

## BOARD COMMITTEE ASSURANCE REPORT TO THE BOARD OF DIRECTORS (BoD)

**Committee:** People & Culture Committee (P&CC)

Meeting date: 11 November 2025

Chair: Claudia Sykes, Non-Executive Director (NED)

Paper Author: Claudia Sykes, NED

Quorate: Yes

**Appendices: None** 

Declarations of interest made: None

Assurances received at the Committee meeting: See below

Agenda item
<b>Board Assurance</b>
Framework (BAF)
risk: recruitment
and retention

### Summary

The Committee reviewed the report from the Chief People Officer (CPO).

# Key items discussed:

Appraisals – still below the target of 80% at 74.9%. The Committee noted ongoing concern about appraisal completion. Action was being taken to move away from having a single year-end deadline to continuous monitoring of completion throughout the year – this would avoid issues where people moved jobs or started within the year and therefore fell out of the annual appraisal cycle. The deep dive report into the quality of appraisals would be discussed at the January Committee.

Staff sickness – as requested at the last Committee, the November CPO report contained benchmarking on sickness rates, with East Kent Hospitals (EKH) outliers shown in the table below:

Trust name	August Overall sickness absence	Anxiety/stress sickness absence	Musculoskeletal (MSK) sickness absence	Healthcare Support Workers (HCSW) sickness absence
EKH	4.76%	1.16%	1.14%	6.50%
Dartford & Gravesham	4.20%	0.65%	0.61%	5.92%
Maidstone & Tunbridge Wells (MTW)	4.07%	0.63%	0.60%	5.46%
Medway	4.87%	0.95%	0.78%	5.97%
Kent & Medway (K&M) Integrated Care Board (ICB) average	4.54%	0.89%	0.85%	6.02%





**NHS Foundation Trust** 

The Committee discussed the need for improved monitoring and support for people on long-term absence, and requested a deep dive report for the next Committee. Improving the Trust's sickness absence levels would not only help staff, but also reduce the need for bank staff, and improve continuity of care for patients.

It was disappointing that due to internal process confusion, it appeared that the request to fund the staff psychological therapy service - which demonstrably had helped reduce staff stress and absence - had not been presented to the CFC in October as expected, and this service had therefore ended. The CPO will follow up.

The Committee also reviewed a report on sickness absence and moral injury in the Emergency Departments (EDs). Burnout levels were reported as high, however, sickness absence was lower than expected (4.88% at Queen Elizabeth the Queen Mother Hospital (QEQM) and 3.57% at William Harvey Hospital (WHH)) and staff continued to pick up bank shifts.

### **BAF** risk: culture and values

### Staff voice

The Committee welcomed Deborah Shalders, Chair of the EDEN staff network. Global Majority staff make up 30% of the Trust workforce. Deborah reported to the Committee the following staff feedback:

- People want to be invested in, not just supported with active career planning and development opportunities.
- Global Majority staff do not always feel confident of how they can navigate the system, or political nuances within the NHS and development opportunities.
- Examples given where staff were shortlisted repeatedly but never successful in applications. No feedback given.
- Whilst welcoming Trust statements of support in difficult times (e.g. recent marches, anti-Semitism activity, natural disasters), these often felt reactive.
- Barriers appeared mainly at middle management level.

The Committee thanked Deborah for this important feedback, and discussed adopting initiatives used at other trusts to mentor and support people from Global majority backgrounds, e.g. bespoke coaching, ensuring unsuccessful candidates received feedback and targeted support.

## **BAF** risk: culture and values

**NHS Workforce** Race Equality Standard (WRES), **NHS Workforce Disability Equality** Standard (WDES) and Equality **Delivery System** (EDS)

The Committee also discussed the themes from the WRES, WDES and the EDS. These reflected the ongoing need to improve the experience of Global majority and disabled staff at the Trust, ensure fair and proportionate recruitment and development at all levels, and tackle racism and harassment. The action plan contained specific targets for the next year and subsequent years, which was welcomed and a positive change from prior years.

The Committee discussed the recent media coverage around increased incidents of racism from patients towards staff. Executives confirmed that this was a concern and something that was now being monitored. Staff were encouraged to report any incidents of discrimination from patients, and these were recorded as a Datix incident. The Trust reserved the right to exclude





	patients who made racist comments or gestures (and had examples of where this had been done already), including in the ED, and Executives were exploring how to ensure this was clearly communicated to empower staff - there was zero tolerance towards any discrimination.
BAF risk: culture and values	The Committee reviewed the FTSU Guardian report for the period from March-September 2025. Several suggestions were made about improving the
Freedom to Speak Up (FTSU)	information and structure of the report, e.g. including benchmarking and highlighting outlier areas - it appeared that Admin and Clerical staff raised a disproportionate number of FTSU cases (23 out of 81). The external FTSU Guardian team welcomed the feedback.
	The Committee was <b>ASSURED</b> of the FTSU service.
BAF risk: organisational development and resilience	The CPO updated the Committee on the workforce reductions as part of the 2025/26 Cost Improvement Plan (CIP). Good progress had been made on agency, but bank costs remained stubbornly high. Tighter grip and controls over bank had been introduced in October.
Workforce planning	The Deputy Chief Medical Officer (CMO) explained that the Medical establishment review was underway. The new rota system, Patchwork, would be going live on 4 December, and the Trust was working closely with the MTW team who also used Patchwork. This would help manage bank medical staffing. There was a need to move from job planning to service planning.
BAF risk: organisational development and resilience	The Committee had requested a report which set out all the work being done to support Trust staff with their wellbeing (including managing stress, trauma, finances etc.). The report highlighted a wide range of support available. The Committee made suggestions about evidencing the impact and return on

Other items of business: None

Wellbeing

Actions taken by the Committee within its Terms of Reference: None

Items to come back to the Committee outside its routine business cycle: None

Items referred to the BoD or another Committee for approval, decision or action: None

Item	Purpose	Date
P&CC asks the BoD to discuss and <b>NOTE</b> this P&CC Chair	Assurance	4 December 2025
Assurance Report.		

investment of these activities. The updated report would be reviewed again at the January 2026 Committee, and also shared with the Council of Governors.

