

People Committee Chairs Summary Report
Public Board
30 July 2026

Presented for:	Alert, Advice, and Assurance
Presented by:	Amanda Stainton, Associate Non-Executive Director, Chair of the People Committee
Authors:	Amanda Stainton, Associate Non-Executive Director Wisdom Echefula, Governance Officer
Previous Committees:	11 June 2026

Freedom of Information Act (FOIA) Exemption	☐ YES (restricted from the FOIA) ☒ NO (available to the public under the FOIA)
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Link to Strategic Objective	Support and develop our people
Link to Provider Capability Assessment	People and culture
Link to CQC Well-led Statement	Shared Direction and Culture Workforce Equality, Diversity and Inclusion Freedom to speak up
<u>Regulatory Impact</u>	Regulation 9: Person-centred care Regulation 16: Receiving and acting on complaints Regulation 17: Good governance Regulation 18: Staffing Regulation 19: Fit and proper persons employed

Key points	Purpose
This report provides a summary of the key highlights from the People Committee meeting and seeks to alert, advice and provide assurance to the Board on the areas discussed.	Alert, Advice and Assurance

<u>Risk Appetite Framework</u>			
Level 1 Risk	Level 2 Risks	(Risk Appetite Scale)	Impact
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	Operating within
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	Operating within
Workforce Retention Risk	We will deliver safe and effective patient care, through providing a supportive culture, training development and health and wellbeing of our staff to retain the appropriate level of resource to continue to meet the patient demand for our clinical services.	Cautious	Operating within
Workforce Performance Risk	We will deliver safe and effective patient care through having the right systems and processes in place to manage the performance of our workforce.	Cautious	Operating within

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.	Cautious	Operating within
External Risk	Regulatory Risk - We will comply with or exceed all regulations, retain its CQC registration and always operate within the law.	Averse	Operating within

1. Introduction

Following its last meeting the Committee has considered significant issues and key areas to highlight to the Board under three key categories Alert, Advice, Assurance (AAA):

- Alert - areas which the Committee wishes to escalate as potential areas of non-compliance, which need addressing urgently, or that it is felt Board should be sighted on.
- Advice - any new areas of monitoring or existing monitoring where an update has been provided to the Committee and there are new developments.
- Assurance - specific areas of assurance received warranting mention to Board.

2. Alert

- The Committee highlighted concerns regarding the disproportionate representation of Black and Minority Ethnic (BME) colleagues within conduct cases during 2025/26, with BME colleagues accounting for 44.9% of conduct cases, which was a significant increase from 31.5% in 2024/25, and exceeded the 31% of BME colleagues within the Trust workforce. The Committee requested further analysis to understand contributory factors, identify any underlying themes, and provide assurance regarding organisational learning and mitigating actions. The Committee requested that future Employee Relations reporting incorporate a stronger ethnicity lens and wished to draw this matter to the Board's attention for ongoing oversight.
- The Committee noted that the Trust does not currently operate a formal probationary period for new employees and supported further work to develop options for a Trust-wide probationary framework. It was recognised that forthcoming changes to the Employment Rights Act 2025, including enhanced employee rights during the early stages of employment, increased the importance of robust recruitment, induction and performance management arrangements. The Committee endorsed continued scoping, benchmarking and option appraisal work, with detailed proposals to be considered through the Executive Team and Weekly Executive Board before any implementation decision is made and wished to alert the Board to this developing area of workforce policy.
- The Committee reviewed the findings of a deep-dive review of mandatory and priority learning undertaken in response to CQC Well-led requirements and agreed to alert the Board to significant concerns regarding the robustness of current governance, reporting, data quality and assurance arrangements. While improvements have been made to oversight and compliance monitoring, the review identified weaknesses in learning needs analysis processes, accountability, escalation, audit trails, data quality and system controls, creating a risk of false assurance regarding whether the right staff are assigned and complete the right learning. The Committee supported the closure of the original Well-led action set and its replacement with a broader Mandatory and Priority Learning Improvement Plan focused on strengthening the control environment, governance, reporting and assurance mechanisms. The Committee noted that the Trust could not yet consistently evidence full compliance assurance and requested regular progress reporting, with the objective of achieving full assurance by March 2027.
- The Committee noted the emerging workforce and financial risks associated with the national requirement to absorb graduate nurses into substantive employment and the expectation to convert some posts into midwifery roles. Members expressed concerns regarding the

potential increase in workforce establishments, its affordability, the required headcount reduction in the Trust, and further long-term workforce planning. The Committee also noted the ongoing Band 5 role redesign programme and the potential implications of future role evaluations and regrading of Band 5 Staff Nurse roles. Given the potential financial and workforce consequences of these national requirements, the Committee agreed that these concerns should be escalated to the Finance and Performance (F&P) Committee for further review. It was also noted that this had been discussed at the F&P Committee meeting held 24 June 2026 and h

3. Advice

- The Committee reviewed the 2025 National Education and Training Survey results and noted the limitations associated with low response rates and national benchmarking methodologies. It was noted that the findings were being considered alongside a broader range of educational quality indicators and that no significant concerns were identified within the educational domains. The Committee advises the Board that the Learning, Education and Training Committee had been tasked with developing a strengthened suite of educational quality and learner experience metrics to enhance future assurance, improve oversight of learner experience, and support targeted quality improvement activity.
- The Committee received a comprehensive update covering key national, regional and local workforce matters affecting the Trust. Developments relating to national sexual safety monitoring arrangements, implementation of recommendations arising from the antisemitism review, workforce planning in response to resident doctors' industrial action, graduate nurse employment, role redesign, mandatory training reform, and emerging employment legislation were noted. The Committee also noted regional collaboration to align workforce policies and digital workforce initiatives across West Yorkshire, alongside local work to realign the People Function, manage industrial relations, and strengthen organisational capability. Assurance was provided that appropriate governance, consultation and workforce planning arrangements were in place, with further reports scheduled where required. The Committee advises the Board to note the breadth of work being undertaken across national, regional and local workforce developments and their implications for the Trust.
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- The Committee reviewed progress against the Learning, Education and Training Strategy and noted good progress across the majority of strategic objectives. The Committee supported the development of a high-impact action plan focused on strengthening

educational metrics and reporting, improving learning facilities, enhancing leadership development, increasing the visibility of educational performance within organisational assurance frameworks, and protecting time for learning and development. The Committee advises the Board of the importance of education and training as a strategic enabler of workforce development, research, innovation and delivery of the NHS 10-Year Plan, and endorsed continued focus on investment, governance oversight and alignment with wider organisational priorities.

4. Assurance

- The Committee received assurance that the recently implemented People Improvement Framework (PIF) was strengthening workforce oversight, accountability and CSU engagement with people metrics. It was noted that early evidence of improved cross-functional working, enhanced use of workforce data and targeted intervention in areas of sustained underperformance, including sickness absence. Assurance was also received that the framework was aligned with the Integrated Accountability Framework, enabling triangulation with wider organisational performance indicators and supporting organisational learning. The Committee noted that a formal review of the first four months of implementation would be undertaken to assess effectiveness and inform future development and was assured that the PIF was providing a robust mechanism for driving workforce improvement and delivering measurable outcomes.
- The Committee received strong assurance from the colleague story presented by the Outpatients Administration Team, which demonstrated exemplary inclusive leadership, person-centred workforce practices and effective implementation of reasonable adjustments to support colleague wellbeing, inclusion and performance. The Committee was assured that the approaches adopted reflected best practice, aligned with the Trust's strategic commitment to inclusion, belonging and the Well-Led framework, and had delivered tangible benefits for both colleagues and service delivery. The Committee further received assurance that the learning and best practice arising from the presentation would be disseminated across the Trust to support organisational learning, promote consistency of approach and strengthen inclusive practice. The Committee therefore provides the Board with positive assurance regarding the effectiveness of these arrangements.
- The Committee received assurance regarding the effective management and governance of Employee Relations (ER) cases during 2025/26, noting improvements in case timeliness, robust oversight arrangements for complex and high-risk cases, and learning arising from serious harm investigations. The Committee was assured that appropriate governance, escalation and consistency mechanisms were in place to support fair decision-making and noted a programme of improvements for 2026/27, including a revised Supporting Attendance Policy, enhanced attendance management arrangements, and greater triangulation of workforce intelligence to strengthen organisational culture and colleague experience.
- The Committee received assurance regarding the Trust's oversight and management of national and local terms and conditions matters affecting the workforce, including changes to Home Office immigration policy and the implications for internationally recruited colleagues. Assurance was provided that appropriate arrangements were in place to monitor emerging developments, assess associated workforce risks, and support affected colleagues through mechanisms such as the Trust's Visa Helpdesk. The Committee also noted ongoing engagement and consultation regarding the recommendations arising from the Leng Review of Physician Associates and was assured that the Trust was taking appropriate steps to understand and respond to the potential impact on local services and workforce arrangements.
- The Committee received assurance regarding the effectiveness of the Trust's Job Evaluation (JE) arrangements, noting significant improvements in process efficiency, audit compliance and turnaround times. The Committee was assured that actions implemented to strengthen

JE governance and job description quality had resulted in all JE activity being completed within the national 12-week target during the final quarter of 2025/26. The Committee also received assurance regarding the Trust's positive NHS England JE audit outcome, with no Red-rated standards and improvement plans in place for the remaining Amber areas. The Committee noted the establishment of a multidisciplinary programme to oversee the Nursing and Midwifery National Profile Review and were assured that appropriate governance, workforce planning and financial oversight arrangements were in place to manage the associated risks and support delivery of national requirements. The full report is shared as a Blue Box item at agenda item 11.6 as required by NHSE.

- The Committee received assurance that the Trust's Freedom to Speak Up (FTSU) arrangements remained compliant with national policy and guidance and continued to provide effective oversight of speaking up activity, organisational culture and workforce concerns. It was noted that the Trust performed favourably against national benchmarks, with ongoing progress in strengthening the FTSU Champion Network, supporting targeted improvement activity within identified CSUs, and embedding speaking up intelligence within wider workforce assurance processes. The Committee was assured that robust governance arrangements were in place to support the identification of organisational learning, improve colleague experience, strengthen leadership capability, and enhance links between speaking up, patient safety and quality improvement.

Note – It is noted that the FTSU Guardian has a duty to report directly to the Board, and this report is received under agenda item 11.3 at the 30 July 2026 meeting.

- The Committee received assurance regarding the Trust's response to the 2025 NHS Bank Staff Survey, noting that overall colleague engagement remained in line with the national average and above the Trust-wide staff survey engagement score. The Committee welcomed significant improvement across seven of the nine survey themes and were assured that a comprehensive programme of Trust-wide and targeted improvement actions was in place, supported by dedicated governance and oversight arrangements. The Committee noted the importance of strengthening engagement with bank colleagues and improving survey participation rates and was assured that the agreed High Impact Action Plan and Trust Nurse Bank Action Plan would support continued improvement in colleague experience, engagement and organisational performance.
- The Committee received assurance regarding the Trust's approach to monitoring and implementing the requirements of the Employment Rights Act 2025. It noted that appropriate actions were underway to respond to legislative changes, with identified leads and timescales in place for areas requiring further work. The Committee was assured that there were no significant risks associated with the current programme of implementation and that arrangements were in place to monitor potential impacts arising from changes to industrial action provisions, employment tribunal time limits and statutory sick pay. Members also noted that further updates would be provided as additional regulations and guidance emerge, particularly in relation to changes planned for 2027.

5. Risk review

There was no risk to highlight from the meeting.

6. Recommendation

The Board are asked to receive and note the content of this report and be assured that the People Committee is fulfilling its assurance function as delegated from the Board and as defined within its Terms of Reference.