

**COFNODION CYMERADWYO Y PWYLLGOR POBL, DATBLYGU A DIWYLLIANT  
SEFYDLIADOL  
APPROVED MINUTES OF THE PEOPLE, ORGANISATIONAL DEVELOPMENT & CULTURE  
COMMITTEE**

<b>Date and Time of Meeting:</b>	9.30am, 15 <sup>th</sup> December 2022
<b>Venue:</b>	Board Room, Ystwyth Building, Hafan Derwen, St David's Park, Carmarthen, SA31 3BB

<b>Present:</b>	<p>Mrs Chantal Patel, Independent Member (PODCC Chair) (VC)</p> <p>Mrs Judith Hardisty, Vice Chair of HDdUHB (PODCC Vice-Chair) (VC)</p> <p>Mrs Delyth Raynsford, Independent Member (VC)</p>
<b>In Attendance</b>	<p>Mrs Lisa Gostling, Director of Workforce &amp; Organisational Development (PODCC Executive Lead) (VC)</p> <p>Mrs Joanne Wilson, Board Secretary (VC)</p> <p>Mr Anthony Dean, Estates and Chair of the Partnership Forum (VC)</p> <p>Professor John Gammon, Strategic Adviser, (Workforce, Education &amp; Training)</p> <p>Dr Leighton Phillips, Director for Research, Innovation and University Partnerships (part) (VC)</p> <p>Ms Christine Davies, Assistant Director of Organisation Development (VC)</p> <p>Ms Mandy Davies, Assistant Director of Nursing and Quality Improvement (VC) (part), deputising for Mrs Mandy Rayani, Director of Nursing, Quality and Patient Experience</p> <p>Ms Sharon Daniel, Assistant Director of Nursing (VC) (part), deputising for Mrs Mandy Rayani, Director of Nursing, Quality and Patient Experience</p> <p>Ms Sally Owen, Head of Recruitment &amp; Workforce Equality, Diversity &amp; Inclusion (VC) (part)</p> <p>Ms Michelle James, Head of Digital Workforce Solutions (VC)</p> <p>Mrs Amanda Glanville, Head of Workforce Education &amp; Development (VC)</p> <p>Ms Helen Sullivan, Head of Strategic Partnerships, Diversity and Inclusion (VC) (part)</p> <p>Ms Sarah Jenkins, Head of People and Organisational Effectiveness (VC)</p> <p>Ms Sian Hopkins, Head of Quality Improvement &amp; Practices &amp; Professional Development (VC) (part)</p> <p>Mrs Anna Bird, Strategic Partnerships (VC)</p> <p>Ms Enfys Williams, Welsh Language Services Manager (VC), deputising for Ms Alwena Hughes-Moakes, Director of Communications</p> <p>Ms Kathryn Cobley, Diversity and Inclusion Manager (VC) (part)</p> <p>Ms Leanne Slaymaker, Organisation Development Practitioner: Talent Management &amp; Succession Planning (VC) (part)</p> <p>Ms Marya Marriott, Committee Services Officer (Secretariat)</p>

<b>Agenda Item</b>		<b>Action</b>
<b>PODCC (22)119</b>	<b>INTRODUCTIONS AND APOLOGIES FOR ABSENCE</b>	
	Mrs Chantal Patel welcomed everyone to the meeting.	

	<p>Apologies for absence were received from:</p> <ul style="list-style-type: none"> <li>• Ms Ann Murphy, Independent Member</li> <li>• Mrs Mandy Rayani, Director of Nursing, Quality and Patient Experience</li> <li>• Professor Philip Kloer, Medical Director/Deputy Chief Executive</li> <li>• Ms Alwena Hughes-Moakes, Director of Communications</li> <li>• Ms Heather Hinkin, Head of Workforce</li> </ul>	
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<b>PODCC (22)120</b>	<b>DECLARATIONS OF INTEREST</b>	
	The were no declarations of interest made.	

<b>PODCC (22)121</b>	<b>MINUTES AND MATTERS ARISING FROM THE PREVIOUS MEETING HELD ON 20<sup>th</sup> OCTOBER 2022</b>	
	<p>The minutes of the meeting held on 20<sup>th</sup> October 2022 had been circulated. It was noted that Minute PODCC(22)100, paragraph 3 (22)78, line 9 should read 'Associate Physician' rather than 'Physician'; subject to that amendment the minutes were agreed to be an accurate record of the meeting.</p> <p><b>RESOLVED</b> – that the minutes of the People, Organisational Development &amp; Culture Committee (PODCC) meeting held on 20<sup>th</sup> October 2022 be <b>APPROVED</b> as an accurate record of proceedings.</p>	

<b>PODCC (22)122</b>	<b>TABLE OF ACTIONS FROM THE PREVIOUS MEETING HELD ON 20<sup>th</sup> OCTOBER 2022</b>	
	<p>The Chair requested an update on the actions agreed at the PODCC meeting held on 20<sup>th</sup> October 2022.</p> <p><b>PODCC(22)101 - PODCC(22)78:</b> The Health Board had contacted the NHS Wales Shared Services Partnership (NWSSP) to request the information; at the date of the meeting it had not been provided.</p> <p>Mrs Judith Hardisty restated her concern that information relating to the trainee GPs retained and progress with their training was not being regularly provided. It was agreed that Mrs Lisa Gostling would make enquiries to establish whether Ms Jill Paterson had subsequently been provided with the information. If it had not been received, the matter would be escalated to the Shared Services Partnership Board via Mr Huw Thomas.</p> <p><b>PODCC(22)102:</b> Mrs Amanda Glanville reported that Mental Health First Aid training is currently being scoped, including the cost implications. It had been requested that the training be made available for all Health Board staff; consideration is being given as to how key principles can be embedded in training programmes. Education &amp; Development will collaborate with mental health for signposting and advice. The meeting action was closed.</p>	<b>LG/JP</b>

	<i>Ms Jenkins and Ms Slaymaker joined the meeting.</i>	
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PODCC (22)123	<b>STAFF STORY: ORGANISATIONAL DEVELOPMENT</b>	
	<p>Ms Christine Davies reported that this staff story would be provided through a video and introduced Ms Jenkins. Ms Sarah Jenkins noted that, whilst effecting cultural change was a slow and evolving process, consistency and persistence was producing positive results. Ms Jenkins had worked with Mrs Nerys Lewis, Senior Nurse Manager, and her team at the A&amp;E Service at Glangwili Hospital. It had taken almost two years to achieve change. In the video, <i>Our Nursing Cultural Transformation Journey</i>, the challenges faced by Mrs Lewis when she came into post in March 2021 were discussed.</p> <p>It was observed that this Staff Story reinforced the HDdUHB's strategy of a focussed approach to culture change and demonstrated that it led to tangible results. The training and guidance Mrs Lewis had received had supported her career progression; the importance of focussing on people, simple values and relationships was extremely powerful. It was suggested that the biggest determinant of culture was how the leadership behaved. Mrs Lewis provided a clear example of a humble authentic leader who was sensitive to how her staff feel. It was suggested that Mrs Lewis would be an extremely positive role model: Ms Jenkins advised that Mrs Lewis would be deployed as a mentor; the Culture Team was setting up the same process used at Glangwili across all A&amp;E services including Bronglais.</p> <p><i>Ms Slaymaker left the meeting</i>  <i>Ms Mandy Davies and Ms Hopkins joined the meeting</i></p>	
	The Committee <b>NOTED</b> the staff story and the progress made with the review of the processes and procedures related to employee relations, including the nurse culture.	

PODCC (22)124	<b>CULTURAL PROGRESS UPDATE</b>	
	<p>Ms Christine Davies introduced the Culture Change report. The purpose of the report was to provide assurance relating to the Health Board's cultural journey. The last 18 months had been a foundation phase following discovery work related to staff, conducted approximately two years earlier. As a result of that work, a number of measures have been put in place, including items such as exit interviews and internal transfer information.</p> <p>The team is also developing a Healthy Working Relationships Framework, to take a more facilitative approach to managing conflict and seeking resolution so that situations do not escalate and fracture teams. A key theme of the Staff Discovery was the need to find ways to recognise and appreciate our staff; the introduction of measures such as the staff awards is helping with that task. Work on staff well-being and</p>	

keeping staff healthy so that they remain with the Health Board is continuing; this is a work in progress.

Ms Jenkins had led the new team of Organisational Development Managers for the past 18 months. The managers were engaging with staff and leaders and working closely with staff side colleagues to develop the Cultural Framework.

It was noted that conversations change culture - one conversation at a time - and build confidence and trust. The work to build leadership capability was ongoing. Cultural change would always be a work in progress; Ms Christine Davies thanked the Board for its support.

*Mrs Williams joined the meeting*

Mrs Patel thanked Ms Christine Davies for providing a comprehensive report. It was observed that HDdUHB's turnover rate in many categories of staff was among the lowest of all comparable Health Boards; it was suggested that it would be valuable to link recruitment to staff retention when advertising positions. When the staff retention plan was established it had been focussed on groups: nursing staff had been considered first, medical staff would be next followed by Allied Health Professions and Estates and Facilities.

It was noted that:

- HDdUHB has the largest number of Bevan Exemplar Projects in Wales; several members of staff will present their projects to the Senedd; these achievements should be widely celebrated.
- The team is working on a flexible working guide, it will be published early in 2023
- Phase two of the Well-being Research Report is complete; it will be ready for review in the first week in January 2023
- The metrics appeared to indicate that the focussed work on culture is collectively having the desired impact. Mrs Gostling advised that the work relating to culture would be publicised in the new year

Mrs Patel enquired whether the Health Board was adapting to meet the challenges faced in terms of supporting and maintaining the resilience of leadership and staff in the system. Ms Christine Davies advised that a new leadership programme had been designed which would be launched early in 2023. A succession planning framework was also being developed and would be launched in spring 2023. The intention of these two pieces of work was to grow the leaders of the future and for them in turn to grow the culture the Health Board wants to work towards.

Mrs Patel queried the nature of the concerns that had necessitated the establishment of the BAME Task and Finish Group. Ms Christine Davies advised that it had developed from the introduction of the BAME Advisory Group during the COVID-19 pandemic due to the health inequality issues raised in the First Minister's Report. The BAME

	<p>Advisory Group was set up within Hywel Dda to advise the Board. During the listening exercise that had been undertaken a number of concerns had been raised around BAME staff feeling more bullied or harassed than other HDdUHB staff. The Task and Finish Group was set up in response to this issue.</p> <p><i>Ms Jenkins left the meeting</i></p>	
	The Committee <b>RECEIVED ASSURANCE</b> on the progress regarding the cultural progression in 2022 and noted the future direction.	
<b>PODCC (22)125</b>	<b>WORKFORCE PLAN UPDATE</b>	
	It was noted that the Workforce Plan Update had been deferred to the next meeting; 15 <sup>th</sup> February 2023.	<b>MM</b>

<b>PODCC (22)126</b>	<b>1B HYWEL DDA HEALTH HUB - SINGLE POINT OF CONTACT</b>	
	<p>The slides for the presentation <i>Hywel Dda UHB Communication Hub; Year one and the plan ahead</i> had been circulated.</p> <p>Ms Mandy Davies reported that, she was responsible for the Communications Hub and Mrs Sian Hopkins was the Operational Lead. The Communications Hub is part of Planning Objective 1B; progress reports had been provided to the Committee for the past 12-18 months. The Hub was originally set up to act as the Command Centre and central point of contact to support services and respond to queries from the public during the COVID-19 pandemic. The Health Board had agreed Strategic Planning Objective 1B: <i>Building on the success of the command centre, develop a longer-term sustainable model</i>.</p> <p>When the COVID-19 pandemic related demand started to reduce in January 2022, the Command Centre team began to plan the Communications Hub. The team mapped the services already offered and started to identify which could be transitioned to the Communications Hub. The aims of the Communications Hub were outlined.</p> <p>The transition started in early 2022. The Dental Support Service was the first to move to the Communication Hub; all Dental Support Service telephone calls were directed to the Communication Hub – this change released clinical time.</p> <p>In excess of 25 other services moved to the Hub during 2022; more are scheduled to do so in 2023. During the past year, the number of telephone calls managed by the Hub has increased; currently it receives circa 5000 per month.</p> <p>Patients have been invited to share their experiences of the Communications Hub via a survey: 80% of respondents said they found</p>	

	<p>it beneficial to talk to a call handler. Respondents have also made comments such as:</p> <ul style="list-style-type: none"> <li>• Direct contact gave them confidence</li> <li>• They received a prompt response to their queries</li> </ul> <p>It was reported that, before a service is transitioned to the Communications Hub, a pilot phase is usually held. Following transition to the Hub staff reported that the change in process was smooth and efficient. Staff benefits were also reported.</p> <p>A service in crisis transitioned to the Communications Hub without a pilot phase; the move had been successful and led to the improvement of that service.</p> <p>The change allowed new services for patients to be set up, for example the Long COVID Support Service. A team of twelve staff provides the service. An unforeseen benefit of introducing the Communications Hub has been the improvement to services due to the streamlining of pathways and the consistency of advice provided across the three counties. Findings from a Value-based evaluation were also highlighted.</p> <p>Decisions concerning the Communication Hub's next phase have been based on discussions with operational services and the results of risk assessments carried out to identify where there would be greatest impact. The number of requests to transfer to the Single Point of Contact has increased.</p> <p>In response to a question concerning whether the service is being provided bilingually and whether there had been any issues due to patients being unable to access services through the medium of Welsh, the Committee was advised that following two complaints regarding the lack of provision for Welsh speakers the issue has been addressed by means of bilingual call handlers.</p> <p>Mrs Patel thanked Ms Mandy Davies and her team for a comprehensive and interesting report.</p>	
	<p>The Committee <b>NOTED</b> the progress made in relation to Planning Objective 1B, Hywel Dda Health Hub - Single Point of Contact</p> <p><i>Ms Mandy Davies and Ms Hopkins left the meeting</i>  <i>Ms Cobley, Ms Owen and Ms Sullivan joined the meeting</i></p>	
<b>PODCC (22)127</b>	<p><b>ANNUAL EQUALITY REPORT AND PAY GAP REPORTS</b></p> <p>Mrs Bird introduced the Annual Equality Report and Pay Gap Reports and noted that their purpose was to demonstrate that HDdUHB had fulfilled its statutory duties during 2021-2022 and that it had made progress against the Health Board's Strategic Equality Plan (SEP) and</p>	



strategic objectives. It was noted that the report referred to work undertaken almost 12 months previously and a great deal of additional work had happened during the current financial year. It was intended that the Annual Equality Report and Pay Gap Reports for 2022-2023 would be brought to the Committee in the summer of 2023.

MM

Several of the achievements detailed in the SEP report were highlighted:

- Development of the Workforce Culture and establishment of a Bullying and Harassment Task and Finish Group
- Working with local authorities, 3<sup>rd</sup> sector and Welsh Government to support Ukrainians seeking sanctuary in the Hywel Dda area.
- Adoption of a new Children's Charter
- Introduction of a Community Development Outreach Team (CDOT)
- Improvements to services for staff and service users with sensory loss
- Preparations to adopt the Dementia Friendly Hospital Charter

The Report set out the progress in relation to each of the strategic equality objectives. The current 4-year plan would end in 2024 and in 2023 planning will commence for the 2024-2028 plan and new objectives would be undertaken. The next Strategic Equality Plan Annual Report would include the Anti Racist Wales Action Plan. It was anticipated that a LGBTQ Action Plan and a Disability Action Plan would be added to Welsh Government's (WG) overarching Strategic Equalities Plan and that they would include actions for Health Boards.

Pay Gap Report for Gender, Disability & Ethnicity 1<sup>st</sup> April 2021-31<sup>st</sup> March 2022: Ms Sally Owen advised that the teams had come together to deliver a variety of positive actions in relation to all protected characteristics. The Health Board had voluntarily included data for disabled and ethnic groups in the Pay Gap Reports. It was observed that 21.35% of staff had not declared whether or not they had a disability; it was not known whether this proportion was high or low when compared to similar organisations as staff were not required to disclose the information.

A staff disability network had been established in November 2022. The staff agreed the network should be split into two branches: one branch would focus on support for staff with neurodivergent conditions or learning disabilities in the workplace, the other branch would focus on the needs of staff with physical or chronic conditions. The two groups would also meet together to discuss any common areas of interest. It was intended that the staff networks would act as leads for the equality, diversity and inclusion by helping to identify actions that would better support staff affected by those issues in the workplace. A Workforce Adviser for Equality, Diversity and Inclusion had been recruited since the SEP and Pay Gap Reports had been written.

	<p>It was agreed that an update on the work undertaken with the Dream Team, and how it linked to the Health Board's equalities work would be provided at a future meeting.</p> <p>Mrs Patel commended the Workforce and Organisational Development Team on its comprehensive reports.</p>	
	<p>The Committee <b>RECEIVED ASSURANCE</b> from the Strategic Equality Plan Annual Report 2021-2022 and the Disability, Ethnicity and Gender Pay Gap Report 2022 on the work which has been undertaken to meet the (Public Sector Equality Duty) PSED and SEP Objectives.</p> <p><i>Ms Cobley and Ms Owen left the meeting</i></p>	

PODCC (22)128	<b>ANTI RACIST WALES ACTION PLAN</b>	
	<p>The Committee had received for consideration the Update on Implementation of the Anti Racist Wales Action Plan, December 2022. Ms Helen Sullivan reported that the Welsh Government's Vision was to be an anti racist nation by 2030. WG's Action Plan (which would run to 2024) included actions for the Health Service. Health Boards are required to have their own local action plan, in order to demonstrate and measure how they are working towards being anti racist organisations.</p> <p>A workshop was planned for January 2023; representatives from the BAME Advisory Group, the staff network and other colleagues including Workforce Planning and staff side would aim to an action plan would be put in place.</p> <p>Mrs Wilson noted that, this year, the First Minister had set an objective on Anti Racism as a core objective for all Chairs across NHS Wales; this would need to be built into the action plan with assurance provided to the Committee that this objective was on track for PODCC.</p> <p>Mrs Gostling confirmed that the BAME Advisory Group would formally report to PODCC so that it could monitor progress with the Anti Racism Action Plan.</p> <p>The Committee <b>NOTED</b> the progress towards implementation of the Anti-racist Wales Action Plan launched by Welsh Government and that updates will be provided at regular intervals.</p> <p><i>Ms Sullivan left the meeting</i></p>	

PODCC (22)129	<b>PERFORMANCE ASSURANCE &amp; WORKFORCE METRICS</b>	
	<p>Ms Michelle James presented the Performance Assurance &amp; Workforce Metrics report, advising that:</p> <ul style="list-style-type: none"> <li>There had been a reduction to the Staff Engagement score during the last two months. The team is considering new accessible methods of</li> </ul>	



	<p>capturing and reporting staff views. The survey will continue to be issued over the next few months</p> <ul style="list-style-type: none"> <li>• In response to queries at the previous PODCC meeting in October 2022, staff sickness absence data for the four main sites had been included as an appendix</li> </ul> <p>Mrs Hardisty enquired how the Committee could be assured that senior managers are using the data, noting that significant issues should trigger action. Ms James confirmed that managers are provided with monthly reports and advised that, in the week commencing 19<sup>th</sup> December 2022, new Performance Dashboards would be launched; the dashboards would include long and short term sickness data and would identify whether there was action that managers needed to take.</p> <p>Mrs Hardisty enquired whether there was a normal variation in survey responses. Ms James advised that trends were not yet apparent as this was the first year the survey had been used. When particular groups were surveyed the results were likely to be more informative.</p> <p>Mrs Patel thanked Mrs James and her team for the comprehensive report and good quality data, which showed clear improvement.</p>	
	<p>The Committee <b>NOTED</b> the content of the report as assurance of performance in key areas of the Workforce and OD agenda.</p>	

<b>PODCC (22)130</b>	<b>WELSH LANGUAGE AND CULTURE DISCOVERY REPORT (DRAFT)</b>	
	<p>Ms Enfys Williams introduced the Welsh Language and Culture Report, advising Members that the Discovery process had been launched at the National Eisteddfod in August 2022. Two main themes emerged from visitor feedback.</p> <ol style="list-style-type: none"> <li>a. The Health Board needed to ensure that its staff can communicate appropriately with Welsh speaking service users</li> <li>b. The Health Board needed to proactively offer services in Welsh</li> </ol> <p>The statutory Welsh Language Standards are the basis of the Welsh Language Services team's work; however, the team wanted to provide more than the minimum. The following developments were highlighted:</p> <ul style="list-style-type: none"> <li>• A group of switchboard staff had identified that learning Welsh would help to improve their work. The Health Board had invested in those staff by providing a budget to support them with their learning in 2023</li> <li>• A tutor had been employed to work with staff who had reached Level 3 Welsh and would benefit from help to develop their confidence</li> <li>• A calendar of National Welsh days, celebrations and other Welsh items of interest would be launched in January 2023; it would be similar to the inclusion and diversity calendar</li> <li>• Health Board staff reported that they would value simple activities to encourage their Welsh learning. In response, 'phrase of the week'</li> </ul>	

	<p>had been launched in the lead up to Christmas; this had proved popular</p> <ul style="list-style-type: none"> <li>• Following a pilot study conducted by the Health Board the Learning Welsh Centre had provided financial and other resources to help support improvements</li> </ul> <p>The Discovery Report had established the Health Board's current position in relation to the Welsh language and had been critical in setting the agenda; the Welsh Language and Culture Plan would be presented to the Board for approval in March 2023. Professor John Gammon noted that, within the Plan to be delivered to the Board, there would need to be key deliverables, key objectives and timescales for delivery. Mrs Bird advised that there were already a number of key dates celebrating Welsh language and culture in the diversity calendar and indicated that she would welcome a conversation with Mrs Williams to establish whether others could be added. It was noted that the language line included Welsh as well as all other languages. Mrs Delyth Raynsford observed that changes such as ensuring Health Board information notices are bilingual would result in 'quick wins'. It was confirmed that the Health Board's leadership would help to make improvements if all Members of the Board completed the survey.</p> <p>The Committee was reminded that the Planning Objective related to Welsh Culture as well as Welsh language. There was a need to celebrate key events and historical figures in the Welsh culture by, for example, doing more to highlight St David's Day. The Welsh health boards were working collaboratively on celebrations for St David's Day and trying to work together more creatively across other areas.</p> <p>Mrs Wilson reminded Members that this was an assurance committee with the conversation aiming to resolve the issues. Furthermore, the Committee had previously agreed a planning objective in relation to Welsh Language and in particular the Health Board's strategy for Welsh Language, the Welsh Language Standards and the culture within the Health Board. It was essential that future reports focus on the areas which had been agreed by both the Board and Committee and to provide assurance if the work was on track and where any support was needed.</p> <p>Mrs Patel thanked Mrs Williams and her team for their useful report.</p>	
	<p>The Committee <b>NOTED</b> the progress and associated timescales with the delivery of the Board-approved planning objective for Welsh language and culture.</p>	
<p><b>PODCC (22)131</b></p>	<p><b>BAME BULLYING AND HARASSMENT TASK AND FINISH GROUP UPDATE</b></p> <p>Mrs Gostling presented that BAME Bullying Harassment Task &amp; Finish Group Update report, adding that:</p>	

	<ul style="list-style-type: none"> <li>• There had been significant progress and a number of the actions detailed in the report had been completed</li> <li>• There are still a number of actions that the group is working through</li> <li>• There had been a particular focus on the Exit Interview process and cultural awareness</li> </ul> <p>It was noted that there were several people development related actions rated amber on the spreadsheet. Mrs Glanville advised that, at a future meeting, she would welcome an opportunity to discuss those further.</p>	
	<p>The Committee:</p> <ul style="list-style-type: none"> <li>• <b>NOTED</b> the revised action plan and RAG rating.</li> <li>• <b>ENDORSED</b> the progress made to date in terms of introducing means to reduce or eradicate the extent of bullying and harassment experienced by BAME employees.</li> </ul>	

PODCC (22)132	<b>CORPORATE RISKS ALLOCATED TO PODCC</b>	
	<p>The Committee received for consideration the Corporate Risks Assigned to PODCC report. Mrs Gostling noted that the main risk, <i>1406 - Risk of insufficient skilled workforce to deliver services outlined in Annual Plan 22/23 and deliver UHB strategic vision by 2030</i>, needed to be broken down, in order that meaningful actions could be identified. This was being taken forward following a workshop that had been held within the directorate with support from the risk and assurance team.</p>	
	<p>The Committee <b>RECEIVED ASSURANCE</b> that:</p> <ol style="list-style-type: none"> <li>a. All identified controls are in place and working effectively.</li> <li>b. All planned actions will be implemented within stated timescales and will reduce the risk further and/or mitigate the impact if the risk materialises.</li> <li>c. Where assurances are inadequate they are challenged.</li> </ol> <p>This in turn will enable PODCC to provide the necessary assurance (or otherwise) to the Board through its Update Report, that HDdUHB is managing these risks effectively.</p> <p><i>Dr Phillips and Ms Daniel joined the meeting</i></p>	

PODCC (22)133	<b>OPERATIONAL RISKS ALLOCATED TO PODCC</b>	
	There were no Operational Risks requiring consideration at this meeting.	

PODCC (22)134	<b>RESEARCH &amp; INNOVATION SUB COMMITTEE REPORT</b>	
	<p>Dr Leighton Phillips introduced the Research &amp; Innovation Sub-Committee Report and opened the floor to questions.</p> <p>Mrs Patel reminded Dr Phillips that at the previous meeting there had been a query as to whether there was a plan in place to increase clinical leadership in relation to research and innovation. Dr Phillips advised that</p>	

	<p>the Health Board applied to several schemes. The team was involved in the job planning process and related performance discussions to make it core consideration. Due to recent applications under the Health and Care Research Wales Clinical Research Time Award, it was possible that research time would be secured for a small number of clinicians within the organisation. Dr Phillips hoped to provide an update on all points at the next meeting.</p> <p>Mrs Gostling reported that a form of words to be included in all of advertisements for consultant roles had been agreed; the wording had been formed around the expectation that individuals would be involved in innovation and research and that this would be built into job plans.</p> <p>Mrs Hardisty enquired whether the infrastructure for the Biobank had been resolved. Dr Phillips advised that there was a clear pathway to follow; he anticipated being able to provide an update at the next meeting.</p> <p>Mrs Patel thanked Dr Phillips for his informative report.</p> <p><i>Dr Phillips left the meeting</i></p>	
	The People, Organisational Development & Culture Committee <b>NOTED</b> the Research & Innovation Sub Committee Report.	

<b>PODCC (22)135</b>	<b>CORPORATE &amp; EMPLOYMENT POLICIES</b>	
	<p>The Committee received the following policy and appendices:</p> <p>a. 1097 Corporate Safeguarding Policy</p> <p>Mrs Sharon Daniel reported that this was an overarching policy; there were no contentious issues in relation to the Policy. The Policy was approved.</p>	
	<p>The Committee <b>RECEIVED ASSURANCE</b> that 1097 Corporate Safeguarding Policy has been reviewed in line with Policy 190 and the Policy for publication.</p> <p><i>Ms Daniel left the meeting</i></p>	

<b>PODCC (22)136</b>	<b>HUMAN RESOURCES POLICIES</b>	
	<p>The Committee received the following policies:</p> <ul style="list-style-type: none"> <li>• 247 Dealing with Anonymous Communications Regarding Members of the Workforce Policy</li> <li>• 113 Learning &amp; Development Policy</li> <li>• 100 Organisational Induction Policy and EqIA</li> <li>• 109 Time in Lieu Procedure</li> <li>• 001 Adverse Conditions</li> </ul>	

	<p>The Committee noted the following review for information:</p> <ul style="list-style-type: none"> <li>Guidelines for extending sick pay</li> </ul> <p>Mrs Gostling advised that all of the policies had been reviewed by the Partnership Forum; comments from staff representatives had been incorporated into the versions submitted to the Committee.</p>	
	<p>The Committee:</p> <ul style="list-style-type: none"> <li><b>RECEIVED ASSURANCE</b> that the above documents had been reviewed in line with the Written Control Documentation (WCD) Policy (policy number 190).</li> <li><b>APPROVED</b> the following documents for publication: <ul style="list-style-type: none"> <li>a. 247 Dealing with Anonymous Communications Regarding Members of the Workforce Policy</li> <li>b. 113 Learning &amp; Development Policy and EqIA</li> <li>c. 100 Organisational Induction Policy and EqIA</li> <li>d. 109 Time in Lieu Procedure</li> <li>e. 001 Adverse Conditions.</li> </ul> </li> </ul>	
<b>PODCC (22)137</b>	<p><b>OUTCOME OF ADVISORY APPOINTMENTS COMMITTEE</b></p> <p>The Committee received the Advisory Appointments Committee (AAC) Report, providing an update on the outcome of the AACs held between 4<sup>th</sup> October 2022 to 21<sup>st</sup> November 2022, and approved the following appointments on behalf of the Board:</p> <ul style="list-style-type: none"> <li>Dr Victoria Hughes was appointed to the post of Consultant in Emergency Medicine based in Withybush General Hospital. Commencement date to be April 2023.</li> <li>Dr Benjamin Jonathan Hedley Davies was appointed into the post of Consultant in General Medicine with an interest in Gastroenterology based at Prince Philip Hospital. Commencement date to be January 2023</li> <li>Dr Zena Marney was appointed to the post of Consultant Physician in Care of the Elderly based at Prince Philip Hospital. Commencement date to be January 2023.</li> <li>Dr Sri Rama Nidumolu was appointed to the post of Consultant in General Medicine with an interest in Diabetes and Endocrinology based at Prince Philip Hospital. Commencement date to be confirmed once Dr Sri Rama Nidumolu has obtained GMC Specialist Registration.</li> </ul> <p>Mrs Gostling advised that during an informal review exercise it had been realised that 50 Consultants had been appointed during the past year. Professor Gammon enquired whether the informal review could be circulated; Mrs Wilson agreed to work with Mrs Gostling to establish</p>	<b>JW/LG</b>

	whether there were any governance related matters that would prevent circulation. Mrs Hardisty thanked Mrs Gostling's team for the efforts made to ensure appointments were made, particularly in relation to Care of the Elderly.	
	The Committee <b>APPROVED</b> on behalf of the Board the outcome of the AACs held between 4 <sup>th</sup> October 2022 to 21 <sup>st</sup> November 2022.  <i>Ms Owen left the meeting</i>	
<b>PODCC (22)138</b>	<b>PODCC WORKPLAN 2022/23</b> The Committee <b>NOTED</b> the PODCC Workplan for 2022/23.	
<b>PODCC (22)139</b>	<b>MATTERS FOR ESCALATION TO BOARD</b> There were no items for escalation to the Board.	
<b>PODCC (22)140</b>	<b>DATE AND TIME OF NEXT MEETING</b> 9.30am, 15 <sup>th</sup> February 2023	