

Workforce Committee Chair's Report

31 July 2025

Public Board

Presented for:	Information and Assurance
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Previous Committees:	Workforce Committee, 17 July 2025

Our Annual Commitments for 2025/26 are:	
Recognise and act upon moments that matter to our patients	✓
Support our patients to get home a day sooner	✓
Be in the top 25% for patient experience and efficiency in outpatients	
Support each other to act with kindness and compassion	✓
Reduce our carbon footprint by creating greener patient pathways	
Support our staff to manage every £ wisely	✓
Make best use of our estate, equipment and digital assets	

Risk Appetite Framework				
Level 1 Risk	(✓)	Level 2 Risks	(Risk Appetite Scale)	Impact
Workforce Risk		Workforce Supply Risk - We will deliver safe and effective patient care through having adequate systems and processes in place to ensure the Trust has access to appropriate levels of workforce supply.	Cautious	↔ (same)
Workforce Risk		Workforce Deployment Risk - We will deliver safe and effective patient care through the deployment of resources with the right mix of skills and capacity to do what is required.	Cautious	↔ (same)
Workforce Risk		Workforce Retention Risk - We will deliver safe and effective patient care, through providing a supportive culture, training, development and H&WB of our staff to retain the appropriate level of resource to	Cautious	↔ (same)

		continue to meet the patient demand for our clinical services		
Workforce Risk		Workforce Performance Risk - We will deliver safe and effective patient care through having the right systems and processes in place to manage performance of our workforce.	Cautious	↔ (same)
Operational Risk		Health& Safety Risk - We will protect the health and wellbeing of our patients and workforce by delivering services in line with or in excess of minimum health & safety laws and guidelines.	Minimal	↔ (same)

Key points	
1. This summary provides an overview of significant issues of interest to the Board, highlights key risks discussed, key decisions taken and key actions agreed.	For information and assurance

1. Introduction

The Workforce Committee (WFC) provides assurance to the Board on workforce performance and planning using the revised five People Priorities and the agreed annual areas of focus to determine the forward plan for the Committee, alongside the seven Trust annual commitments. It does this principally through analysis of the current and future workforce through the lenses of engagement, health and wellbeing, equality diversity and inclusion, training and education and financial and operational performance pressures. The Committee also scrutinises assurances provided in respect of key workforce performance indicators against the Trust's People Priorities reported to the Trust Board in the Integrated Quality Performance Report (IQPR).

The Workforce Committee, is supported by the Workforce Management Group which sits within its supporting governance structures, and provides oversight of operational management.

In light of Non-Executive Director recruitment, and delays to appointments from NHS England, the Trust has been unable to populate Workforce Committee in July with regular NED members. Professor Laura Stroud, Associate Non-Executive Director and former member of the Committee, was in attendance and consistency was provided by the Chair Amanda Stainton. The Committee recognised that where any decisions were made, this would require endorsement by the full Board. During the Committee meeting there were no formal decisions required.

2. Significant Issues of Interest to the Board

Workforce Management Group Summary

The Committee were provided with the minutes from the most recent Workforce Management Group (WVG) meeting and an Executive summary. The key updates noted were:

- In light of the CQC reports for Maternity and Neonates, the schedule of CSU deep dives had been reviewed. It was agreed that an overview of all CSU ratings would be discussed at each Group, with additional narrative provided for CSUs that were rated red across a number of pillars. An Operational Workforce Action Plan (OWAP) from

a CSU rated red for workforce would also be presented at each meeting to facilitate additional support.

- A presentation from Adult Therapies had been received, with the CSU self-assessing as red. The CSU were noted to be making progress and were asked to consider a target date when they would be rated amber. Assurance on progress would be monitored by the Group through the CSU ratings overview.
- CRRW4: Insufficient Staff to Provide Treatment and Services to Patients was presented to the Group, with the risk remaining at 16. The risk had been updated to include the red workforce risks from CSU OWAPs. Work was underway to triangulate this with CSU risk registers.
- Progress against the Team Commitment of Supporting Our Staff to be Kind and Compassionate was presented for information and assurance. Common themes and actions across CSUs had been collated, with CSUs focusing on Freedom to Speak Up (FTSU) and recognition. A dashboard of key metrics was being developed to help CSUs understand their data in this area.

The Committee commended the Group for revisiting the assurance process and explored whether Women's and Children's CSUs were rated red at the time of the CQC visits. It was confirmed that Women's CSU was rated red and Children's was rated amber overall. It was noted that there was variance in terms and services, with the Committee agreeing that it was therefore important to get a deeper understanding of risks at team level.

The update was received and noted.

Staff Story: Moving Forward **<https://youtu.be/ME4c4vH8TZQ>**

The Committee viewed a video on the Moving Forward Programme, a positive action programme to equip BME staff with the skills and confidence to progress their careers and remove organisational barriers in developing. Jenny Lewis explained how the Trust had facilitated nine cohorts since commencing in 2019 and noted that the difference in confidence of the delegates at the start and end of the programme was transformational.

The video featured Sharon Dawkins, who worked within Organisational Development and Culture as a Trainer. She described her career journey to date and explained how she had participated in the Moving Forward Programme. She explained that the programme gave her the confidence to network and put herself forward for development opportunities, such as facilitating the health and wellbeing learning burst. She explained this had stretched her professionally, developed her confidence and gave her exposure. As a result, she has since helped facilitate the Moving Forward Programme and the Mary Seacole Programme and was looking for further opportunities to develop her career.

The video concluded with feedback from other delegates which included comments such as the course had been life changing, that the course had provided a sense of purpose and direction, and it had opened up networking opportunities.

Jenny Lewis informed the Committee of the feedback from delegates in relation to inclusive recruitment and explained that this had prompted the development of the Inclusive Recruitment Training for all staff involved in recruitment. The Committee commended the programme and the positive impact it had on delegates.

The update was received and noted.

NHS Job Evaluation Assurance

The Committee were informed that a letter had been received from NHS England requiring Board assurance on the Trust's job evaluation process. It was noted that a report would be presented to the September Workforce Committee and flow to the Board for assurance.

The update was received and noted.

Workforce Committee Metrics

The Committee reviewed and scrutinised the workforce metrics aligned to the People Priorities. The key points noted were:

- The total WTE was above trajectory in May 2025.
- May had shown increased bank expenditure, this was noted to be due to nurse staffing within Urgent Care, Speciality Integrated Medicine and Chapel Allerton. Agency costs had decreased in May but remained above target.
- Rolling 12 month sickness absence rate was 5.19%, with sickness absence rates in April and May 2025 noted to be higher than in the same period in 2024. The stretch target of 4.9% remained in place.
- Voluntary turnover in May was 5.89% in comparison to the end of year position of 5.9% for 2024/25.
- 81% of job plans were on Electronic Job Planning (EJP). Out of date job plans remained high, however, this had decreased from 720 to 552.
- The percentage of rosters approved on time remained stable, but below 90%.
- 30 new Freedom to Speak Up (FtSU) concerns had been raised directly with the Guardian. The Committee explored the themes, and it was noted these remained consistent with the previous report to Board.
- Mandatory training compliance continued to be above 80%, however, the target had been reviewed and subsequent reports would show a revised target of 85% moving forward.
- Appraisal compliance continued to increase with extensions agreed for specific departments in Pathology and Women's until 31 August 2025. Noting for Agenda for Change staff Q1 was appraisal period. Medical appraisal completion was comparable with previous years, noting this was carried out across the full year.

The Committee received and noted the update.

Workforce Planning People Priority:

Delivery of the Workforce Plan 2025/26

The Committee received an update on the delivery of the workforce plan for 2025/26 for information and assurance. Progress continued to be monitored through the Workforce Plan Delivery Group, with the Group meeting weekly. A number of deep dives were scheduled, including areas such as agency spend, high earners due to overtime and bank, overtime spend, Eroster best practice and EJP. The deployment of the consultant workforce through EJP and Eroster was also being accelerated, with all consultants to be utilising these systems by December 2025.

A review had been undertaken by the North East Commissioning Service (NECS) with an overview of the recommendations presented to the Committee for information. It was noted that the NECS report had commended the Senior HR Business Partners knowledge and understanding of their CSUs workforce and risks.

The update was received and noted by the Committee.

Medical and Dental Optimisation Programme (MDOP)

The Committee were presented with an update on the MDOP for information and assurance. Projects included updated medical and dental policies and procedures, roll out of electronic time sheets for additional claims processing, embedding of effective and efficient Erostering, review of job planning processes including new job planning policy and implementation of new guidance on exception reporting for the Resident Doctor workforce. A pilot had also been undertaken in Head and Neck CSU with a number of opportunities identified for potential scaling up.

The next steps were outlined, which included acceleration of the deployment of the medical consultant workforce through EJP and Erostering to deliver a real time medical workforce management information system.

The update was received and noted by the Committee.

We Lead by Example – Compassionately, Effectively and Together People Priority:

Supporting and Developing Our People

The Committee were presented with an update on the progress in embedding 'We Lead by Example – Compassionately, Effectively and Together' People Priority for information and assurance. The Committee were reminded that investment had been approved to support leadership and management, recognising its importance in helping the organisation meet the current challenges as well as build for the future.

Progress included a review of the current leadership offer, completion of the Leadership Development Guidance, investment in additional staff to support the role out and embedding of the work, development of a system to prioritise and escalate demand and capacity gaps within Organisational Development and Culture and establishment of an Executives Deputies Task and Finish Group. The Committee were presented with the action plan, target deadlines and measures of success, which included Staff and Pulse survey responses, the number of FTSU concerns raised directly with the Guardian and senior leadership role models, leadership and management staff stories.

The Committee discussed the measures of success and noted the importance of removing barriers to development, ensuring this was accessible despite operational challenges. The importance of leadership visibility and curiosity in creating psychological safety and the culture of speaking up was also noted, and therefore an increase in contacts to the FtSU Guardian would be viewed positively. The Committee also commended the Leadership Development Guidance, noting it's utility in Scope for Growth conversations.

The Committee also discussed the implications of the reforms to Level Seven Apprenticeship funding and noted that short term mitigation was in place, but the longer-term implications would be considered once further details were known.

The Committee received and noted the assurances within the report.

Training and Education People Priority:

Progress Against the Strategy

An update on progress against the Learning, Education and Training (LET) Strategy was presented to the Committee for information and assurance. An overview of progress against the workstreams was provided within the appendices and it was noted that whilst progress had been made in most areas, further work was required in relation to ensuring that learning was at the core of LTHT's culture, embedding LET as a core function in LTHT's business and development of appropriate educational facilities.

It was noted that whilst progress had been made in ensuring that learning was at the core of LTHT's culture and embedding LET as a core function in LTHT's business, there was still work to do requiring continue engagement across most senior levels of the organisation and greater visibility for LET activities. It was also explained that the workstream related to developing one learning management system had been paused due to the need to re-procure the Training Interface. However, this remained a longer-term ambition of the strategy.

In terms of accommodation, the Committee heard that whilst LTHT had plenty of training estate, this was located across different sites, varied in quality and there was no unified approach to managing and booking the facilities. Therefore, a Task and Finish Group had been established to undertake a detailed analysis of the LET estate, procure a room booking system and establish a fair use agreement. However, it was noted that the Trust spent approximately £300k per year on external venues and therefore £2.5m in capital funding from NHS England had been secured to refurbish the Education, Training and Development Centre at St James's. Opportunities for utilisation of Joseph's Well were also noted to being explored.

The Committee discussed the steps being taken to progress red workstreams and make progress, which included the Year of Learning, increasing traction with LET and continued engagement with senior leaders.

The update was received and noted.

3. Risk and Governance

Internal Audit Assurance

The Committee received an update on the current and planned Workforce Internal Audits for information and assurance. The key points noted were:

- A third request had been made to extend the deadline for the Sickness Absence Audit due to delays associated with agreeing the policy with staff side. Many of the risks of the policy had already been built into standard practice in the management of attendance and therefore the extension did not pose further risks.
- A request was being made to extend the Job Planning Audit deadline to March 2026 to allow monitoring of the changes and ensure these were fully embedded.
- All other actions were either complete or on track to meet the extended completion dates.

- The findings of the Staff Immunisation Audit had been received with findings noted to pose low and medium risks. Key actions had been agreed and were outlined within the report.

The Committee discussed the need to ensure timeframes were achievable to avoid the need for repeated extensions.

The update was received and noted by the Committee.

4. Standing Agenda Items

There were no new issues to escalate to the Corporate Risk Register, no issues required legal advice, or escalated to NHS England, WY ICB/Leeds ICB, CQC and issues to escalate to the Board are set out in the report.

The information received within the meeting reported the Trust remained within its defined risk appetite.

5. Publication Under Freedom of Information Act

This paper has been made available under the Freedom of Information Act 2000.

6. Recommendation

The Trust Board is asked to receive and note the assurances received by the WFC and note the further work requested as set out in the report.

7. Supporting Information

No supporting information.

Amanda Stainton
Chair of Workforce Committee
July 2025