

Item 6.1di

People Committee

Terms of Reference

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To be read in conjunction with the following documents: Governance Manual Provider LicenceLicense NHSI-Single Oversight Framework Board Assurance Framework Risk Management Policy	
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1 Constitution and Remit

This Committee is established as an Assurance Committee of the Board of Directors of Liverpool Heart and Chest Hospital NHS Foundation Trust in order to provide the Board with assurance in respect of workforce governance. It is a Non-Executive Committee.

2 Authority

The People Committee is authorised by the Board of Directors to investigate any activity within its terms of reference. It is authorised to seek information it requires of any employee (or contractor acting on behalf of the Trust) and all employees (or contractors acting on behalf of the Trust) are directed to co-operate with any request made by the Committee.

The Committee is authorised by the Board to obtain legal advice or other independent professional advice.

The Committee is authorised to request the attendance of individuals and authorities from inside or outside of the Trust with relevant experience and expertise, where it considers this is necessary or expedient to the carrying out of its functions.

Trust Standing Orders and Standing Financial Instructions apply to the operation of the Committee.

3 Main Priority and Objective

The People Committee shall provide the Board of Directors with a means of independent and objective review of [Team LHCH at its Best Frameworkthe People Strategy](#) in line with the annual planning process.. The Committee's main priority is to review and scrutinise assurance that the Trust's strategic priorities for [attracting, developing and retaining the best staffresourcing, engagement collective and compassionate leadership, education and development, and staff wellbeing](#) are identified, implemented and monitored. Key priorities for 2018/1947/48 will be continued monitoring of the organisation's use of bank and agency against the planned reduction implementation of the recruitment map and ensure an overall improvement in learning, ~~and~~ development [and succession planning](#) across the Trust.

4 Duties and Responsibilities

The Committee will promote best practice in HR and Organisational Learning and Development and Leadership and help to identify priorities and risks on a continuing basis.

Specifically, the Committee will:

4.1 [Excellence in Compassionate and Collective Leadership](#)

- 4.1.1 Receive assurance that [Team LHCH at its Bestthe People Strategy](#) is being delivered and monitor its effectiveness in supporting the Trust's Strategic Objectives and is aligned with the Trust's Carter Plan
- 4.1.2 Receive assurance that staff engagement and satisfaction levels are improving through developed Listening into Action methodologies and recognition and reward initiatives
- 4.1.3 Receive assurance that the Equality and Inclusion Strategy is being delivered
- 4.1.4 Receive assurance reports on compliance with the Workforce NHS Constitution pledges
- 4.1.5 Receive external assurance reports from CQC and other regulatory / statutory bodies in relation to the workforce agenda and ensure that management responses / action plans are robust
- 4.1.6 Consider urgent or material matters referred to and from other Committees or Board of Directors.

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4.2 AttractResourcing

4.2.1 Review Key Workforce Performance Indicators including sickness absence, bank/agency usage and expenditure, education and development, appraisal and staff turnover and ensure agreed targets are being met

4.2.14.2.2 Receive assurance that the Trust is recruiting the right staff first time with the roll out of value based recruitment

4.2.24.2.3 Provide assurance to the Board on compliance with relevant HR legislation and best practice including doctors and nursing revalidation.

4.2.34.2.4 Review and monitor implementation of the Trust's annual workforce plans to ensure the Trust develops new roles and innovative ways of working to deliver appropriate, efficient and safe care 7 days a week

4.2.44.2.5 Monitor performance against relevant HR policies and procedures.

4.2.54.2.6 Receive an annual report on all Employee Relations activity, including the Staff Partnership Forum, ~~and~~ Local Negotiating Committee, HR/Education Group and Workforce Utilisation Group work

4.2.64.2.7 Receive reports and action plans on the requirements of new and emerging guidance from regulators and external agencies that relate to workforce

4.2.74.2.8 Receive assurance the Trust has a robust Job Planning process in place and that maximum value is being achieved.

4.3 DevelopEducation & Development

4.3.1 Review and sign off the Trust's Annual Learning Needs Analysis

4.3.2 Receive summaries of high level contractual agreements and associated risks from external agencies/bodies including HENW, HEIs and other partnerships.

4.3.3 Receive the 'Doctors in Training' annual survey and the Deanery annual visit results and monitor delivery of any action plans arising.

4.3.4 Receive assurance that all staff are receiving an effective annual appraisal and that robust succession plans and talent management processes are in place.

4.3.5 Receive assurance that the trust is providing the right education and development opportunities for all our staff to achieve their maximum potential and adhere to their professional standards.

4.3.6 Receive assurance that the trust is developing a well led workforce with the right leadership behaviours and management skills to deliver Team LHCH.

4.3.44.3.7 Receive assurance that the Trust is supporting effective organisational change to deliver our priorities and ensuring our service are sustainable

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4.4 RetainStaff Wellbeing

4.4.1 Receive the results and receive assurance against action plans in relation to the National NHS Staff Survey, Staff Friends and Family Test and other workforce satisfaction measures as agreed.

4.4.2 Receive assurance that the workforce can be its best through offering Health and Wellbeing support, flexible working options and creating a healthy workplace enabling good attendance. Receive an annual assurance from the Staff Wellbeing Group.

4.4.24.4.3 Receive assurance that staff are rewarded and recognised for their contribution and performance

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5 Risk

The Committee will consider and seek assurance in relation to any risks relating to its remit and will identify and escalate any new or emerging risks arising from its work, through the BAF reporting process.

6 Equality and Diversity

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Ensure that equality and inclusion and due consideration to the Human Rights Act are regarded in all aspects of the committee's work.

7 Membership

Three nominated Non-Executive Directors, one of whom will be the Chair and one the Vice Chair In attendance at all meetings:

Director of [Workforce Development](#)~~HR~~

Director of Nursing & Quality

Medical Director

Director of Strategic Partnerships / Chief Operating Officer

All of the above attendees to appoint a nominated Deputy who will attend in his / her absence

The Committee may invite other officers to attend meetings as required. All Board Members have a right to attend any meeting of the Committee.

8 Quorum and Frequency

In order for decisions taken by the Committee to be valid, the meeting must be quorate. The Chair or Vice Chair plus one other member of the Committee must be present at the point when any business is transacted.

The Committee will meet four times per year (quarterly).

9 Reporting

The Committee Chair will provide a BAF Key Issues Report to the Board of Directors following each meeting, along with approved minutes and an annual report, which will include a review of the Committee's Terms of Reference.

The Chair of the Committee will escalate urgent matters and exceptions to the Board and / or Audit Committee in-between meetings as deemed appropriate.

The Committee will oversee the work of and reports from the Operational Board in respect of matters set out within these terms of reference.

10 Conduct of Meetings

The Chair of the committee will be supported by the Associate Director of HR who will ensure that the appropriate processes are followed:

- Minutes and action log are accurate, comprehensive and timely
- The agenda and supporting papers are sent out to committee members 5 working days prior to the meeting, unless authorised by the Chair for exceptional circumstances
- Authors of papers presented must use the required template and adhere to BAF Policy.
- Presenters of papers can expect all committee members to have read the papers and should keep to a summary that outlines the purpose of their paper/report and key issues.
- Committee members and those in regular attendance should actively participate in discussions pertaining to the agenda, ensuring that solutions and action plans have multidisciplinary perspectives and consideration of Trust-wide impact

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