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This Document Supports: *standards and legislation – include exact details of any CQC*	Annual Governance Statement CQC National Standards
Key Associated Documents:	DN142 Standing Orders DN140 Standing Financial Instructions DN137 Scheme of Delegation TR001 Audit Committee Terms of Reference NHS Audit Committee Handbook 2024
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Key points of this document

- Terms of Reference for a Committee of the Board of Directors.

Version Control table

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01/05/2025	03	Approved

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1   Authority:

1.1   The Workforce Committee is a Committee of the Board of Directors.

2   Purpose:

2.1   To provide assurance to the Board that there is an effective structure, process
        and system of control for:

- Education and Training
- Education Governance
- Equality, Diversity, and Inclusion (EDI)
- Leadership Development
- Resourcing & Retention
- Staff health and Well-being
- Workforce Health & Safety
- Workforce Planning

2.2   To work with Internal Auditors to deliver assurance.

2.3   To inform the Audit Committee and/or Board of Directors of any risks relating to
        the Committee's areas of responsibility.

3   Delegated Authority:

3.1   The Workforce Committee is authorised by the Board of Directors to undertake
        any activity within its terms of reference, and to seek any information it requires
        from staff, who are requested to co-operate with the Committee in the conduct of
        its enquiries.

3.2   Reporting committees are set out in the Trust Governance Structure.

3.3   Any recommendation that has a financial consequence would need to be taken
        through the appropriate Trust approval procedures.

4   Duties:

4.1   The Committee provides the formal forum for the collective ownership and
        oversight, by the Board, of the Trust's People Plan.

4.2   The Committee will provide assurance to the Board that there is an effective
        structure, process, and system of management of workforce matters with key
        performance indicators relating to:

- Deployment of staff
- Wellbeing & safety of staff
- Safer staffing
- Resourcing
- Retention
- Pay & Reward
- Staff engagement
- Education & training
- Leadership development
- Equality diversity & inclusion

4.3   Ensuring delivery of the requirements and our reporting obligations under the following programme and associated workstreams:

- WRES
- WDES
- Gender Pay Analysis
- Freedom to Speak Up
- Guardian of Safe Working

4.4   Monitor and review the Board Assurance Framework (BAF) and action those areas that fall within the remit of the Committee.

4.5   To approve policies as required on behalf of the Board of Directors in the areas of workforce, research, and education.

4.6   To receive draft strategies on matters relating to workforce and education before being presented to the Board of Directors.

4.7   To receive regular reports on the action being taken to remove or mitigate the principal risks on the Corporate Risk Register that fall within the remit of the Committee, and to review and approve updates, monitor controls and examine assurance sources.

4.8   To receive regular reports on the metrics relating to workforce and education.

4.9   To seek on the workforce development requirements for including metrics for medical and nursing staff numbers, with the Q&R Committee and with the Performance Committee

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4.10   To review minutes and received reports from:

Equality and Diversity Steering Group,
Education Steering Group
Health & Safety Committee relating to the Workforce agenda.

4.11   Internal Assurance

The Committee will receive internal assurance by reviewing the establishment
and maintenance of effective systems of governance, risk management and
internal control, in relation to:

(a)   annual reports and development plans relating to for example: the
Compassionate & Collective Leadership Programme, the Resourcing & Re
Programme, the Royal Papworth School, and the Trust's Education Strateg

(b)   internal risk management arrangements incorporating the risk register and
assurance framework for areas within the committee's remit

(c)   progress reports against workforce indicators for example: staffing reports
including turnover, absence, use of bank and agency staff; learning and
development reports; uptake of professional education and development;
provision of supervision and support; mandatory training.

(e)   Department of Health submissions and reports

(f)   In carrying out its functions the Committee may request and review reports
positive assurances from Directors and managers on the overall arrangeme
governance, risk management and internal control. The Committee may als
request specific reports from individual functions within the organisation, as
may be appropriate to the overall arrangements.

4.12   External assurance

The Committee will receive external assurance from:

(a)   Department of Health (DoH) arms' length bodies or regulators/inspectors (e
Care Quality Commission, the Regulator, the Health & Safety Executive),
professional bodies with responsibility for the performance of staff or functi
royal colleges, accreditation bodies).

(b)   Care Quality Commission - reports relevant to Royal Papworth.

(c)   statements from internal or external audit opinion relating to matters that fall within the Committee's remit.

(d)   compliance with relevant regulatory, legal and code of conduct requirements relating to matters that fall within the Committee's remit.

(e)   the output of peer review visits and reports.

(f)   national staff survey reports.

5   Membership/Quorum:

Voting Membership

5.1   The Chair and members of the Workforce Committee shall be appointed by the Board of Directors.

5.2   The Committee shall be made up of at least three Non-executive Directors

- Chair: A nominated Non-executive Director
- At least two further nominated Non-executive Directors
- Chief Executive
- Medical Director
- Chief Nurse
- Director of Workforce and Organisational Development
- Chief Operating Officer
- Deputy Director of Workforce
- Deputy Chief Finance Officer
- Deputy Director of Medical Education (Deputising for MD)

Quorum

5.3   The Committee shall be deemed quorate if there is representation of a minimum 3 members, including two Non-executive Directors and one Executive Director.

Membership Attendance Requirements

5.4   The Committee will be required to have a minimum attendance level of 50% from members in a rolling twelve-month period.

5.5   In accordance with the Code of Governance for NHS Providers attendance will be recorded during the year and reported in the

Annual Report and Accounts.

5.6   In Attendance

The following will normally be in attendance:

- Associate Director of Corporate Governance
- 2 Governor observers
- Other Executive Directors will be expected to attend when agenda items require.
- An Internal audit representative may be invited attend, specifically as per agenda items.
- Other Directors or officers may be invited to attend at the discretion of the Chair or the Lead Executive Director particularly when the Committee is discussing an issue that is the responsibility of that Director or officer.

5.7   A full set of agenda papers will also be sent to the Chairman, Chief Executive, Chief Finance Officer, and Chief Information Officer. NEDs to receive full set of papers on request.

6   Meetings:

6.1   In the event of the Chair of the Committee being unable to attend, the remaining members shall elect one of their members as Chair for the meeting.

6.2   The Committee shall be supported administratively by a member of the Trust's staff.

6.3   The Committee will meet on a bi-monthly basis.

6.4   Agendas and briefing papers should be prepared and circulated in sufficient time for Committee Members to give them due consideration.

7   Conduct of Business:

7.1   The conduct of business will conform to guidance set out in the Board of Directors' Standing Orders, unless alternative arrangements are defined in these Terms of Reference.

8   Equality Statement:

The Committee will ensure that these terms of reference are

applied in a fair and reasonable manner that does not
discriminate on such grounds as race, gender, disability, sexual
orientation, age, religion or belief.

9   Monitoring:
9.1   Minutes of Committee meetings should be formally recorded and
        distributed to Committee members and attendees. Subject to the
        approval of the Chair, the minutes will be submitted to the Board
        of Directors at its next meeting and may be presented by the
        Committee Chair/Committee Member/Executive Lead.

        The Chair of the Committee or Executive Lead shall draw to the
        attention of the Audit Committee or Board of Directors any
        issues that require disclosure to the full Board of Directors or
        require executive action.

9.2   All Board Committees and the Audit Committee have a shared
        responsibility to provide assurance to the Board of Directors. As
        such, all Board Committees need to work collaboratively to
        ensure that all aspects of governance are covered and that the
        Board receives comprehensive assurances on Royal Papworth
        Hospital's business and activities.

9.3   Where deficiencies in reporting arrangements are identified the
        Board of Directors will seek assurance from the Audit Committee
        that recommendations have been implemented.

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Monitoring Table

What key element(s) need(s) monitoring as per local approved policy/ procedure or guidance?	Who will lead on this aspect of monitoring? Name the lead and what is the role of the multidisciplinary team or others.	What tool will be used to monitor/check/ observe/assess/ inspect/ authenticate that everything is working according to this key element from the approved policy/ procedure?	How often is the need to monitor each element? How often is the need complete a report? How often is the need to share the report?	Who or what committee will the completed report goes to. How will each report be interrogated to identify the required actions and how thoroughly should this be documented in e.g. meeting minutes.	Which committee, department or lead will undertake subsequent recommendations and action planning for any or all deficiencies and recommendations within reasonable timeframes?	How will system or practice changes be implemented the lessons learned and how will these be shared?
Element to be monitored	**Lead**	**Tool**	**Frequency**	**Reporting arrangements**	**Acting on recommendations and Lead(s)**	**Change in practice and lessons to be shared**
All	Director of Workforce & OD, Chief Nurse & Associate Director of Corporate Governance	N/A	Annually	Workforce Committee	Workforce Committee	Any changes in practice and lessons shall be shared with the relevant internal stakeholders

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Rapid Equality Impact Assessment Tool

When looking at the impact on the equality groups, you must consider the following points in accordance with General Duty of the Equality Act 2010:
In summary, those subject to the Equality Duty must have due regard to the need to:

- eliminate unlawful discrimination, harassment and victimisation;
- advance equality of opportunity between different groups; and
- foster good relations between different groups

EQUALITY IMPACT ASSESSMENT – WHAT IS THE IMPACT TO DIFFERENT GROUPS IN SOCIETY?		
If you believe there has been No impact or a Positive impact, please choose Yes for Negative impact please choose No. Please provide supporting comments, both on positive and negative impacts. You may be asked to complete a FULL EQUALITY IMPACT ASSESSMENT to understand the impact further.		COMMENTS
Age: Consider and detail across age ranges on old and younger people. This can include safeguarding, consent and child welfare.	Yes	N/A
Disability: Consider and detail on attitudinal, physical and social barriers.	Yes.	N/A
Race: Consider and detail on difference ethnic groups, nationalities, Roma gypsies, Irish travellers, language barriers.	Yes	N/A
Sex: Consider and detail on men and women	Yes	N/A
Gender reassignment: (including transgender) Consider and detail on transgender and transsexual people. This can include issues such as privacy of data and harassment	Yes	N/A
Sexual orientation: Consider and detail on heterosexual people as well as lesbian, gay and bi-sexual people.	Yes	N/A
Religion or belief: Consider and detail on people with different religions, beliefs or no belief.	Yes	N/A
Pregnancy and maternity: Consider and detail on working arrangements, part-time working, and infant caring responsibilities.	Yes	N/A
Marriage and civil partnership status	Yes	N/A
Environment: Consider impact on transport, energy and waste	Yes	N/A
Other identified groups: Consider and detail and include the source of any evidence on different socio-economic groups, area inequality, income, resident status (migrants) and other groups experiencing disadvantage and barriers to access.	Yes	N/A
Were any NEGATIVE impacts identified?	No	
If YES, you will need to complete a full Equality Impact Assessment. Please contact the Equality, Diversity and Inclusion team papworth.edi@nhs.net for the full assessment template.		N/A