

Agenda item 2.i

Report to:	Board of Directors	Date: 05 June 2025
Report from:	Chair of the Workforce Committee – Part 1 Meeting in May 2025	
Principal Objective/ Strategy and Title	GOVERNANCE: To update the Board on discussions at the May 2025 Part 1 Workforce Committee Meeting	
Board Assurance Framework Entries	BAF 1853, 1854, 1929 and 3261	
Regulatory Requirement	Well Led/Code of Governance:	
Equality Considerations	To have clear and effective processes for assurance of Committee risks	
Key Risks	N/A	
For:	Discussion	

Issues of interest to the Trust Board

1. Consideration of the BAF Risks:

- **Risk 1853:** This risk was considered in detail, and the consequence category was reduced from 5 to 4, making the overall risk score 12. The rationale for this reduction was that the turnover trend has shown an almost consistent decrease over the last six months. Given the context of our staff engagement activities, the Committee agreed with the proposed reduction.
- **Risk 3261:** At the recommendation of the Audit Committee, a thorough discussion on the risk rating of 20 took place. While there was recognition that the trust had in place all the right controls and mitigations, the national context remained an unknown, particularly regarding recent union activities related to pay. The Committee, therefore, recommended a strengthening of the narrative related to internal controls and processes, and that further consideration would take place at the Committee in three months, once the national context became clearer and our response to that was understood.

2. The Workforce Director's Report:

The Committee received the report and commented on the comprehensive nature of the updates and the progress made on the key KPIs across the organization and within divisions. The Committee received an update from Eilish on progress against

the junior doctors' mess, where good progress had been made. The Committee had a focused discussion on three key areas.

- A deep dive into rostering formed part of the director's report. Significant focus on both clinical and non-clinical compliance has shown a steady improvement and allowed for a greater understanding of the barriers to rollout. For non-clinical staff, familiarity and more focused attention to detail would lead to improvements. For clinical staff, there was a greater focus on ensuring the 22% headroom was complied with.

The Committee was **assured**.

a. Update on Career Progression:

The Committee received an extremely comprehensive paper on progress made at the Royal Papworth Hospital (RPH). It was noted that national profiles for nursing have been signed off, alongside guidance which will be published next week. It was acknowledged that we are extremely lucky that our Director of Workforce is part of the national work, which has helped us prepare for what could be a significant issue for the NHS. RPH has been able to work through the current profiles and job evaluation and will be ready to map the new national profiles to our local profiles, enabling us to identify risk areas and address these rapidly. It was felt that we were generally 18 months ahead of other organizations.

The paper described the phases that RPH would undertake over the coming months to ensure that we were managing the risks, understood where there was variation and/or mission creep, and the potential actions open to us to ensure that we treat staff with equity and fairness, while being mindful of both the expectations of individuals and also of the unions, which will be a challenge to manage.

The Committee was **assured**.

b. Dissemination of the Staff Survey Results:

The Committee received a comprehensive report describing the approach to the dissemination of staff survey results to divisions and teams, based on empowering staff, giving them the right information, giving them the tools to do the job, and also the support.

The report also described the approach to active action planning and how the plans and improvements would be supported and monitored through HR business partners, through the normal operational governance routes up to the Executive Committee, and onto the Committee through quarterly reports.

The Committee was **assured** on this report and the overall Director of Workforce report.

3. Workforce Strategy:

The Committee received the Quarter 4 review of progress against the 2024/2025 workforce plan and KPIs. The review marked the significant progress across the 5 themes during 2024/2025 and provided significant assurance through the KPIs, the detailed narrative, and the conversation at the Committee.

The one area where progress was marked as poor was theme 6 - working with partners. Although rated as poor, the rating reflected that the three areas within this theme had not been progressed; however, relationships with partners were strong, and progress had been made in other areas, such as the Oliver McGowan training and the hub approach to supporting staff redeployment.

The action plan for 2025/2026 was presented, and it was noted that while the plan was ambitious, it had been recently reviewed to ensure that it was prioritized and balanced across the six themes of the workforce strategy. It was noted that many of the actions were continuations from last year, were commitments made by the board, or were external requirements.

The Committee was **assured**.

4. The EDI Annual Report:

The annual report was presented to the Committee and was commended for both the presentation, the content, and the progress made. It was noted that this was Ali's last Committee before returning to his organization following his six-month secondment. The Committee thanked Ali for all his contributions and the work on the annual report. The report was recommended to the Board.

The Committee also received a comprehensive EDI action plan that brought all of the action plans together in one place for the first time. The Committee welcomed this and looked forward to ongoing conversations. It was noted that the engagement and feedback from the Race Equality Network did not appear as positive as some of the other networks. OM confirmed that there had been a discussion at the Transformational Reciprocal Mentoring Programme Board regarding how the network could be supported to develop. It now had four chairs who were all from clinical backgrounds which was positive in terms of engaging and connecting with staff but did present challenges with their release and flexibility. Eden Charles, who was part of the discussion that took place, reflected that Race Equality Networks often needed greater support, empowerment, and encouragement when compared with other networks.

The Committee was **partially assured**.

5. The Guardian Of Safe Working Hours Report:

The report noted that exception reporting remains low despite positive engagement from the Guardian of Safe Working. A new policy had been introduced to improve the reporting process, which was now smoother and offered some anonymity, and consultant supervisors no longer have access in the same way. It was noted that significant progress had been made on reducing the backlog of exception reports, and while we were **assured** that doctors were informed and aware of exception reporting and the role of the Guardian, the Committee was **not assured** that everybody was exercising their right to report.

6. Gap Analysis of the National Education and Training Survey (NETS):

The Committee received a report in response to a previous inquiry whether the actions from the NETS survey were incorporated in the action plans across the organization.

The Committee was **assured**.

7. The Annual Nursing and Patient Establishment Review:

The Committee received a comprehensive report which demonstrated significant progress with vacancies, turnover, uptake of student nurses, creation of a talent pool of nurses, and how safe staffing has been adopted at RPH as the nursing establishment tool. While significant progress has been made, the Chief Nurse reflected some of the current risks that could impact on progress, namely the new nursing profiles, the funding restrictions for apprenticeships at level 7 (being a small organization), and keeping people motivated in succession planning and progression was difficult, and the potential constraints to education budgets given the financial challenges of the NHS. The report was recommended to the Board, and Maura was thanked for her leadership and professionalism.

The Committee was **assured**.

8. Internal Audit Report on Agency Expenditure and Temporary Staffing:

The Committee received their internal audit reports, and it was noted how helpful it was to have sight of these.