

People Committee

Terms of Reference

1. Constitution

- 1.1. The People Committee is constituted as a standing Committee of each of the University Hospitals Bristol and Weston NHS Foundation Trust Board of Directors and the North Bristol NHS Trust Board of Directors (hereafter collectively referred to as “the Boards”). The People Committee (hereafter referred to as “the Committee”) operates as Committees in Common of both Boards.
- 1.2. The Committee has no executive powers, other than those specifically delegated by the Boards in these Terms of Reference which are incorporated within the trusts’ Standing Orders.

2. Purpose

- 2.1. The Committee is responsible for assuring the Boards on matters concerning all aspects of delivery that relate to workforce supply, development and wellbeing and the delivery of education.
- 2.2. The scope of the Committee covers:
 - **Workforce:** workforce strategy and planning; workforce supply (recruitment and retention); workforce health and wellbeing; learning and development; leadership development; culture and organisational development; HR systems, policies and processes; Equality, Diversity and Inclusion (EDI); workforce engagement; Freedom to Speak Up (FTSU); and workforce risk.
 - **Education:** Group Learning and Workforce strategy and the delivery of thereof.

3. Duties

3.1. Workforce

- Receive, scrutinise, shape and approve the Trusts’ Group People Strategy.
- Ensure that the trusts have an appropriate annual workforce plan which aligns with the trusts’ broader business plan.
- Receive and scrutinise updates relating to Our People Patient First priorities.
- Monitor delivery of the trusts’ people strategy(s), ensuring that the desired outcomes are achieved.
- Monitor key performance indicators relating to workforce supply, development and wellbeing.
- Monitor and take assurance against the trusts’ approach to Equality, Diversity and Inclusion (EDI), including reviewing the trusts’ performance against nationally mandated standards and corresponding action plans.
- Ensure that cultural improvement is a priority for the trusts, and that the approach and initiatives connected to cultural improvement are effective.
- Ensure that the trusts continue to develop and embed an open and safe culture towards Speaking Up, including by receiving FTSU exception reports/ escalations.
- Receive reports and escalations from the Guardian of Safe Working Hours.
- Ensure that the trusts’ approach and initiatives connected to the promotion of staff health and wellbeing are aligned to workforce needs and embody the culture and values of the trusts.
- Ensure there is a positive and open culture to staff engagement and that there are appropriate processes in place for engaging and communicating with staff at all levels.

- To receive and review the findings of the annual National NHS Staff Survey and ensure the implementation and effectiveness of resultant action plans.

3.2. Education

- Receive, scrutinise, shape and approve the trusts' Group Learning and Workforce Development Strategy.
- Monitor delivery of the trusts' education strategy(s), ensuring that the desired outcomes are achieved.
- Monitor key performance indicators relating to education.

3.3. Review and monitor strategic risks within the Committee's area of responsibility, as set out in the Board Assurance Framework (BAF).

3.4. The Committee shall collectively undertake the statutory duties of the Non-Executive Director Champion Role related to Security Management – Violence and Aggression.

3.5. In carrying out these duties, the Committee will:

- Work collaboratively with the other Committees and on behalf of the Boards to test and seek assurance from a range of perspectives on the key risks affecting the trusts to ensure coordinated and comprehensive oversight of cross-cutting themes; and
- Work collaboratively with system partners to improve the supply and development of the whole health and care workforce in BNSSG.

4. **Membership**

4.1. Members of the Committee shall be appointed by the Boards and shall comprise:

- At least two Non-Executive Directors, one of whom shall be appointed as the Committee Chair
- The Group Chief People and Culture Officer
- The Group Chief Digital Information Officer
- The Group Chief Nursing and Improvement Officer
- The Group Formation Officer
- Group Chief Medical & Innovation Officer

4.2. Other Group Executive Directors may attend on an ad hoc basis.

4.3. In the absence of the Committee Chair and/or an appointed deputy, the remaining members present shall elect one of themselves to chair the meeting.

5. **Quorum and Attendees**

5.1. The quorum necessary for the transaction of business shall be:

- At least two Non-Executive Director
- At least two Executive Director

5.2. At the discretion of the Chair, additional representatives may be requested to attend meetings from time to time to participate in discussions or report on particular issues.

6. **Frequency**

6.1. The Committee shall meet a minimum of 6 times per annum.

6.2. Additional meetings may be called at the request of the Chair.

7. **Authority**

7.1. The Committee is authorised:

- to investigate any activity within its terms of reference.
- to seek any information required from any employee of the trusts in order to perform its duties, and to direct all employees to cooperate with any requests made by the Committee.
- to obtain, at the trusts' expense, outside legal or other professional advice on any matter within its terms of reference, and
- to call any employee to be questioned at a meeting of the Committee as and when required
- to secure the attendance of outsiders with relevant experience and expertise if it considers this necessary.

8. Meeting administration

8.1. The Trust Secretariats shall act as the secretary of the Committee.

8.2. Papers will be circulated in accordance with the trusts' Standing Orders and minutes will be circulated to all members.

9. Reporting

9.1. An exception report will be provided to the Boards via the Committee Chair – highlighting business transacted and making any recommendations as deemed appropriate within the remit of the Committee.

9.2. The Committee will conduct an annual review of its effectiveness.

Version 1.1

Date Approved: September 2025

Date of Next Review Date: September 2026