

Agenda item 3.i

Report to:	Board of Directors	Date: 06 November 2025
Report from:	Chair of the Workforce Committee – Part 1 Meeting in September 2025	
Principal Objective/ Strategy and Title	GOVERNANCE: To update the Board on discussions at the September 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

BAF was reviewed and no changes were made to the risk ratings, and the controls mitigations and commentary were noted.

Workforce Directors report

At the request of the Performance Committee the Workforce Director highlighted the work that had been undertaking looking at temporary staffing against vacancies and sickness. The report highlighted that although there was a slow improving trend relating to sickness absence it remained above the inbuilt assumption of 3.5%. Absence due to maternity leave was broadly stable but leave due to other absences reasons had risen although an update at the Committee suggested that this was due to a change in the reporting process. The total temporary staffing use has been slowly improving. And whilst there has been a reduction in the total shortfall of workforce available there has not been the same degree of reduction in the amount of temporary staffing being used. Whilst the report was useful there is much more to understand in order to put the right mitigations and controls in place within departments and across the organisation.

The Committee was pleased to see the improvement in mandatory training compliance which for the first time in approximately 7 years was at 90.55%. Other areas of recognition was the smooth transition of the junior doctors in August 2025, operational HR was almost fully established and the manager self-service successfully implemented.

Recruitment data across the Trust highlights a growing disparity in appointment Likelihood Ratios (LR) between BAME and White colleagues. The likelihood ratio of White colleagues being appointed compared to BAME increased from 1.19x in 2023/24 to 1.8x in 2024/25, indicating a widening imbalance in recruitment outcomes. This trend raises concerns regarding equity, and alignment with the Trust's commitment to equality, diversity, and inclusion. Exploration highlighted statistical anomalies in some areas and cardiology was selected as a focus of a deep dive which was presented at the Committee. It was a comprehensive and thoughtful process which uncovered opportunities for improvement with the next steps including the use of the nurse recruitment team in moderating short listing and interviews, meeting with the candidates who had submitted multiple job applications to understand their experience and an audit of random selection of 30 jobs to review compliance regarding interview feedback and whether managers were using Oleeo, the Trust's Talent Acquisition Recruitment Platform correctly.

Fairer recruitment audit

The paper summarised the audit of recruitment practises of band 7 and above using a model piloted at Imperial College, London. The model aims to shine a light on recruitment practise, understand behaviours on the ground, and provide assurance that fair and transparent processes are in place. The findings of the audit highlight important risks for the trust in disparities in appointment outcomes for BAME candidates which are at odds with WRES, the NHS people plan and our own EDI commitments. The recommended next steps focus on five areas which are in summary training and capability, audit development, compliance and accountability, systems integration and candidate support.

Sexual safety in the workplace update

The Worker Protection (Amendment of Equality Act 2010) Act 2023 creates a duty on employers to take reasonable steps to stop sexual harassment in the workplace from colleagues and third parties. It is intended that the framework will support Boards to assure themselves against this legal duty.

The Director of Workforce and OD provided an update on the progress of the sexual safety charter, which the Trust Board signed up to in 2023. In August 2025 the NHSE sexual safety framework was published which lists best practice actions to support the delivery of the seven commitments in the Charter. A self-assessment against the framework is required and will come to Committee in November 2025 and through to the Trust Board. The Committee discussed the encouragement of all staff to participate the e-learning on sexual misconduct, and it was suggested that Board members should "road test" the e-learning package. Further consideration to including the work on Sexual Safety in the Workplace in a future Board Development Session is recommended by the Chair of the Committee.

Annual report from the Trust's Armed Forces Network

The report was commended by Committee members and the recommendation to support the Trust's progression from Silver to the Gold Defence Employer Recognition Scheme status was supported.

Annual Medical Revalidation Report

The report was presented by Dr Stephen Webb. The aim of the report was to provide assurance that patient care is being supported by fulfilling the statutory obligation of the responsible officer for the trust and that we were able to demonstrate basic compliance and continuing improvement over time. The Committee sought assurance on key areas such as the quality of the appraisal, progress on last year and that mandatory training is tested as part of this process. The report is recommended to the Trust Board.

Graduation guarantee for newly qualified nurses

In August 2025 and it just England issued an official communication outlining the governments guaranteed graduation for newly qualified nurses and midwives. The initiative aims to ensure that every graduate in England has the opportunity to apply for a role within the health and social care workforce.

The Committee received a comprehensive paper that detailed the approach being adopted at the Royal Papworth hospital to deliver against this aim. RPH has demonstrated strong alignment with the principles outlined in NHS England's request whilst also identifying opportunities to enhance predictive workforce planning optimising bank staffing and improving visibility of support mechanisms such as relocation policies.

Next steps from embedding our vision for inclusive leadership

A report was presented by the Director of Workforce and OD updating the Committee on progress following the event that took place in March 2025 where the Divisions and Directorates shared the work that they had been undertaking to share the vision and embed this into practise.

For main areas of progress were presented including line managers/leaders' development programme, the commissioning of the EDI anti racism training for managers, commissioning a development programme for staff from a BAME background and the leader's workshops on bullying. More details and progress will form part of the Board Development Workshop later this year.

Guardian of Safe Working Hours Report April to July 2025 and the Annual report

Dr Steven Preston presented both reports which are recommended to the Trust Board for approval.

Improving the working lives of doctors in training

In May 2024 the NHSE launched a set of recommendations proposed to make resident doctors feel more welcome in their working and training environment. On the 29th of August 2025 the 10-point plan to improve resident doctors working lives was published which summarises the goals of the previous policy and introduces central oversight of progress commencing with a baseline exercise against the 10 points of the plan. The baseline was submitted on the 12th of September following consultation with medical staffing, the Director of Medical Education (DME) and resident doctors. The baseline exposed that there were a number of areas where the trust is fully compliant with best practise or plans are in place. In some areas we could not demonstrate compliance one of those areas being that resident doctors have protected breaks. Another area is to improve the payroll errors which result in doctor overpayments. The Committee noted the report and the work that is ongoing to improve the working lives of doctors in training.