that, while the KPI gave the impression that this was reducing, other information would point to increases.

Ms Lemon undertook to revisit this and report back to the February meeting.

Ms Larmour referred to KPI 7, ER Issues (Level 1&2), in particular grievance and harassment, and asked what percentage of staff were impacted by these. She noted the levels in both areas.

Ms Lemon clarified that the figures represented those cases which were open as opposed to the number of the cases opening. She suggested that it might be more helpful to report on how many cases had been closed as well as how many grievance and harassment cases were created on a monthly basis.

The HR & OD Scorecard was **NOTED** by the Committee.

## 8 **Conflict, Bullying and Harassment Policy (PC06/12/23/06)**

Ms Lemon explained that the DoH Workforce Policy Directorate issued Circular HSC (AfC) (5) 2023 “Implementation of Conflict, Bullying and Harassment Policy” on 9 November 2023, requiring all

HSC organisations to adopt the revised Conflict, Bullying and Harassment (CBH) regional policy.

She drew the Committee's attention to the paper which provided details of the proposal to implement the HSC (CBH) Policy locally within NIAS with effect from 1 April 2024 as well as the actions which would be taken to support implementation.

Mr Bloomfield indicated that each Trust would be expected to introduce the Policy.

Ms Gardner confirmed that there had been Trade Union engagement in the development of the Policy.

The Committee **APPROVED** the adoption of the Policy.

## 9 **Development of HR Assurance Framework – verbal update**

Ms Lemon advised that, while a risk register had been established within the Directorate, it would be helpful to have an effective HR Assurance Framework which would assist in identifying risks. She explained that this work was progressing and a workshop was being held this morning to consider what a Directorate Risk Register might look like as well as best practice around an Assurance Framework.

Ms Lemon said she intended to present the Framework to the Committee at its February meeting for consideration.

Responding to a question from Ms Larmour, Ms Paterson advised that the post of Risk Manager was currently being evaluated with a view to commencing a recruitment exercise for the post as soon as possible. However, in the meantime, Mr Seamus Mullen would provide support. Ms Paterson referred to the importance of the Risk Manager post and said that it may become necessary to supplement the risk management capacity within the Trust to ensure resilience.

Ms Larmour noted that, in terms of resilience, there were a number of posts which she described as 'instrumental' within the Trust which could potentially place functions at risk. She suggested it would be helpful to identify such posts and referred to the importance of exit interviews with those staff who had decided to take up posts elsewhere.

Mr Bloomfield pointed out that the Trust had recruited a number of posts at risk to mitigate vulnerabilities in certain functions. However, it was important to ensure a balance between resilience of corporate support functions and ensuring appropriate resources were allocated towards the operational frontline.

10 **Actions from meeting with PFOD Chair/Chair/Chief Executive/Director HR & OD on 28 September 2023 – verbal update**

Ms Lemon explained that she and Ms Byrne met on a weekly basis to discuss attendance management and said that, in addition to this, both she and Ms Byrne met with the Chief Executive on a monthly basis to review progress.

Ms Lemon advised that, at the September meeting, there had been some discussion as to what extent members could be assured that managers now viewed attendance management as an integral element of their role and have clarity around what was expected of them. Ms Lemon said that she did believe there had been significant progress in relation to this.

Mr Bloomfield said that he would agree with Ms Lemon's assessment.

Ms Larmour noted the number of staff in temporary posts and stressed the importance of transitioning to permanent posts where possible. She commented that she would like to see more evidence of managers meeting to discuss managing attendance.

Ms Lemon advised that a number of sessions had taken place with managers.

The Chair thanked Ms Lemon for her update.

11 **HR & OD Capacity and Structure – verbal update**

Ms Gardner and Ms Watters withdrew from the meeting at this point and Ms Lemon provided a detailed update in relation to the HR & OD capacity and structure.

12 **Date of next meeting**

The next meeting of the Committee is scheduled to take place on Thursday 29 February 2024.

13 **Any Other Business**

There were no items of Any Other Business.

**THIS BEING ALL THE BUSINESS, THE CHAIR DECLARED THE MEETING CLOSED AT 3.30PM.**

**SIGNED:**



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**DATE:**

29 February 2024