

Key Issues Report Issues for referral to reporting Committee/Group

Originating Committee/Group and meeting date:	People and Organisational Development Committee – 15 January 2026
Chair:	Karen Sinnott, Non-Executive Director
Lead Executive Director (as appropriate):	Kate Read, Chief People Officer

Subject	Details of Issue	Action*
Assurance Reports	<p>The Board Assurance Framework was received, and the dynamic nature praised. One strategic risk, BAF5 regarding workforce, was aligned to the committee. Additional assurances relating to the Sexual Safety Charter and Unison Anti-Racism Charter (approved by the Board in January 2026) added been recorded. The committee noted that the regional and national landscape / structure changes were described on BAF1, regarding transformation, which is reported to the Board. It was recognised that it would be beneficial to cross reference relevant detail on BAF5.</p> <p>The Chief People Officer provided an update on emergent and topical issues:</p> <ul style="list-style-type: none"> • The next Agenda for Change (AfC) pay award is expected to be 3–3.5%, with a formal announcement due late January or early February; medical, dental and VSM staff will have different arrangements. • Promotion processes and pay progression following promotion are expected to receive increased focus after the next pay deal. • Pay arrangements for apprentices and unsocial hours are currently under review. • A new 10-year workforce and training plan has been outlined in Parliament, aiming to address long-standing challenges in strategic workforce forecasting. • Significant workforce reform is underway, and organisations are encouraged to stay aligned with NHSE guidance. • National messaging emphasises that staff retention remains a priority. • Positive news from Scotland regarding resolution of resident doctor industrial action. 	Assurance

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	<p>The Director highlighted key elements of the month 6 workforce performance report under each of the strategic pillars. The vacancy rate was 3%, below the 4% target. Overall turnover was 5.98%, although nursing turnover is lower at 4.56%. This continues to be a strong position for the Trust and remains better than many model-hospital comparators.</p> <p>Education performance remains strong across mandatory training, apprenticeships and work-experience initiatives, all of which support the organisation’s wider commitments as an anchor institution. The wellbeing programme continues to grow, with 114 wellbeing ambassadors and significant signposting is underway around stress, anxiety and depression. Over recent weeks cold and flu cases have overtaken mental-health-related absences, contributing to a rise in sickness rates. Early January saw sickness levels above 700, though this has now begun to fall. Work is ongoing to support EDI priorities, including addressing challenges related to supporting transgender colleagues and responding to external social media commentary. Work continues with the LGBTQI+ Staff Network. The Trust now has 19 cultural ambassadors, close to the target of 20, and a range of other training and development programmes .</p> <p>The “HR Helper” chat-assistant was launched in December, with further promotion ongoing. This supports all colleagues by providing answers to quick questions and signposting where necessary.</p> <p>Employee relations activity remains high, with a substantial number of current cases. In addition to the formal cases reported, the Trust is managing a further 54 informal cases.</p> <p>The Deputy Chief People Officer presented an update on the themes emerging from the implementation of Epic, focusing on the impact on admin and clerical roles, and the approach to delivering the planned efficiencies whilst retaining a skilled workforce. A tailored organisational change process has been created, aligned with Trust policies and values, to support staff through the transition. All 956 Band 2 to 4 admin and clerical staff were assessed and assigned to one of three categories, where administrative tasks will move to electronic systems, reducing manual work. Communications have been prioritised, with a detailed and regularly reviewed plan shaped by feedback from HR business partners, divisions, and unions. Well-being support is available to all staff, including one-to-one psychological sessions, navigating change webinars and workshops, and bespoke literature regarding the emotional impact of change.</p>	Alert
Fair and Inclusive Workplace	<p>The Gender Pay Gap Annual report was presented. Employers are required to publish their data annually, on both their own and on the government’s websites, with a subsequent Action Plan to support and develop a set of measurable actions to tackle any pay gaps. The following areas were highlighted:</p> <ul style="list-style-type: none"> • Gender breakdown: 23% men and 77% women 	Escalation

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	<p>gender pay gap requirements, and the operational implications of the legal definition of 'woman'. National bodies like the NMC are undertaking similar cultural change work, providing helpful comparisons. The committee noted that people and patients speak-up to people who look like them.</p> <p>The committee acknowledged the leadership and input provided by the Non-Executive Director, Chair EDI Strategic Reference Group, and thanked him for his achievements and support he has provided.</p>	
General Medical Council (GMC) Survey	<p>The GMC survey was presented; it was the first year that the GMC had recongised ESNEFT as a single organisation for the pruposes of the national training survey. Previous surveys split results across Ipswich, Colchester and earlier configurations, which made it difficult to identify exactly where issues were occurring. The 2025 dataset provides a clearer picture, with Trust wide results and the ability to break them down by site where response numbers allow. The results represent a snapshot of early 2025, specifically the second rotation of the training year. Positive movement has been seen in surgery, historically an area of concern. . Overall, ESNEFT benchmarks similarly to, or slightly better than, organisations of comparable size in the region. Some standout achievements include ophthalmology being rated the best in England for handover and obstetrics and gynaecology F1 achieving the top national rating for educational governance, alongside a number of other programmes ranking within the top 4-5 nationally.</p> <p>The Committee noted that the survey is now being triangulated with the staff survey and patient safety information to build a better understanding of training and quality risks and any necessary actions for improvement.</p>	Assurance

*Key:		Approval	Positive action required regarding an item of business or support for a decision
Escalation	Support/decision required by reporting committee to resolve an issue within its remit	Alert	Proactive notification of subject matter/risk that reporting committee is currently dealing with or mitigating which may require future action/decision
Assurance	Evidence or information to demonstrate that appropriate action is being taken within a reporting committee's remit	Information	No action required. Reporting to update on discussion within a reporting committee's remit