

Report Title	People and Organisational Development Highlight Report
Author	Suzanne Hartshorne, Deputy Director of People and Organisational Development Dawn Adams, Associate Director of People Development
Accountable Director	Mandy Wilcock, Director of People and Organisational Development
Previous committees/groups	People Committee 20 January 2026
Recommended action(s) (assurance, approval, information)	Information/Assurance
Purpose of the paper	The report provides a brief overview of the highlights, lowlights, and risks within the services in the People Directorate.
Executive Summary	
<p>The report highlights progress and challenges across four key Board Assurance Framework risks: workplace culture, staff wellbeing, recruitment and retention, and leadership and development.</p> <p>Cultural improvement continues, supported by a record 66% NHS Staff Survey response rate and the launch of the YAS Culture Dashboard, which enables managers to act on staff experience insights. Work on sexual safety has strengthened reporting confidence, while the Bystander to Upstander campaign aims to embed respectful behaviours and reinforce expectations.</p> <p>Staff wellbeing efforts show mixed results. Flu vaccination uptake has increased significantly, and reforms to Occupational Health have delivered substantial cost reductions and improved referral quality. However, sickness absence has risen to 9.3%, prompting detailed analysis to shape a focused 2026/27 wellbeing and absence reduction plan.</p> <p>Recruitment and retention performance remains generally strong, with stable turnover and improved pipelines for key clinical roles. Work is ongoing to refine paramedic recruitment, extend apprenticeship programmes and strengthen the management of bank staff. Job Evaluation activity is also underway to ensure nursing and midwifery roles remain current and aligned with national profiles.</p> <p>Leadership and training developments include alignment to the NHS Management and Leadership Framework, improvements to the appraisal process, and strengthened governance of statutory and mandatory learning. Apprenticeship levy changes present financial risk requiring mitigation.</p> <p>Overall, progress is evident across multiple areas, though sickness absence and training timeliness remain key concerns.</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)	<ol style="list-style-type: none"> 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 and Organisational Development Highlight Report

1.0 INTRODUCTION

- 1.1 This paper updates the Trust Board on the key achievements and ongoing work of the People and Organisational Development (OD) Directorate, focusing on mitigating four principal risks from the Board Assurance Framework: workplace culture, staff health and well-being, recruitment and retention, and leadership and training.
- 1.2 The Directorate's efforts are wide-ranging, aiming to support the Trust's strategic ambitions, YAS Together and the NHS People Plan by fostering a positive work culture, supporting staff well-being, ensuring robust recruitment and retention, and enhancing leadership and training.
- 1.3 The Trust Board are asked to note the contents of the paper.

2.0 BACKGROUND

- 2.1 The NHS People Plan sets out the agenda, which supports how the NHS workforce can enable improvement of the patient experience. The Trust Strategy 'Great Care, Great People, Great Partner' supports the NHS People Plan and has a bold ambition 'Our People', that guides our work locally.
- 2.2 The above two plans guide the work the People and Organisational Development Directorate as well as the day-to-day operations of managing a workforce within the Ambulance Service.
- 2.3 The Board Assurance Framework also sets out four key risks concerning the Our People bold ambition; hence the Directorate work is directed to be able to mitigate and resolve these. The four risks are:
 - #6 Ability to develop and sustain an open and positive workplace culture.
 - #7 Ability to support staff health and well-being effectively.
 - #8 Ability to deliver and sustain improvements in recruitment and retention.
 - #9 Ability to deliver and sustain improvements in leadership and staff training and development.

3.0 PEOPLE AND ORGANISATIONAL DEVELOPMENT DIRECTORATE HIGHLIGHTS

- 3.1 The following sets out the key highlights of the directorate's work to mitigate and reduce the BAF risks.

#6 Ability to develop and sustain an open and positive workplace culture.

- **NHS National Staff Survey** was conducted from 6 October to 28 November 2025, achieving a strong 66% response rate (47% in 2024). This is the highest response rate ever recorded for YAS and is one of the top results in sector. This level of engagement and participation provides a robust and representative dataset for understanding views and experiences of the YAS Voice. This year's survey, in response to feedback, saw the introduction of individual and team-based incentives and the opportunity for one person to win one week's annual leave. Results start to be received early in Q4 with embargo arrangements in place until March 2026 (specific date to be confirmed).

- **YAS Culture Dashboard live** (9 January 2026) on the Business Intelligence (BI) Portal providing a transparent, data-driven tool designed to enable Team Leaders and Managers to better understand the staff experience metrics across their teams and turn insights into action. It is built around the five YAS Together pillars and brings key cultural indicators together in one place, including specific insights from the NHS Staff Survey. A supporting guide and bite sized learning resources are available to enable managers to optimise the use of this tool.
- **Sexual Safety:** The Charter has been in place for over 2 years. The NHS England 'Understanding Sexual Misconduct in the Workplace' locally mandated eLearning compliance is at 89.55%. The implementation of the training and communication strategy, including the 'Let's Talk Sexual Safety' campaign, has been a factor in the increased number of reported cases (28 cases). This suggests that staff members have greater confidence that their concerns will be appropriately addressed. Future work includes communicating a summary of cases outcomes, numbers of staff dismissed and stronger messages regarding behavioural tolerance levels. The HR Business Partnering team now review all sexual safety case outcomes quarterly to review lessons learned and to check consistency and proportionality of outcomes are in line with the Trust's strategic vision.
- **Employee Relations:** Casework levels have started to decrease with now 28 open disciplinary cases at end of December 2025. The Community of Practice (CoP) is very much in its infancy but provides a confidential, supportive, and structured forum to strengthen organisational capability, consistency, and confidence in managing sexual safety and disciplinary cases. It aims to enable shared learning, emotional support, reflective practice, and the continuous improvement of approaches in line with Trust values and behavioural frameworks. There has been a significant rise in the number of Employment Tribunals in this period, which reflects the complexity of this work. The People and Culture Group monitors this work.
- **Bystander to Upstander** working group established to deliver a behavioural campaign (foundation of kindness and respect values and the YAS Behavioural Framework) setting clear expectations that *all* staff are responsible for calling out and challenging unwanted behaviour. The campaign is being supported by a suite of materials; campaign statement and a set of guidelines for staff aligned to the behavioural framework, manager guidance, case studies, videos, posters, screensavers and targeted communications, all designed to reinforce consistent behaviours in day-to-day practice. With a phased launch planned from February, culture and dignity at work metrics will provide assurance on uptake and impact.
- **Equality Impact Assessment (EIA) Internal Audit** reported with limited assurance. A quality improvement initiative was already underway in collaboration with the QI Team, and this audit was selected to help inform the priorities. This includes alignment with the Quality Impact Assessment. EIA Taskforce established with external training provided. Current EIA process mapped in partnership with Business Intelligence team, to re-design the EIA Form and Tracking process, including opportunities for automation. A screening tool has been implemented, and audit trail where it determined that no EIA is required.

#7 Ability to support staff health and well-being effectively.

- **Flu Vaccination Programme** ran from 1 October to 12 December 2025 (vaccinations upon request continued thereafter). 46.3% of frontline workers were vaccinated, exceeding the NHS England 5% improvement from the 2024/25 baseline

(34.5%). Open to all staff and offered through easily accessible clinics held across the region, engagement was encouraged by a £10 incentive voucher scheme. Recruitment of a dedicated local vaccination team via expressions of interest and the vaccine register played a critical role in the increased uptake. Learning from this delivery will inform future planning.

- **2026/27 Health & Wellbeing Plan:** Engagement with key stakeholders via the Health & Wellbeing Group has informed the proposed priorities for 2026/27. The key focus of the plan is on reducing sickness absence, fit for purpose occupational health service and a reduction in harm caused through musculoskeletal injuries. The plan is progressing through the governance approval stages following approval from the People and Culture Group on 18 December 2025.
- **Sickness Absence:** The Trust sickness rate deteriorated significantly from 7.7% to 9.3% in December 2025 which is well-above the Trust threshold of 5% and the target of 6.58%. This is concerning as increasing absence can affect Trust patient activities/patient safety. Given the risks, this will be one of the three Trust priorities for 2026/27 business plan. Working in partnership with the Quality Improvement and Business Intelligence teams, data analysis of 12 data sources has taken place to understand trends and themes that could be underlying reasons for sickness absence, which will inform development of the 2026/27 work plan. The initial data and outline plan was presented to the People Committee on 20 January 2025, with ongoing progress monitored by the People and Culture Group.
- **Occupational Health:** visible improvement to making quality and appropriate Occupational Health (OH) referrals seen, with work continuing to strengthen further as pockets of historical practice remain. This positive shift is supporting improvements to staff wellbeing and increasing manager confidence has contributed to cost savings across the OH contract. The impact is a 33% cost reduction (£178,899), with spending dropping from £540,008 for the nine months of 2024/25 to £361,109 for the same period in 2025/26. (NB: a reduction in workforce recruitment during the period has also contributed). £29,556K cost savings were attributed to reduction in 'did not attend' appointments and 'short notice cancellations'. Further efficiencies, and the implementation of an enhanced OH service delivery model, in readiness for 2027/28 will be explored further through the development of a full business case, which was approved to proceed at Trust Executive Group in December 2025.

#8 Ability to deliver and sustain improvements in recruitment and retention.

- **Recruitment and retention:** Recruitment continues to be robust for Remote Patient Care, as well as for Ambulance Support Worker (ASW) and Paramedic training programmes. Trust turnover is stable at 8.4% in December 2025, improved from 9.7% in December 2024 due to targeted interventions in high-turnover areas such as EOC (11.9%) over the past year. While IUC turnover remains high at 22.6%, this figure has improved from 29.1% since January 2025 remaining an area of ongoing concern, requiring further attention. These efforts are designed to ensure the Trust maintains sufficient capacity and capability across all staff groups to deliver quality patient care.
- **Review of External Paramedic Recruitment:** In partnership with QI, a decision sprint with key stakeholders took place in December to review the external Paramedic recruitment process to ensure this is fair and consistent, reliably identifies the best candidates and differentiates sufficiently between candidates. This is in response to the national oversupply issue for Newly Qualified Paramedics. Decisions were made on a revised advert schedule and shortlisting approach, the inclusion of a

clinical assessment, a standardised assessment centre with scoring and weightings. The 'Your Career at YAS' presentation has been refreshed and a sub-group is being established to develop a revised bank of values-based interview questions. The recruitment timeline starts in February.

- **Core Workforce Development Apprenticeship Programme Extensions** approved by Trust Executive Group. The ASW clinical classroom-based phase extends to 8 weeks (previously 6) and Associate Ambulance Practitioner (AAP) to 18 weeks (previously 12) from January 2026. The revised structure offers a more balanced blend of theory and practice, increased protected time for both skills practice and self-directed study, and improved curriculum alignment with regulatory standards and Trust needs. It reduces the assessment burden during operational duties. Expected benefits include a reduction of unscheduled clinical action plan abstractions post course and a reduction in apprentices past their planned end date. Increased abstraction costs to be met by Level 4 bursary income and cost efficiencies.
- **Bank workers:** To mitigate the new corporate risk, a working group is being set up to review the Trust's procedures for managing bank workers, including recruitment / leavers, essential learning compliance, entitlement and contractual status considering the proposed changes as part of the Employment Rights Bill. This aims to ensure there are robust processes, systems and governance arrangements in place for the recruitment and management of bank workers, to support patient safety and fulfil regulatory requirements. The People and Culture Group will monitor progress of this risk.
- **Overpayments** – To support a reduction in staff overpayments, a new procedure has been implemented that mandates an authorised ESR Change Form or Leaver Form to be submitted via the HR Portal before a pay affecting change is made in ESR, GRS or WFM. This aims to reduce payroll errors, which have previously led to significant overpayments, staff debt and increased administrative burden. There will be an internal audit on the new procedures later this year.
- **Job Evaluation:** As part of the 2023 Agenda for Change non-pay national agreement and the Secretary of State's written ministerial statement from 23 April 2025, a working group is reviewing all nursing and midwifery job descriptions to ensure they are current, accurate, and aligned with national profiles. A Board appointed Senior Responsible Officer must oversee the work and Mandy Wilcock, Director of People and Organisational Development, has been identified for this purpose. The working group, led by the Head of Patient Experience and Nursing and Deputy Director of People, will use the NHS Staff Council Guidance to assess and improve local job evaluation practices. These actions will support compliance with national requirements. To support the delivery of this work, the Ambulance Sector through the Ambulance Association Chief Executive's (AACE) HR Directors Network have established a national working group. This work is being led by Director of People at North West Ambulance Service, with Vice Chair YAS Deputy Director of People. The Board via the People Committee will be updated on the progress of this work.

#9 Ability to deliver and sustain improvements in leadership and staff training and development.

- **NHS Management and Leadership Framework:** YAS is an active member of the socialisation work to test and map a new national standard for all NHS managers and leaders, to our existing Leadership Development Pathway. The framework includes a Code of Practice, clear competency standards from entry to executive level, a unified curriculum for leadership development across the NHS and an individual leadership

self-assessment. The framework launch is now delayed until March 2026. Our mapping shows the framework will complement and enhance the existing YAS pathway and development opportunities.

- **Appraisals Internal Audit** reported limited assurance (November 2025) with actions to update the Performance and Career Development Review Policy, review survey feedback and governance, provide clear guidance for appraisals, improve notification and quality assurance processes, and ensure robust reporting and escalation for non-compliance. These actions aim to enhance the appraisal process, improve compliance, and ensure the delivery of high-quality Trust appraisals. All actions are in progress and on track for completion by end of Q4. Appraisal compliance has steadily improved over the past 6 months to 77.9% (69% in June 2025; target 90%).
- **Essential Learning Oversight Group (ELOG)** established in response to the NHS England Statutory and Mandatory Training Optimise, Rationalise and Redesign project. A subgroup of People and Culture Group, the ELOG provides governance and oversight of the alignment to national standards, local mandated learning and Trust-wide reporting. The Group oversees the Education Portfolio Governance Boards and has documented current non-compliance with national standards, escalating a risk for Moving and Handling (M&H) training (current refresh 3 years, with national standard as 2 years). YAS is fully compliant with the learning outcomes for all nationally mandated topics. An outcomes-based approach and existing mitigations informed the decision making for Resuscitation and M&H non-compliance of refreshment periods. A staged gateway process, mirroring that adopted nationally, has been agreed for use for new locally mandated learning.
- **National Apprenticeship Levy Changes:** the impact of the shift to the Growth and Skills Levy and changes announced in the autumn budget will have a detrimental financial impact on YAS although strong partnerships with levy transfer organisations should mitigate for some of this impact. For example, the removal of the 10% levy top-up will reduce the levy funds available and the increase from 5% to 25% co-investment once levy funds are exhausted (common for YAS given our strong use of apprenticeship schemes) will increase our contributions. The removal of Level 7 funding will impact on senior leadership development apprenticeship opportunities but will not impact the Enhanced Clinical Practitioner apprenticeship used for Specialist Paramedic development as this is at level 6.

4.0 CONCLUSION

- 4.1 The work of the Directorate aims to reduce the risks set out in the Board Assurance Framework as well as meet the Trust's bold ambitions and NHS People Plan.
- 4.2 We are committed to improving the staff experience to ensure our patients get the 'Best Care' possible. Our workforce is crucial to our operations, and we know that there is much more we can do to ensure they come to work and give their best on every shift. The above work demonstrates that our work programme is extensive and wide-ranging, and we will strive to ensure that our people can thrive at every opportunity.

5.0 RECOMMENDATIONS

The Trust Board are asked to note the contents of the paper.