

MINUTES OF THE PEOPLE, ORGANISATIONAL DEVELOPMENT AND CULTURE COMMITTEE MEETING

Date of Meeting: Tuesday 04 November 2025
Venue: Ystwyth Boardroom and Microsoft Teams Meeting

Present: Mrs Eleanor Marks, Vice-Chair, HDdUHB (Committee Chair)
Cllr. Rhodri Evans, Independent Member
Ms Ann Murphy, Independent Member

In Attendance: Mrs Lisa Gostling, Executive Director of Workforce and Organisational Development/ Deputy Chief Executive (Executive Lead)
Ms Sharon Daniel, Executive Director of Nursing, Quality and Patient Experience
Mr Andrew Carruthers, Chief Operating Officer (part)
Ms Alwena Hughes Moakes, Communications and Engagement Director
Mr James Severs, Executive Director of Allied Health Professions and Health Science
Mr Mark Henwood, Executive Medical Director
Mr Anthony Dean, Trade Union Representative
Ms Charlotte Wilmshurst, Assistant Director of Assurance and Risk (deputising for Mrs Joanne Wilson, Director of Corporate Governance/Board Secretary)
Ms Heather Hinkin, Assistant Director of People Management
Ms Tracy Walmsley, Assistant Director of People Planning
Ms Michelle James, Head of Resourcing & Utilisation
Ms Sarah Barnes, Workforce Manager: Systems and Workforce Intelligence
Ms Sara Rees, Senior Public Health Practitioner (part)
Ms Trina Nealon, Principal Public Health Officer (part)

Minutes Item Ref.

Action

PODCC **Welcome and Apologies for Absence** (25)83

Mrs Eleanor Marks, People, Organisational Development and Culture Committee (PODCC) Chair, welcomed everyone to the meeting.

Apologies for absence were received from:

- Ms Anna Lewis, Independent Member (Committee Vice-Chair)
- Mrs Joanne Wilson, Director of Corporate Governance/Board Secretary.

PODCC **Declarations of Interest** (25)84

The following declarations of interest were made:

- Ms Ann Murphy in her Trade Union role.

PODCC **Minutes and Matters Arising from the meeting held on 19 August 2025**
(25)85

The Minutes from the meeting held on 19 August 2025 were approved as an accurate record.

Decision: The Minutes of the meeting on 19 August 2025 were approved.

PODCC **Table of Actions from the meeting held on 19 August 2025**
(25)86

All actions from the PODCC meeting held on 19 August 2025 were complete.

PODCC **Self-Assessment of Committee Effectiveness – 6 month outcome report**
(25)87

The Committee was informed that all actions agreed in response to the outcomes of the PODCC Self-Assessment 2024/25 have been completed.

The Committee was ASSURED on this item.

Decision: The Committee RECEIVED ASSURANCE from the progress made against the actions being undertaken to improve its effectiveness.

PODCC **Targeted Intervention (TI) Progress Report**
(25)88

Mrs Lisa Gostling introduced the progress update report on TI.

Following a query at the PODCC meeting in August 2025, Mrs Gostling explained that the actions, although complete, would remain amber rated until the TI process is complete and the Health Board is de-escalated for Leadership and Governance.

The Committee was ASSURED on this item.

Decision: The Committee RECEIVE ASSURANCE from the Targeted Intervention Progress Report.

PODCC **Staff Story - Sickness Absence Tool Demonstration**
(25)89

Ms Michelle James and Ms Sarah Barnes introduced the Workforce & Health Population Tool, advising that it was presented to the Executive Team in September 2025. The tool uses resources from a number of different sources including the Electronic Staff Record (ESR), Welsh Index of Multiple Deprivation (WIMD), Lower Super Output Area (LSOA) and Office of National Statistics (ONS) to provide data on staff sickness absences.

Mrs Gostling explained the tool was developed in response to ongoing high staff sickness rates since pre-COVID, to explore possible links with staff demographics or where staff live.

The cost of absence in 2024-25 was £26.4m, with individuals aged 61-65 accounting for 10% of sickness absences.

The presentation included healthy life expectancy data for the population of Hywel Dda University Health Board (HDdUHB) population. It highlighted that staff in the Glangwili Hospital area have lower life expectancy compared to other HDdUHB areas. The tool allows filtering by factors such as work area, age and more.

Mrs Sharon Daniel highlighted that staff working longer hours has increased since COVID, resulting in less recovery time between scheduled shifts. It is a pattern that many staff now favour, choosing to work longer hours despite the reduced recovery time between shifts.

Councillor Rhodri Evans raised several points for consideration. He inquired whether the age profile of staff has shifted since COVID. He also questioned whether the previous reliance on a high number of agency staff may have contributed to lower staff sickness rates. Additionally, Cllr Evans sought clarification on the intended use of the tool.

Mrs Gostling explained that the tool can help identify problem areas, for example high rates of cough, colds or flu and support targeted interventions such as flu vaccination campaigns in the most affected locations. Mrs Gostling recently met with the Executive Director of Public Health and was informed that a charitable funding bid had been submitted to provide health check pods, to support staff to monitor their own health such as weight.

Mrs Heather Hinkin highlighted that work related absences were low, therefore it is challenging to reduce these absences.

Members were advised that short term sickness was at the lowest level for some time. Mrs Gostling noted the importance of understanding how the Health Board can support staff through their lifetime of work. As staff age and as they experience more health challenges, there is an increasing need to offer more flexible working arrangements.

Ms Alwena Hughes-Moakes requested that the data presented focuses more on its practical application to inform targeted communications on hygiene and illness prevention.

Mrs Gostling suggested using the data to explore specific areas and set actions that can be reviewed over time to assess impact.

Mrs Eleanor Marks requested the tool be presented in more detail at a future PODCC meeting.

MJ

The Committee was ASSURED on this item.

Decision: The Committee NOTED the Sickness Absence Tool Presentation.

PODCC **Partnership Forum Update - DEFERRED**
(25)90

Deferred due to the cancellation of the Partnership Forum meeting.

PODCC **Workforce Efficiency**
(25)91

Ms Tracy Walmsley presented the Workforce Efficiency deep dive report, which forms part of a planning framework relating to Annex 2 workforce productivity to maximise workforce productivity and efficiency by strengthening value.

The report outlines several ongoing actions, acknowledging the substantial workload involved. The Workforce Team is collaborating closely with care group leads to progress these efforts.

Mrs Gostling emphasised the need to review headroom percentages across all staff groups, noting that some areas show high levels of annual leave and over-allocation. She highlighted the Medical staff group as a particularly complex area requiring significant attention. Mrs Marks questioned how departments can over-allocate annual leave. Mrs Gostling explained that this typically happens when multiple staff members are permitted to take annual leave at the same time, rather than staggering leave periods to ensure balanced coverage.

In response to Cllr Evans' query about the most significant challenges to address, Ms Walmsley responded that work is divided into three: short term, tactical and long-term. She identified urgent care as requiring both immediate and long term review, medical rostering and addressing overpayments linked to duty rate cards, as key priorities.

Mr Henwood explained that rate cards refer to agreed hourly terms and conditions established in collaboration with the British Medical Association. While a previous all-Wales agreement on rate cards was in place, this is no longer applicable. HDdUHB now faces the challenges of aligning its rates with the rest of Wales, which would incur an additional cost of circa £2m. Given the current financial pressures, identifying funding for this increase is challenging. However, maintaining lower rates will negatively impact staff recruitment and retention.

Mrs Gostling noted that the report indicated that some staff groups had taken no study leave during 2024-25, largely due to financial restrictions on training and development. Mrs Daniel highlighted that a number of Grow your Own staff had taken a significant number of study leave days.

The Committee was ASSURED on this item.

Decision: Decision

The Committee NOTED the Workforce Efficiency Report.

PODCC **Whistleblowing in Hywel Dda**
(25)92

A verbal update was provided at the meeting following a request from Independent Members. A multi-disciplinary team meeting had taken place to discuss whistleblowing from a number of perspectives. The Committee was assured that work was progressing and that **a written report would be presented at the next PODCC meeting in February 2026.** HH

PODCC **Social Partnership Duty Annual Report**
(25)93

Ms Sara Rees and Ms Trina Nealon joined the meeting.

The Social Partnership Duty Annual Report 2024-25 was presented, evidencing how the Health Board has fulfilled its statutory obligations under the Social Partnership and Public Procurement (Wales) Act 2023. The report supports the Health Board goals for the Wellbeing and Future Generations Act. Members were advised that the annual report was approved by the Executive Team on 17 September 2025.

In response to Cllr Evans' query on whether the Welsh Government (WG) provide feedback on the report, Ms Trina Nealon advised that she had not received any feedback. However, believed WG were pleased with the report and anticipated a response next year.

Ms Sara Rees highlighted that WG did not provide a deadline for producing the report therefore it was difficult to know whether other organisations have submitted their reports as yet.

Ms Charlotte Wilmshurst highlighted that the report would require Board approval.

Ms Hinkin added that generic feedback would be provided. Organisations submitting annual reports were a mixture of both small and large, and it would be interesting to see the feedback on reports from those organisations that had already submitted their annual reports.

Mrs Marks noted the report stated that balancing operational demands with meaningful engagement was a challenge. She agreed that it is difficult and reiterated the importance of ensuring consistency in partnership working across departments and believed it would be interesting to learn how inconsistent this is across the Health Board. In response, Ms Hinkin advised that some services have recognised the need to better promote their social partnership duty. She emphasised that partnership working and engagement should begin early in the process, not after completion.

Ms Walmsley observed that the Future Workforce Strategy places limited emphasis on learning and development.

The Committee was ASSURED on this item.

Decision: The Committee RECEIVED ASSURANCE that the Social Partnership Duty Annual Report 2024-2025 was submitted to Social

Partnership Council on 2 October 2025, fulfilling HDUHB's obligations under the Social Partnership and Public Procurement (Wales) Act 2023.

PODCC **Planning Objectives Update Report**
(25)94

It was noted that one objective (PO1.1 to establish a group to support staff wellbeing) was reported as off-track for the first time due to vacancies and sickness absences. Although other objectives remain on track, they may also be impacted by staffing pressures during the final quarter of 2025/26.

Mrs Gostling highlighted that the staff survey response rate was 13% as at the week beginning 27 October 2025.

The Equality, Diversity and Inclusion (EDI) Team is assessing which objectives that can be achieved within current capacity and evaluating whether this will be sufficient to meet future delivery requirements.

The Health Board has been invited to the WG Anti-Racism Conference. The EDI team is exploring attendance options and Mrs Anna Bird will join the panel discussion.

Following a request from Mrs Marks regarding the WG Sensory Loss event in November 2025, it was agreed that **Mrs Gostling would contact Mrs Anna Bird and request that the details are circulated to Committee Members.**

LG

In response to the Chair's query on micro-volunteering Ms Walmsley explained that a number of projects are currently underway, with a team within Public Health reviewing this and a 'Public Health Champion' now in place.

Mrs Marks informed the Committee that she sat on the Board of a small charity which helps people over 50 to volunteer.

Members noted that Ms Jo McCarthy, as Chair of the Enfys Network would lead on organising an LGBTQ+ staff network event in the spring in 2026.

Mrs Gostling noted that Workforce and Organisational Development staff remain committed despite ongoing staff shortages, however acknowledged that staff within other teams are also experiencing staff shortages. The Workforce Annual Plan will be refreshed for 2026-27 to focus on what is realistically achievable.

Ms Hinkin highlighted that although the team is committed to doing their best, the heavy workload poses risks of burnout and increased sickness absence. She noted the challenge of balancing staff health and wellbeing with meeting work demands.

The Committee was ASSURED on this item.

Decision: The Committee RECEIVED ASSURANCE on the current position regarding the progress of the Planning Objectives aligned to the People, Organisational Development, and Culture Committee, in order to assure the

Board that the Planning Objective is progressing and is on target, and to raise any concerns where a Planning Objectives is identified as behind in its status and/or not achieving against its key deliverables.

PODCC
(25)95

Assurance and Risk Report

Mr Andrew Carruthers joined the meeting.

Ms Wilmshurst introduced the Assurance and Risk report and outlined that there were currently 2 corporate risks, 5 operational risks, 1 principal risk and 3 audit and inspection reports assigned to PODCC.

The risk score for Principal Risk 1186: “attract, retain and develop staff with the right skills” had increased from 15 to 16 to acknowledge that sickness rates were increasing.

It was noted that the risk score for Operational Risk 2169: “risk to staff wellbeing in weight management service due to unrealistic patient / referrers expectations with associated unreasonable behaviour” remains high due to key staff being absent with sickness or stress. Communication work is underway to manage public expectation around access to weight loss medication, though this carries a risk of increasing public concern. This risk will be reviewed again at the end of November 2025.

Mr James Severs highlighted that Wales is the only nation without a policy position, and the risk is not being addressed. Discussions are underway with Public Health to identify strategies for mitigating the risks of violence and aggression towards clinicians and staff responding public queries.

Mrs Marks expressed concern that given expansive media coverage of weight loss medication, the public may turn to online sources if they are unable to obtain medication through health services.

Mr Andrew Carruthers agreed this required consideration and has begun early discussions with the Executive Director of Public Health on the absence of an all-Wales policy position, and whether the Health Board could trial a pilot scheme to increase access to weight loss medication for residents.

Mrs Marks recognised the need to triangulate with PODCC, the Health and Safety Committee and the Quality, Safety and Experience Committee.

Cllr Evans queried whether the risk score for Operational Risk 2137: “risk of unsustainable surgical Specialty, Associate Specialist, and Specialist doctors (SAS) Level Rota in Carmarthenshire due to gaps in Glangwili Hospital rota and unfunded rota in Prince Phillip Hospital” was too low. In response, Mr Carruthers advised that the risk currently reflects the mitigating actions in place. The risk will however continue to be monitored and managed accordingly.

It was highlighted that Operational Risk 2088: “risk that staff will have a poor experience whilst at work due to clinical pressures, financial challenges and change processes” mirrored earlier discussions on Workforce staffing pressures within their teams. Mr Carruthers noted that

staff throughout the Health Board are experiencing significant pressures and some of the enhanced controls in place are a challenge from an operational perspective. In terms of managing these pressures, there is further work to be undertaken on health and safety training to include the stress risk assessment process for operational managers and clinical leads to ensure those assessments are completed and up-to-date. The target deadline date for the risk has been brought forward from March 2026 to the end of November 2025. In the meantime, service areas will continue to fill vacancies, where possible and review the use of bank staff to backfill vacant posts, and use existing budgets to recruit a level of locums to support some of the vacancies at Clinical Care Group (CCG) level.

Mr Carruthers is in discussion with WG who have indicated financial support to increase physiotherapist numbers within the Health Board through agency recruitment. This measure aims to address reducing waiting times and alleviate pressures on staff.

Mrs Gostling highlighted Corporate Risk 1821: "risk to the welfare of Health Board staff due to current demands". While further discussions will follow, given the current financial climate, the risk may ultimately be deemed at tolerance. Mrs Gostling explained that the purpose of raising the discussion now was to address the issue of risk tolerance.

The Committee was ASSURED on this item.

Decision: The Committee:

Risk Management

- RECEIVED ASSURANCE that identified controls are in place and working effectively;
- RECEIVED ASSURANCE that all planned actions are credible and deliverable, and in line with agreed plans, and will be implemented within stated timescales and will reduce risks further and/or mitigate the impact should risks materialise; and

Audits, Inspections and Regulatory Reports

- RECEIVE ASSURANCE from the lead Executive Director or Supporting Officer on the management of recommendations raised in audit, inspection and regulatory reports within their area of responsibility, particularly in respect of confirming the full implementation of recommendations, any barriers to delivery and subsequent impacts of non/late delivery, and assurance that the risks associated with these are being managed effectively.

PODCC
(25)96 **CCG Structure and Process for Recruitment**

A verbal update was provided in the absence of the written report scheduled for the next meeting. Members were advised that plans are in place for structuring 3 of the 4 CCGs and new posts are currently going through the Organisational Change Policy (OCP) process. A draft outline for Phase 2 of the OCP is in place for the fourth CCG and a review is taking place to align

clinical care. **A written report will be presented at the next PODCC meeting in February 2026.** **AC**

Decision: The Committee NOTED the verbal update in relation to Clinical Care Group Structure and Process for Recruitment.

PODCC
(25)97 **Sickness Rates and Cultural Challenges in Theatres**

Although the report had been deferred, a verbal update was provided at the meeting. Following a grievance raised last year by theatre staff in Glangwili Hospital, work is underway to complete the identified actions and review the next steps. The main challenge relates to the number of staff sickness absences, with an action plan requested from the CCG to mitigate these. A review of theatre staffing levels has also been undertaken. It was noted that current staff were undertaking additional hours to cover the staff shortfalls.

Cllr Evans questioned whether feedback provided by Independent Members following 'patient safety walkarounds' are taken into account. In response, Mrs Daniel advised that previously there was a process in place to provide feedback. Cllr Evans commented that the feedback process should be reintroduced. Mrs Marks agreed and added that a written report should be provided, outlining the challenges and the actions being taken to address them.

Mr Dean understood that concerns have been raised from staff within Theatres.

The Committee agreed to take assurance on this issue with the caveat that **a written report will be presented at the next PODCC meeting in February 2026.** **AC**

Decision: The Committee NOTED the verbal update in relation to Sickness Rates and Cultural Challenges in Theatres

PODCC
(25)98 **PO Deep Dive: PO1 Workforce stabilisation: Workforce Education and Development Plan - DEFERRED**

Due to staff absence, this item was deferred until the next PODCC meeting.

PODCC
(25)99 **Performance Assurance and Workforce Metrics - Integrated Performance Assurance Report (IPAR)**

The update report on Performance Assurance and Workforce Metrics was presented to the Committee.

Members commended the high percentage (96.1%) compliance on dementia awareness training. Ms Hinkin believed there were a number of reasons for the high staff engagement including family relevance.

The Committee was ASSURED on this item.

Decision: The Committee NOTED the content of the Performance Assurance and Workforce Metrics report and RECEIVED ASSURANCE of performance in key areas of the Workforce and OD agenda.

PODCC **Strategic People Planning and Education Group (SPPEG)**
(25)100

An update from the July 2025 SPPEG meeting was presented to the Committee. It was noted that the SPPEG meeting due in September 2025 was cancelled and has been rescheduled for 18 November 2025.

The report highlighted low compliance with mandatory training, with assurance received that improve efforts are underway. Mr Severs noted recent discussions with Mrs Daniel, Mrs Gostling and Mr Carruthers on supporting better compliance. A task and finish group has been established to address staff capacity challenges and enhance delivery of face to face clinical quality elements of statutory mandatory training.

The Committee was ASSURED on this item.

Decision: The Committee NOTED the contents of the SPPEG update report.

PODCC **Outcome of Advisory Appointments Committee (AAC)**
(25)101

The Committee approved three AAC appointments. No further discussion took place on this item.

The Committee was ASSURED on this item.

Decision: The Committee APPROVED the appointments of the consultants on behalf of the Board.

PODCC **Workforce Policies for Approval**
(25)102

The Committee received assurance that the documents received have been reviewed in line with Policy 190.

- Agreed that **Chair's action is to be undertaken to approve six local policies listed post consideration at the Health Board Partnership Forum meeting on 18 November 2025.**
 - 247- Anonymous Communications Regarding the Workforce Policy
 - 436 - Rostering Policy
 - 438 - Shared Parental Leave Policy
 - 713 - Honorary Contracts Procedure
 - 1386 - Re-banding Procedure 1409 - Neonatal Care Leave Procedure
- Extend the review date of the following policies:
 - 558/787 - Medication Errors (until 28 February 2026)
 - 121 - Relocation Expenses (until 28 February 2026)
 - 158 - Redeployment Policy (until 31 May 2026)

HH

- 001 - Adverse Conditions (until 28 February 2026)
- 109 - Time off in Lieu (until 28 February 2026)
- 100 - Induction (until 28 February 2026)
- 113 - Learning & Development (until 28 February 2026)
- 1103 - Performance Management (until 28 February 2026)
- Adopt the NHS Wales Anti-Sexual Harassment Policy and the revised All-Wales Flexible Working Policy

The Committee was ASSURED on this item.

Decision: The Committee:

- RECEIVED assurance that the above local policy has been reviewed in line with Policy 190.
- AGREED that Chair's action is to be undertaken to approve all six local policies listed post consideration at the Health Board Partnership Forum meeting on 18 November 2025.
- EXTENDED eight local policies in accordance with the dates provided.
- ADOPTED the NHS Wales Anti-Sexual Harassment Policy and the revised All-Wales Flexible Working Policy and note the All-Wales policy schedule update provided.
- NOTED the documents provided for information in relation to Career Breaks and Short-Term Protection of Earnings.

PODCC **PODCC Workplan 2025/26**
(25)103

The Committee noted the PODCC workplan 2025/26.

PODCC **ANY OTHER BUSINESS**
(25)104

Mrs Marks, as Chair, reminded the Committee this is a quarterly meeting and stated she will not approve a high number of deferrals for the next meeting. Should significant deferrals occur again, Mrs Marks will request the Committee convene on a bi-monthly basis.

PODCC **DATE OF NEXT MEETING:** 9.30am-12.30pm, Tuesday 17 February 2026
(25)105