



Report Title	People and Organisational Development Highlight Report		
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Previous committees/groups	People Committee 6 May 2025 Trust Executive Group 7 May 2025		
Recommended action(s)	The Trust Board are asked to note the contents of the paper.		
Purpose of the paper	The report provides a brief overview of the highlights, lowlights, and risks within the services in the People Directorate. The paper aims to update the Trust Board on key successes and outcomes and current/future projects.		
Executive Summary			
<p>The report provides a brief overview of the highlights, lowlights, and risks within the services in the People Directorate.</p> <p>The paper aims to update the Trust Board on key successes and outcomes and current/future projects.</p>			
Recommendation(s)	The Trust Board are asked to note the contents of the paper.		
Link to Board Assurance Framework Risks (board and level 2 committees only)	6. Develop and sustain an open and positive workplace culture. 7. Support staff health and well-being effectively. 8. Deliver and sustain improvements in recruitment and retention. 9. Develop and sustain improvements in leadership and staff training and development.		

People Directorate Highlight Report

Highlights	Lowlights
<ul style="list-style-type: none"> • Recruitment: 2024/25 A&E core workforce trajectories were delivered successfully with a 96% occupancy rate across ASW, ACA and Paramedic cohorts. Strong pipeline for core A&E roles in place – 163 ASWs and 114 Paramedics progressing through latter stages of recruitment process as at mid-April. • International Recruitment: 2024/2025 saw the third consecutive year of successful international recruitment efforts, welcoming 16 Newly Qualified Paramedics from Australia and New Zealand, all of whom have been successfully placed in Hull. This brings the total number of internationally recruited Paramedics over the past three years to 80. The final cohort of international recruits, 10 Paramedics, will join the organisation on 16 May. • Turnover is showing a decreasing trend overall from 9.7% in January 2025 to 9.4% in March 2025. IUC reduced from 32.2% to 25.7%, EOC reduced from 20.9% to 18.1%. A&E 5.8% now and PTS 9.4%. The Ambulance average turnover is 12.5% (February 2025), hence YAS compares well. • Fit and Proper Person Audit: In accordance with our safeguarding responsibilities, the Trust ensures full compliance with the NHS Employment Checking Standards for all appointments. We are also committed to meeting the requirements of the Fit and Proper Persons testing process and apply this rigorously. The results of our recent audit demonstrate this commitment, having received significant assurance in recognition of our robust processes. • Sexual Safety Charter: A sub-group of the task & finish group completed the initial Learning Needs Analysis, Bystander/Upstander training observed at West Yorkshire Police, 'Let's Talk Sexual Safety' campaign converted to screen savers with additional signposting to support offer, NHS England 'Understanding Sexual misconduct in the workplace' eLearning mandatory for all staff, Avoidable Harm workstream has dotted line link in – see separate bullet point below. TASC launched Sexual Safety Support Service, Domestic Abuse awareness campaign. • Inclusive Recruitment Review: regular workstream meetings concluded as part of Phase 1 for the 5 identified roles: 	<ul style="list-style-type: none"> • Sickness Absence: the Trust sickness rate at March 2025 is 7.3%% with 3.1% short-term sickness and 4.2% long-term absence (end of December rates were 9.18% with 4.26% short-term sickness and 4.92% long-term absence). This is significantly above target (5%) and higher than previous years (6.5% in February 2024). This is also higher than the average for ambulance services 6.9% (February 2025). For long-term absence Stress / Anxiety / Depression/other psychiatric illness continues to be the highest reason for long term absence. There are specific mental health interventions within the 2025/26 Health and Wellbeing plan. • The OEG Absence Group is reviewing the membership of the group to ensure influence at the most appropriate stages of absence and leadership support. The group have a draft plan of 10 core focussed interventions for the coming year. These include local plans for Directorates to be held accountable for absence/action, Avoidance of Harm agenda, Workplace adjustments, HR case (new ER management system) and person-centred support. • Occupational Health: spend exceeded the allocated budget. The bulk of this was driven by the costs associated with 'did not attend' and 'short notice cancellations', and the high number of referrals. Support for managers will continue however the challenge remains with consistency in engagement across all areas with use of such services being seen as a first point of action than the last. • Employee Relations: Casework remains high. Securing Investigating Officers remains a challenge despite training 60 people in January. More training planned with a specific target audience of corporate services areas. Emerging themes of areas for improvement are application of process without compassion, impact of third party engagement, technical terminology and logistical issues relating to inadequate estate. • Mediation: We face challenges with employees seeing this as a feasible option to help address workplace issues, and in accessing trained mediators. • Apprentice progress Learners Past Planned End Date (PPED) (target below15%) – There continues to be an increasing trend in

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<ul style="list-style-type: none"> ○ Job Description (Workstream 1): Workstream 1: fully completed, JD's have been reviewed using the Inclusivity Checker on Word and any bias identified removed. Recruitment managers for each of the roles have submitted a 'day in the life of' supplementary document. This document will go out with the JD/advert and uploaded on to the recruitment page on the YAS website. ○ Application Process (Workstream 2): Options for alternative application types and processes identified with recommendations for implementation. ○ Marketing and Advertisement (Workstream 3): Options for inclusive recruitment marketing and attraction identified. ○ Phase 1 review complete, report with recommendations submitted to the YAS Together Programme Group. ○ Next Steps: Upon approval the report will be shared with Finance/Remote Patient Care to implement recommendations. ● Veteran Aware Status: Veterans Covenant Healthcare Alliance (VCHA) offers the NHS Veteran Aware accreditation programme designed to support healthcare providers understand and meet the needs of the Armed Forces community. The Trust's reaccreditation was submitted in March 2025 (every 3 years) with good progress towards actions since signing the pledge in 2021. The Trust was reaccredited in April 2025 as Veteran Aware. ● Allyship Campaign: campaign launched on 08 April on Team Brief. Support Networks video outlining the importance of allyship introduced, launched new online training module on YAS 24/7. To ensure widespread awareness, a poster will be distributed across all YAS sites to highlight the campaign. Further planning with Leadership & OD is ongoing to embed Allyship into Say YES to Respect and other relevant workstreams such as Compassionate & Inclusive Conversations. ● Anti Racism Framework: following a supportive discussion with the Board, development of the Anti-Racism Charter is underway in collaboration with the Race Equality Network, Safeguarding, and Corporate Communications. An e-learning package will be available on YAS 24/7, and an anti-racism and anti-discrimination statement will be published to launch the charter from June 2025. 	<p>Associate Ambulance Practitioners (AAP) going PPED; 36% AAP PPED (35% Dec 24). The Ambulance Support Workers (ASW) are managed or below 15% threshold (15% end of March). A number of actions and interventions to manage this increasing trend include, BI dashboard of individual apprentice performance against expected completion, use of alternative duties staff to contact apprentices and enable portfolio and assessment completion, mock ESFA (Education and Skills Funding Agency) audit identified good areas of practice and risks to compliance, apprentice survey to better understand challenges to completion, standing agenda item at Heads of Ops meetings to review data and actions, and revisions to terms and conditions in collaboration with trade unions.</p> <ul style="list-style-type: none"> ● Appraisal and Career Conversations: compliance rate at 71.9% (24 April 2025) from 73.7% at end of Mar 24 (target is 90%). The figures showing on the YAS BI Portal dashboard are currently not showing accurate figures. The development of the online appraisals and career conversation and the Robotic Process Automation to update ESR records, accurate reporting will be available from May 2025. ● Essential Learning: steadily declining trend of essential learning compliance, now below the 90% target rate at 87.7% (Mar 25 IPR) with only Corporate and PTS above 90%. ● Seasonal Vaccination plan for flu concluded in February 2025 with an uptake of 34.8% amongst our frontline staff. This trend is generally in line with the sector. A total of 222 clinics were advertised with further pop-up clinics at Emergency Departments and stations across the region. Evaluation and learning complete with 2025/26 planning due to start shortly. ● Disability Pay Gap: For the 2023/24 period, our pay gap analysis indicates that the average (mean) pay gap favours non-disabled staff, who earn more on average compared to Disabled staff. Specifically, non-disabled staff earn an average of £18.56, while Disabled staff earn £18.28, resulting in a difference of £0.28 and a pay gap of 1.52%. The average median pay gap also favours non-disabled staff. The median pay for non-disabled staff is £16.47, compared to £15.86 for Disabled staff, representing a difference of £0.61 and a pay gap of 3.71%.

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<ul style="list-style-type: none"> • Health & Wellbeing: year-end position against the Trust Health and Wellbeing Plan has been positive. From the eleven approved priorities, eight finished the year in green (on-track/complete) with three in amber (work in progress). Work on the latter three will continue into 2025/26. Approvals process successfully completed for the 2025/26 Health and Wellbeing Plan (9 priorities) supported by two sub-plans focused on mental wellbeing and OH services engagement and awareness. Several off-plan initiatives also supported during the period. Positive increase in the 2024 NHS Staff Survey scores against health and wellbeing. Morale score increased to 5.9, with 53% of respondents feeling that YAS takes positive action on health and wellbeing. Service line engagement with the Health and Wellbeing Team has seen some improvements, particularly within the call centres. • Avoidable employee harm through investigations: This work relates to ensuring staff who are subject to or involved in employee relations processes have sufficient welfare support to ensure they are not psychologically harmed as a result of their involvement; whether as the subject or as a witness. National training has been completed and a Task and Finish Group established. Evidence-based model, developed by NHS Wales, being used that focuses on looking after our people and the process. This work is a priority, hence is a key feature on the 2025/26 sickness absence reduction plan. • Appraisal and Career Conversations (Senior Leadership Community) appraisal and career conversation window is currently open from 01.04.25 to the 30.06.25 utilising the new online appraisal and career conversation tool. Compliance will be reported once the Robotic Process Automation (RPA) is in place by the end of April 2025. 	<ul style="list-style-type: none"> • Ethnicity Pay Gap: For the 2023/24 period, our pay gap analysis reveals that the average (mean) pay gap favours White staff, with White staff earning more, on average, than BME staff. White staff receive an average pay of £18.60 compared to £17.39 for BME staff, resulting in a difference of £1.21 and a pay gap of 6.53%. The average median pay gap also favours White staff. The median pay for White staff stands at £16.51, while for BME staff it is £15.65, creating a gap of £0.86, which equates to 5.20%. • National Living (Minimum) Wage (NLW): On 1 April 2025, the rate increased to £12.21 from £11.44. This placed all Band 2 staff under NLW as the rate was £12.08. NHS England awarded a temporary advance to Band 2 (£12.36) and Band 3 (£12.59) to ensure compliance with the NLW and to maintain differential between B2 and B3. On running April payroll, despite the uplift, 98 staff fell below NLW due to salary sacrifice (cars & bikes) and repaying C1 training fees. The Trust extended terms for most staff, however, 19 staff were paid top-ups to ensure compliance. This matter remains a rating of 12 on the corporate risk register.

Key Issues/Risks to Address	Actions Implemented	Further Actions to be Undertaken
Ensure compliance with National Living (Minimum) Wage in advance of 2025/26 NHS pay award.	<ul style="list-style-type: none"> • NHS England have uplifted B2 and B3 wage to ensure compliance. 	<ul style="list-style-type: none"> • Continue to monitor number of staff who fall below NLW. • Review agreements for staff who required monthly top-up to hourly rate.

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	<ul style="list-style-type: none"> Extended terms for staff who already hold a salary sacrifice agreement that takes their hourly rate below NLW. Ensured no further agreements for staff who would breach NLW are issued. Assessed that all current agreements that require top up end by November 2025. 	
Over-reliance on Occupational Health provision and the continued high number of ' did not attend ' and ' short notice cancellations ' resulting in budget overspend. (risk).	<ul style="list-style-type: none"> Occupational Health engagement and awareness sub-plan approved and joint delivery with Optima Health started. Departmental chargebacks introduced. 	<ul style="list-style-type: none"> Planning, approval and implementation of the pilot internal immunisations programme for new starters (as per priority on the 2025/26 Health and Wellbeing Plan). Continued efforts to secure engagement across key service lines. Escalate where appropriate.
Number of AAP apprentices past their planned end date above the 15% threshold monitored by the Education and Skills Funding Agency (currently 36%) resulting in workforce not progressing through the pipeline and financial risk of levy clawback.	<ul style="list-style-type: none"> YAS Academy Apprenticeships Team resource requirements built into Training Plan 25/26. BI dashboard of individual apprentice performance against expected completion Use of alternative duties staff to contact apprentices and enable portfolio and assessment completion Apprentice survey to better understand challenges to completion. Standing agenda item at Heads of Ops meetings to review data and actions Revisions to terms and conditions in collaboration with trade unions. 	<ul style="list-style-type: none"> Analyse survey data to better understand the multiple causes and possible solutions for the number of AAPs past their planned end date building on the good practice of the ASW. Onboarding of new Awarding Organisation in readiness for autumn registrations and streamlined assessment.