

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

<b>Date and Time of Meeting:</b>	18 <sup>th</sup> August 2022 at 9:30 a.m.
<b>Venue:</b>	Board Room, Ystwyth Building, Hafan Derwen, St David's Park, Carmarthen, SA31 3BB

<b>Present:</b>	Mrs Judith Hardisty, Independent Member (PODCC Vice-Chair) Mrs Chantal Patel, Independent Member Ms Ann Murphy, Independent Member (VC) Mrs Delyth Raynsford, Independent Member
<b>In Attendance</b>	Mrs Lisa Gostling, Director of Workforce & Organisational Development (PODCC Executive Lead) Mrs Mandy Rayani, Director of Nursing, Quality and Patient Experience Mrs Joanne Wilson, Board Secretary (VC) Ms Jill Paterson, Director of Primary Care, Community and Long Term Care (part) Mr John Evans, Assistant Director, Medical Directorate, deputising for Professor Philip Kloer, Medical Director/Deputy Chief Executive (VC) Dr Jo McCarthy, Deputy Director of Public Health (VC) Professor John Gammon, Strategic Advisor (Workforce, Education & Training) Ms Alwena Hughes-Moakes, Communications Director (VC) Ms Bethan Lewis, Interim Assistant Director of Public Health (VC) Ms Christine Davies, Assistant Director of Organisation Development (VC) Ms Heather Hinkin, Head of Workforce & OD (VC) Mrs Amanda Glanville, Head of Workforce Education & Development (VC) Ms Tracy Walmsley, Senior Workforce Development Manager (VC) Dr Leighton Phillips, Director of Research and Innovation (VC) (part) Professor Chris Hopkins, Head of Innovation & TriTech Institute (VC) (part) Ms Helen Sullivan, Head of Partnerships Diversity and Inclusion (VC) Ms Michelle James, Head of Digital Workforce Solutions (VC) (part) Ms Sarah Barnes, Workforce Manager, Systems and Workforce Intelligence (VC) (part) Ms Sharon Richards, Senior Workforce Manager, Efficiency, Job Evaluation and Business (VC) (part) Mr Phil Jones, Audit Wales (observing) (VC) Mr Gareth Heaven, Internal Audit Manager (observing) (VC) Ms Karen Richardson, Partnership and Governance Officer (minutes)

<b>Agenda Item</b>		<b>Action</b>
<b>PODCC (22)70</b>	<b>INTRODUCTIONS AND APOLOGIES FOR ABSENCE</b>	
	Mrs Judith Hardisty welcomed all to the meeting, in particular Mrs Chantal Patel, Independent Member University, the incoming PODCC Chair. Mrs Hardisty advised that Professor John Gammon now attend PODCC as the Strategic Advisor (Workforce, Education & Training) and his expertise is very much appreciated.	

	<p>Apologies for absence were received from:</p> <ul style="list-style-type: none"> <li>• Professor Philip Kloer, Medical Director/Deputy Chief Executive</li> <li>• Mr Anthony Dean, Chair Partnership Forum</li> </ul>	
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PODCC (22)71	<b>DECLARATIONS OF INTEREST</b>	
	Professor Chris Hopkins declared an interest as an Honorary Chair of the University of Wales Trinity Saint David (UWTSD).	

PODCC (22)72	<b>MINUTES AND MATTERS ARISING FROM THE PREVIOUS MEETING HELD ON 20<sup>th</sup> JUNE 2022</b>	
	<b>RESOLVED</b> – that the minutes of the People, Organisational Development & Culture Committee meeting held on 20 <sup>th</sup> June 2022 be <b>APPROVED</b> as an accurate record of proceedings.	

PODCC (22)73	<b>TABLE OF ACTIONS FROM THE PREVIOUS MEETING HELD ON 20<sup>th</sup> JUNE 2022</b>	
	An update was provided on the Table of Actions from the PODCC meeting held on 20 <sup>th</sup> June 2022, with confirmation received any outstanding actions have either been progressed or forward planned for a future Committee meeting.	

PODCC (22)74	<b>SELF-ASSESSMENT OF COMMITTEE EFFECTIVENESS - OUTCOME</b>	
	<p>Members received the outcome report and progress on the PODCC Self-Assessment 2021/22 Action Plan report.</p> <p>Mrs Lisa Gostling welcomed the positive comments relating to the performance of the Committee, particularly given that PODCC has only been established for one year. The responses have been agreed following a meeting with the Board Secretary and work will be undertaken to ensure delivery on areas identified within the report.</p> <p>Prof. Gammon commented on feedback from the self-assessment outcome, however highlighted a need for improved appropriate representation across professional groups and suggested this requires further discussion. In terms of representation, Mrs Hardisty noted previous discussions at the Committee on this regard and welcomed the inclusion of a Primary Care report on the agenda for this meeting, which is increasingly important to the delivery of our strategy.</p> <p>Further to Prof. Gammon’s comment, Mrs Delyth Raynsford emphasised the importance of PODCC understanding the experiences of our staff and suggested that PODCC receive regular staff stories. Mrs Gostling</p>	<b>LG</b>

	<p>agreed to this suggestion, confirming they would be forward planned on the Committee workplan.</p> <p>Mrs Hardisty advised that the self-assessment process is currently being reviewed by the Board Secretary and Ms Anna Lewis, Independent Member before it is reissued again next year. In addition, highlighted the importance of Members completing the questionnaires, given that those responses provide a valuable insight to the Committee's progress during the year.</p>	<b>CSO</b>
	The People, Organisational Development & Culture Committee <b>RECEIVED ASSURANCE</b> that any actions from the PODCC Self-Assessment 2021/22 are being progressed within the agreed timescales.	
<b>PODCC (22)75</b>	<b>MONITORING OF WELSH HEALTH CIRCULARS (WHCS) (BI-ANNUALLY)</b>	
	There are currently no open Welsh Health Circulars aligned to PODCC.	
<b>PODCC (22)76</b>	<b>RATIFICATION OF CHAIRS ACTION: EMPLOYER PENSION CONTRIBUTIONS –ALTERNATIVE PAYMENT POLICY</b>	
	Members received the Employer Pension Contributions –Alternative Payment Policy.	
	Ms Gostling advised that the policy has previously been presented to PODCC, however feedback from staff suggested further clarity was required in terms of the support provided. The policy has now been amended and presented for ratification following Chairs Action.	
	<i>Dr Leighton Phillips and Professor Chris Hopkins joined the Committee meeting.</i>	
	The People, Organisational Development & Culture Committee <b>RATIFIED</b> Chairs Action - Employer Pension Contributions –Alternative Payment Policy.	
<b>PODCC (22)77</b>	<b>DEEP DIVE: RECRUITMENT</b>	
	Deferred to 20 <sup>th</sup> October 2022.	
<b>PODCC (22)78</b>	<b>PRIMARY AND COMMUNITY WORKFORCE &amp; OD PLANNING UPDATE</b>	
	Ms Jill Paterson presented the Primary and Community Workforce & OD Planning Update advising that the breadth of the portfolio is wider than outlined within the report. In particular suggesting that a future report could include care home and community workforce and the interface across a number of employers to understand this area of work. However, adding that the report focuses on our independent contractors,	<b>JP/ CSO</b>

in particular GMS and dental, given our understanding of this area due to previously holding 70% of the funding. Ms Paterson outlined previous challenges for practice staff accessing training courses, although welcomed the improved training opportunities through our university contracts. The Health Board currently has four managed practices, which will shortly increase to five and is responsible for all primary care services across a population of circa 27,000 patients. The ongoing challenges due to staff availability and medical cover has been raised with the Executive Team (ET). Therefore, working creatively with our wider workforce within the Health Board is going to be important going forward. During the last year Welsh Government (WG) has introduced the Welsh National Workforce Reporting system, and whilst limited at present with only noting the numbers within General Medical practices, it will be evolved to include other contractors.

Given the age profile of staff in Primary Care (PC), the team are working towards a workforce strategy and liaising with Health Education and Improvement Wales (HEIW), including utilising national funding when available. One area where the Health Board is leading in Wales is the Physicians Associate (PA) posts in North Ceredigion, with Ms Paterson proposing that the GP-PA Development Manager could present a report on this work to a future meeting of PODCC. Ms Paterson further outlined the Accelerated Cluster Development (ACD) OD programme advising given that this programme will be accountable to the Regional Partnership Boards (RPB) work has commenced locally to establish the level of OD/Workforce Planning intervention required for the various partners and agencies who need to be engaged in the ACD programme. The importance of culture work being undertaken across the Health Board was emphasised, which is being supported by the Organisational Development Relationship Managers (ODRMs), which in turn will support future development of our workforce. Once completed the Primary Care Workforce Strategy will be presented to PODCC via the Strategic People Planning & Education Group.

Prof. Gammon welcomed the development of a Primary Care Workforce Strategy in order to shape different roles, however commented that the key to a successful strategy will be identifying which roles are required going forward. As part of my new role, suggested linking with HEIW & WG to progress. Ms Paterson welcomed this support, advising that there has been a disparity in terms of the financial cost of development training for general practice staff as opposed to hospital staff, emphasising that the cost should be the same regardless of where staff work. Adding that in order to create a workforce for the 21<sup>st</sup> century training opportunities in this sector will need to increase and suggested this could be provided by universities. In response, Prof. Gammon enquired whether the Health Board could commission its own training.

Mrs Chantal Patel suggested that further work may be required to highlight the benefits of PAs with the public. Mrs Raynsford agreed adding that initiatives to improve staff retention in PC should be

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identified. In response Ms Paterson evidenced the national campaign to choose well, in order to direct the public to alternative PC services; however, it should be recognised that a small number of patients will only accept an appointment with a doctor.

Mrs Amanda Glanville commented that the key role of the education team will be to support this work, and how it aligns with the overarching Health Board workforce plan.

Mrs Lisa Gostling believed that historically WG have not connected workforce planning for PC and acute staff and suggested that the Health Board may need to influence a change of strategy.

Reflecting on the public engagement events in 2018 as part of the Health Board's 'A Healthier Mid and West Wales' Strategy, Mrs Hardisty noted public concerns in terms of PC plans.

Whilst welcoming the report, Mrs Hardisty enquired whether data is available on the number of GP trainees who received financial incentives to train in Hywel Dda University Health Board (HDdUHB) have remained. For contextual purposes Ms Paterson advised that each GP trainee received £10,000 at the start of the scheme and a further £10,000 after completing a year within general practice. In terms of numbers understood that there are between 20 and 25 in Pembrokeshire, 15 in Aberystwyth and 45 in Carmarthen. However, agreed to confirm the number from the first cohort of GP trainees who have stayed beyond the first year.

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Mrs Patel advised that GPs are leaving the service following frustration with a lack of continuity between tertiary services and enquired whether they are being asked to feedback on other reasons for leaving. Further enquired whether discussions take place on acute sites between Welsh Ambulance services and consultants on how best to manage patients, which is a further frustration of GP's. In response Ms Paterson noted the significant progress by both Dr Mark Henwood, Deputy Medical Director (Secondary Care) and Sion James, Deputy Medical Director (Primary and Community Services) to improve communication between acute sites and GPs. As part of this work discussions have taken place on alternative ways of working, however it is accepted that more work is required.

Prof. Gammon suggested that as part of the strategic planning the Health Board may need to widen the incentivisation packages and work with other providers to include additional training opportunities to progress staff development rather than only offering financial packages. In response, Ms Paterson referred to a fast-tracked programme for GP's however the Deanery have not been fully supportive of this approach. For assurance stated that discussions are planned with HEIW and the Deanery and would welcome Prof. Gammon's involvement in the process.

	<p>Mrs Hardisty welcomed the comments from Members and suggested that a report be presented to a future meeting of PODCC on the PC Strategy for the retention and recruitment of staff.</p> <p><i>Ms Jill Paterson left the Committee meeting.</i></p> <p><i>Ms Sharon Richards joined the Committee meeting.</i></p>	<p><b>JP/ CSO</b></p>
	<p>The People, Organisational Development &amp; Culture Committee <b>NOTED</b> the work undertaken and the current position with regard to the Primary Care workforce and OD Plan.</p>	

<p><b>PODCC (22)79</b></p>	<p><b>WORKFORCE EFFICIENCY</b></p> <p>Members received the Workforce Efficiency Report providing an update progress against the workforce efficiency agenda.</p> <p>Ms Sharon Richards advised that in response to a request from the Executive Team, a three-year Workforce Efficiency Programme has been scoped in order to deliver a £7.65m saving. This has resulted in 39 individual schemes being identified as potential opportunities to deliver workforce efficiencies equating to a 15% reduction in variable pay. The report sets out a number of risks to delivery in particular supply and demand and service pressures. In terms of the next steps the team are identifying how to track the financial impact relating to the interventions associated with the schemes and whether they are cash releasing or cost avoidance. The team are working with Finance to track progress against the financial impact, with the development of a data warehouse. This should enable the team to not only map the impact of a number of reductions in variable pay but also to the impact in terms of the establishment, which has previously not been possible.</p> <p>Mrs Raynsford requested assurance that support will be available for staff whilst the programme is progressing. Mrs Gostling recognised that staff may have concerns and advised that staff wellbeing is at the forefront of this approach in order to stabilise sites resulting in a sustained workforce. One area to highlight has been the successful recruitment of overseas nurses. There are plans to recruit more however due to the lack of nurse accommodation across the Health Board, this will need to be taken into consideration as part of the estate strategy.</p> <p>Accepting that previously the Health Board has struggled to recruit nurses, Mrs Patel enquired about the plans to improve recruitment going forward. Ms Gostling advised that the team recognised a change of direction was needed, which resulted in placing adverts overseas to fill vacancies. The intention is to recruit 100 nurses for one specific site which should reduce agency nurse requirements and therefore reduce variable pay costs, with the financial team monitoring the baseline.</p>	
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Mrs Patel referred to a successful pre nursing scheme which operated during the 1970's where the majority of students progressed to full nurse training and enquired whether a similar initiative could be established. In response, Mrs Gostling cited the Hywel Dda Apprentice Academy, which commenced in September 2019. In September 2022, 60 apprentices are due to start, with a further 40 in January 2023. The overseas nurses will have an immediate impact, with the apprentice's part of our longer-term strategy.

Mrs Mandy Rayani highlighted that one aspect of the staffing structure, which is not referenced within the report is the need to ensure that the rota on wards meet the needs of the patient. Whilst the wards are compliant with the Nurse Staffing Levels (Wales) Act 2016, it has been recognised that workforce models need to adapt to not only focus on numbers and improved technology should support this progress. In the interim the delegation framework provides clarity for the teams when determining the skill mix on each ward. Further, HEIW are exploring options on how we create a workforce that stops focusing on numbers.

Recognising the biggest risk is supply and demand, Prof. Gammon commented that this year's nurse enrolment at Swansea University is lower than in previous years, therefore proposing that the Health Board may need to be more creative in terms of developing multi-faceted staffing models. Further, understanding that other Health Boards are also recruiting from the same pool of overseas nurses, enquired how HDdUHB can be seen as more attractive than another Health Board and offered to support this from a strategic perspective.

Mrs Gostling referred to a news report which stated that 1/5 teenagers are choosing apprenticeships over university education and wondered whether teenagers are choosing the apprenticeship programme as an alternative route to avoid financial debt. Mrs Raynsford suggested the change could be driven by economic reasons and could be the catalyst for change, adding that discussions may be required with Local Authority partners on affordable housing for the health and social care workforce.

Ms Ann Murphy provided feedback from a meeting with the new overseas nurses, one area of interest discussed was the option of the opportunity to complete a master's degree and enquired whether development opportunities could be included in advertising campaigns. Mrs Patel echoed this, advising that when she met with the nurse's future development was important to them. Whilst agreeing, for equitable purposes, Mrs Hardisty stated that this option would need to be included for all nursing vacancy campaigns.

Mrs Rayani understood that the workforce team are working with the Black, Asian and Minority Ethnic (BAME) Advisory Group and the overseas nurses to ensure that they have equity of opportunity in the availability of training. Further plans are to work with the nursing

	<p>leadership to ensure that all staff have the option to pursue development opportunities.</p> <p>Within the online chat, Mrs Alwena Hughes-Moakes commented that providing guaranteed accommodation for undergraduates was a significant selling point for Aberystwyth University.</p> <p>Mrs Hardisty requested an update on discussions regarding staff accommodation in the estate’s strategy. In response Mrs Gostling confirmed that discussions have taken place with the Director of Strategic Development &amp; Operational Planning and the Director of Operations, the next stage will be to have detailed discussions with the Director of Estates, Facilities and Capital Management. For assurance purposes, Mrs Hardisty requested an update on progress before the next PODCC meeting in October 2022.</p> <p><i>Ms Sharon Richards left the Committee meeting.</i></p>	<b>LG</b>
	<p>The People, Organisational Development and Culture Committee <b>RECEIVED ASSURANCE</b> from the Workforce Efficiency Report of the work being undertaken to address the challenge of variable pay.</p>	

<p><b>PODCC (22)80</b></p>	<p><b>WORKFORCE PLANNING MODEL FOR HEALTH VISITORS</b></p> <p><i>Ms Bethan Lewis joined the Committee meeting.</i></p> <p>Ms Bethan Lewis presented the Workforce Planning Model for Health Visiting outlining the short, medium and long-term approaches to workforce planning. Whilst the challenges with the current staffing deficits are noted a strategic vision has now been developed with stakeholders for the Health Visiting Service.</p> <p>Mrs Tracy Walmsley advised that from a practical level the team could provide support on the ground to support a demand and capacity assessment, reviewing population health and census data. It is recognised that this is a significant piece of work in order to reduce the current vacancies in the workforce. Further work is being progressed with the OD Relationship Managers to engage locally and support morale within the team.</p> <p>Members welcomed the significant progress since the challenges were presented to the Quality, Safety and Experience Committee (QSEC) and the comments following a workshop with staff noted within the report.</p> <p>Whilst the trajectory suggests a long-term decrease in births, Mrs Raynsford understood that the demand on the Health Visitors workforce is more extensive post COVID-19 due to an increase in speech and developmental delay. Given the role of the Health Visitor is evolving, enquired whether current staff are being supported and secondly how is the team is managing the expectations of the public. Mrs Lewis advised that a number of data sources are being used to determine future workforce planning, accepting that demand capacity will change in</p>	
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	<p>future. However, in terms of immediate staff concerns the team are considering alternative approaches, similar to those within Ceredigion. In addition, identifying how we can approach the individualised home visit, and clinic-based visits which have been very successful. Further engagement is taking place with the Health Visiting and Therapies Teams in order to streamline the process and identify alternative staffing models. Mrs Lewis advised that plans are in place to expand Flying Start from September 2022, with a further expansion from January 2023. This is the start of a long-term process, which aspires to create a team to support the parent and family.</p> <p>Whilst noting that currently the workforce structure of the Health Visiting team is within the Public Health Directorate and not nursing, Prof. Gammon enquired whether a move of directorate could provide greater flexibility across the Health Board. Whilst understanding the philosophical thoughts as to the current structure, believed from a strategic perspective moving the service may enable the Health Board to manage the workforce more effectively. Further referring to the plans for a range of roles from bands 2-6 noted within the report, these may also benefit from a change of directorate. Prof. Gammon further enquired whether HDdUHB is influencing service delivery with our commissioners to ensure that we are receiving an equitable service and offered his support to the team. Due to time constraints, it was agreed that Mrs Lewis would provide a response via the table of actions.</p>	BL
	<p>The People, Organisational Development and Culture Committee <b>RECEIVED ASSURANCE</b> from the Workforce Planning Model for Health Visiting that:</p> <ul style="list-style-type: none"> <li>• there is a defined process</li> <li>• engagement from the Health Visiting Team has been sought from the outset</li> <li>• a plan is in place to develop the strategic approach to align to our aspirations of a social model of Health</li> <li>• operational and tactical interventions have been taken to mitigate risk in the short to medium term, supported by ODRM's</li> <li>• reputational, operational and financial risks will be reflected in the final report/plan for the Committee.</li> </ul>	
<p><b>PODCC (22)81</b></p>	<p><b>TRITECH INSTITUTE BUSINESS PLAN</b></p> <p>Prof Hopkins presented the TriTech Institute Business Plan advising that the TriTech Institute has now been operating for 12 months. Members were advised that prior to presentation at PODCC, the five-year business plan for the Trittech Institute was agreed by the TriTech Management Group and the Executive Team and endorsed by the Research and Innovation Sub Committee (R&amp;ISC).</p> <p>Prof. Gammon believed HDdUHB should be extremely proud of this innovation, the intent and ambition of the Research Team in particular the links to current regional developments, particularly Pentre Awel, in</p>	

	<p>Llanelli. Further, the plans should facilitate commercial opportunities around research and suggested this approach could be replicated in developing future training opportunities.</p> <p>Mrs Raynsford commented that the plan places HDdUHB at the forefront for recruitment and retention of staff.</p> <p>Members commended the content of the TriTech Business Plan and approved for onward submission to Board in September 2022.</p> <p><i>Prof. Chris Hopkins left the Committee meeting.</i></p>	
	<p>The People, Organisational Development and Culture Committee <b>RECEIVED ASSURANCE</b> from the TriTech Institute Business Plan and <b>APPROVED</b> for onward submission to Board.</p>	

<b>PODCC (22)82</b>	<b>STRATEGIC EQUALITY PLAN ANNUAL REPORT</b>	
	Deferred to 20 <sup>th</sup> October 2022.	

<b>PODCC (22)84</b>	<b>BILINGUAL SKILLS POLICY – UPDATE ON PROGRESS</b>	
	<p>Mrs Gostling presented an update on the progress of implementing the Bilingual Skills Policy which was approved in September 2021. The report outlines where we have improved performance either in terms of collecting intelligence or improvements by numbers of people who can speak Welsh in directorates. In terms of recruitment, there has been an improvement in the number Level 3 to 5 Welsh Speakers appointed to Welsh Essential vacancies, in addition to 40% of our 2022 apprentices and 24% of our volunteers being Welsh speakers. Mrs Gostling advised that HDdUHB received the Welsh in the Workplace employers' award from Aberystwyth University at the Eisteddfod in recognition of the development of Rho Gynnig Arni' brand to encourage staff to use the Welsh language in the workplace. In summary Mrs Gostling drew Members' attention to the staff story within the report evidencing how individuals are supported to use Welsh in the workplace.</p> <p>Mrs Hardisty expressed thanks to Ms Sally Owen, Head of Recruitment and Workforce Equality, Diversity and Inclusion on highlighting the significant improvement in Welsh speakers for PODCC.</p> <p>In recognition of our development Ms Hughes-Moakes informed Members that during the Eisteddfod the Health Board received an offer of funding from the Welsh for Adults Centre. Further discussions are required to establish the scope of the offer, however essentially the Centre has offered their support with a post to improve staff confidence when conversing in Welsh.</p> <p>As a Welsh speaker Mrs Raynsford believed that the Eisteddfod provided HDdUHB with a fantastic opportunity to be at the forefront of Welsh language and culture. In addition, Mrs Eluned Morgan, Minister</p>	

	<p>for Health and Social Services of Wales attended the festival to launch the <i>more than just words</i> initiative, which is the WG’s strategic framework to strengthen Welsh language provision in health and social care. The Minister welcomed the progress made by HDdUHB in terms of Welsh language. Following the success of the Eisteddfod Mrs Raynsford envisaged an increase in volunteers within HDdUHB and believed that the Director of Communications and Welsh Language Team should be congratulated for their drive and enthusiasm.</p> <p>Mrs Patel enquired whether overseas nurses have opportunities to learn Welsh. Mrs Granville advised that Welsh language is becoming a main focus for HDdUHB adding that education and development officers have recently been appointed with plans to deliver this provision in Welsh. Whilst progress is needed in terms of induction training, we have recently launched our first, making a difference in the Welsh language, which is the first step for HDdUHB. Further, with the support of the Welsh Language Team the induction training package will be translated, in addition to Welsh language courses and opportunities for Welsh language throughout our programmes. In response Mrs Gostling confirmed that as part of the overseas nurse induction, a session on Welsh culture is included.</p> <p>Mrs Raynsford reiterated the difference between conversational and academic Welsh, suggesting that a list of common words and phrases should be available on wards. Mrs Raynsford agreed to discuss how this could be progressed with Mrs Hughes-Moakes.</p> <p>Whilst welcoming the increase in Welsh speakers, Mrs Rayani relayed feedback from patients advising that consideration needs to be made to non-Welsh speaking patients and staff.</p>	<b>AHM</b>
	<p>The People, Organisational Development &amp; Culture Committee <b>RECEIVED ASSURANCE</b> from the report on the progress of implementing the Health Board’s Bilingual Skills Policy.</p>	

<p><b>PODCC (22)85</b></p>	<p><b>ANTI RACIST WALES ACTION PLAN</b></p> <p>Mrs Gostling gave an overview of the Anti-racist Wales Action Plan, which has been launched by WG as part of its vision to be an anti-racist nation by 2030.</p> <p>Ms Helen Sullivan advised that the Anti-racist Wales Action Plan follows on from the work started by WG in 2020 for race equality. The Anti-racist Wales Action Plan covers the period June 2022 – June 2024, with 11 policy areas, including holding the Health Board to account on the five enabling goals for Health. WG has started to design a Strategic Progress Measurement Framework, which will be the main reporting tool for the plan, although this will not be available until Autumn 2022 at the earliest.</p>	
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	<p>Mrs Patel welcomed the trajectory of WG, however remained cautious on whether this will be achievable by 2030, although agreed to hold judgement until the Strategic Progress Measurement Framework is available to evidence how this will be achievable in practice. In response Mrs Gostling believed that the work of the Diversity and Inclusion Team will be pivotal in this regard, with ensuring that the plan is shared with a number of groups to gather to views of staff across our organisation.</p> <p>In response to a query from Mrs Hardisty, Ms Sullivan confirmed that Local Authorities have been allocated similar enabling goals as strategic partners of the Regional Partnership Board (RPB). Mrs Gostling added that the plan will also be presented to the Regional Workforce Board.</p> <p>Mrs Hardisty requested that an update on the implementation of the plan be forward planned on the PODCC work plan.</p> <p><i>Ms Michelle James and Ms Sarah Barnes joined the Committee meeting.</i></p> <p>The People, Organisational Development &amp; Culture Committee <b>ACCEPTED</b> the overview of the Anti-racist Wales Action Plan launched by Welsh Government and <b>NOTED</b> that updates will be provided at regular intervals on the Health Board’s progress against the 21 health specific actions and 6 additional actions for all public bodies.</p>	<p>HS /CSO</p>
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<p>PODCC (22)86</p>	<p><b>PERFORMANCE ASSURANCE &amp; WORKFORCE METRICS</b></p> <p>Mrs Gostling presented the Performance Assurance &amp; Workforce Metrics report advising that it continues to develop and expressed thanks to Michelle James and Ms Sarah Barnes on the progress to date.</p> <p>Ms James provided an overview of the key points contained within the report, specifically the work undertaken with employee relations. In terms of recruitment, from vacancy creation to conditional offer HDdUHB are performing better than other health boards in Wales for this measure. It is also pleasing to note that HDdUHB remain the lowest in Wales for sickness absence during the previous 12 months.</p> <p>Whilst noting that the Health Board is out performing other Health Board in Wales, Mrs Hardisty commented that there is always a focus on the financial aspects and enquired whether HDdUHB are highlighting our successes. In agreement Mrs Rayani commented given our significant financial deficit the feedback received when promoting the good work of the Board at the Joint Executive Team meetings, revolves around “at what cost”. Acknowledging that the financial impact is important, Mrs Rayani believed that any feedback needs to be balanced.</p> <p>Prof. Gammon welcomed the detail in particular in terms of future workforce and believed the report provides a clear understanding of workforce staffing metrics. It is interesting to note the extent to which the HDdUHB is supporting study leave and investing in the continued</p>	
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	<p>personal development of our workforce. Whilst it is helpful for benchmarking purposes, combining the individual workstreams could be beneficial from a strategic perspective.</p> <p>In response to a query from Mrs Hardisty regarding the detail available to directorates, Ms James advised that currently a number of the new metrics are not accessible, however confirmed that this will be progressed as part of the next phase. Mrs Gostling added that the OD Relationship Managers also use elements of this data during discussions with individual services around their culture work. In terms of timescales, the workforce intelligence dashboard for directorates is currently being discussed with the team and agreed to provide an update by the next PODCC meeting.</p> <p><i>Ms Michelle James and Sarah Barnes left the Committee meeting.</i></p>	<b>LG</b>
	<p>The People, Organisational Development &amp; Culture Committee <b>NOTED</b> the content of the Performance Assurance &amp; Workforce Metrics report as assurance of performance in key areas of the Workforce and OD agenda.</p>	

<b>PODCC (22)87</b>	<p><b>CORPORATE RISKS ALLOCATED TO PODCC</b></p> <p>The Committee received the Corporate Risks assigned to PODCC.</p> <p>In terms of the one risk aligned to PODCC (RR1406) Mrs Gostling advised that the risk is from a high level position and may not reflect the current position for each staff group. A review will be undertaken to understand the differences across each site, accepting that not all staff groups have risk score of 16. Once completed, re-assurance will be provided on the overarching workforce risk.</p> <p>Prof. Gammon recognised that a number of variables, including the previous mitigations, whether operationally or strategically will have an impact on the overall score. Whilst agreeing to the approach suggested by Mrs Gostling enquired to the expected impact on the risk score following the proposed workforce strategies. In response Mrs Gostling stated that the long term trajectory is part of the 10 year workforce strategy and advised that discussions have taken place with the Assistant Director of Governance and Risk to ensure that Board Assurance Framework aligns with this.</p>	
	<p>The People, Organisational Development and Culture Committee <b>RECEIVED ASSURANCE</b> that:</p> <ul style="list-style-type: none"> <li>• All identified controls are in place and working effectively.</li> <li>• 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> </ul>	

<b>PODCC (22)88</b>	<p><b>OPERATIONAL RISKS ALLOCATED TO PODCC</b></p> <p>No operation risks are currently highlighted.</p>	
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<b>PODCC (22)89</b>	<b>BLACK, ASIAN AND MINORITY ETHNIC (BAME) ADVISORY GROUP TERMS OF REFERENCE</b>
	<p>Ms Sullivan presented the BAME Advisory Group Terms of Reference (ToRs) for approval, outlining the following amendments:</p> <ul style="list-style-type: none"> <li>• a change to the reporting structure, given that the BAME Advisory Group previously reported to Board.</li> <li>• changes to the Membership, which now includes the Chair and Vice Chair of the BAME Staff Network.</li> <li>• inclusion of the BAME Staff Network will now reports to the BAME Advisory Group.</li> </ul> <p>Mrs Gostling advised that discussions are required on whether future updates from the BAME Advisory Group will be incorporated within an overarching “Culture” update. However, provided assurance that until an agreement has been reached PODCC will receive separate BAME Advisory Group update reports.</p> <p><i>Ms Helen Sullivan left the Committee meeting.</i></p> <p>The People, Organisational Development &amp; Culture Committee <b>APPROVED</b> the BAME Advisory Group ToRs.</p>

<b>PODCC (22)91</b>	<b>RESEARCH &amp; INNOVATION SUB COMMITTEE REPORT</b>
	<p>The Committee received the Research &amp; Innovation Sub-Committee (R&amp;ISC) update report following the meeting held on 18<sup>th</sup> July 2022.</p> <p>Dr Leighton Phillips advised that the R&amp;ISC has only met once since PODCC in June 2022 in order to discuss and approve the TriTech Business Plan. However, the update report also provides details on R&amp;D activity since the previous update to PODCC, including details on the current risk and financial positions.</p> <p>In terms of the format of the R&amp;ISC report, Mrs Hardisty commented that it is similar to those received by the Operational Quality Safety and Experience Sub-Committee and believed placing the risks at the end of the report is helpful for Members.</p> <p>Recognising that the delivery of the TriTech Business Plan is dependent on our capability and capacity strategy for research, Prof. Gammon suggested that discussions may be required with Mrs Gostling and Dr Phillips on ways to support medical staff to deliver research activity.</p> <p>Mrs Rayani stated that research and innovation is much wider than one staff group, commenting that discussions have taken place on how to support the nursing workforce to contribute to research activity.</p> <p>Mrs Murphy commended the work of the research and innovation teams, however believed that the without promotion within the Health Board,</p>

	<p>staff will not utilise the expertise. Whilst welcoming the points raised, Dr Phillips advised that the team have focused on creating a strong foundation to progress research and innovation and now are in a position to communicate and engage with staff about how research and innovation can assist them and their patients.</p> <p>Mrs Glanville advised that following on from discussions with Dr Phillips and the workforce team a plan is being developed on how to promote research and innovation as part of the staff induction programme, in order to sign post interested staff. In addition, a meeting is planned with the Communications Director on how to promote research and innovation and extended the invite to Dr Phillips.</p> <p>Mrs Hughes-Moakes accepted that promoting work in this area can be improved and suggesting utilising LinkedIn to highlight successes and celebrate staff and developments.</p> <p>Mrs Hardisty welcomed the partnership working with Health &amp; Social care following successful funding bids for Prehab/Reablement in elective surgery with Pembrokeshire County Council.</p> <p><i>Dr Leighton Phillips left the Committee meeting.</i></p>	<b>AG</b>
	<p>The People, Organisational Development &amp; Culture Committee <b>NOTED</b> the Research &amp; Innovation Sub-Committee update report.</p>	

<b>PODCC (22)92</b>	<p><b>CORPORATE &amp; EMPLOYMENT POLICIES</b></p> <p>In the absence of any policies for approval Ms Heather Hinkin provided a verbal update on progress with the Health Boards policy development plan presented to PODCC in April 2022. It was noted that the next cohort of policies will be presented at PODCC in October 2022 for approval. Members were advised that policies have been streamlined to be more intuitive going forward.</p> <p>Members were reminded that in 2018/19 the Welsh Partnership Forum agreed a framework to change the terms of annual leave and the appropriate calculation relating to supplementary payments and overtime. Ms Hinkin advised that following staff consultation, payments have now been back dated. From 1<sup>st</sup> July 2022, this has been integrated on ESR for monthly payments going forward. It was noted that changes to pensions contributions will commence from October 2022, which will be phased in over the next 2 years. The contribution will vary dependent on staff bands and role; however, part time staff contributions will be lower and with the cost-of-living increases that will be welcomed. In terms of employment law during COVID-19 this has been quiet, although changes to the Employment Law framework, are anticipated to change during 2023. In anticipation of these changes an agile policy review framework has been developed to respond.</p>	
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	Mrs Hardisty welcomed the detailed verbal update, suggesting that an update on any employment changes relating to Brexit be provided to PODCC in October 2022.	<b>HH</b>
	The People, Organisational Development & Culture Committee <b>NOTED</b> the verbal update on Corporate & Employment Policies.	

<b>PODCC (22)93</b>	<b>OUTCOME OF ADVISORY APPOINTMENTS COMMITTEE</b>	
	<p>The Committee received the Advisory Appointments Committee (AAC) Report, providing an update on the outcome of the AACs held between 22<sup>nd</sup> June 2022 and 1<sup>st</sup> August 2022, and approved the following appointments on behalf of the Board:</p> <ul style="list-style-type: none"> <li>• Dr Janet Edge was appointed to the post of Consultant in General Adult Psychiatry in Community Mental Health based in The Community Mental Health Team, Llanelli and will start with immediate effect.</li> <li>• Dr Arun Kozhikunnath was appointed to the post of Locum Consultant in T&amp;O with an interest in Foot &amp; Ankle based at Withybush General Hospital. Dr Kozhikunnath will commence following successful completion of his (CESR) Certificate of Eligibility for Specialist Register and addition to the GMC Specialist Register. Both of which are expected to be complete within 6 months of interview date.</li> <li>• Dr Tochukwu Igboekwu was appointed to the post of Consultant General Paediatrics based at Bronglais General Hospital, commencement date to be confirmed.</li> <li>• Dr Kumbalathara Arachchige Menaka Gunarathna was appointed to Consultant in Community Paediatrics and will start with immediate effect.</li> </ul> <p>Mrs Gostling understood that two further AAC appointments have taken place, however the outcome of these appointments had been omitted from the report. As Chair of the two AAC panels, Mrs Hardisty confirmed that two locum appointments were made, with the intention for these to become permanent consultants. It was agreed that the details of these appointments would be confirmed with the Head of Recruitment and Workforce Equality, Diversity and Inclusion.</p> <p>Members welcomed the increase in the number of appointments made and especially the calibre of the candidates applying to join HDdUHB.</p>	<b>SO</b>
	The Committee <b>APPROVED</b> the outcome of the AAC appointments held between 22 <sup>nd</sup> June 2022 and 1 <sup>st</sup> August 2022 on behalf of the Board.	

<b>PODCC (22)94</b>	<b>PODCC WORKPLAN 2022/23</b>	
	The PODCC workplan for 2022/23 was received for information, with Members noting that the workplan will be updated to include the agreed actions from today's meeting.	

	The Committee <b>NOTED</b> the PODCC workplan for 2022/23.	

PODCC (22)96	<b>STRUCTURED ASSESSMENT 2022: PHASE 2 - CORPORATE GOVERNANCE AND FINANCIAL MANAGEMENT ARRANGEMENTS - ENGAGEMENT PLAN</b>	
	The Committee received the HDdUHB's Continuous Engagement Plan (2022/23).	
	Mrs Hardisty expressed disappointment that the Engagement Plan does not reference the Communication Team and the ongoing discussions with the public in relation to primary care, in particular GP surgeries especially given that public events are taking place. In response, Mrs Joanne Wilson suggested that the version shared with Members may be the original plan which has previously been presented to Board, however agreed to feedback the observations raised to Ms Helen Morgan-Howard, Interim Head of Transformation and Engagement Programme Office.	JW
	Mrs Gostling understood that a communications and engagement sub-group is being developed and requested that workforce are invited to contribute to this. In order to provide some re-assurance particularly in relation to our strategy, Mrs Hughes-Moakes advised that a Communications and Engagement Group meet fortnightly, focusing primarily on the Programme Business Case (PBC), in addition a Staff Engagement Group has now been established which also meets fortnightly (on opposite weeks to the overarching group). Whilst taking on board the comments in terms of the plan and linking with the Engagement Team, it is still a work in progress on the best approach to engage and communicate with colleagues across our sites.	
	Within the online chat, Mrs Wilson advised that the Board agreed that any updates relating to the PBC should report to the Strategic, Development and Operational Delivery Committee (SDODC). However, accepted that this may need reviewing following the establishment of the Staff Engagement Group.	JW
	The Committee <b>NOTED</b> the Hywel Dda University Health Board Continuous Engagement Plan (2022/23).	

PODCC (22)95	<b>ANY OTHER BUSINESS</b>	
	No other business was discussed.	

PODCC (22)96	<b>MATTERS FOR ESCALATION TO BOARD</b>	
	In the absence of any concerns raised Mrs Hardisty proposed that the positive achievements noted in the meeting should be highlighted within the PODCC report to Board.	

	<ul style="list-style-type: none"> <li>• Workforce Planning Model for Health Visiting</li> <li>• The TriTech Business Plan approval.</li> <li>• Bilingual skills compliance.</li> </ul>	
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<b>PODCC (22)97</b>	<b>DATE AND TIME OF NEXT MEETING</b>	
	20 <sup>th</sup> October 2022 at 9.30 a.m. - Boardroom, Ystwyth Building, Hafan Derwen, St David's Park, Carmarthen.	