

Trust Board (in Public)
24 September 2026



Report Title	NHS Staff Standards: Board Assurance and alignment to YAS Together
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Accountable Director	Director of People and Organisational Development
Lead Board Committee	People Committee
Previous groups	People and Culture Group 18 September 2026 Joint Steering Group 10 September 2026 YAS Together Programme Group 04 September 2026 Trust Executive Group 12 August 2026 Trade Union Staff Standards Self-Assessment Review and Feedback Meeting 5 August 2026
Recommended action	Assurance and approval
Purpose of the paper	To provide assurance on the Trust's baseline position against the six NHS Staff Standards, including the principal strengths, gaps and risks identified through the self-assessment, and to seek agreement to the proposed delivery and assurance approach through YAS Together.
Executive Summary	
The NHS Staff Standards were launched on the 6 July 2026, and set national expectations across line management, health and wellbeing, violence prevention and reduction, championing sexual safety, tackling racism and promoting flexible working. The Trust has completed a baseline self-assessment against the 56 employer actions, informed by local evidence, 2025 NHS Staff Survey measures, workforce data, policies, governance and current programme activity. The assessment has been reviewed with relevant leads, Executive Directors and Sponsors, with feedback and insight also provided through a dedicated session with Trade Union colleagues. The assessment shows established foundations across all six standards, but differing levels of implementation and assurance. Health and wellbeing have the most established assessed baseline, while positive Staff Survey results for line management and flexible working are not yet matched by full delivery of the employer actions. The most significant assurance gaps relate to consistent implementation, staff safety and reporting confidence, equality insight, data quality, leadership accountability, operational consistency and evidence of impact. Without focused action, there is a risk that policy, governance and programme activity will not translate into sustained improvements in staff experience. YAS Together will provide the single coordination and assurance route, with delivery remaining with accountable leads and existing workstreams. Outstanding employer actions will be translated into proportionate delivery plans with clear Executive accountability, ownership, capacity, milestones, review dates and measures of impact. Progress, risks and exceptions will be reported through established People and Board governance, drawing together implementation evidence, Staff Survey measures, workforce and equality data, staff experience, and continued partnership working and insight from Trade Union colleagues and staff networks.	

Recommendation(s)	a) Agree the baseline self-assessment as the Trust's current position against the six NHS Staff Standards, recognising the different levels of evidence and implementation. b) Confirm YAS Together as the single coordination and assurance mechanism, with delivery remaining with accountable leads and existing workstreams. c) Endorse the priority actions and require clear Executive accountability, lead ownership, capacity, milestones, review dates and measures of impact for outstanding employer actions. d) Support an assurance approach that brings together implementation evidence, confirmed Staff Survey measures, workforce and equality data, staff experience, and Trade Union and staff network insight. e) Receive progress, risk and exception assurance through established People and Board governance routes, focused on consistent implementation, measurable impact and staff experience.
Link to Board Assurance Framework Risks (board and board assurance committees only)	6. Develop and sustain an open and positive workplace culture. Choose an item.

NHS Staff Standards: Board Assurance and alignment to YAS Together

1 INTRODUCTION

- 1.1 This paper aims to provide Board assurance on the Trust's baseline position against the six NHS Staff Standards and outlines how delivery of the remaining actions will be coordinated, monitored and assured through the YAS Together Culture Development Programme. It builds on the position previously considered by Trust Executive Group and incorporates the latest self-assessment evidence, findings and identified priorities.

2 BACKGROUND

- 2.1 Launched nationally on 6 July 2026, the NHS Staff Standards describe what staff should expect from employers and the actions organisations should take across six areas: line management; health and wellbeing; violence prevention and reduction; championing sexual safety; tackling racism; and promoting flexible working.
- 2.2 The standards set the national expectation with the NHS Oversight Framework providing the national assurance route. YAS Together provides the local delivery and coordination framework, supported by established People and Board governance. The annual Culture Maturity Framework will help test whether delivery is becoming embedded and influencing staff experience over time.
- 2.3 The baseline assessment draws on the employer actions, 2025 NHS Staff Survey measures linked to each standard, local policies, action plans, workforce evidence, governance routes and YAS Together programme activity. The position has been reviewed with relevant leads, Trust Executive Directors and Sponsors and with Trade Union colleagues.
- 2.4 Partnership working with Trade Union colleagues is a key principle running throughout each standard. A dedicated session has been held with Trade Union colleagues to review the self-assessment, gather feedback and insight, and reinforce the partnership approach that will continue through action planning, delivery and assurance.

3 CURRENT ASSURANCE POSITION

- 3.1 There are 56 employer-actions across the six standards. The assessment provides a differentiated baseline rather than a simple positive or negative position. It shows clear alignment and established foundations, while confirming significant work is still required to demonstrate consistent implementation, staff experience and impact.

Standard	Actions	Assessed status	Board assurance summary
Line management	12	1 fully met; 4 largely met; 5 partially met; 2 planned	Positive Staff Survey evidence across appraisal, development and manager support. Priorities are mapping to the NHS Leadership and Management Framework, implementing the manager self-assessment, addressing any gaps in the Leadership Development Pathway and programme delivery, line manager capacity and capability, and stronger shared team objectives.
Health and wellbeing	9	4 fully met; 3 largely met; 2 partially met	Most established assessed baseline, supported by Board accountability, governance, plans and

Standard	Actions	Assessed status	Board assurance summary
			wellbeing provision. Further assurance is required on work-related stress, restorative rest, access to food and drink, consistent manager-led wellbeing conversations, consistent use of the Post Incident Care process, and assurance and operational consistency of occupational health recommendations.
Violence prevention and reduction	8	4 largely met; 4 partially met	Governance, Executive accountability and improvement planning provide an established foundation. Further assurance is required on embedding the VPR Standard and a proactive safety culture through effective risk management, reliable data, reporting confidence, trauma-informed support, training, organisational learning, and a supporting communications and engagement plan.
Championing sexual safety	7	3 fully met; 4 largely met	The Sexual Safety Charter, governance, policy alignment, high e-learning compliance (93.7%) and specialist case oversight provide an established baseline. Assurance now needs to focus on maintaining this compliance position and increasing beyond 95%, strengthening staff and manager guidance, implementing the aftercare toolkit and demonstrating that reporting, response and support arrangements are understood and work consistently.
Tackling racism	9	1 largely met; 7 partially met; 1 planned	Important programme and governance foundations are in place, but the majority of employer actions remain partially met. Stronger assurance is required to further develop Board and Executive accountability, implementation of the Anti-Racism Charter, Cultural Awareness Programme and six High Impact Actions, policy alignment, reporting insight and measurable impact on staff experience.
Promoting flexible working	11	4 partially met; 6 planned; 1 not started	Staff Survey results provide a positive baseline, but assurance against the employer actions is less developed. Further evidence is required on Board-level leadership, delivery of an agreed action plan, consistent access and decision-making, manager capability, workforce data with equality analysis, and implementation across different services and staff groups.

4 STAFF SURVEY AND WORKFORCE INSIGHT

- 4.1 The 2025 NHS Staff Survey measures provide the initial comparative evidence for the NHS Oversight Framework, but do not replace assurance against the employer actions. Board assurance therefore needs to combine the survey measures with implementation evidence, workforce and equality data, staff experience and partnership insight.
- 4.2 **Line management:** appraisal coverage is above the ambulance average at 84.28%, and agreeing clear objectives through appraisal is best in the ambulance sector at

30.46%. Shared team objectives are slightly below the ambulance average at 62.41% compared with 62.81%.

- 4.3 **Health and wellbeing:** 51.78% agree the organisation takes positive action on health and wellbeing, compared with the ambulance average of 44.57%. Work-related stress is better than the ambulance average, with 46.10% reporting that they had felt unwell because of work-related stress, compared with 51.98% across the ambulance sector, where lower is better. Burnout is also better than the ambulance average at 36.89%. Continued focus is needed on prevention, rest and recovery, operational access to support and consistent manager-led wellbeing conversations.
- 4.4 **Violence prevention and reduction:** physical violence from patients or the public is slightly worse than the ambulance average at 31.80% compared with 31.12%. Reporting is below average at 72.80% compared with 76.87%. These results support continued focus on proactive prevention, embedding a safety culture, reporting confidence, risk and data quality, trauma-informed post-incident support, training effectiveness and organisational learning.
- 4.5 **Championing sexual safety:** 7.00% of staff reported unwanted behaviour of a sexual nature from staff or colleagues, compared with the ambulance average of 8.14%, and we are above target (93.7% compliance, target 90%) for the sexual safety eLearning. The relative position is better than average, but any level remains unacceptable. Priorities are to maintain target eLearning compliance and increase to over 95%, clarify staff and manager guidance, develop the aftercare toolkit and test whether reporting and support arrangements are understood and work consistently.
- 4.6 **Tackling racism:** career progression fairness is 56.10% and manager-related harassment, bullying or abuse is 7.69%, both the best ambulance-sector results across this set of survey indicators. The wider position remains mixed: public or patient harassment, bullying and abuse is at the ambulance average, public or patient discrimination is worse than average, and discrimination from staff remains present. Accountability, implementation and evidence of impact therefore remain priorities.
- 4.7 **Flexible working:** satisfaction with flexible working opportunities is best in the ambulance sector at 46.27%. Work-life balance support and open manager conversations about flexible working are also above the ambulance average and close to best. The main assurance gap is not the survey baseline, but consistent delivery of the employer actions, with focus on consistency of access and outcomes across staff groups and services.

5. PRINCIPAL ASSURANCE THEMES

- 5.1 What is working:
- Clear alignment between the Staff Standards and the existing YAS Together Programme priorities.
 - Established governance, policy and YAS Together Programme activity provide foundations across all standards.
 - Strong Board oversight of culture and staff experience, supported through Executive and Non-Executive lead roles, Board champions, and regular reporting and discussion at Public Board
 - Partnership routes with Trade Union colleagues and staff networks support co-production and challenge.

- The Staff Survey evidence is positive in a number of areas, including appraisal, health and wellbeing, career progression fairness and flexible working.

5.2 Where assurance is not yet complete:

Line management: no agreed organisational approach is yet in place for completion, recording and follow-up of the national manager self-assessment, or for assessing whether managers have sufficient time and capacity to fulfil their line management responsibilities effectively.

Health and wellbeing: Assurance remains incomplete in relation to equitable access to restorative rest breaks and facilities for all staff, consistent implementation of the Post Incident Care process, and the routine embedding of wellbeing conversations within one-to-ones and appraisals.

Violence prevention and reduction: workforce and workplace violence risks are not yet systematically assessed and used to drive evidence-based prevention, while consistent trauma-informed post-incident support and feedback to staff remain underdeveloped.

Championing sexual safety: the remaining gap is practical assurance that staff recognise and report sexual misconduct and receive consistent support after a case, including implementation of the aftercare toolkit and associated manager training.

Tackling racism: Board-level Specific, Measurable, Achievable, Realistic and Timely (SMART) diversity and inclusion objectives for Executive Directors require further development. Operational protocols and formal people processes require review to ensure they respond appropriately and without bias, to racism and discrimination.

Promoting flexible working: the Trust does not yet have complete request and outcome data by protected characteristic, staff group and service, or an agreed Board-owned action plan demonstrating fair and consistent access; digital capability support is also not yet evidenced.

5.3 Board-level focus

- Agree the self-assessment as the Trust baseline, recognising the different levels of evidence and implementation across the six standards.
- Endorse the priority actions, with clear Executive accountability, delivery ownership, capacity, milestones, review dates and measures of impact.
- Confirm YAS Together as the delivery and coordination mechanism, with Staff Survey metrics, workforce and equality data, staff experience, and trade union and staff network insight brought together for assurance.
- Oversee progress, risks and exceptions through established People and Board governance, with a clear focus on consistent implementation and measurable impact.

6 DELIVERY AND ASSURANCE APPROACH

- ## 6.1
- YAS Together will provide the single coordination and assurance route for the Staff Standards. Delivery will remain with the accountable leads and existing workstreams, with the self-assessment used to identify gaps, align action and avoid creating

separate or duplicative programmes. The key components of the delivery and assurance approach are:

- 6.2 Translate the outstanding employer actions into proportionate delivery plans, with clear Executive accountability, lead ownership, milestones, review dates, evidence requirements and measures of impact.
- 6.3 Align delivery through the relevant YAS Together priorities and existing workstreams, escalating gaps in ownership, capacity, dependencies or pace through established governance.
- 6.4 Maintain partnership working with Trade Union colleagues and staff networks through action planning, delivery and review, ensuring staff insight informs priorities and contributes to assurance on implementation, measurable impact and staff experience.
- 6.5 Bring together confirmed Staff Survey measures, workforce and equality data, delivery evidence, staff experience and partnership insight, with exceptions, overdue actions, risks and evidence gaps reported through People and Board governance.
- 6.6 Use the annual Culture Maturity Framework as an additional test of whether change is becoming embedded, alongside action-level evidence and measures of staff experience and impact.

7 FINANCIAL IMPLICATIONS

- 7.1 No specific additional financial requirement is requested through this paper. Accountable leads should identify and escalate any resource or capacity requirement arising from detailed action planning, particularly where data development, training, operational implementation or specialist support is required.

8 EQUALITY IMPLICATIONS

- 8.1 Equality is integral to the standards and assurance approach. Consistent equality and demographic analysis is required particularly for discrimination, violence and abuse, reporting and staff confidence, career progression and access to development, workplace adjustments, and flexible working outcomes. Equality impact assessment and partnership with Equality Support Networks and Trade Union colleagues should test fairness, differential experience and whether actions are reducing inequalities in practice.

9 QUALITY IMPLICATIONS

- 9.1 The standards support workforce conditions that influence safe, effective and compassionate care. Assurance should connect workforce experience with relevant safety, quality and operational indicators where a direct relationship can be evidenced.

10 RISKS

- 10.1 These risks align principally to BAF Risk 6 and should be managed through clear ownership, action-level evidence, equality insight, partnership feedback, exception reporting and Board challenge on implementation, outcomes and staff experience.

- 10.2 **Staff safety and experience risk:** incomplete implementation of the violence prevention, sexual safety and tackling racism actions may leave staff exposed to harm, inconsistent support and reduced confidence to report concerns.
- 10.3 **Delivery risk:** actions without clear Executive accountability, lead ownership, sufficient capacity, milestones and review dates may not progress at the required pace or achieve consistent implementation.
- 10.4 **Assurance risk:** gaps in evidence, data quality and measures of impact may overstate the Trust position or limit the Board's ability to identify variation and challenge progress.
- 10.5 **Equality risk:** insufficient demographic analysis and staff insight may conceal unequal experience, access or outcomes across staff groups and services.
- 10.6 **Culture risk:** policies, programmes and governance may not translate into sustained changes in behaviour, leadership practice and staff experience, limiting confidence that the standards are embedded consistently across the Trust.
- 10.7 **Reputational and regulatory risk:** failure to demonstrate effective implementation of the standards, particularly in violence prevention, sexual safety, tackling racism and fair access to flexible working, may weaken staff and stakeholder confidence and limit the Trust's ability to evidence compliance and improvement.

11 RECOMMENDATION

- 11.1 The Board is asked to:
- a. Agree the baseline self-assessment as the Trust's current position against the six NHS Staff Standards, recognising the different levels of evidence and implementation.
 - b. Confirm YAS Together as the single coordination and assurance mechanism, with delivery remaining with accountable leads and existing workstreams.
 - c. Endorse the priority actions and require clear Executive accountability, lead ownership, capacity, milestones, review dates and measures of impact for outstanding employer actions.
 - d. Support an assurance approach that brings together implementation evidence, confirmed Staff Survey measures, workforce and equality data, staff experience, and Trade Union and staff network insight.
 - e. Receive progress, risk and exception assurance through established People and Board governance routes, focused on consistent implementation, measurable impact and staff experience.