



**CYFARFOD BWRDD PRIFYSGOL IECHYD
UNIVERSITY HEALTH BOARD MEETING**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	09 June 2022
TEITL YR ADRODDIAD: TITLE OF REPORT:	People, Organisational Development & Culture Committee Annual Assurance Report 2020/21
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Professor John Gammon, Chair, People, Organisational Development & Culture Committee
SWYDDOG ADRODD: REPORTING OFFICER:	Lisa Gostling, Director of Workforce & OD

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Penderfyniad/For Decision

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

The purpose of this report is to present the People, Organisational Development & Culture Committee (PODCC) Annual Assurance Report 2021/22 to the Board.

The PODCC Annual Report provides assurances in respect of the work that has been undertaken by the Committee during 2021/22, and outlines the main achievements, which have contributed to robust integrated governance across the Health Board.

Cefndir / Background

Hywel Dda University Health Board's Standing Orders and the Terms of Reference for PODCC require the submission of an Annual Report to the Board to summarise the work of the Committee and to identify how it has fulfilled the duties required of it.

The fundamental purpose of the Committee is:

- 2.1 To provide assurance to the Board on compliance with legislation, guidance and best practice around the workforce and OD agenda, learning from work undertaken nationally and internationally, ensuring Hywel Dda University Health Board (HDdUHB) is recognised as a leader in this field.
- 2.2 To provide assurance to the Board on the implementation of the UHB's Workforce & OD Strategy, and the all Wales Health & Social Care Workforce Strategy, ensuring these are consistent with the Board's overall strategic direction and with any requirements and standards set for NHS bodies in Wales.
- 2.3 To provide assurance to the Board on the organisation's ability to create and manage strong, high performance, organisational culture arrangements.
- 2.4 To receive an assurance on delivery against all relevant Planning Objectives falling under Strategic Objectives 1 (*Putting people at the heart of everything we do*), 2 (*Working together to be the best we can be*) and 3 (*Striving to deliver and develop excellent services*), in accordance with Board approved timescales, as set out in HDdUHB's Annual Plan.

- 2.5 To provide assurance that the organisation is discharging its functions and meeting its responsibilities with regard to the research and innovation activity carried out within the Health Board.
- 2.6 To seek assurance on the management of principal risks within the Board Assurance Framework (BAF) and Corporate Risk Register (CRR) allocated to the Committee and provide assurance to the Board that risks are being managed effectively and report any areas of significant concern e.g. where risk tolerance is exceeded, lack of timely action.
- 2.7 To recommend acceptance of risks that cannot be brought within the UHBs risk appetite/tolerance to the Board through the Committee Update Report.
- 2.8 To receive assurance through Sub-Committee Update Reports and other management groups that risks relating to their areas are being effectively managed across the whole of the Health Board's activities (including for hosted services and through partnerships and Joint Committees as appropriate).

Asesiad / Assessment

PODCC has been established under Board delegation, with the Health Board initially approving Terms of Reference for the Committee at its Board meeting on 29th July 2021 and subsequently approving a revised version on 25th November 2021.

In discharging its role, the Committee is required to oversee and monitor the people, organisational development and culture agenda for the Health Board and in respect of its provision of advice to the Board, ensure the implementation of the people, organisational development and culture agenda against the following areas of responsibility:

People

- Seek assurances that people and organisational development arrangements are appropriately designed and operating effectively to ensure the provision of high quality, safe services/programmes and functions across the whole of HDdUHB's activities.
- Consider the implications for workforce planning arising from the development of HDdUHB's strategies and plans or those of its stakeholders and partners, including those arising from joint (sub) committees of the Board.
- Ensure mechanisms exist to enable strong, effective leadership at all levels, including robust and empowering clinical and compassionate leadership on the front line.
- Consider the second 'Discovery' phase of the pandemic learning that is conducted to understand more about staff experience in order that approaches to rest, recovery and recuperation can be shaped over the next 2 years including a 'thank you offering' to staff (PO 1H).
- Ensure robust mechanisms are in place to deliver effective staff engagement, including with the Local Negotiating Committee (LNC), in accordance with HDdUHB's values and behaviour framework.
- Seek assurances that there are engagement activities in place to encourage and facilitate staff participation and involvement with staff wellbeing and support interventions.
- Approve Appointments made by the Advisory Appointments Committee.

Organisational Development

- Seek assurance on delivery against all Planning Objectives aligned to the Committee, considering and scrutinising the plans, models and programmes that are developed and implemented, including the annual workforce plan and associated commissioning

plan, supporting and endorsing these as appropriate (PO 1A, 1B, 1C, 1F, 1G, 1I, 2A, 2B, 2D, 2G, 2H).

- Receive the 3 year strategic plan developed in partnership with universities, life science companies, and public service partners, for implementing to increase research, development, and innovation activity, and number of research investigators, sufficient as a minimum to deliver the Welsh Government and Health and Care Research Wales expectations and improvement targets (PO 3G).
- Receive the R&D Annual Report for approval prior to submission to the Health and Care Research Wales, to ensure the UHB increases its R&D/R&I capacity, research output and research income.

Culture

- Ensure robust mechanisms are in place to foster a strong and high performance organisational culture of effective leadership, innovations and continuous improvement, in accordance with HDdUHB's values and behaviour framework, future-proofed to ensure their continuity and success.
- Ensure changes are anchored in the corporate culture and values through systems and processes to embed positive behaviour and cultural change throughout the organisation.
- Ensure monitoring, review and evaluation takes place of the impact of interventions which are implemented to provide assurance that the gap between the existing and desired culture is closed and the rate of progress is acceptable, recognising that culture changes slowly over time.
- Seek assurances on the requirements arising from HDdUHB's regulators, WG and professional bodies.
- Seek assurances that there is the appropriate culture and arrangements to allow HDdUHB to discharge its statutory and mandatory responsibilities with regard to Welsh language provision (workforce & patient related).

Governance

- Refer people, culture and organisational development matters which impact on quality and safety to the Quality, Safety & Experience Committee (QSEC), and vice versa.
- Approve workforce and organisational development policies and plans within the scope of the Committee.
- Review and approve the annual work plans for any Sub-Committee which has delegated responsibility from the People, Organisational Development & Culture Committee and oversee delivery.
- Agree issues to be escalated to the Board with recommendations for action.

Sub-Committees

The Sub-Committee reporting to PODCC during 2021/22 is as follows:

Research & Innovation Sub Committee (R&ISC) – established to:

- Assure the Board that it is discharging its functions and meeting its responsibilities with regards to the quality and safety of research, development and innovation activity carried out within the organisation. The guiding principles will be: 4.1.1 a clear strategy; 4.1.2 clear governance and performance management; and 4.1.3 working within budget constraints.

- Promote and support involvement in high quality, multi-disciplinary and multi-agency healthcare research, development and innovation, promote evidence-based healthcare, build research and innovation capacity and foster a research and innovation culture, including patient/public involvement where appropriate.
- Facilitate collaboration with the Research and Academic community to maximise outcome and impact for the Health Board and the patients it serves.

The PODCC Annual Report 2021/22 is intended to outline how the Committee and its Sub-Committee have complied with the duties delegated by the Board and PODCC through the Terms of Reference set, and also to identify key actions that have been taken to address issues within the Committee's remit.

Constitution

From the Terms of Reference approved on 29th July 2021 (revised in November 2021), the membership of the Committee was agreed as the following:

- Independent Member (Chair).
- Independent Member (Vice Chair).
- 3 Independent Members.

The following Members are identified as "In Attendance" Members:

- Director of Workforce & Organisational Development (Lead Executive).
- Medical Director/Deputy CEO.
- Director of Public Health.
- Director of Nursing, Quality & Patient Experience.
- Chair of HDdUHB Staff Partnership Forum.

Meetings

The Committee meets on a bi-monthly basis. Since its establishment from July 2022, the Committee met on 4 occasions and was quorate at all meetings, as follows:

- 19th August 2021
- 11th October 2021
- 13th December 2021
- 3rd February 2022.

As PODCC is directly accountable to the Board for its performance, it provides an assurance to the Board through a formal written update report, which is received at the subsequent Board meeting. A full set of the papers for each Committee meeting is routinely made publicly available from the Health Board's website.

Areas of Responsibility

In discharging its duties, PODCC has undertaken work during 2021/22 against the following areas of responsibility in relation to its people, planning and performance assurance agenda:

Governance

Self-Assessment 2020/21 Action Plan – At the December 2021 meeting, the Committee received the PODCC Self-Assessment 2020/21 Action Plan report, providing a progress update following the completion of a questionnaire to consider the effectiveness of the People, Planning & Performance Committee (PPPAC) (predecessor Committee to PODCC) during 2020/21. The Committee was pleased to note that all actions had been completed and

incorporated into the Committee's workplan and received assurance from the self-assessment action plan report presented.

Policies – during 2021/22, the Committee approved the following policies:

- All Wales Secondment Policy.
- Primary Care Welsh Language Policy.
- Equality Impact Assessment Policy & Procedure.
- All Wales Procedure for NHS Staff to Raise Concerns.
- Interpretation & Translation Policy.

The Committee also approved extensions to the review dates of various employment policies.

People

Outcome of the NHS Wales Staff Survey and Nursing Climate Survey

Implementation/Action – at the 19th August 2021 meeting, the Committee received the “Our Staff Experience: How we are actioning what our staff are telling us through surveys?” report and updated action plan relating to the “Your Wellbeing Matters” survey, recognising that the past 18 months had been one of the most challenging experiences for staff in both their working and personal lives, and understanding the importance of ensuring that staff have a voice. A survey timeline was suggested to co-ordinate and manage staff surveys. The Committee was pleased to learn that seven Organisational Development Relationship Managers (ODRMs) had been appointed and due to commence in post in September 2021, and the Committee gained assurance from the steps being taken to progress the cultural change journey. At the December 2021 meeting, the Committee received the Staff Experience: Transforming Staff Feedback into Positive Change report, noting the Board's commitment to supporting the well-being of staff, reflected in the three Planning Objectives (POs) and in the commissioning of the Discovery Report in March 2021. Following Board approval of the Discovery Report in September 2021, delegated responsibility was given to PODCC to receive an action plan to take forward its recommendations. The Committee commended the detailed report, in particular the solutions identified, and endorsed the recommended actions contained within the report requesting progress reports be presented to the Committee on a six monthly basis.

Speciality and Associate Specialist Contract Reform Implementation Update – at the August 2021 meeting, the Committee received the “Speciality & Associate Specialist (SAS) Contract Reform Implementation Update” report, noting that new terms and conditions for Speciality Doctor and the Specialist grade have been agreed with an implementation plan in place. The Committee gained assurance from the progress associated with the change in speciality and associate specialist contract reform implementation and how this would be enacted within HDdUHB. At the October 2021 meeting, the Committee received the SAS Contract Reform Implementation update report, noting that the choice exercise, where eligible SAS doctors are required to express an interest in whether or not they wish to transfer to the new contract, is progressing. Further work is being undertaken to ascertain the best way forward and to understand the impact upon the service. It was agreed that the Committee would receive updates in the future relating to any implications associated with implementation.

Medical Engagement Scale Survey Results/Comparison Report – at the December 2021 meeting, the Committee was presented with the Medical Engagement Scale (MES) Survey Results/Comparison report, noting that the MES is a survey instrument that assesses the level of engagement of the medical workforce with the goals of the organisation in which they work. Following the all-Wales survey conducted in June 2021 to monitor engagement of medical staff, 222 members of HDdUHB staff completed the survey. The Committee was pleased to

note that a number of actions are already making progress and received assurance on the actions being undertaken to further develop relationships with the medical staff cohort.

Strategic Equality Plan Annual Report – the Committee received the Annual Equality Reports: Strategic Equality Plan (SEP) Annual Report 2020/21, Annual Workforce Equality Report 2020/21 and Gender Pay Gap, for assurance on the work which had been undertaken to meet the Public Sector Equality Duty and HDdUHB equality objectives, prior to Board approval. The Committee commended the reports and warmly acknowledged the work of the staff involved in their production. It was agreed that future reporting would include all Wales benchmarking information for comparative purposes.

Staff Story – the Committee received a heart-warming video concerning the recently appointed Apprenticeship Academy cohort, noting that the 2021 cohort had now commenced across both corporate and acute sites. The Director of Workforce & OD emphasised what this means, not only to the apprentices, but also to their families and the community, and reiterated the importance of expanding the academy further. The Committee welcomed the broadening of the apprenticeship academy across clinical and non-clinical departments.

Domiciliary Care Provision (Workforce Issues) – the Committee was 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. The Committee received assurance that weekly Health & Social Care Tactical Group meetings have been re-established, and a regional action plan agreed to improve patient flow across the system, with delivery against the plan monitored on a weekly basis. The Committee noted that the regional action plan includes a range of remedial measures including the implementation of a new home based bridging service whereby additional staff would be appointed to significantly extend HDdUHB's existing bridging service in order to provide bridging services to all patients awaiting domiciliary care. Assurance was received in regard to the short-term measures undertaken to date and the requirement to address matters in the longer-term was reiterated, with a further update position requested at a future Committee meeting.

Discovery Report – the Committee was presented with the “Discovery Report: Understanding the Staff Experience in HDdUHB during the 2020-21 COVID-19 Pandemic”, and noted that this had been commissioned to consider the changes and innovations that had been made in response to the first wave of the pandemic to enable organisations to respond to both patient and public needs. Gratitude was expressed 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 agreed that an action plan would be presented to the Committee in December 2021.

Black, Asian and Minority Ethnic (BAME) Advisory Group – the Committee was presented with the BAME Advisory Group update reports, noting that the official launch of the BAME Staff Network had taken place on 9th September 2021, and attended by 42 staff members representing a diverse range of clinical and non-clinical roles. The Committee acknowledged HDdUHB's corporate responsibility to work with, value and support BAME colleagues alongside other staff. Gratitude was expressed for the encouraging reports and the Committee was pleased to note the tangible outcomes in terms of initiatives and actions being undertaken which are having a positive impact on staff within HDdUHB. At the February 2022 meeting, the Committee received the BAME Staff – Review of Dismissals over a 10 Year Period report, providing an update commissioned by the BAME Advisory Group to review all dismissals relating to a member of the workforce from a BAME staff group over a 10 year period. It was noted that the review had been undertaken to identify any indication of

disproportionate impact, and to provide confidence to the BAME Advisory Group of the commitment to consider any evidence of disproportionate action. Assurance was provided that no evidence of disproportionate impact based on the quantitative review of data had been found, however a number of recommendations were made to ensure more positive action could be taken to support BAME staff going through the disciplinary process. The Committee received assurance from the report whilst emphasising the importance of ensuring that the recommendations are monitored and fed back to PODCC.

Outcome of Advisory Appointments Committee – The Committee received Advisory Appointments Committee (AAC) reports, providing updates on the outcome of the AACs held between 01/06/21 - 20/09/21 and 23/11/21 – 20/01/22, and approved the appointments on behalf of the Board.

Carers Report - the Committee received the Carers Report – Supporting Improved Outcomes for Unpaid Carers: Update on Planning Objective 2A, providing an update on the ongoing work that supports unpaid carers, including those staff who work for HDdUHB and have unpaid caring responsibilities in their home lives. The Committee received assurance from the encouraging work undertaken to date and recognised the challenges, in particular Welsh Government cost pressure implications for certain aspects of HDdUHB work in 2022/23.

Development of People & Culture Plans/ Cultures & Principles of Engagement – the Committee received the Cultures and Principles of Engagement report, building upon an In-Committee PODCC discussion in December 2021 and outlining how the Workforce & OD teams will work with PODCC going forward. The culture change journey to collectively achieve a culture change and give the opportunity for **every day to be a good day** in HDdUHB was noted. The Committee was joined by the newly appointed team of ODRMs, who each provided an insight into their working backgrounds and reasons for becoming ODRMs. Their passion and aspirations for the role were acknowledged and the Committee endorsed the proposed way of working with PODCC and the approach in terms of presenting future reports, with the expectation that the benefits and outcomes of this work will be evidenced in both the short and long term.

Making a Difference – Customer Service Programme – the Committee received a report providing both an update and assurance relating to the development of a customer service programme in order to develop excellent customer service across HDdUHB. The Committee noted that in response to the 2021/22 Planning Objective (PO) 1C – *design a training and development programme to build excellent customer service across the Health Board for all staff in public & patient facing roles for implementation from April 2021*, the Education & Development Team had been requested to design a training programme to build excellent customer service across HDdUHB for all staff in public and patient facing roles. The work undertaken to date was commended, recognising that appropriate consideration had been given to the anticipated challenges associated with the delivery of the programme, and the Committee received assurance from the progress made and impact anticipated.

Nursing & Midwifery Strategic Framework – at the February 2022 meeting, the Committee received the Nursing & Midwifery Strategic Framework report, noting that the commitment to the nursing profession across HDdUHB over a 5-year period had been launched at the Nursing & Midwifery ceremony in November 2021. The aim of the Nursing & Midwifery Strategic Framework is to empower the profession at all levels of practice, and to improve the safety and quality of services. The vision of HDdUHB is one of delivering excellent clinical services fit for current and future generation, with a focus on keeping people well to meet the priorities outlined within the Health and Care Strategy ‘A Healthier Mid and West Wales: Our Future Generations Living Well’. It was noted that key outcomes for success have been

identified, which will allow the progression of the implementation process, i.e. ensuring that plans are executed and the benefits are released. The pledge is to work alongside colleagues in Workforce & OD in delivering the vision of collective, compassionate and visible leadership across the profession. The focus will be upon *putting people at the heart of everything we do* and retaining staff by ensuring HDdUHB is the best place to work. The Committee noted the content of the Nursing & Midwifery Strategic Framework report together with the proposals for delivery and reporting arrangements.

Culture

Welsh Language Provision – the Committee was presented with the Diweddariad ar yr Iaith Gymraeg/Welsh Language Provision report, providing an update on progress in implementing compliance against the Welsh Language Standards and the development of the HDdUHB strategy to set an ambition for how the Welsh language and culture is embraced within the organisation. The report provided an update on three areas of work that currently offer assurance to the Committee relating to the ambition for the Welsh language and compliance with Welsh Language Standards to ensure HDdUHB is meeting the expectations of its communities. It was noted 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 PO which can be measured. The Committee was pleased to note that HDdUHB is the first organisation to undertake a flexible “improve your Welsh” course, which has received positive feedback.

Bilingual Skills Policy Compliance – the Committee was presented with the Implementation of the Bilingual Skills Policy report, providing an update on progress in implementing the Bilingual Skills Policy which had been approved in September 2021. It was 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, and Members were pleased to note that as at August 2021, 36% of the HDdUHB workforce are compliant with this target. The Committee was 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.

Performance

Performance Appraisal Development Review (PADR) Performance Report – the Committee received the “Performance Appraisal Development Review (PADR): How do we Manage and Raise Performance in HDdUHB”, providing Members with a deeper understanding of the performance management agenda within HDdUHB. The Committee supported the outlined direction of travel to enable the growth of an employee-led performance management culture within HDdUHB, anticipating that this would have a positive impact upon the compliance rate moving forward.

Workforce Dashboard & Integrated Performance Assurance Report – at the October 2021 PODCC meeting, the Committee was presented with two reports: Workforce Metrics and Key Performance Indicators and the Integrated Performance Assurance Report - Update of Strategic Objectives 1, 2 and 3 for Hywel Dda University Board as at 31st August 2021, noting that future reporting would consist of one combined report. The Committee noted the substantial work to be undertaken associated with workforce metrics and key performance indicators in terms of the Workforce & OD Department’s aspirations to present to the Committee moving forward. The Committee further noted that 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. At the December 2021 meeting, the Committee was presented with the Performance Assurance & Workforce Metrics report, including an update on workforce metrics as well as key performance indicators, which provide

assurance of delivery against objectives and nationally set targets. At the February 2022 meeting, the Committee was presented with the Performance Assurance & Workforce Metrics report, including an update on workforce metrics as well as key performance indicators, which provide assurance of delivery against national framework targets and the 10-year Workforce, Organisational Development and Education Strategy 2020-2030. Members were pleased to note the improvement in the update on metrics and key performance measures presented compared to previous reports presented to PODCC, with the report now including a much broader range of metrics and key performance measures around the entire Workforce & OD agenda. Members commended the detailed report in terms of gaining an understanding of the Key Performance Indicators across HDdUHB.

Planning

Planning Objectives Update – at the August 2021 meeting, the Committee received the Workforce & Organisational Development PO update report, demonstrating where progress has been made in delivering the Workforce & OD planning objectives. Whilst Members were pleased to note that all POs are progressing and on target, some concerns were raised with regard to PO 2D Clinical Education Plan due to changes in team management. Assurance was provided that a deep dive into PO 2D would be undertaken in September 2021 with any revisions to the PO to be agreed by the Executive Team. The Committee was assured by the current position, recognising that future reporting would include two versions of the RAG ratings, i.e. a current rating and an end of year target rating. The Committee received a further Workforce & OD PO update report at the October 2021 meeting, providing an update on the progress made in the development and delivery of the POs aligned to PODCC, demonstrating where progress has been made. The Committee noted that 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 is due for delivery in subsequent quarters of 2021/22 are on schedule. Assurance was received by the Committee from the current position. At the December 2021 meeting, whilst acknowledging the clear progress made in terms of those POs currently amber rated, the Committee was assured that plans are in place and collaborative working is being undertaken with organisations in terms of the future workforce. At the February 2022 meeting, whilst assurance was received in terms of the current position, it was agreed that in order to gain assurance moving forward, where there is a change in the current status of a PO, the factors impacting on a static or deteriorating position be identified, together with the action that is being taken to resolve the issues involved.

Monitoring of Welsh Health Circulars (WHCs) – the Committee received the “Welsh Health Circulars” report, providing an update in relation to the implementation of Welsh Health Circulars (WHCs), noting that one WHC 015-21 (NHS Pay Bonus for Primary Care) falls under the remit of PODCC. Assurance was received that the WHC has now been implemented, jointly led by the Director of Workforce & OD and the Director of Primary Care, Community and Long Term Care. The Committee gained assurance from the report and agreed closure of WHC 015-21.

Workforce Plan Update Position – at the December 2021 meeting, the Committee was presented with the Workforce Plan Update Position report, noting its purpose to define, explore and develop interventions to increase workforce supply routes that can contribute to the overall workforce plan (as part of the Integrated Medium Term Plan) and identify resource needs within the Workforce & Organisational Development Directorate that would require additional investment to support the ambition to address the scale of the workforce deficits. Members noted the intention to recruit from overseas to address the short to medium term deficit position, whilst developing the local workforce. In terms of workforce development, recognising that there are a number of healthcare support workers who wish

to progress to become registered nurses, and the substantial amount of applications received for HDdUHB's apprenticeship scheme, there is clear evidence that these are career pathways that the population of HDdUHB wish to pursue. The Committee supported and was assured by the Workforce Plan Update report, noting the indicative costs and requirement for further scoping and development work.

Risk

Corporate Risks Report – The Committee was presented with the Corporate Risks Allocated to PODCC report at the October 2021 meeting, noting the one new risk currently aligned to PODCC – *Risk 1219 Insufficient workforce to deliver services required for “Recovery” and the continued response to COVID-19*. It was noted that the Workforce Team is developing a strategic recruitment strategy for delivery within year, and the Committee was assured by the identified controls in place.

Feedback from the R&ISC

At the August 2021 meeting, the Committee received the R&ISC update report following the meeting held on 12th July 2021, together with the Terms of Reference for the Tritech Management Team established to oversee the Tritech project, sponsored and governed by HDdUHB. It was noted that Health and Care Research Wales has withdrawn funding from the Development Team (circa £120k) from April 2021, with the expectation that they will cost-recover, which is not a dissimilar position across Wales. It was further noted that a peer review process has been undertaken by academics, with HDdUHB the second institution to be peer reviewed, recognising the importance of creative thinking concerning accessing funding, including innovation, research and clinical trial monies. The Committee sought assurance on the management of Risk 1160; Lack of Research Leadership, and it was noted that collaborative working with university partners would be undertaken to pursue the potential for increasing the number of Principal Investigators. Members were informed that a report concerning the research and innovation strategy would be presented to Public Board in September 2021.

At the October 2021 meeting, the Committee received the R&ISC update report following the meeting held on 13th September 2021. It was noted that verbal feedback, pending the written report, following the recent Peer Review had been positive in terms of Board level engagement and the understanding of research and innovation within HDdUHB. However, 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. The Committee looked forward to the future reporting of the developing dashboard, and requested that the next report includes an update position relating to Risk 1160 (risk of a decreasing research portfolio, both in amount as well as diversity).

At the December 2021 meeting, the Committee received the R&ISC update report following the meeting held on 8th November 2021, noting the significant progress and achievements undertaken by the R&I Team, particularly in regard to the additional research sessions available for clinicians.

At the February 2022 meeting, the Committee received the R&ISC update report following the meeting held on 10th January 2022, where Members were pleased to note that following a lack of research leadership, a team of clinical leads had been appointed, and also that an interim solution had been found in terms of identifying suitable space for research nurses to undertake clinical interactions with patients.

Key Risks and Issues/Matters of Concern

During 2021/22, the following key risks and issues/matters of concern were raised by PODCC to the Board:

- August 2021 – concerns in regard to Risk 1160; Lack of Research Leadership, with assurance provided that collaborative working with university partners would be undertaken to pursue the potential for increasing the number of Principal Investigators.
- December 2021 - the inhibiting number and types of research studies that can be undertaken at Wthybush General Hospital due to a lack of space, with work in progress to identify suitable accommodation noted.

Matters Requiring Board Level Consideration or Approval

During 2021/22, the following matters required Board level consideration or approval:

- October 2021 – approval of revised PODCC Terms of Reference.

Argymhelliad / Recommendation

The Board is requested to endorse the People, Organisational Development & Culture Committee Annual Report 2021/22.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Safon(au) Gofal ac Iechyd: Health and Care Standard(s): Hyperlink to NHS Wales Health & Care Standards	Governance, Leadership and Accountability
Amcanion Strategol y BIP: UHB Strategic Objectives: Hyperlink to HDdUHB Strategic Objectives	Not Applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Statement	Not Applicable

Gwybodaeth Ychwanegol:

Further Information:

Ar sail tystiolaeth: Evidence Base:	Agendas, papers and minutes of PODCC meetings 2021/22
Rhestr Termiau: Glossary of Terms:	Included within the body of the report

Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	PODCC Chair, Lead Director and Committee Members
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Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	A sound system of internal control, as evidenced in the Committee's Annual Report, will assist with ensuring financial control, and the safeguard of public funds
Ansawdd / Gofal Claf: Quality / Patient Care:	SBAR template in use for all relevant papers and reports.
Gweithlu: Workforce:	SBAR template in use for all relevant papers and reports.
Risg: Risk:	SBAR template in use for all relevant papers and reports.
Cyfreithiol: Legal:	A sound system of internal control, as evidenced in the Committee's Annual Report, ensures that any risks to the achievement of the Health Board's objectives are identified, assessed and managed. Compliance with the Health Board's Standing Orders, and the Committee's Terms of Reference, requires the submission of an Annual Report to the Board.
Enw Da: Reputational:	Not applicable
Gyfrinachedd: Privacy:	Not applicable
Cydraddoldeb: Equality:	SBAR template in use for all relevant papers and reports.