

TOR051 Workforce Committee of the Board of Directors Terms of Reference

Document title: **Workforce Committee of the Board of Directors: Terms of Reference**

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Key points of this document

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

Workforce Committee: Terms of Reference

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
- 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

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- Safer staffing
- Resourcing
- Retention
- Pay & Reward
- Staff engagement
- Education & training
- Leadership development
- Equality diversity & inclusion
- Employee relations (including professional and disciplinary matters)
- Revalidation

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 have oversight of workforce development requirements, including metrics for medical and nursing staff numbers, with the Q&R Committee and the Performance Committee.

4.10 To review minutes and receive 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

TOR051 Workforce Committee of the Board of Directors Terms of Reference 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 & Retention Programme, the Royal Papworth School, and the Trust's Education Strategy
- (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 and positive assurances from Directors and managers on the overall arrangements for governance, risk management and internal control. The Committee may also request specific reports from individual functions within the organisation, as they 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.g. Care Quality Commission, the Regulator, the Health & Safety Executive), professional bodies with responsibility for the performance of staff or functions (eg 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

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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
Medical Director
Chief Nurse
Director of Workforce and Organisational Development
Chief Operating Officer
Deputy Director of Workforce
Deputy Director of Finance
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 an overall attendance level of 50% from members in a rolling twelve-month period.

5.5 In accordance with Monitor's Code of Governance 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:
Trust Secretary
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.

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- 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.

Further document information

Approved by Executive Director/local committee (required for all documents):	Workforce Committee
Approval date (<i>this version</i>):	26 January 2023
Approved by Board of Directors or Committee of the Board (required for Strategies and Policies only):	Board of Directors
Date:	2 March 2023
This document supports: <i>standards and legislation – include exact details of any CQC & NHSLA standards supported</i>	Annual Governance Statement CQC National Standards
Key related documents:	DN142 Standing Orders DN140 Standing Financial Instructions DN137 Scheme of Delegation Audit Committee Term of Reference NHS Audit Committee Handbook 2014
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Groups:	Disability Race Gender Age Sexual orientation Religious & belief Other
Yes/No:	No No No No No No No
Positive/ Negative:	
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