The Leeds Teaching Hospitals NHS Trust

People Committee Chairs Summary Report

Public Board
26 November 2026

Presented for:	Alert, Advice, and Assurance
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Previous Committees:	8 October 2026

Freedom of Information Act (FOIA) Exemption	☐**YES** (restricted from the FOIA) ☒**NO** (available to the public under the FOIA)

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
Regulatory Impact	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

Risk Appetite Framework

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 received no matter to alert the Board at this meeting.

3. Advice

- The Committee received an update on the proposed Compassionate and Effective Leadership Programme, which aims to embed the Leeds Way values, strengthen leadership and management capability, and improve colleague experience to support outstanding patient care. It supported the continued co-design approach, bringing together existing leadership provision with accessible digital learning, practical management development and bespoke programmes for senior leaders. The Committee emphasised the importance of ensuring the programme addressed a broad range of leadership capabilities and that its impact was evaluated against the People Improvement Framework (PIF), colleague engagement and workplace experience. The Board is asked to note the progress in developing the programme and support its continued development and implementation.

- The Committee was updated on the Medical and Dental Optimisation Programme (MDOP) and progress towards the £1.5m medical spend waste reduction target for 2026/27. It noted progress in developing the Trust's first job planning policy, establishing the Job Planning Consistency Committee and strengthening medical establishment planning to align workforce capacity and skill mix with service requirements. The Committee recognised the potential to improve clinical productivity and reduce reliance on variable pay, while emphasising the need for clearer evidence of savings achieved, robust attribution of benefits and accountability for delivery across Clinical Service Units (CSUs). Key risks relating to implementation capacity, CSU engagement, governance and contractual changes remained under active management. The Board is asked to note the progress and ongoing work to realise the anticipated financial and operational benefits.

- The Committee acknowledged the phased centralisation of Agenda for Change (AfC) Staff Bank arrangements and noted that implementation was progressing without identified patient safety concerns or service disruption. It noted the planned transfer of the Nursing and Midwifery Staff Bank and Estates and Facilities bank staff to the People Function on 1 November 2026, with centralisation expected to strengthen consistency, workforce oversight and rostering control, while also delivering potential efficiencies and savings. Outstanding dependencies included bank pay rates, annual leave liabilities, historic employment contracts, rostering licence costs and operational capacity. The Committee noted that

progress and associated risks were being monitored through the programme's milestone plan, action trackers and risk log, with further work required to resolve contractual and financial issues and progress subsequent phases of implementation. The Board is asked to note the progress, outstanding dependencies and ongoing management of implementation risks.

- The Committee considered the proposed Fair Shot, Fair Game initiative, which aims to address barriers to career progression, improve representation in senior leadership and promote equitable access to development opportunities across the Trust. It supported the proposed five-stage transformation approach, including evidence gathering and engagement with colleagues across all bands, building on existing initiatives such as 7 Up for LTHT. The Committee noted the proposed use of workforce data, colleague experiences and reverse mentoring to identify barriers, inform targeted interventions and support inclusive leadership. It emphasised the importance of demonstrating measurable impact and aligning career development opportunities with colleagues' capabilities and aspirations. The Board is asked to note the proposed approach and the next steps in its development.

- The Committee reviewed the strategic importance of the 2026 NHS Staff Survey as a key mechanism for understanding colleague experience, monitoring engagement and identifying workforce improvement priorities. It noted that the 2025 engagement score was 6.7, down from 6.9 in 2024, with a response rate of 47%, below the national benchmark of 49%. The Committee emphasised the importance of visible leadership support, representative participation and shared accountability across CSUs. It endorsed a minimum response-rate target aligned with the national benchmark, with a stretch target one percentage point above it, and noted that weekly response-rate monitoring would support engagement and oversight. The Board is asked to note the survey priorities and the approach to maximising participation and supporting sustained improvement in colleague engagement.

- The Committee noted the update from the Finance & Performance Committee on its review of productivity and Whole-Time Equivalent (WTE), which recognised progress and the establishment of appropriate processes but confirmed that full assurance had not yet been achieved. It noted that productivity would be monitored through quarterly reporting, with clearer metrics required to demonstrate the pace and impact of improvements in activity volumes, overtime, patient experience and waiting-list performance. It was agreed that further scrutiny would be undertaken through the Finance & Performance Committee.

- **Post Meeting Note –** Following a deep strategic review of the Trust's Workforce Race Equality Standard (WRES) & Workforce Disability Equality Standard (WDES) data, the Committee reviewed and supported a revised, high-impact action plan via correspondence mail on 4 November 2026. Recognising that historical performance trajectories require a sharper focus to drive meaningful change from 2027/28 onwards, the Chair and Committee members endorsed publishing this targeted plan alongside the upcoming external data release. To ensure robust ongoing governance, oversight, and assurance, a full comprehensive paper and a deep-dive discussion on the plan's priorities, actions, and success measures have been scheduled for the next formal meeting on 10 December 2026.

4. Assurance

- The Committee received assurance on the implementation of the People Improvement Framework (PIF), noting that approximately three-quarters of CSUs and Corporate Function Teams had maintained or improved their workforce performance position. While targeted interventions had supported improvement in several areas, sickness absence remained a significant workforce risk, requiring sustained management action, particularly ahead of winter. The Committee emphasised the need for clearer presentation of performance trends, improved benchmarking and workforce profiling, and a more explicit assessment of the effectiveness of interventions. It was assured that work was ongoing to strengthen proactive

sickness absence management, with a revised management policy and a clear action plan to be developed to support targeted improvement.

- The Committee received an update on the implementation of national requirements relating to Locally Employed Doctors (LEDs), including eligibility for conversion to substantive Specialty Doctor or Specialist contracts, the review of fixed-term arrangements and enhanced appraisal requirements. It noted that approximately 105 of the 375 LEDs initially identified met the core eligibility criteria for contract conversion, with application and assessment processes established. The Committee recognised the potential benefits for workforce stability, recruitment, retention and staff experience, while highlighting the need for further assessment of the financial implications, contractual arrangements and wider workforce risks. It sought a further report to the Committee and subsequently the Board to support consideration of the emerging impact and provide assurance on implementation.

- The Committee received assurance on the proposed audit of pre-employment and in-employment checks to verify compliance with NHS employment requirements and the effectiveness of existing controls. It supported the planned testing of 60 employee files between October 2026 and March 2027, including targeted reviews of internal staff movements, professional registration and qualification evidence. The Committee noted that the transition to a new system provided an opportunity to identify and address any gaps in assurance. The audit findings will be presented to the Committee in April 2027, with assurance provided to the Board on the effectiveness of the controls and any required improvement actions.

- The Committee was assured on the progress in delivering the Inclusion and Belonging Plan, including activity against the 10 priority actions to strengthen colleague engagement, shared ownership and inclusive workplace experiences. It noted the focus on ward-to-ward communication, compassionate and effective leadership, lived experience and accessible communications, alongside the development of a strategic steering group to strengthen delivery and accountability. The Committee was assured that progress had been made since the August 2026 update and that further activity was planned to embed inclusion and belonging across the Trust.

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.