

## Appendix 5 - Provider Capability – Self Assessment Template

Domain: **People and culture**

Lead Committee: People and Organisational Development

Exec Lead – Kate Read

Self-assessment criteria <i>'The Board is satisfied that...'</i>	Indicative evidence or lines of enquiry	Trust response
<p>1. Staff feedback is used to improve the quality of care provided by the trust</p> <p style="text-align: right; font-size: small; transform: rotate(-45deg);">Ward, Emma 31/10/2025 14:22:34</p>	<ul style="list-style-type: none"> <li>Does the board look at the diversity of its staff and staff experience survey data across different teams (including trainees) to identify where there is scope for improvement?</li> </ul>	<p>The Board approved the Equality, Diversity and Inclusion Strategy and Action Plan which provides the Trust's aims and ambitions to be an inclusive and compassionate place to work and be cared for. The Action Plan is regularly reviewed by the Board.</p> <p>In addition, the Board receives and reviews a raft of statutory reporting which derive from the Equality Act 2010:</p> <p>The Public Sector Equality Duty (PSED) provides workforce and patient demographics and states key initiatives that staff have implemented to improve health inequalities for patients and staff experience.</p> <p>WRES/WDES data submissions and annual reports enable the Board to review the diversity of its workforce in each banding, staff experience in terms of recruitment and formal process, access to non-mandatory training and CPD, and data trends from the NSS EDI questions around harassment, bullying and abuse. The Board then approves a raft of actions and initiatives to be implemented to improve equality in terms of our processes and behaviours and ultimately improve staff experience and patient care. These actions include MyCareerMatters which starts with career conversations, offers of coaching, mentoring and CPD programmes to enhance promotion opportunities; reviewing recruitment and formal processes and support from Cultural Ambassadors to ensure the processes are fair and equitable; Suite of EDI training sessions for all staff to attend; Staff Network listening events; etc. Our EDI reporting and action plans include all staff including trainees.</p> <p>The Trust has a mechanism in place where the results of the NHS staff survey are fed back to the Executive Management Committee presented by a member of the staff survey co-ordination team (IQVIA). Results are broken down divisionally by the CDG and team level. An engagement plan with appropriate actions against any theme from the survey that requires focus is set for the following year for improvements. The survey data is also scrutinised according to protective characteristics for themes where there is evidence of a particular characteristic that may require additional support or improvements relating to the experience of both patients and staff. Our staff networks are instrumental in supporting within these areas. Listening sessions are held with some teams where required to drill down deeper into the staff experience. Survey data is also feedback to teams highlighting where improvements have been made from previous years, or where focus needs to be, this can be via away days or presentations at team meetings/forums.</p> <p>The Director of People and OD co-chairs the Staffside Partnership Forum each month which consists of key leads within the Trust and Staffside colleagues. Our Staffside colleagues provide a raft of collective concerns from staff which are reviewed and discussed. A Chair's Key Issues report is submitted to each Trust Board meeting</p>

<b>Self-assessment criteria</b> <i>'The Board is satisfied that...'</i>	<b>Indicative evidence or lines of enquiry</b>	<b>Trust response</b>
<div style="position: absolute; bottom: 10px; left: 10px; transform: rotate(-45deg); font-size: small;">           Ward, Emma            31/10/2025 14:22:34         </div>		<p>In addition, the EDI Staff Networks, which cover Ethnicity, disability, sexual orientation, and gender, report into the EDI Operational Group attended by Board members and senior leaders, and POD Committee on a regular basis and attend Trust Board each year to provide an update on staff experience and systemic barriers faced.</p> <p>The Board also receives regular updates from the Chairs Key Issue (CKI) from every PEECCC via the QPS Committee. The Board Sub-Committee also receives CKIs from HR Assurance, our Faculty of Education Steering Group, FTSU Steering Group and the EDI Steering Group. POD also receives CKIs from our LNC.</p> <p>In addition, we have a robust process for raising concerns through FTSU to encourage our staff to raise concerns openly, or anonymously if they prefer, safe in the knowledge they will be supported and protected if they do, to make our trust a positive and trustworthy place to work and receive care.</p> <p>The principles of speak up is to embed the Trust's values, role model speaking up and set a healthy freedom to speak up culture, make sure staff know how to speak up and feel encouraged to do so, when someone speaks up thank them, and listen and follow up. Use speaking up as an opportunity to learn and improve, identify and tackle barriers to speaking up regarding patient safety, bullying and harassment, sexual harassment and workplace safety/other issues.</p> <p>The HR Directorate provides a monthly HR Bulletin which is available to all staff and provides a raft of policies, development opportunities, raising concerns, and wellbeing initiatives and support (see attached)</p>
	<ul style="list-style-type: none"> <li>Does the board engage with staff forums to continually consider how care can be improved?</li> </ul>	<p>The Director of People and OD co-chairs the Staffside Partnership Forum each month which consists of key leads within the Trust and Staffside colleagues. Our Staffside colleagues provide a raft of collective concerns from staff which are reviewed and discussed. A Chairs Key Issues report is submitted to each Trust Board meeting.</p> <p>In addition, the EDI Staff Networks, which cover Ethnicity, disability, sexual orientation, and gender, report into the EDI Operational Group attended by Board members and senior leaders, and POD Committee on a regular basis and attend Trust Board each year to provide an update on staff experience and systemic barriers faced.</p> <p>The FTSU guardian has open access to the Board members to discuss or escalate urgent concerns. The FTSU Steering Board meets twice a year chaired by the SID where a CKI is submitted to Trust Board. Additionally, the FTSU lead, and deputy guardians submit an update at Trust Board twice per year.</p>

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	<ul style="list-style-type: none"> <li>Can the board evidence action taken in response to staff feedback?</li> </ul>	<p>Patient and Staff Experience Stories are shared throughout the year at Trust Board meetings which highlight both positive and negative outcomes and learnings to take forward. Clinical Divisional staff will attend each meeting to support the patient providing their experience and to talk through changes that have been implemented following their feedback.</p> <p>As per above, the FTSU guardian has open access to the Board members to discuss or escalate urgent concerns.</p>
<p>2. Staff have the relevant skills and capacity to undertake their roles, with training and development programmes in place at all levels</p> <p style="text-align: right; font-size: small; transform: rotate(-45deg);">Ward, Emma 31/10/2025 14:22:34</p>	<ul style="list-style-type: none"> <li>Does the trust regularly review skills at all levels across the organisation?</li> </ul>	<p>The Trust has an annual appraisal process which enables line managers to discuss with staff any training and development needs. In addition, the Trust recently implemented a 'My Career Matters' programme which again identifies gaps in skills and signposts the individual to training and development opportunities.</p> <p>For clinical staff an Annual Skills Acuity Review undertaken and reported to Board.</p> <p>A Study hub is in place to manage all requests for study leave and funding from both non-medical and medical staff. This supports staff training and development, through higher education programmes, conferences, study days, and workshops. Reporting is via the Faculty of Education.</p> <p>HCSW level 2 Apprentices are offered the opportunity to feed back on their experience through individual support meetings held by Retention Partners at week 8 of the Apprenticeship Academy Programme. Feedback is reported to the Internal Delivery Strategy and Performance Group.</p> <p>NHS organisations have a responsibility to undertake an annual comprehensive nursing and midwifery skill mix review, to ensure that there are safe and appropriate staffing levels and skill mix to provide assurance to the Board and our stakeholders that the organisation is safe and to provide high quality care.</p> <p>The annual establishment review should be "followed with a comprehensive staffing report to the board after six months to ensure workforce plans are still appropriate" (NQB 2018).</p> <p>This finalised report will be approved by the Chief Nurse and Director of Finance. It will also be taken to the People and Organisational Development Team and Executive Management Committee prior to Trust Board.</p> <p>The Trust has a My Careers Matters programme, comprehensive apprenticeship programme which highlight opportunities for staff to develop their skills and match these to roles across the organisation. Excellent relationships are developed with Higher and Further education institutions locally to support placements, volunteering opportunities and an academy approach to education into employment.</p>

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	<ul style="list-style-type: none"> <li>Does the board see and, if necessary, act on levels of compliance with mandatory training?</li> </ul>	<p>Full transparency of mandatory training is monitored via, CDGs, DMTs, and DAM meetings.</p> <p>The Trust has a full programme of leadership programmes available to staff to support development in this area. These are available to all bands where line management responsibility is noted. Apprenticeships are used widely to support development, with paid study time provided as a mandatory element of the programme. None of it is mandatory.</p> <p>The Trust has a compliance target for mandatory training of 90%, which is exceeded. Trust compliance is reported monthly via the Accountability Framework. Divisional compliance is reviewed at DAM meetings.</p> <p>The Mandatory and Role Essential steering group monitors compliance, and reviews applications for new subjects to be added to the training matrix.</p>
3. Staff can express concerns in an open and constructive environment	<ul style="list-style-type: none"> <li>Does the board engage effectively with information received via Freedom To Speak Up (FTSU) channels, using it to improve quality of care and staff experience?</li> </ul>	<p>The Freedom to Speak Up Guardian reports six monthly to both the People and Organisational Development committee and to the Main Board. In between these reports the Senior Independent Director chairs the Raising Concerns Steering group where policy is scrutinised and future ways to improve quality and staff experience are discussed. The most recent board report is attached.</p> <p>The Trust promotes a range of way to ensure there is learning from concerns raised. The Trust has a full After-Action Review process, learning from deaths, freedom to speak up, well being MDT, TRIM, the use of feedback from our chaplaincy team. The HRD has 1:1 meetings with the Chaplain and Clinical Psychologist and the FTSU Guardian.</p>
Ward, Emma 31/10/2025 14:22:34	<ul style="list-style-type: none"> <li>Are all complaints treated as serious and do complex complaints receive senior oversight and attention, including executive level intervention when required?</li> </ul>	<p>Staff are able to raise formal complaints in accordance with the Trust's Grievance Policy, which sets out a structured and transparent process for resolution with a strong emphasis on early informal resolution where possible. All complaints are treated with seriousness and assessed in line with policy requirements. A case management record system is maintained for all complaints, capturing actions taken, timeliness, and outcomes, thereby ensuring accountability and an auditable trail. Targeted training is provided for managers responsible for handling complaints to ensure consistency in the application of the Grievance Policy, and the Trust is committed to increasing uptake of this training across all services. Case numbers, categories and timescales are reported to the Board on a monthly basis, providing assurance on governance, oversight, and emerging risks, as well as informing learning and continuous improvement across the Trust.</p> <p>In addition, complaints of a complex nature are subject to senior oversight. These cases are reviewed at weekly Complex MDT meetings, where executive-level management are in attendance and provide direct intervention when required. This process</p>

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	<ul style="list-style-type: none"> <li>Is there a clear and streamlined FTSU process for staff and are FTSU concerns visibly addressed, providing assurance to any others with similar concerns?</li> </ul>	<p>There is a clear process that is outlined to all staff on induction including all FY1 Doctors and Consultants. The process is included within the FTSU trust intranet page, on a series of posters and different staff groups are regularly updated at additional training events. Other staff including Wellbeing Ambassadors are trained to signpost those with concerns to the FTSU service.</p>
	<ul style="list-style-type: none"> <li>Is there a safe reporting culture throughout the organisation? How does the board know?</li> </ul>	<p>The Trust's FTSU Policy and Raising Concerns Guide which confirms the Trust's ethos around encouraging staff to raise a concern safe in the knowledge that they will be supported and guided through the process. It provides the various routes to raise a concern (see evidence of Speaking Up posters erected across each site), the process and wellbeing support provision. All leads of the various routes to Speak Up meet each month for a Wellbeing MDT to pull through common themes which are raised at the monthly OD Focus sessions, chaired by the Director of People &amp; OD and escalated to Board if/when appropriate.</p> <p>Our EDI Team, FTSU and Staff Networks have secure email addresses where staff can raise concerns in a confidential and safe space. In addition, Datix incidents and Purple Flag initiative are taken forward with the relevant teams to address incidents reported. The Purple Flag concerns received are reported to Board.</p> <p>The Freedom to Speak Up Guardian reports six monthly to both the People and Organisational Development committee and also to the Main Board.</p> <p>In addition, within the autumn report to the board the FTSU Self-reflection tool is revised and audited. This report is jointly written by the Wellbeing Guardian and the Director of People and reviews the reporting culture from a raising concerns perspective. A copy of the Self review tool is attached.</p>
	<ul style="list-style-type: none"> <li>Is the trust an outlier on staff surveys across peers?</li> </ul>	<p>This response is based on comparisons of ESNEFT national staff survey results with how we compare nationally to the acute and acute and community trust sector category managed by IQVIA (our survey provider), there are 65 Trusts included in this sector. For noting IQVIA is the biggest survey data supplier. Currently we cannot make comparisons to our peers as outlined in the NHS Oversight Framework as we are still waiting for them to be announced/confirmed.</p>

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		<p>Theme: We each have a voice that counts. Sub theme People Promise 3, Raising Concerns.</p> <p>There are 4 questions that sit under this sub theme as shown in table 1, two of these relate to 'staff can express concerns in an open and constructive environment'. Q20a relating to staff feeling safe and secure to raise a concern about unsafe clinical practise and Q25e I feel safe to speak up about anything that concerns me in this organisation, were not statistically significantly different when compared to our sector comparators. Our overall score for the theme Raising Concerns is significantly worse against the sector score, 6.33 against 6.42, with the score being affected by Q20b and 25f .</p> <p>Steps that the Trust is taking to improve these scores is managing expectations of when a concern is raised, which is dependent on the subject and situation. Improving the communication and closing the feedback loop, making sure in every incident that staff members raise, they are given some kind of feedback. As a Trust we recognise that continued improvement on staff confidence to raise concerns, as well as providing increasing opportunities to learn from best and excellent practice. (In accordance with Safety II national programme) We have trained all senior leaders in Speak Up culture and have provided a series of 'TED' talks which all staff can access. 1000 fresh eyes conversations, together with team listening events and the use of 200 wellbeing ambassadors is contributing to increased opportunity and confidence for staff in speaking up.</p>

**Additional narrative:**

*A recent training programme has been put in place for all Trust Ambassadors who will have an extensive training session concentrating on how and when to 'post box' individuals with concerns to the FTSU system. We intend to re-promote the TED talks as part of FTSU Month and to continue to ensure that our leadership development programmes have the importance of raising concerns embedded throughout. We are currently making a series of short informal videos ("Ask Anything") that will further spread the message, and we will continue with our regular (and sometimes ad hoc) training delivered to small groups such as trainee physiotherapists, HCAs and other specialities whilst building on our current work with resident doctors and Consultants.*

*A particular focus in the coming year will be to look at the nine protected characteristics and in particular look at those who are least likely to come forward. Simultaneously we intend to look at support to line managers in dealing with concerns. Finally, we have an aspiration to establish further Assistant Guardians in our satellite sites.*