

NHS England's People Committee Terms of Reference

Approved by the Board on 30 July 2019

NHS England and NHS Improvement



1. Purpose

- 1.1 The Board of NHS England (the Board) has established a People Committee (the Committee) as a sub-committee of the Delivery, Quality and Performance Committee (DQPC) to meet in common with NHS Improvement's People Committee to support the exercise of the respective duties and powers of the DQPC and the Boards of each organisation in their joint setting of an overall people strategy and delivery plan for the NHS. Together, the Committee and NHS Improvement's People Committee will oversee the delivery of workforce improvement support, talent management and the development of senior leadership capability.

2. Composition

Membership

- 2.1 The members of the Committee are appointed by the Board and will be made up of:
 - 2.1.1 one Non-Executive Director of NHS England;
 - 2.1.2 National Director of Transformation and Corporate Development;
 - 2.1.3 Chief People Officer;
 - 2.1.4 Chief Nursing Officer or the National Medical Director; and
 - 2.1.5 Chief Executive of NHS England (ex-officio)

Committee Chair

- 2.2 The Committee will be chaired by the Non-Executive Director. In the absence of the nominated Chair, the Chief People Officer or the National Director of Transformation and Corporate Development will chair the meeting.

Secretary

- 2.3 The Head of Governance or their nominee will act as the secretary to the Committee.

3. Meeting arrangements

Attendance

- 3.1 Members of the Committee are expected to attend meetings wherever possible. In exceptional circumstances and subject to prior approval from the Chair of the Committee, a deputy can attend.
- 3.2 Any Non-Executive Director of NHS England who is not a member of the Committee is entitled to attend Committee meetings. At the invitation of the Committee chair others may also attend Committee meetings.

- 3.3 The Committee Chair may ask any person in attendance who is not a member of the Committee to withdraw from a meeting to facilitate open and frank discussion of a particular matter.

Meetings

- 3.4 The Committee will meet in common with NHS Improvement's People Committee (including by telephone or video conferencing) quarterly or as determined by the Committee Chair. Any member of the Committee may ask for a meeting to be convened in person, by video-conference or by telephone, or for a matter to be considered in correspondence.
- 3.5 The quorum for meetings is half of all members, including the Non-Executive Member. A duly convened meeting of the Committee at which a quorum is present will be competent to exercise all or any of the authorities, powers and discretions vested in or exercisable by the Committee.
- 3.6 Unless otherwise determined by the Committee Chair, notice of each meeting confirming the venue, time and date together with an agenda and supporting papers will be circulated to each member of the Committee, any other person invited or required to attend and all other Non-Executive Directors, no later than five working days before the date of the meeting.
- 3.7 The secretary will minute the proceedings and decisions of all meetings of the Committee, including recording the names of those present and in attendance.
- 3.8 Draft minutes will be sent to the Committee Chair within four business days of the meeting and submitted for formal agreement at the next meeting, where the Chair will sign them.
- 3.9 Except as outlined above, meetings for the Committee will be conducted in accordance with the relevant provisions of NHS England's Standing Orders.

4. Declarations of Interest

- 4.1 All members and attendees of the Committee must declare any relevant personal, non-personal, pecuniary or potential interests at the commencement of any meeting. The Chair of the Committee will determine if there is a conflict of interest such that the member and/or attendee will be required not to participate in a discussion or otherwise limit their involvement in the meeting.
- 4.2 Any member at any time is entitled to ask the Chair whether an item of business should be discussed outside of a meeting in common as it is in conflict with a particular power or duty of an individual organisation.
- 4.3 The Head of Governance can provide advice on reporting Declarations of Interests.

5. Duties

- 5.1 The Committee will, working in common with NHS Improvement's People Committee, work collaboratively with national partners to oversee and challenge

the delivery of the overall people strategy for NHS England commissioned services and sector staff and the development and delivery of a plan to realise this, in line with the Long Term Plan.

5.2 In particular, the Committee will:

5.2.1 oversee the implementation of the key provisions in the Interim People Plan and later, the full People Plan;

5.2.2 support, challenge and advise on the delivery of the primary care commitments set out in the Long Term Plan, the primary care networks contract and continuing commitments in the General Practice Forward View to strengthen the workforce across primary and community care, including training, recruitment, support and retention of medical, clinical and non-clinical staff;

5.2.3 support, challenge and advise on the new talent management arrangements to ensure they will deliver a step change improvement in talent management and develop a pipeline of first class options for senior appointments, including new leaders of integrated care systems and primary care networks;

5.2.4 support, challenge and advise on the development workforce improvement. This will include advising on the development of a targeted offer of NHS workforce improvement support in areas including, but not limited to, talent management and development, attraction, recruitment and retention, career development and opportunity, culture improvement and staff health and wellbeing to ensure the effective resourcing of multi-professional staff more than meets the current and future demand, including dentistry, community pharmacy and optometry;

5.2.5 oversee the delivery of a programme of engagement and support focused specifically on continuously improving people/HR, organisational development and change management functions for NHS organisations and primary care providers; and

5.2.6 support the building of the “brand” of careers in NHS management to improve and expand the overall breadth of managing talent.

Other

5.3 The Committee will discuss any matter which any member of the Committee believes to be of such importance that it should be brought to the attention of the Committee.

5.4 Where the Committee considers an item of its business may give rise to a potential conflict by meeting in common, the Committee may refer that business to the Board.

6.Reporting responsibilities

6.1 The Committee’s Chair will report formally to the DQPC on its proceedings after

each meeting.

- 6.2 The Committee will make whatever recommendations to the DQPC it deems appropriate on any area within its remit where action or improvement is needed.

7. Other matters

The Committee will:

- 7.1 have access to sufficient resources to carry out its duties, including access to the Board Secretary for assistance as required.
- 7.2 consider any other matters where requested to do so by the DQPC or the Board.
- 7.3 review on an annual basis its own performance and terms of reference to ensure that it is operating effectively as part of the Board's effectiveness review.

8. Authority

The Committee is authorised:

- 8.1 to seek any information it requires, or request attendance at a meeting, from any employee of NHS Improvement or NHS England or any other person in order to perform its duties; and
- 8.2 to obtain, at NHS England's expense, legal or other professional advice on any matter within its terms of reference (subject to budgets agreed by the Board) For legal advice, the Director of Governance and Legal or Head of Legal shall be consulted prior to procurement of external advice.