

**PWYLLGOR DIWYLLIANT, POBL A DATBLYGU SEFYDLIADOL  
PEOPLE, ORGANISATIONAL DEVELOPMENT & CULTURE COMMITTEE**

<b>Date and Time of Meeting:</b>	13 <sup>th</sup> October 2021 at 1.30 p.m.
<b>Venue:</b>	Board Room, Ystwyth Building, Hafan Derwen, St David's Park, Carmarthen, SA31 3BB

<b>Present:</b>	<p>Professor John Gammon, Independent Member (PODCC Chair)          Mrs Judith Hardisty, Independent Member (PODCC Vice-Chair)          Ms Ann Murphy, Independent Member (VC)          Mrs Delyth Raynsford, Independent Member (VC)          Mr Winston Weir, Independent Member (VC)</p>
<b>In Attendance</b>	<p>Mrs Lisa Gostling, Director of Workforce &amp; Organisational Development (PODCC Executive Lead)          Mrs Mandy Rayani, Director of Nursing, Quality &amp; Patient Experience (VC) (part)          Miss Maria Battle, Chair (VC) (part)          Mrs Joanne Wilson, Board Secretary (VC) (part)          Ms Jill Paterson, Director of Primary Care, Community and Long Term Care (part)          Mr Steve Morgan, Deputy Director of Workforce &amp; Organisational Development (VC)          Ms Christine Davies, Assistant Director of Organisational Development (VC)          Mrs Annmarie Thomas, Assistant Director of Workforce &amp; Organisational Development (VC)          Mrs Amanda Glanville, Head of Workforce Education &amp; Development (VC) (part)          Dr Leighton Phillips, Director for Research, Innovation &amp; University Partnerships (on behalf of Dr Philip Kloer, Medical Director/Deputy Chief Executive) (VC) (part)          Mrs Mandy Davies, Assistant Director of Nursing &amp; Quality Improvement (on behalf of Mrs Mandy Rayani, Director of Nursing, Quality &amp; Patient Experience) (VC) (part)          Mr Jonathon Griffiths, Director of Social Services &amp; Housing, Pembrokeshire County Council (VC) (part)          Mrs Enfys Williams, Welsh Language Services Manager (VC) (part)          Ms Anna Bird, Assistant Director – Strategic Partnerships, Diversity and Inclusion (VC) (part)          Mrs Claire Williams, Committee Services Officer (Secretariat)</p>

<b>Agenda Item</b>		<b>Action</b>
<b>PODCC (21)19</b>	<p><b>INTRODUCTIONS AND APOLOGIES FOR ABSENCE</b></p> <p>Apologies for absence were received from Dr Philip Kloer, Medical Director/Deputy Chief Executive.</p> <p>Prof. John Gammon acknowledged the comments made at the Public Board meeting held on 30<sup>th</sup> September 2021, commending the effort made by all Hywel Dda University Health Board (HDdUHB) staff to provide safe, quality services on behalf of the population. Being cognisant of the on-going challenges experienced by staff, Prof. Gammon</p>	

	welcomed and acknowledged the support provided at all levels of the organisation and the support provided to one another.	
<b>PODCC (21)20</b>	<b>DECLARATIONS OF INTEREST</b> No declarations of interest were made.	
<b>PODCC (21)21</b>	<b>MINUTES AND MATTERS ARISING FROM THE PREVIOUS MEETING HELD ON 19<sup>TH</sup> AUGUST 2021</b> <b>RESOLVED</b> – that the minutes of the PODCC meeting held on 19 <sup>th</sup> August 2021 be <b>APPROVED</b> as an accurate record of proceedings.	
<b>PODCC (21)22</b>	<b>TABLE OF ACTIONS FROM THE PREVIOUS MEETING HELD ON 19<sup>TH</sup> AUGUST 2021</b> An update was provided on the Table of Actions from the meeting held on 19 <sup>th</sup> August 2021, with confirmation received that all outstanding actions have either been progressed or forward planned for a future Committee meeting, with the exception of the following:  <i>PODCC(21)03 To consider and discuss further the links between the clinical education planning objective and the possible re-alignment of other groups with a new forum</i> – Mrs Lisa Gostling advised that the meeting scheduled for 4 <sup>th</sup> October 2021 unfortunately had been cancelled, however would be re-arranged imminently and links re-established.	
<b>PODCC (21)23</b>	<b>PODCC REVISED TERMS OF REFERENCE</b> Members were presented with the revised PODCC Terms of Reference (ToR) following a request at the previous meeting to ensure the references to culture within the ToR reflect HDdUHB as a whole organisation, including primary care, and that there is reference to relevant clinical groups associated with PODCC. Mrs Gostling confirmed that the ToR had been strengthened in terms of culture and engagement. Members agreed the revisions for onward submission to Public Board for ratification, acknowledging that these would be reviewed as the PODCC matures.  The Committee <b>NOTED</b> and <b>AGREED</b> the PODCC revised Terms of Reference for onward submission to Public Board for ratification.	
<b>PODCC (21)24</b>	<b>STAFF STORY</b> Mrs Amanda Glanville shared a heart-warming video with Members concerning the recently appointed Apprenticeship Academy cohort, advising that the 2021 cohort had now commenced across both corporate and acute sites. Mrs Gostling emphasised what this means to not only the apprentices, but also to their families and the community, and reiterated the importance of expanding the academy further. Members who had met the apprentices and those involved in the assessment process warmly acknowledged the “feel good factor” and “proudness” in seeing the younger generation join the organisation.  Mr Winston Weir, recognising the importance of apprenticeship programmes, enquired as to the ambitions in terms of recruitment numbers	

	<p>each year. In response, Mrs Gostling advised that whilst there are currently no set numbers in place, moving forward it is anticipated that annual recruitment would be developed and further reported to PODCC. The importance of the programme leading to permanent employment within HDdUHB was acknowledged.</p> <p>In response to Mr Weir’s enquiry in regard to whether the source of funding for the programme in Wales is similar to England, Mrs Gostling advised that, across Wales, funding is provided to the training provider as opposed to the Health Board which is the case in England.</p> <p>Prof. Gammon expressed gratitude to Mrs Glanville for the presentation and emphasised the importance of broadening the apprenticeship academy across clinical and non-clinical departments, and to ensure that the impact of the programme is monitored in order to have a source of evaluation.</p>	
	<p>The Committee <b>NOTED</b> the Apprenticeship Academy staff story.</p>	

<p><b>PODCC (21)25</b></p>	<p><b>PERFORMANCE APPRAISAL DEVELOPMENT REVIEW (PADR) PERFORMANCE REPORT</b></p> <p>Members were presented with the “Performance Appraisal Development Review (PADR): How do we Manage and Raise Performance in HDdUHB”, providing PODCC with a deeper understanding of the performance management agenda within HDdUHB and the possible direction of travel which may offer greater opportunities to develop a performance culture within the organisation.</p> <p>Mrs Christine Davies emphasised the aspiration to create and embed a positive performance culture, whereby employees are empowered to discuss their performance with leaders in an open and safe environment. The ongoing support of the newly recruited Organisational Development Relationship Managers (ODRMs) will provide an opportunity to reposition the importance of the PADR process to attract, motivate and retain staff. It was pleasing to note that a Rapid Response Group had recently been established and a Pay Progression Policy would come into force across Wales next autumn. Work is also being undertaken with Mrs Glanville’s Team in developing an explicit link as part of the PADR process to educational offerings across the board.</p> <p>Prof. Gammon welcomed the report, acknowledging the historic challenges associated with appraisal systems, and looked forward to the anticipated changes in compliance rates and the process becoming more meaningful for employees.</p> <p>Mrs Judith Hardisty, referring to the current PADR compliance rates and recognising that the quality of the process undertaken is not understood, enquired whether further investigation is being undertaken to establish a more positive rate. In response, Mrs Davies advised that this remains work in progress, with quarterly reviews undertaken across HDdUHB sites by the</p>	
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People and Workforce Experience Team to provide more workforce intelligence in the quality of ongoing performance conversations.

In response to whether the PADR process will include talent spotting for those individuals with the potential to progress into other roles, Mrs Davies confirmed that work is being undertaken with regard to talent spotting and talent pools within HDdUHB, with it anticipated that this will create a positive message for staff wishing to progress their career within HDdUHB.

Mrs Delyth Raynsford commended the detail within the report and enquired how trends would be gathered, e.g. in terms of positive staff development, poor performance, or lack of engagement. In response, Mrs Davies advised that engagement is undertaken with local management teams and following the establishment of the ODRMs, additional data, including positive and negative trends, will be gathered moving forward.

Mrs Raynsford further enquired whether there is a link between the PADR process and exit interviews. In response, Mrs Davies advised that exit interviews are not linked to the PADR process and all leavers are offered a survey and interview with either their line manager or a member of the OD Team. However, the discussion of job satisfaction as part of the PADR process is being pursued and an information leaflet is being sent to all new starters upon commencement in post inviting them to speak to the OD Team, and after four months in post, a survey will be forwarded to employees to obtain their views with regard to job satisfaction.

Referring to the future direction of performance management within HDdUHB, Prof. Gammon queried what is being undertaken to address the challenges, including ensuring that the digital platforms are easier for people to navigate. In response, Mrs Davies advised that this would form part of the re-messaging about the purpose of the PADR and how it can become a better experience for both the employee and line manager. Recognising the constraint placed upon staff time to undertake PADR and the system being "clunky" in terms of the forms, etc. that requiring uploading to the Electronic Staff Record (ESR), Mrs Davies undertook to pursue this further with the HDdUHB Digital Team. Prof. Gammon emphasised the importance of Health Boards putting pressure on those organisations responsible for processes and systems in place, such as NHS Wales Shared Services Partnership, in order to make these slicker to provide a more positive experience for staff undertaking PADR.

**CD**

*Ms Jill Paterson joined the PODCC meeting*

Members noted the PADR update report and supported the outlined direction of travel to enable the growth of an employee led performance management culture within HDdUHB, anticipating that there would be a positive impact upon the compliance rate moving forward. Mrs Davies undertook to provide an update report to PODCC in February or April 2022.

**CD**

The Committee:

- **NOTED** the progress over the past five years, which includes an improvement in performance up to 2019 and current comparators against similar sized health boards in Wales.
- **SUPPORTED** the outlined direction of travel to enable the growth of an employee led performance management culture in Hywel Dda University Health Board.

**PODCC  
(21)26**

**PLANNING OBJECTIVES UPDATE**

Members were presented with the “Workforce & Organisational Development (OD) Planning Objectives Update”, providing an update on the progress made in the development (delivery) of the twelve Planning Objectives (PO) under the Executive leadership of the Director of Workforce and OD; Director of Nursing, Quality and Patient Experience; Director of Public Health; and Medical Director that are aligned to PODCC. Mrs Gostling advised that one PO (2D Develop a Clinical Education Plan) is currently behind schedule due to a delay in the establishment of the overarching Education Governance Group, however all other actions associated with PO 2D which are due for delivery in following quarters are on schedule.

Referring to PO 2H (Construct a comprehensive development programme), Mr Weir enquired as to how the programme is progressing. In response, Mrs Davies advised that the key action had been to appoint a Team and confirmed that all staff have now commenced in post and are undertaking research on best practice in terms of coaching and leadership models and developing a report for consideration by the Workforce & OD senior management team as to how this fits with the direction of travel and culture HDdUHB wishes to create. Mrs Davies further advised that there would be 45 trained coaches in place by May 2022, providing a strong position from which to drive the improvement and development culture. Recognising the on-going service pressures associated with COVID-19 and the forthcoming winter, Mr Weir further enquired whether there are any challenges associated with the release of staff to attend training. In response, Mrs Davies advised that although challenges are being experienced in terms of staff being released to undertake the nurse leadership programme due to current pressures, over 20 applications have been received from medical staff for the mentor programme and it is felt that staff are requiring some form of respite away from the front line and development with peers is improving motivation.

Prof. Gammon referred to discussion at the Audit & Risk Assurance Committee (ARAC) meeting held on 24<sup>th</sup> August 2021, regarding concerns relating to the attracting and recruiting of graduates to HDdUHB. Mrs Gostling advised that plans for graduates are multi-layered and had been discussed with WG colleagues earlier in the day. Health Boards are required to submit workforce plans to Health Education and Improvement Wales (HEIW), and universities are commissioned to provide student places on the basis of these plans. Discussions are taking place on the development of the workplan to ascertain what is required in terms of graduates for the future. Prof. Gammon emphasised that it is not acceptable

	<p>to receive below the expected number of graduates identified within the workplan and requested that this matter be escalated.</p> <p>Members noted the Planning Objectives update report and gained assurance in regard to the current position. In terms of graduate employment, it was agreed that updates would form part of this report moving forward in order to gain assurance from the work undertaken.</p> <p><i>Mr Jonathon Griffiths joined the PODCC meeting</i></p>	<p>LG</p> <p>LG</p>
	<p>The Committee <b>RECEIVED</b> an assurance on the current position in regard to the progress of the Planning Objectives aligned to PODCC, in order to onwardly assure the Board where Planning Objectives are progressing and are on target, and raised any concerns where Planning Objectives are identified as behind in their status and/or not achieving against their key deliverables.</p>	

<p><b>PODCC (21)27</b></p>	<p><b>DOMICILIARY CARE PROVISION (WORKFORCE ISSUES)</b></p> <p>Members were presented with the “Domiciliary Care Workforce Actions” report, noting the current pressures across the health and social care system within the HDdUHB area, and noting the collective action being undertaken by statutory and other partners to address these in the short and medium term. Despite these pressures and the persistent backlog caused by these factors, Members noted that individuals are still progressing through the system, with clients receiving Domiciliary Care and Reablement and care packages. Ms Jill Paterson informed Members that the challenges had been considered in some detail by HDdUHB at its Public Board meeting and at the Regional Partnership Board on 29<sup>th</sup> July 2021, with PODCC identified to be presented with the actions being undertaken by the Health and Social Care Regional Group. In light of current pressures, weekly Health &amp; Social Care Tactical Group (HSCTG) meetings have been re-established, and a regional action plan agreed to improve patient flow across the system, with delivery against this plan monitored on a weekly basis. Members noted that the regional action plan includes a range of remedial measures including the implementation of a new Home Based Bridging Service through which 175 whole time equivalent (wte) healthcare support workers will be appointed to provide additional capacity from October 2021, significantly extending HDdUHB’s existing bridging service in order to provide bridging services to all patients awaiting domiciliary care up to the point of when an appropriate package of care becomes available or the 31<sup>st</sup> March 2022 (whichever is sooner). Ms Paterson emphasised the requirement to ensure there is a workforce available with suitable skills.</p> <p>Members noted that a review of local practice in relation to care home admissions and exclusions had been undertaken in line with national guidance, and where previously a care home would be in exclusion for 20 days following a single positive COVID-19 case, this has now been amended to two positive cases prior to undertaking exclusion. Community hospital provision is also being utilised for step down care. Members were</p>	
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advised that there are currently 360 individuals across hospitals and the community awaiting domiciliary care.

Mr Jonathon Griffiths emphasised the requirement to modify the domiciliary care model and to consider the “longer term picture”. However, recognising the “here and now”, capacity within the system and joint working is required to address the care required for the flow of patients coming out of hospital settings. Mr Griffiths drew Members attention to the circulation of a detailed regional survey across each local authority area to identify ways to attract more people into the care sector, targeting those who work in the sector, those who have left and those who do not yet work in the sector, with the results anticipated by the end of October 2021 which could be shared with PODCC if considered appropriate. Members noted that a pay and conditions mapping exercise had also been undertaken to fully understand how domiciliary care workers are remunerated across the counties and to review areas for improvement or potential enhancement, the outcome of which had been presented to the HSCTG on 12<sup>th</sup> October 2021. A meeting has been scheduled imminently to discuss tangible changes to pay and conditions in the short term, and collective working is being undertaken to reward the existing workforce and attract in a future workforce, including the pursuing of an apprenticeship programme.

*Mrs Enfys Williams joined the PODCC meeting*

Prof. Gammon expressed gratitude to Ms Paterson and Mr Griffiths for the report and the assurance provided in terms of the work undertaken in the short term, and welcomed the joint partnership working. Recognising the interventions undertaken for the “here and now”, Prof. Gammon expressed apprehension in terms of the longer term situation and emphasised a requirement to attract into different cohorts, including nurses, apprentices, graduates, etc. and to have an understanding of whether these cohorts are available within the local communities or whether this needs to be pursued regionally, nationally or internationally. Ms Paterson, referring to the 175 wte healthcare support workers being appointed from October 2021, advised that there would only be a need for 60 wte in the first phase, as the priority individuals targets would include those in hospital settings and those in urgent need within the community. Those who do not fall into the urgent need category, would come under the local authority domiciliary care. It was noted that fifty applications for the vacancies have been received to date. Mrs Gostling added that Mrs Thomas is undertaking a review of the available market in terms of employees, and that overseas employees will be considered in the longer term. The importance of retaining the workforce was reiterated.

*Ms Anna Bird joined the PODCC meeting*

Ms Ann Murphy enquired whether there would be any further adverts placed for additional posts, and in response, Ms Paterson advised that interviews following the previous advert are currently being undertaken, and if required

	<p>further discussions would be undertaken if there was a requirement for additional adverts.</p> <p>Mrs Hardisty emphasised the importance of regional working, and referring to her experience with overseas employment, enquired whether any engagement had been undertaken with individuals who have relocated from Afghanistan and those expected from Hong Kong. In response, Mrs Thomas assured Members that the Head of Partnerships, Diversity &amp; Inclusion is currently establishing links. Mrs Bird supplemented that the Strategic Partnership and Inclusion Team works closely with the three local authorities and with regard to the Afghan Resettlement programme.</p> <p>Members noted the update provided with regard to the Domiciliary Care workforce and gained assurance by the short term measures undertaken to date. The requirement to address matters in the longer term was reiterated with a further update position welcomed at a future meeting.</p> <p><i>Mr Griffiths left the PODCC meeting</i></p> <p>The Committee <b>NOTED</b> the update with regard to the Domiciliary Care workforce.</p>	
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<p><b>PODCC (21)28</b></p>	<p><b>DISCOVERY REPORT</b></p> <p>Members were presented with the “Discovery Report: Understanding the Staff Experience in Hywel Dda University Health Board During the 2020-21 COVID-19 Pandemic”, noting that subsequent to phase one of the COVID-19 pandemic, HDdUHB commissioned a Discovery Report into the changes and innovations that had been made in response to the pandemic to enable the organisation to respond to both patient and public needs. Rich evidence of service changes and innovations emerged with extensive changes undertaken across many areas, including working practices, workforce agility, and the use of technology. This was important learning in order to support the recovery of services across HDdUHB, to build upon what worked well, and to work towards a ‘new normal’.</p> <p>Mrs Davies expressed gratitude to staff who had participated in the staff surveys and to the valuable comments received following discussion at the September 2021 Public Board meeting. It was noted that the Discovery Report had also been presented to the Staff Partnership Forum, where it was agreed to co-produce an action plan which would be presented to PODCC at the December 2021 meeting for further discussion.</p> <p>Mr Weir informed Members that he had visited services recently where staff had reflected upon the report, and enquired whether a further survey would be undertaken in the foreseeable future. In response, Mrs Davies reiterated the importance of staff recognising that they have been heard and that associated actions are being undertaken. Monthly pulse surveys are being undertaken for cohorts of 1,000 staff and there are two major surveys planned for 2022 including a repeat of the National Staff Survey and the Nursing &amp; Midwifery Wellbeing Survey.</p>	<p><b>CD</b></p>
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	<p>Being cognisant of the requirement to invest in facilities and services in order to provide staff with space to pause and reflect, Mr Weir enquired how this could be enabled. In response, Mrs Davies acknowledged the lack of comfortable space for staff to rest and undertake private and confidential discussions, and confirmed that the matter would be pursued as part of the HDdUHB Estates Strategy.</p> <p>Mr Weir further enquired how leadership roles are developed in order to lead others in a compassionate way, and Mrs Davies responded that leading compassionately would be through leadership programmes and tools for managers to utilise, e.g. wellbeing discussions with staff and teams.</p> <p>Members noted the Discovery Report update and agreed that the action plan would be presented at the December 2021 PODCC meeting.</p>	
	<p>The Committee was <b>APPRAISED</b> of the workplan to address the recommendations in the Discovery Report and <b>NOTED</b> that progress would be reported on a regular basis.</p>	

<p><b>PODCC (21)29</b></p>	<p><b>WELSH LANGUAGE PROVISION</b></p> <p>Members were presented with the “Diweddariad ar yr Iaith Gymraeg/Welsh Language Provision” report, providing an update on the progress of implementing compliance against the Welsh Language Standards and development of the HDdUHB strategy to set an ambition for how the Welsh language and culture is embraced within the organisation.</p> <p>Mrs Enfys Williams explained to Members that the report provided an update on three areas of work that currently offer assurance to PODCC relating to the ambition for the Welsh language and compliance with Welsh Language Standards to ensure HDdUHB is meeting the expectations of its communities. Mrs Williams advised that work has commenced with regard to the strategic approach and ambition in terms of the Welsh language and would be incorporated within the next iteration of the HDdUHB Annual Plan as a planning objective which can be measured.</p> <p>Members were advised that an internal audit review had been undertaken in July 2021 to establish whether clear and appropriate arrangements are in place to ensure HDdUHB is compliant with the Welsh Language Standards and a copy of the final report, including recommendations, was presented to Members. It was pleasing to note that some of the recommendations have already been implemented. Referring to the self-assessment tools issued to all directorates and service areas in January 2021, Mrs Williams advised that not all areas had completed the tool due to wider pressures.</p> <p>Referring to Appendix C of the report, Mrs Williams informed Members that during the summer, the Welsh Language Team conducted a mystery shopper exercise across the three counties as part of its proactive approach, enabling the Team to assess the extent in which a Welsh language service is provided by departments across HDdUHB. Members were further advised that a steering group would be established when the newly</p>	
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appointed Director of Communications and Welsh Language commences in post in January 2022.

Mrs Raynsford welcomed the report, in particular the mystery shopper approach, and enquired whether other Health Boards are experiencing similar issues in terms of barriers associated with compliance with the Welsh Language Standards. In response, Mrs Williams acknowledged that momentum had been lost across all Health Boards in Wales due to the pressures of the COVID-19 pandemic, however work is progressing slowly.

Mrs Christine Davies, being cognisant of the language of choice for patients, emphasised the positive difference it makes when patients are able to converse with staff in their first language of choice and suggested more evidence gathering should be undertaken. Mrs Williams was pleased to report that HDdUHB is the first organisation to undertake a flexible “improve your Welsh” course which has received extremely positive feedback, and staff are pursuing Welsh courses to improve their Welsh language skills. Mrs Thomas added that the existing skills base of staff, including Welsh speakers, would also be reviewed as part of the service/department skills audit.

Miss Battle, emphasising the importance of patients and their families being able to converse in their language of choice, enquired how this is being linked to the Dementia Strategy in order to embed the rights of dementia patients to be cared for in their language of choice. Whilst unaware of any links, Mrs Williams undertook to pursue the matter further.

**EW**

Prof. Gammon, referring to the audit report, enquired as to the expectations in terms of the actions being met and where the response to the audit would be reported. Mrs Joanne Wilson confirmed that all internal audits are initially presented to ARAC. Updates on progress are collated by the Assurance and Risk Team on a bi-monthly basis and reported to ARAC through the Tracker Report. Members noted that the Welsh language audit report had been presented to ARAC on 24<sup>th</sup> August 2021. Members enquired whether the action plan is required to be presented to PODCC for monitoring and in response, Mrs Wilson confirmed that it would be presented at a future meeting. Prof. Gammon reiterated the importance of gaining assurance that the action plan is being addressed.

Prof. Gammon recognised the significant and substantial amount of work being undertaken by the Team, however expressed a level of frustration at the lack of assurance on the strategic approach to the Standards and what is being undertaken to support the Welsh language heritage and culture within HDdUHB. The importance of having a strategic direction where HDdUHB can be held to account in terms of what it wishes to represent in terms of the Welsh language was emphasised. Prof. Gammon requested that further reports presented enable PODCC to gain assurance on the aspirations of the Welsh language, including what actions will be taken, timescales and any barriers in place. Mrs Williams advised that having met with Mrs Gostling and Mrs Raynsford regarding the strategic approach of the

	<p>Welsh language, it had been agreed that the intention would be to include this within the HDdUHB Annual Plan as a planning objective which can be measured. It was also agreed that the impending commencement of the newly appointed Director of Communications &amp; Welsh Language, would serve to progress this once in post.</p> <p><i>Dr Leighton Phillips joined the PODCC meeting</i></p> <p>Members noted and were assured by the report provided and Prof. Gammon expressed warm gratitude to Mrs Williams and the Team for the work undertaken. It was agreed for a further report to be presented to PODCC in April 2022 in order to provide sufficient time to present a full position regarding the strategic direction.</p> <p><i>Ms Paterson left the PODCC meeting</i></p>	<b>EW</b>
	<p>The Committee received a level of <b>ASSURANCE</b> from the Welsh Language Provision report, and <b>ACCEPTED</b> the current approach to provide a supportive environment to the most pressured services at this time.</p>	

<b>PODCC (21)30</b>	<p><b>BILINGUAL SKILLS POLICY COMPLIANCE</b></p> <p>Members were presented with the “Implementation of the Bilingual Skills Policy – Update on Progress”, providing an update on progress of implementing the Bilingual Skills Policy which had been approved in September 2021. The Policy ensures compliance with certain requirements of the Welsh Language Standards (No. 7) 2018 Regulations, which are a set of statutory requirements relevant to HDdUHB, which clearly identify the responsibilities to provide excellent bilingual services. Members noted that HDdUHB is setting its own target to ensure 50% of the workforce have a skill level which is at foundation level or above within the next 10 years. Mrs Thomas was pleased to report that as at August 2021, 36% of the HDdUHB workforce are compliant with this target.</p> <p>Mrs Hardisty, referring to the number of separate reports presented to PODCC concerning the Welsh language, suggested they be brought collectively as part of one language and culture report moving forward. Mrs Gostling agreed, emphasising that bi-lingualism is part of the future provision of how culture and language will be embarked upon within HDdUHB. Mrs Thomas, being cautious not to lose emphasis and mindful that the bilingual skills of the workforce is only one element of the overarching Welsh language strategic plan, confirmed that the Workforce Team would work closely with the Welsh Language Team.</p> <p>Members noted and were assured by the report provided with regard to the progress of implementing the Bilingual Skills Policy and looked forward to a Welsh language position update in April 2022.</p> <p>The Committee received <b>ASSURANCE</b> from the report on the progress of implementing the HDdUHB’s Bilingual Skills Policy.</p>	
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<b>PODCC</b>	<b>BLACK, ASIAN AND MINORITY ETHNIC (BAME) ADVISORY GROUP</b>	
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(21)31	<p>Members were presented with the Black, Asian and Minority Ethnic (BAME) Advisory Group update report for August – September 2021, noting that the official launch of the BAME Staff Network had taken place on 9<sup>th</sup> September 2021, attended by 42 staff members representing a diverse range of clinical and non-clinical roles. Ms Bird explained to Members that the BAME Advisory Group is chaired by Miss Battle and that this represented the inaugural report of the Group presented to PODCC, where previously the Group had provided reports directly to Board. Mr Weir’s support was formally acknowledged by Ms Bird.</p> <p>Members noted that work is being undertaken by teams across HDdUHB to celebrate Black History Month 2021 in October. Mr Weir, whilst welcoming the celebrating of Black History Month, enquired why events to celebrate festivities such as Diwali, etc. are not communicated to staff. Ms Bird, recognising Mr Weir’s comment, responded that a celebrating diversity calendar had been offered to all staff at the beginning of 2021, identifying important events held throughout the year.</p> <p>In response to Mr Weir’s enquiry relating to disciplinaries and dismissals amongst BAME colleagues, Mrs Thomas advised that the report reviewing all dismissals over a ten-year period is almost complete and would be presented to the BAME Advisory Group in November 2021.</p> <p>Miss Battle emphasised the corporate responsibility to work with, value and support BAME colleagues alongside other staff, and was pleased to note that the celebration of the 20<sup>th</sup> anniversary of the Filipino staff employed within HDdUHB had been highlighted as an exemplar of the support offered to overseas staff to help them adjust to unfamiliar surroundings, culture and language and to combat loneliness and isolation. Members were pleased to note that substantial work is being undertaken including expanding the current buddy scheme to comprise the self-selecting of mentors.</p> <p>Mr Weir further emphasised the importance of capturing how HDdUHB responds to diversity and the importance that all staff feel safe and supported.</p> <p>Members noted the BAME Advisory Group update report and expressed gratitude for the work undertaken.</p> <p><i>Mrs Enfys Williams left the PODCC meeting</i></p>	
	<p>The Committee <b>NOTED</b> the Black, Asian and Minority Ethnic Advisory Group update report.</p>	

(21)32	<p><b>RESEARCH AND INNOVATION SUB COMMITTEE REPORT</b></p>	
	<p>The Committee received the Research &amp; Innovation Sub-Committee (R&amp;ISC) update report following the meeting held on 13<sup>th</sup> September 2021.</p> <p>Referring to the Peer Review report noted within the update, Prof. Gammon enquired whether the full report following the review had been received. In response, Dr Leighton Phillips confirmed that a meeting had been held with</p>	

	<p>the Peer Review Team at the end of September 2021, with it anticipated that the written report would be received in November 2021. Verbal feedback had been positive in terms of Board level engagement and the understanding of research and innovation within HDdUHB. It is anticipated that some key risks will be included within the report, including the offering of life changing treatment and therapies to patients, and a requirement for additional investigators across HDdUHB to supervise and sponsor studies.</p> <p>Mrs Hardisty, referring to university partnerships, enquired whether honorary appointments are being considered across other professions, aside from medical. In response, Dr Phillips confirmed that honorary appointments are considered for both medical and non-medical staff, emphasising that any member of staff who has a contribution to make academically is eligible to apply through university partners for an honorary appointment. Plans are in place for a revised way of working with university partners in terms of identifying staff who may be eligible for honorary appointments.</p> <p>Mr Weir welcomed the update report, and noted that the Research and Innovation report presented at the September 2021 Public Board had been well received. In response to Mr Weir's enquiry relating to the consideration of KPIs against the Strategy presented to Public Board, Dr Phillips advised that performance against Welsh Government's (WG) KPI evidences that 71% of the open portfolio studies are meeting the KPI for the pace of recruitment and whilst HDdUHB is the highest performing Health Board in Wales against this KPI, the number of studies open is currently the lowest in Wales. However, in order to open more studies, the constraints involved, e.g. clinical investigators and ensuring that research is a consideration for everyone, need to be identified. Future indicators being considered include those which affect the performance metrics which are required to be reported upon. It is anticipated that the dashboard will be presented at the October 2021 R&amp;ISC meeting and reported to PODCC in December 2021 as part of the update report.</p> <p>Noting the content of the R&amp;ISC update report, Members expressed gratitude to Dr Phillips for the update report and looked forward to the future reporting of the developing dashboard, and requested that the next report includes an update position relating to Risk 1160.</p> <p><i>Mrs Mandy Davies left the PODCC meeting</i></p>	
	<p>The Committee <b>NOTED</b> the Research &amp; Innovation Sub-Committee update report.</p>	
<p><b>PODCC (21)33</b></p>	<p><b>WORKFORCE DASHBOARD REPORT INTEGRATED PERFORMANCE ASSURANCE REPORT</b></p> <p>Prof. Gammon proposed that agenda items 6.1 Workforce Dashboard and 6.2 Integrated Performance Assurance Report be discussed collectively, and informed Members that future reporting would consist of one combined report.</p>	

Members were presented with the “Workforce Metrics and Key Performance Indicators” report, providing an update on workforce metrics as well as key performance indicators which provide assurance of delivery against objectives and nationally set targets. Members noted that this is the first report presented to PODCC which shares information on workforce metrics and key performance indicators to ensure PODCC is assured in respect of performance in all areas of the workforce and OD agenda.

Members were further presented with the “Performance update of strategic objectives 1, 2 and 3 for Hywel Dda University Health Board as at 31<sup>st</sup> August 2021” report, noting that for this month, traditional performance report measures are being reported. It was noted that the measures ascribed to PODCC relate to sickness absence; core skills mandatory training; performance appraisals; consultants/specialist & specialty (SAS) job planning; staff dementia training; staff that are happy with standards of care we are providing; overall staff engagement score; and research and development studies.

*Dr Phillips left the PODCC meeting*

Mrs Thomas advised Members there is substantial work to be undertaken in terms of workforce metrics and key performance indicators in terms of what the Workforce & OD Department aspire to present to PODCC moving forward. A review of all ascribed strategic objectives to identify primary and secondary measures which have a clear line of sight to the strategic objective is also being undertaken.

Mrs Hardisty expressed some concern at the high turnover rate contained within the report, and requested that data, including that of newly qualified staff moving on from HDdUHB at the end of their rotation, and the exploration of any underlying reasons, be included within the report moving forward.

Members welcomed the work undertaken to date and noted that the content of the Workforce Dashboard and Integrated Performance Assurance Report would be combined into one report identifying current performance with a commentary to support the quantitative data presented, trends, future actions to address any areas where improvement is necessary, and increasing use of statistical control charts to improve monitoring of variation, highlighting any areas requiring further investigation.

*Miss Battle, Mrs Wilson and Mrs Glanville left the PODCC meeting*

*Mrs Mandy Rayani joined the PODCC meeting*

*Ms Paterson re-joined the PODCC meeting*

The Committee:

- **NOTED** the content of the report as assurance of performance in key areas of the Workforce and OD agenda.
- Provided **FEEDBACK** on the usefulness of the content and format of the report and recommended any additional metrics to include.

AT

	<ul style="list-style-type: none"> <li>• <b>CONSIDERED</b> the PODCC measures from the Performance Assurance Report and <b>ADVISED</b> of any issues arising.</li> </ul>	
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<b>PODCC (21)34</b>	<p><b>CORPORATE AND EMPLOYMENT POLICIES</b></p> <p>Members were presented with the following policies:</p> <ul style="list-style-type: none"> <li>• “Primary Care Welsh Language Policy – Policy on assessing the impact of decisions in relation to providing Primary Care services on the Welsh Language (in accordance with Welsh Language Standards 78 and 78A)” – Ms Paterson advised that there is a requirement to have a Primary Care Welsh Language Policy in place for Primary Care services managed by HDdUHB, with a requirement to review this on a five-yearly basis. Prof. Gammon suggested that the Primary Care Welsh Language Policy, Bilingual Skills Policy and Welsh Language Policy be considered by the Board as in integrated process in the future.</li> <li>• “Policy 153 - Hywel Dda University Health Board Equality Impact Assessment Policy and Procedure” – Ms Bird confirmed there were no significant changes to the revised policy.</li> <li>• “All Wales Procedure for NHS Staff to Raise Concerns” – Mrs Gostling advised that the procedure had been agreed on an all-Wales basis and also discussed and agreed by the HDdUHB Staff Partnership Forum. Mr Steve Morgan added that substantial work is currently being undertaken associated with the speaking up safely campaign and therefore the procedure would likely be reviewed again in the near future.</li> </ul> <p>Members approved the Primary Care Welsh Language Policy and accompanying Welsh Language Impact Assessment tool; Policy 153 - Hywel Dda University Health Board Equality Impact Assessment Policy and Procedure; and the All Wales Procedure for NHS Staff to Raise Concerns.</p> <p><i>Ms Paterson and Ms Bird left the PODCC meeting</i></p> <p>The Committee <b>APPROVED</b> the:</p> <ul style="list-style-type: none"> <li>• Primary Care Welsh Language Policy and accompanying Welsh Language Impact Assessment tool.</li> <li>• Policy 153 - Hywel Dda University Health Board Equality Impact Assessment Policy and Procedure.</li> <li>• All Wales Procedure for NHS Staff to Raise Concerns.</li> </ul>	
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<b>PODCC (21)35</b>	<p><b>CORPORATE RISKS ALLOCATED TO PODCC</b></p> <p>Members were presented with the “Corporate Risks Allocated to PODCC” report, noting the one new risk currently aligned to PODCC – <i>Risk 1219 Insufficient workforce to deliver services required for “Recovery” and the continued response to COVID-19</i>. Mrs Gostling advised that the Workforce Team is developing a strategic recruitment strategy for delivery which may impact on the timescales within the risk.</p>	
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	<p>Prof. Gammon welcomed the detailed response contained within the report in terms of mitigations in place, reiterating that many mitigations relate to local recruitment and the fragility of reliance upon flexible and temporary contracts. In response to whether the risk is required to be raised at Public Board as a matter of concern, Mrs Gostling advised that the current workforce situation and planning objectives had been discussed by the Executive Team and a significant refresh of the workforce strategy in terms of recruitment and retention would be undertaken over the forthcoming two months which would be presented to a future Board Seminar session. On this basis, it was agreed by Members not to raise this as a matter of concern currently and the risk would be reviewed at a future meeting.</p> <p>Members were assured by the controls in place and noted the update.</p>	
	<p>The Committee was <b>ASSURED</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>	

<p><b>PODCC (21)36</b></p>	<p><b>OPERATIONAL RISKS ALLOCATED TO PODCC</b></p> <p>Members were informed that there are no operational risks allocated to PODCC meeting the criteria for reporting.</p>	
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<p><b>PODCC (21)37</b></p>	<p><b>SPECIALITY SPECIALIST CONTRACT REFORM IMPLEMENTATION UPDATE</b></p> <p>Members were presented with the “Speciality &amp; Associate Specialist (SAS) Contract Reform Implementation Update”, noting that since the previous update presented to PODCC in August 2021, HDdUHB is progressing with the choice exercise whereby eligible SAS doctors had until 30<sup>th</sup> September 2021 to express an interest as to whether or not they wish to transfer to the new contract. Mr Morgan advised that the date to express an interest on whether or not they wish to transfer to the new contract had since been extended until the end of November 2021. Members noted that since publication of the presented report, expressions of interest across HDdUHB have increased to 58%, which is on par with other Health Boards. Awareness sessions on the new terms and conditions for Service Delivery Managers and Clinical Leads, etc. were undertaken during September 2021. In terms of the financial impact associated with the new contract, Mr Morgan advised that this remains difficult to ascertain at the current time, however the General Manager for Unscheduled Care Services in Bronglais General Hospital (BGH) has concluded that if all SAS doctors were to opt in, there would be a requirement for an additional four speciality doctors. Requests had been made to General Managers and Service leads for their impact plans, although to date, very few responses had been received. Mr Morgan stated he was seeking views from the Director of Finance and the Director of Operations to ascertain the best way forward and to understand the impact upon the service. It was noted that it would be difficult to determine given the variables involved although it was felt that some sort of assessment needed to be undertaken if possible. Recognising the potential impact, Mrs Hardisty emphasised the importance of having a plan in place and a process to assess all contract changes.</p>	
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	<p>Prof. Gammon enquired whether the British Medical Association (BMA) had agreed to the new contract, and in response Mr Morgan confirmed that it had been agreed by WG and the BMA, with the BMA actively encouraging members to opt in.</p> <p>Members noted the update and progress made in relation to the SAS contract implementation and looked forward to receiving updates in the future relating to any implications associated with the implementation.</p>	
	The Committee <b>NOTED</b> the progress made in relation to the Speciality & Associate Specialist (SAS) Contract implementation.	

<b>PODCC (21)38</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 5<sup>th</sup> August and 20<sup>th</sup> September 2021, and approved the following appointments on behalf of the Board:</p> <ul style="list-style-type: none"> <li>• Dr Felicity Jayne Elizabeth Clark to the post of Consultant in Anaesthetics with an interest in Critical Care, based in Glangwili General Hospital (GGH), with a commencement date to be confirmed.</li> <li>• Dr Gareth Iwan James to the post of Consultant in Anaesthetics with an interest in Peri-Operative Care and Trauma, based in GGH, with a commencement date to be confirmed.</li> </ul>	
	The Committee <b>APPROVED</b> the outcome of the AAC appointments held between 5 <sup>th</sup> August and 20 <sup>th</sup> September 2021 on behalf of the Board.	

<b>PODCC (21)39</b>	<b>PODCC WORKPLAN 2021/22</b>	
	The PODCC workplan for 2021/22 was received for information.	
	The Committee <b>NOTED</b> the PODCC workplan for 2021/22.	

<b>PODCC (21)40</b>	<b>MATTERS FOR ESCALATION TO BOARD</b>	
	<p>Mrs Gostling highlighted the matters discussed during the meeting for escalation to Board:</p> <ul style="list-style-type: none"> <li>• Revised PODCC Terms of Reference for ratification.</li> </ul>	

<b>PODCC (21)41</b>	<b>ANY OTHER BUSINESS</b>	
	<p>Mrs Gostling expressed warm gratitude to Mrs Davies, Mrs Glanville, Mr Morgan and Mrs Thomas for the substantial work undertaken and the leadership portrayed on their various aspects of the Workforce &amp; OD agenda. Prof. Gammon welcomed the “team approach” and the appropriate contributions made in terms of specific discussion at the meeting.</p> <p>Members were informed that the report due to be presented to the In-Committee meeting immediately following this meeting is currently in development and therefore it was agreed that the In-Committee meeting be deferred until 13<sup>th</sup> December 2021.</p>	

<b>PODCC</b>	<b>DATE AND TIME OF NEXT MEETING</b>	
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**(21)42**

13<sup>th</sup> December 2021 at 1 p.m. - Boardroom, Ystwyth Building, Hafan Derwen, St David's Park, Carmarthen.