PEOPLE AND CULTURE COMMITTEE

TERMS OF REFERENCE

# CONSTITUTION

* 1. The Board of Directors has established a subcommittee of the Board known as the People and Culture Committee. It is a Non-Executive committee and has no executive powers, other than those specifically delegated in these Terms of Reference. These Terms of Reference can only be amended with the approval of the Board of Directors.

# PURPOSE

* 1. To provide strategic overview and board assurance in relation to all workforce, education, organisation and cultural development matters and identify any risks to delivery of the strategic objectives.

# OBJECTIVES

* 1. Oversee the development and implementation of the Trust’s People Strategy to include workforce, training & education, organisational and cultural development strategies, ensuring the Trust has robust plans in place to support the delivery by staff of high-quality patient care and experience in a safe, appropriate and inclusive environment aligned to the Trust’s strategic objectives.
  2. Monitor delivery against the annual strategic objectives through the agreed set of key performance indicators and provide assurance to the Board.
  3. Ensure the Trust has robust plans and forecasts to maintain safe staffing levels in all areas and is planning for workforce changes in the long-term (10 year horizon).
  4. Seek assurance that the Trust is supporting colleagues to ensure educational needs, professional development, training, wellbeing and formal appraisals are meeting and exceeding required standards.
  5. Oversee the development of a Trust-wide cultural change programme that underpins a safe environment for colleagues and patients, delivers exceptional outcomes for patients and engages staff to enable the Trust to become an employer of choice.
  6. Seek assurances that the Trust is creating a workplace that supports and rewards positive behaviours and does not tolerate negative behaviours including bullying and harassment. Ensure staff feel they have the freedom to speak up and that the Trust deals with grievances, disciplinary matters and sickness absence in a timely and professional manner.
  7. Seek assurances that the Trust is responding to national and local reports, recommendations and best practice guidelines, to optimise our workforce provision.
  8. Ensure the Trust has mechanisms in place which provides assurance of its workforce models to which encompass emerging new roles and new ways of working to support delivery of the Trust’s strategic objectives.
  9. To ensure that the Trust has appropriate pay, reward and recognition schemes that are linked to the delivery of the Trust’s strategic objectives, outcomes and desired behaviours.
  10. Regularly review workforce-related strategic risks and seek assurance that effective controls are in place to mitigate such risk. Ensure the Trust Risk Register and Board Assurance Framework is updated regularly.

3.11 Provide assurance to the Board that the Trust it is fulfilling its commitment to address inequal experiences of staff and improve representation across all groups in the Trust; including ensuring the Trust is compliant with its legal duties under the Equality Act 2010 and the Public Sector Equality Duty (PSED). This entails adhering to and effectively demonstrating mandatory reporting on equality, diversity, and inclusion (EDI), as well as implementing actions to enhance the experiences of our workforce. Specific areas of focus include, but are not limited to, the EDI High Impact Actions, Workforce Race Equality Standards, Workforce Disability Equality Standards, Equality Delivery System, and Gender Pay Gap initiatives.

* 1. Seek assurance regarding the appointment of staff and implementation of systems and services that support the delivery of the Kent and Medway Medical School.

# MEMBERSHIP AND ATTENDANCE

## Members

* 1. The Committee shall be appointed by the Board of Directors and shall comprise:
* Non – Executive Director (Chair)
* Non – Executive Director (Deputy Chair)
* Non – Executive Director
* Chief People Officer
* Deputy Chief People Officer
* Chief Nursing and Midwifery Officer
* Chief Medical Officer

## Attendance by Officers

* 1. The Committee will be open to the Trust Chair, Chief Executive, Chief Finance Officer, Executive Director of Communications and Engagement, Associate Director of Medical Education and Director of Corporate Governance to attend.
  2. Other staff may be co-opted to attend meetings as considered appropriate by the Committee on an ad hoc basis.
  3. The Chief People Officer will act as lead Executive Director for the Committee.

## Attendees

### Quorum

* 1. Business will only be conducted if the meeting is quorate. The Committee will be quorate with at least two Non-Executive Directors and One Executive Director present. If the Trust Chairman is in attendance, this will count towards the quorum.
  2. If the meeting is not quorate the meeting can progress if those present determine. However, no business shall be transacted and items requiring approval may be approved virtually by members and ratified at the subsequent meeting of the Committee.

### Attendance

* 1. The Chair and Lead Executive, or their nominated deputy, of the Committee will be expected to attend 100% of the meetings. Other Committee members will be required to attend a minimum of 80% of all meetings and be allowed to send a Deputy to one meeting per annum.

### Voting

* 1. When a vote is requested, the question shall be determined by a majority of the votes of the members present. In the event of an equality of votes, the person presiding shall have a second or casting vote.

# FREQUENCY

5.1 Meetings of the Committee shall generally be held monthly. The Chair may call additional meetings to ensure business is undertaken in a timely way.

# AUTHORITY

6.1 The Committee is authorised by the Board to investigate any activity within its terms of reference. It is authorised to seek any information it requires from any member of staff and all members of staff are directed to co-operate with any request made by the Committee.

6.2 Reference should be made as appropriate, to the Standing Orders and Standing Financial Instructions of the Trust.

6.3 The Committee may set up permanent groups or time limited working groups to deal with specific issues. Precise terms of reference for these shall be determined by the Committee. However, Board Committees are not entitled to further delegate their powers to other bodies, unless expressly authorised by the Trust Board (Standing Order 5.5 refers).

6.4 The Committee is authorised by the Board to obtain outside legal or other independent professional advice and to secure the attendance of outsiders with relevant experience if it considers this necessary or advantageous to its work.

# SERVICING ARRANGEMENTS

7.1 A member of the Board Secretariat shall attend meetings and take minutes.

7.2 Agendas and papers shall be distributed in accordance with deadlines agreed with the Committee Chair.

7.3 Members will be encouraged to comment via correspondence between meetings as appropriate.

7.4 The Committee will maintain a rolling annual work programme that will inform its agendas and seek to ensure that all duties are covered over the annual cycle. The planning of the meetings is the responsibility of the Chair.

# ACCOUNTABILITY AND REPORTING

8.1 The Committee is accountable to the Board of Directors.

8.2 Chair reports will be provided to the Board of Directors to include: Committee activity by exception; decisions made under its own delegated authority; any recommendations for decision; and any issues of significant concern.

8.3 Approved minutes will be available to the Board of Directors. Requests for copies of the minutes by a member of public or member of staff outside of the Committee membership will be considered in line with the Freedom of Information Act 2000.

# RELATIONSHIPS WITH OTHER COMMITTEES

* 1. The Committee can request minutes and reports for scrutiny from any relevant Trust committee to inform and assist its ability to fulfil these Terms of Reference.
  2. The Committee will receive escalations from the Quality and Safety Committee and Finance and Performance Committee as risks and issues relating to workforce may be identified at these meetings in respect of quality, safety and finances.

# MONITORING EFFECTIVENESS AND REVIEW

10.1 A review will be undertaken by the members on an annual basis to ensure that the terms of reference are being met and where they are not either; consideration and agreement to change the terms of reference is made or an action plan is put in place to ensure the terms of reference are met.

10.3 The terms of reference will be reviewed and approved by the Board of Directors on an annual basis.

Approved by the Board of Directors: 5 June 2025

Review Date: February 2025