

**APPROVED MINUTES PEOPLE, ORGANISATIONAL DEVELOPMENT & CULTURE
COMMITTEE MEETING/ COFNODION CYMERADWY CYFARFOD Y PWYLLGOR POBL,
DATBLYGU SEFYDLIADOL A DIWYLLIANT**

Date of Meeting: **09:30, Monday 16 December 2024**
Venue: **Microsoft Teams Meeting/ Ystwyth Boardroom; Ystwyth
Board Room, Ystwyth, St David's Park**

Present: Mrs Chantal Patel, PODCC Chair/ Independent Member
Ms Anna Lewis, PODCC Vice-Chair/ Independent Member
Ms Ann Murphy, Independent Member
Mrs Delyth Raynsford, Independent Member
Mrs Lisa Gostling, Director of Workforce and Organisational Development/
Deputy CEO (PODCC Executive Lead)
Mrs Joanne Wilson, Director of Corporate Governance/Board Secretary
Dr Ardiana Gjini, Executive Director of Public Health
Mr James Severs, Executive Director of Allied Health Professions and Health
Science
Ms Alwena Hughes-Moakes, Communications and Engagement Director

In Attendance: Mrs Amanda Glanville, Assistant Director of People Development
Ms Carly Hill, Assistant Director - Medical Directorate
Mrs Anna Bird, Assistant Director – Strategic Partnerships, Diversity and
Inclusion
Mrs Clare James, Head of Corporate Governance
Ms Heather Hinkin, Head of Workforce
Ms Christine Davies, Assistant Director of Organisation Development
Professor John Gammon, Strategic Adviser, (Workforce, Education & Training)
Ms Corinna Lloyd-Jones, Head of Organisation Relations
Ms Elin Brock, Head of Research, Innovation and Improvement
Ms Lucy Morgan, Healthcare Apprentice
Ms Janice Cole Williams deputising on behalf of Mrs Sharon Daniel, Executive
Director of Nursing, Quality and Patient Experience
Ms Nicola Fourie, Apprentice Academy
Ms Tracy Walmsley, Assistant Director of People Planning
Ms Michelle James, Head of Resourcing and Utilisation
Ms Sally Hore, Head of Research and Development
Ms Katie Lewis, Committee Services Officer (Minutes)

Minutes Ref.	Item	Action
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PODCC (24)114	GOVERNANCE AND RISK	
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Apologies for Absence

Cllr. Rhodri Evans, Independent Member
Mrs Sharon Daniel, Executive Director of Nursing, Quality and Patient Experience

PODCC (24)115	Declarations of Interest	
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There were no declarations of interest.

PODCC (24)116	Minutes and Matters Arising from the meeting held on 29 October 2024	
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Decision: The minutes from the meeting held on 20 August 2024 were approved as an accurate record.

PODCC (24)117	Table of Actions from the meeting held on 29 October 2024	
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PODCC 24 (108)- Ms Janice Cole Williams provided a verbal update on the plan to discuss the impact of dementia training for staff at Senior Nurse Manager team meeting the following day to explore opportunities for capturing quantitative data during interactions with patients to demonstrate how training such as the distraction therapies and enhanced support training has improved quality patient experience. While Ms Anna Lewis was pleased to note the update, shared disappointment that this was not provided in advance of the meeting. Mrs Wilson undertook to provide a reminder at Executive Team meeting of the importance of providing updates for the Committee table of actions within the agreed timescales.

JW

Ms Lewis suggested that it will be useful to compile an overarching evaluation of staff training provision to demonstrate value of investments. In agreement, Mrs Patel highlighted that this may be a piece of work already underway by the Assistant Director of Legal and Patient Experience as part of the review of training provision in response to themes identified through complaints and concerns received. Ms Amanda Glanville highlighted that the Mandatory Training Group has recently reformed and provided assurance that the Group will be measuring the impact and value of financial investment for mandatory training as part of the work programme. A collaborative piece of work is underway to establish an interprofessional steering group with representation from the Assistant Director of Nursing (ADoN) for Patient Experience and ADoN for Professional Standards. The Assistant Director of Quality Assurance and Safeguarding will be attending the next meeting to discuss the development of the learning framework, themes and training opportunities.

PODCC **Corporate Risks Assigned to PODCC**
(24)118

Mrs Gostling introduced the Corporate Risks Assigned to PODCC report.

Several actions are underway to reduce medical agency usage across the Health Board which will be included within the Annual Plan 2025/26, and improvements being made to the medical rostering system between now and March 2025 will provide better oversight and management.

Mrs Patel queried whether the reduction in medical agency workforce is likely to have a detrimental impact on quality patient care and waiting lists. Mrs Gostling shared that early indicators from the changes within nursing have showed an improving trend, with less complaints and less incidences reported. The plan is to maximise learning opportunities from this work.

Professor John Gammon noted the corporate risk of 'insufficiently skilled workforce to deliver services due to limited labour market' and reflecting upon the narrative within the report, felt that although it captures the current challenges, does not take into account the Health Board's future workforce planning intentions, such as exploring different scopes of practice, different roles such as the medical practitioner roles, the re-assessment of band 2 and 3 roles, and potentially how the nature of the medical workforce is likely to change. Ms Walmsley recognised that the wider developments for the Workforce Plan are not fully captured within the report, which is being developed as a risk themed approach to ensure the right infrastructure will be in place for sustainable quality services. Mrs Walmsley noted this may not be clear from the risk report however more information is available within the Workforce Planning item on the agenda.

Ms Anna Lewis reflected upon recent discussions at Board and Board Seminar regarding the commitment to support the Equality, Diversity and Inclusion (EDI) Strategy following data concerns (highlighted during the Strategic Equality Plan Annual Report 2023/24 at Board on 26 September 2024). Ms Lewis queried where the associated organisational risks are being recorded and monitored. Ms Walmsley agreed that although there is a Workforce specific Risk Register and work underway in this space including a revised Job Evaluation Policy and Performance and Development Record (PADR) reviews to include EDI discussion prompts, recognised that the specific risks need to be set out. Mrs Gostling and Ms Walmsley undertook to include specific risk on the risk register to amplify Committee and Board level discussions, monitoring of actions and accountability.

LG/TW

Decision: The Committee received assurance from the report.

PODCC **Targeted Intervention Progress Report**
(24)119

Mrs Gostling presented the Targeted Intervention Progress report, highlighting that 21% of staff completed the Staff Survey this year, which is a significant improvement over the previous year's response rate of 12%. The survey results will provide valuable insights to inform future staff

engagement strategies and support improvements in workforce feedback methods. Mrs Gostling highlighted that progress has been made to recruit into key executive position roles, finalising leadership programmes, and implementing workforce plans.

Ms Anna Lewis reflected on the content of the slides and felt that they are remarkably optimistic in light of the significant challenges being faced by the organisation, and did not agree that there are no risks with a number of the objectives contained within the report such as recruitment in to key executive roles, highlighting that there is nothing being done in the Organisation that does not entail risk, particularly with recruitment. Mrs Gostling noted Ms Lewis's concerns and reflected that the 'leadership development' requirements for Targeted Intervention de-escalation have been a challenge to set out and have been dependent on progress on actions such as staff engagement/ feedback (Staff Survey). Leadership Programmes are underway which include an evaluation process.

Discussions continue with Welsh Government to clarify requirements. Ms Lewis noted the way in which the de-escalation requirements have been framed have caused challenges however the progress reports may not be providing an accurate reflection of the amount of work undertaken. Mrs Gostling acknowledged Ms Lewis's point and suggested that the Committee could explore taking the monitoring of the progress of leadership development by looking at training and leadership provided and triangulating with data for disciplinaries, grievances, sickness absence and feedback from the Staff Survey in the future. Ms Lewis agreed that there is an opportunity, if the Health Board meet the requirements for de-escalation, to take it a step further to show how the leadership development is making a real difference for staff and quality services.

In terms of the staff survey results, Ms Christine Davies shared that the progress of the response rate has been positive and there will no doubt be uncomfortable messages and themes from the feedback. The challenge for the Organisation will be to respond to what staff have said. In terms of the leadership development programme, Ms Davies advised that an evaluation report is being fed through the Strategic Planning and Education Group (SPEG) structure and positive feedback has been noted. The selection process for the programmes have been revised for senior managers. Ms Davies provided assurance that the building blocks are being put in place to enhance leadership development however it may take time to feed through the system and make tangible changes.

Mrs Gostling reflected on a number of organisational changes made in response to Targeted Intervention such as the Directorate monthly monitoring and focus meetings which has been a helpful forum to undertake constructive discussions with Directorate leads and make improvements across organisation. The Executive Team will revisit areas of focus to meet the Targeted Intervention de-escalation criteria for 2025/26

Decision: The Committee took assurance from the report.

PODCC **Self Assessment of Committee Effectiveness Report**
(24)120

Mrs Patel presented the Self-Assessment of the Committee Effectiveness Report. No comments or questions were received.

Decision: The Committee received assurance from the progress made against the actions being undertaken to improve the Committees effectiveness.

PEOPLE

PODCC **Staff Story: Apprenticeship Programme**
(24)121

Ms Nicola Fourie and Ms Lucy Morgan joined the meeting.

Ms Lucy Morgan provided her experience of the nurse apprenticeship programme had left school in 2024 and had always wanted to be a nurse and took an opportunity to join the Academi programme following discussions at a College Job Fair open evening. Ms Morgan recalled that the staff were forthcoming to share the highs and lows of the role which was appreciated. Lucy recalled that the 6-week resilience training and induction programme was valuable, and it was reassuring to know there was support available. One of the challenges Ms Morgan raised has been conversing with Welsh speakers due to language barriers. Some of the experiences and skills Ms Morgan has gained since joining the programme has included shadowing experienced staff, the handover of care process for patients during shift changes, risk assessments and assisting with personal care. Ms Morgan feels her confidence has grown considerably in a short period of time and feels excited for the future and grateful for the opportunity to follow her dream of becoming a nurse.

While the programme has received positive feedback, Ms Amanda Glanville shared that a number of recurring comments have been received from discussions with ward managers and staff such as challenges with work ethic. Apprentices have fed back that they feel like they often feel treated like children, and not feeling fully embedded as part of the team. Missed opportunities to carry out tasks to learn have also been fed back.

In response to a query from Mrs Patel in terms of whether all staff understand their role in supporting apprentices, Ms Glanville advised that there are handbooks available, and highlighted there can at times be challenges due to staff change over which is going to be an area of focus for the year ahead to strengthen guidance and support for staff. Mrs Patel queried whether consideration has been given to having a mentor based at each ward, and Ms Glanville explained that the apprentices have a mentor, and meetings are undertaken with the apprentice and mentor via MSTeams. Mrs Patel noted the series of measures in place to address challenges.

Ms Anna Lewis thanked Ms Morgan for sharing her experiences with the Committee and queried whether there are opportunities for apprentices and

ward managers to come together and meet to discuss any suggestions for improvements and concerns. Ms Glanville advised that these meetings do happen, but this is something that could happen more often. Feedback that has been gathered in November 2024 is being presented to Senior Nurse Manager Team meeting and the outcome of the meeting will be shared once available.

Ms Alwena Hughes Moakes thanked Ms Morgan for sharing her powerful story and is proud to welcome her to the Health Board team. Ms Hughes Moakes encouraged Ms Morgan to utilise her welsh language skills wherever possible to build confidence. In terms of connecting with other apprentices, Ms Hughes Moakes suggested setting up a Community Online Group and will be happy to support.

Ms Gostling thanked Ms Morgan and Ms Fourie for attending the meeting.

Decision: The Committee noted the staff story.

PODCC
(24)122

Employment Law

Ms Heather Hinkin provided an overview of the contractual and legislative changes that have or may impact upon the workforce in terms of the approach to people management, policies, procedures and terms and conditions of employment. Ms Hinkin highlighted the challenges potentially putting 28 employment law changes in to practice from the new Labour Government's proposed Employment Bill. Ms Hinkin advised that the changes will impact on all current processes, particularly financially and there will be a need to adapt accordingly.

Ms Hinkin drew attention to the Worker Protection (Amendment of Equality Act 2010) (2023) which came into effect on 26 October 2024 and is a new requirement for employers to be more proactive with a duty to prevent sexual harassment and create a safe working environment for their employees rather than just addressing harassment incidences that have occurred. It will also make employers liable for harassment of their employees by third parties. Ms Hinkin emphasised that the Duty is far more advanced than before.

Professor Gammon commented on the enormity of the work involved with the proposals set out in the report. Mrs Patel agreed and sought assurance on the plan to ensure the Health Board does not fall foul of these measures. Mrs Gostling agreed that there are some significant changes to enact which will require Directorate engagement with Workforce Colleagues. Discussions will take place on updating the Risk Register, and the transitioning zero-hour workers to fixed-term or permanent contracts to maintain compliance which could have a significant impact on eradicating bank staff usage.

Mrs Raynsford queried what is being put in place to support Managers to provide guidance for the changes for potential staffing issues. It is reassuring to know that the Workforce Team understands the changes however Managers will also need to be au fait with the complexities. Ms Hinkin highlighted the challenges in this space as the impact on each manager across the organisation will vary. The team will disseminate

tailored information and are currently developing 5 minute bite size sessions and update Trade Union members regularly.

Decision: The Committee **NOTED** the Contractual and Legislative Changes Report

CULTURE

PODCC **Deep dive analysis on the increase in stress amongst staff - Deferred**
(24)123

Mrs Gostling apologised to the Committee that the report has been deferred. Assurance was provided that this area of work has been agreed as a planning objective for next year, to explore opportunities and support staff who may have health conditions to be the best they can be will be included in the report scheduled for February 2025. Mrs Gostling advised that the outcome of an away day arranged in January with Public Health colleagues to consider how a shift in service provision could be beneficial for the Organisation will be included within the report. Ms Heather Hinkin added that a collaboration event arranged for later that day with practitioners has been arranged, to provide teams with an opportunity to provide their firsthand experience of working within the organisation and provide feedback on service design opportunities.

Ms Anna Lewis commented that it will be helpful to ensure that the outcome of these meetings is included within the report to provide the context for agreed actions and also to share an understanding of the theory of change aligned.

LG/HH

PLANNING

PODCC **Workforce Plan**
(24)124

Ms Tracy Walmsley provided an update on Workforce Plan, risks, engagement and education commissioning process which has provided opportunity to implement a strengthened approach, through engagement with services and professional groups across all directorates, with a focused view of services aligned to ministerial priorities.

The Workforce and Organisational Development Team continue to strengthen the strategic framework to grow capacity and capability aligned to the strategic need for workforce planning and to strengthen the overall approach to strategic workforce alignment and planning and aligned to operational challenges.

Mrs Raynsford queried developments in terms of the regional working opportunities and whether discussions are underway with Swansea Bay to explore future workforce opportunities to address operational challenges. Ms Walmsley confirmed that she regularly meets with Assistant Director of Workforce in Swansea Bay University Health Board and Powys Health

Board however recognised there is room to upscale strategic planning for future workforce planning.

Professor Gammon commended the comprehensive report and was particularly intrigued by the gap analysis work underway which is important for strategy to address service demands. Prof Gammon was pleased to see the equal emphasis on supply challenges within the report, while there is often a focus on retention and recruitment, supply is often omitted and this is an important risk for consideration when developing action plans.

Ms Anna Lewis queried whether artificial intelligence is being considered as part of the workforce planning next steps and potential material changes particularly in the population health space which Ms Walmsley confirmed was detailed within the slides shared.

Commenting upon the commissioning of third sector opportunities to support fragilities in Mental Health, Ms Lewis suggested that these opportunities should be explored a lot wider to support services.

Decision- The Committee received assurance on:

- a) the progress made in the development of people planning within the Health Board and the progress being maintained to deliver an integrated, critically assessed and embedded systemically across the Health & Care System.
- b) The People Planning Framework in place that is responsive to the needs of the Health Board based on the current maturity of People Planning across the Health & Care System.
- c) The People Plan which will be developed for 2024/25 with a future focus that enables 4 lenses to align resources to agreed priorities via the Annual Planning Cycle.

PODCC Retention and Discovery Report
(24)125

Ms Christine Davies presented an update on the retention work programme, which focusses on the Nursing, Medical and Allied Health Professional (AHP) and Healthcare Scientists (HCS) retention Task and Finish Groups which have been established to identify opportunities to reduce staff turnover by the following:

- Nursing: 0.5%,
- Medical: 1%,
- Allied Health Professionals and
- Health Care Support Workers: 1%.

Ms Davies advised there is work to do to continue to build momentum with executive lead engagement.

Ms Corrina Lloyd- Davies and Ms Elin Brock joined the meeting and provided an update on the Retention Task and Finish Groups and set targets for year ahead according to the staffing groups. The Groups have been established. 12-month Nursing turnover rate has increased from

5.05% in October 2023 to 5.87% in October 2024 (+0.82%). Trend analysis has identified an increase in October each year since 2020, with the exception of 2022. Nevertheless, continue to be the best performing NHS organisation in Wales for the registered nursing turnover rate. Members noted positive feedback from the NHS Wales Retention Community of Practice regarding the successful approach to retention.

Ms Corrina Lloyd Davies provided the key updates from the Task and Finish Groups findings and highlighted that it is early days to monitor the statistics of the Allied Health Professional turnover as the group has only recently established and medical staffing varies. Ms Brock provided an update on the actions arising from the staff retention discovery work and highlighted that the report exemplifies where the Organisational Development team have been able to deep dive into themes and embed recommendations from the Committee into existing work programmes and set up structures to address gaps in intelligence. An update on the Culture elements will be provided in the 2024/25 end of year report during April's Committee.

Ms Janice Cole Williams highlighted the number of new recruits of late and the need to refocus from recruitment to retention to offer staff the best opportunities which will enhance patient care. Ms Cole – Williams recognised that professional development programmes have at times been deferred due to work force capacity and resource challenges, however the benefits of providing these opportunities will have a positive impact on workforce stability.

In terms of the establishment of the Nurse Retention Programme, Mr Severs queried whether quality metrics for patient experience had been implemented to measure the impact of progress for example via incidents reported. If not, Mr Severs queried whether there are opportunities to put these in place early in the programme development. Ms Lloyd- Jones advised that although nothing specific has been put in place in terms of the nurse retention work, these discussions are taking place at service level and a piece of work is underway with the Assistant Director of Legal and Patient Experience around patient outcomes. Learning will be taken from the nurse retention programme and will be reflected in the medical and Allied Health Professional retention work from the start.

Prof Gammon reflected on the number of interventions in place and queried how they are contributing to the retention programme, in particularly flexible working. Ms Lloyd- Davies explained that whereas some aspects of flexible working process are accessible for example applications made via ESR and those recorded as approved, this is not always a full picture as dependent on outcomes recorded via the system. Members noted that there are flexibilities built in via the rostering system also therefore a full picture is not always provided via ESR. Quality Improvement Projects are underway, and a further update will be provided in April with outcome information. Members recognised that there needs to be a culture shift in response to applications for flexible working and creative thinking to attract and retain workforce.

Members noted the progress relating to the staff retention work programmes, including the actions arising from the Retention Discovery

Groups. The work programmes are on track, and staff turnover figures are being monitored as part of the Escalation Framework.

Decision: The Committee took assurance that appropriate progression towards the ambitious target figures is being made.

PERFORMANCE

PODCC (24)126 **Performance Assurance and Workforce Metrics - Integrated Performance Assurance Report (IPAR)**

Ms Michelle James presented the Performance Assurance and Workforce Metrics - Integrated Performance Assurance Report (IPAR) and provided an update on the delivery against national delivery framework targets. Ms James highlighted the increased response rate for the staff survey and that agency expenditure continues to reduce. Prof Gammon was particularly struck by the SPC agency spend graph and commended the impressive work undertaken.

Decision: The Committee noted the content of the report.

PODCC (24)127 **Medical Workforce Performance Management and Mandatory Training**

Ms Carly Hill presented the Medical Directorate Statutory and Mandatory training update and action plan for 2025 and current compliance which has been reported from Electronic Staffing Record (ESR). Ms Hill advised that the data in this report has highlighted that Mandatory and Statutory Training completion rates are steadily improving, and significant progress has been made over the past 12 months however, achieving the 85% Welsh Government Target continues to be a challenge for Hywel Dda which is a national picture. The Executive Medical Director and Deputy Medical Director are communicating directly with individuals and teams that are reporting low compliance to ask that performance improvement is prioritised. Ms Glanville added that the recently reformed Mandatory Training Group which feeds into the Strategic People Planning Group are developing an action plan to drive and improve compliance and undertook to clarify governance arrangements to prevent duplication of efforts.

AG

Ms Ann Murphy queried whether the mandatory training data within the report refers to all doctors or those within the Medical Directorate and Ms Carly Hill confirmed that report covers all medical staff across the organisation. Ms Murphy raised concern regarding the 0% compliance for Paediatric resuscitation basic life support training and queried the process for urgent escalation of this concern. Ms Hill undertook to clarify the figures and Ms Glanville highlighted that not all education data is reported via ESR and this is likely to be a data intelligence issue. Ms Hill added that the work to align ESR with the General Medical Council requirements will improve data quality.

Thanking Ms Hill for the update, Mrs Patel noted that the data provided in the report is not a complete picture and actions to improve data quality and

compliance are being undertaken by the Mandatory Training Group therefore this is the start of this journey.

Ms Anna Lewis echoed the concern raised by Mrs Ann Murphy regarding the data presented to the Committee which indicates that basic life support training has not been provided to Paediatric medical staff and on the basis of this data urgent work is needed to inform the Committee of the actual position if this is not accurate and also improvements in data ahead of the next meeting as this cannot wait two months.

Prof Gammon noted that mandatory training which is operational matter is being reported via SPEG and sought an understanding of the Committees role in receiving reports and monitoring compliance and the clarity of governance is required. Mrs Gostling clarified that Mandatory training monitoring via SPEG is a meeting for professional leads to focus on the mandatory training outside of the Directorate Improving Together Session (DITS) process and performance is discussed with managers and review whether the right training is being provided to the staff.

On behalf of the Committee, Ms Lewis reiterated that routine improvement is required for organisations data for mandatory compliance for clinical workforce, noting the specific concerns relating to Paediatric Life Support training compliance. A revised process needs to be sophisticated enough to pick up risks to quality healthcare services for the population. The performance in the report is varied, and targeted work is needed, and effective escalation systems revised as a matter of urgency.

Decision: The Committee NOTED the report and requested an update on the paediatric life support training position as a matter of urgency ahead of the next meeting when an updated report has been forward planned which will also confirm the governance arrangements for monitoring mandatory training compliance.

CH/MH

SUB COMMITTEE AND GROUPS

PODCC Strategic People Planning and Education Group Update (24)129

Ms Amanda Glanville presented the Strategic People Planning and Education Group Update and highlighted that the most recent meeting had a broader representation in attendance which was positive. The breadth of work underway through SPEG was noted and one area for improvement that has been identified is the recording of risks. Ms Glanville will be working with the Risk and Assurance Team in February 2025 meeting to refresh the Groups risk management process.

Professor Gammon was pleased to see the progress of the group and suggested that the breadth of the remit of the group will require a prioritisation approach. Prof Gammon felt encouraged by the commitment from a range of individuals and hopes to receive updates on the delivery of actions reported to PODCC.

In terms of the following alert items:

- Lack of funding poses a risk to meeting the statutory requirements within the Estates Directorate in order to comply with statutory regulations under the Health & Safety at Work Act 1974 & the Welsh Health Technical Memoranda (WHTMs), Mrs Joanne Wilson asked that funding is considered as part of the Directorate annual planning process.
- Fit Note Training Compliance and identification of relevant professions has still not been agreed, with only 22 staff having completed the training across the Health Board. Mrs Sharon Daniel requested that this is brought to the attention of the Executive Team via Team meeting as she was not aware of this challenge.

PODCC **Research and Innovation Sub Committee Update Report**
(24)130

Ms Sally Hore joined the meeting to present the Research and Innovation Sub Committee Update Report. The Committee were advised of the work underway to improve equity of access for oncology clinical trials. The proposal is to develop and implement a Southwest Wales plan to increase the access to, and uptake of, cancer clinical trials. Mrs Delyth Raynsford raised concern regarding potential inequity of access to the trials and sought assurance that Hywel Dda patients are being treated equally to Swansea Bay patients and asked for timelines for the work to address this and queried whether this needs to be brought to the attention of the Quality, Safety and Experience Committee due to potential impact on patients. Providing context, Ms Hore advised that there has been regional working around Oncology studies and Health Board patients have access to many studies but not all due to capacity at the Felindre service. The Executive Director has been undertaking meetings with key individuals and will ensure there are robust systems in place to closely monitor the equity of access to the trials.

The Committee were also advised that positive progress being made with the Pentre Awel project, in light of the Board signing the lease agreement, and the intention to locate research and innovation activities at the scheme. However, the R&ISC noted that the Department does not have the funds to off-set the costs of the scheme, should it be asked to contribute to the lease costs.

Decision: The Committee noted the mechanisms in place to closely monitor the 'Advise' items.

PODCC **Trade Union Update- Implementation of Welsh Health Circular WHC**
(24)131 **(2024) 017**

Ms Hinkin presented the Trade Union Update Report and highlighted the progress to implement a number of the non-pay elements of the collective agreement for 2022-2024 for Agenda for Change staff, as required by Welsh Health Circular WHC (2024) 017. The Task and Finish Group continues to meet on a monthly basis. Key actions undertaken since the last update include the development of a SharePoint page to provide a one stop

resource for staff seeking information about retirement or flexible retirement options.

FOR APPROVAL

PODCC Outcome of Advisory Appointments Committee (AAC) (24)132

Decision: The Committee approved the following appointments which were made at recent Advisory Appointment Committees: Consultant in Cardiology, Consultant General Physician (Interest in Respiratory), Consultant in Anaesthetics, Intensive Care Unit

PODCC Workforce Policies for Approval (24)133

Decision:

- The Committee approved the following:
- The adoption of the All-Wales Job Evaluation Policy & Procedure.
- To defer the review of the Medication Errors Policy until 31 March 2025.

FOR INFORMATION

- PODCC Workplan 2024/25

MATTERS AND RISKS FOR ESCALATION TO BOARD

DATE OF NEXT MEETING

Tuesday, 18 February 2025