

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

<b>Date and Time of Meeting:</b>	20 <sup>th</sup> June 2022 at 9.30 a.m.
<b>Venue:</b>	Board Room, Ystwyth Building, Hafan Derwen, St David's Park, Carmarthen, SA31 3BB

<b>Present:</b>	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)
<b>In Attendance</b>	Mrs Lisa Gostling, Director of Workforce & Organisational Development (PODCC Executive Lead) Mrs Joanne Wilson, Board Secretary (VC) Ms Christine Davies, Assistant Director of Organisation Development (VC) Ms Elin Brock, Head of Research, Innovation and Improvement (VC) (part) Ms Heather Hinkin, Head of Workforce & OD (VC) Mrs Amanda Glanville, Head of Workforce Education & Development (VC) Ms Alwena Hughes-Moakes, Director of Communications (VC) Ms Sarah Jenkins, Head of People & Organisational Effectiveness (VC) Professor Philip Kloer, Medical Director/Deputy Chief Executive (part) Mrs Sharon Daniel, Assistant Director of Nursing (VC) Mr Robert Blake, Head of Culture and Workforce Experience (VC) (part) Ms Kathryn Cobley, Diversity and Inclusion Manager (VC) Ms Sally Owen, Head of Recruitment and Workforce Equality, Diversity and Inclusion Mr John Evans, Assistant Director, Medical Directorate (VC) (part) Mr Steve Morgan, Deputy Director of Workforce & OD (VC) Ms Enfys Williams, Welsh Language Services Manager (VC) (part) Mr Daniel Blyth – Culture & People Specialist (VC) (part) Ms Charlotte Lawrence – Engagement & Recognition Officer (VC) (part) Ms Denise Fitzsimmons – Workforce Advisor (VC) (part) Ms Hayley Owens, Organisation Development Practitioner (VC) (part) Ms Sarah Russell – Culture & Workforce Experience Team Assistant (VC) (part) Ms Millie Thomas – OD Communications Officer (VC) (part) Dr Augusta Umughele – Workforce Culture, Diversity & Inclusion Manager (VC) (part) Ms Kay Wilkinson – Staff Benefits & Reward Officer (VC) (part) Mrs Karen Didcote, Committee Services Officer (Secretariat)

<b>Agenda Item</b>		<b>Action</b>
<b>PODCC (22)42</b>	<b>INTRODUCTIONS AND APOLOGIES FOR ABSENCE</b>	
	Apologies for absence were received from: <ul style="list-style-type: none"> <li>• Mr Winston Weir, Independent Member</li> <li>• Ms Jo McCarthy, Deputy Director of Public Health</li> </ul>	

	<ul style="list-style-type: none"> <li>Mrs Mandy Rayani, Director of Nursing, Quality &amp; Patient Experience</li> </ul>	
<b>PODCC (22)43</b>	<b>DECLARATIONS OF INTEREST</b> No declarations of interest were made.	
<b>PODCC (22)44</b>	<b>MINUTES AND MATTERS ARISING FROM THE PREVIOUS MEETING HELD ON 4<sup>TH</sup> APRIL 2022</b> <b>RESOLVED</b> – that the minutes of the People, Organisational Development & Culture Committee meeting held on 4 <sup>th</sup> April 2022 be <b>APPROVED</b> as an accurate record of proceedings.	
<b>PODCC (22)45</b>	<b>TABLE OF ACTIONS FROM THE PREVIOUS MEETING HELD ON 4<sup>TH</sup> APRIL 2022</b> An update was provided on the Table of Actions from the PODCC meeting held on 4 <sup>th</sup> April 2022, with confirmation received that outstanding actions have either been progressed or forward planned for a future Committee meeting, with the exception of:  <b>PODCC(22) 29 – Performance, Appraisal &amp; Development Review (PADR)</b> Ms Christine Davies informed Members it is anticipated that a breakdown of the data provided in the Performance, Appraisal and Development (PADR) report will be provided for the PODCC meeting on 18 <sup>th</sup> August 2022.  <b>PODCC(22) 32 – Welsh Language Strategy</b> - Mrs Alwena Hughes-Moakes advised that whilst Members had been provided with a breakdown of data relating to the Welsh speaking population by County, no data currently exists for a breakdown by Ward.  <b>PODCC(22)35 - Research &amp; Innovation Sub Committee report</b> - Professor Philip Kloer informed Members that current arrangements for university partnerships include bilateral meetings with each university partner and a proposed annual celebratory event with university partners. Annual meetings with Pembrokeshire College are still to be confirmed. Prof. Kloer, Mrs Joanne Wilson and Mrs Lisa Gostling will further discuss the oversight of university partnerships and sub committees. Workforce, education and training are within the remit of university partnerships and therefore PODCC is likely deemed the appropriate Committee for oversight of these partnerships, frequency and format of updates will need to be determined. It was agreed that the workplan be updated to include updates from university partnerships.	<b>PK/JW /LG/C SO</b>
<b>PODCC (22)46</b>	<b>PODCC REVISED TERMS OF REFERENCE</b> Members received the PODCC revised Terms of Reference (ToR) including the revised Planning Objectives (PO) for 2022/23. Members noted that the Black, Asian and Minority Ethnic (BAME) ToRs will be	

	<p>reviewed in the BAME Advisory Group meeting on 24<sup>th</sup> July 2022 for onward approval by PODCC on 18<sup>th</sup> August 2022.</p> <p>Professor John Gammon emphasised that reports submitted to PODCC, should align with, and reflect the ToR and POs and should demonstrate how the outcomes achieved within reports relate to individual POs.</p>	
	<p>The People, Organisational Development &amp; Culture Committee <b>APPROVED</b> the revised PODCC Terms of Reference for onward ratification by Board on 28<sup>th</sup> July 2022.</p>	

PODCC (22)47	<p><b>CHAIR'S ACTION – INTERPRETATION AND TRANSLATION POLICY</b></p>	
	<p>Prof. Gammon presented the Interpretation and Translation Policy for ratification following approval via Chair's Action.</p> <p>Mrs Gostling confirmed that the scope of the policy had been amended to reflect the inclusion of Primary Care.</p>	
	<p>The People, Organisational Development &amp; Culture Committee <b>RATIFIED</b> the approval provided via Chair's Action to the Interpretation and Translation Policy.</p>	

PODCC (22)48	<p><b>STAFF EXPERIENCE: TRANSFORMING STAFF FEEDBACK INTO POSITIVE CHANGE PROGRESS REPORT</b></p>	
	<p><i>Mr Rob Blake, Mr Daniel Blyth, Ms Charlotte Lawrence, Ms Denise Fitzsimmons, Ms Hayley Owens, Ms Sarah Russell, Ms Joanne Thomas, Ms Millie Thomas, Dr Augusta Umughele, Ms Kay Wilkinson joined the meeting.</i></p> <p>Ms Sarah Jenkins presented the Staff Experience: Transforming Staff Feedback into Positive Change progress report which detailed the programme of culture change being adopted by Hywel Dda University Health Board (HDdUHB). Organisational Development Relationship Managers (ORDM) and the Workforce and Organisational Development (W&amp;OD) team will work across all service areas of HDdUHB to develop People Culture Plans with the aim of transforming staff experience.</p> <p>Ms Jenkins informed Members that the majority of the framework of the People Culture Plan had been completed and the primary focus has been the cultural intentions of HDdUHB, demonstrating that the Health Board is listening to its employees, a critical element to the engagement process. Whilst the Health Board has learned to adapt and deal with the additional challenges posed following COVID-19 such as increased sickness levels, low resilience and stretched leadership, positive signs are emerging in terms of a cultural shift through staff engagement and interaction. Ms Jenkins highlighted the encouraging retention data shown within the report, which is a key priority in maintaining staffing levels, in particular for nursing staff. The Nursing People Culture plan was launched at the Nursing Conference in May 2022.</p>	

Ms Delyth Raynsford welcomed the staff feedback detailed within the report in relation to 'What a good day at work looks like'.

Prof. Gammon thanked Ms Jenkins for the update, and emphasised the importance of work being progressed around staff experience and its critical role in the Health Board.

Ms Judith Hardisty expressed disappointment at one of the primary reasons for voluntary resignation in the Health Board being work life balance and enquired which measures are in place to address this. In response, Ms Jenkins reported that globally, lack of flexibility has been identified, especially amongst nursing staff, in contributing to a poor work life balance. The Task and Finish Group are undertaking work to progress the issue of flexible/agile working to understand how HDdUHB can adapt to support the needs of staff and improve staff satisfaction and retention.

Noting the general lack of staff awareness around HDdUHB strategy plans and site identification for the new hospital, Ms Hardisty commented that improved engagement with staff is required to ensure they are better informed, and involved in discussions relating to which services remain at current sites. This approach would allay the uncertainty which exists amongst staff and also the public. Whilst the Improving Together Agenda raises the profile of the strategic objectives, Ms Jenkins acknowledged that as a result of ongoing operational challenges which staff have experienced, work around this had ceased. However, Ms Jenkins provided reassurance that the work will recommence and provide an opportunity to engage with staff and raise awareness.

Ms Raynsford enquired how engagement is being progressed with other staffing groups such as administrative, ancillary and estates. In recognition of the current economic climate, further enquired whether the increased resignation levels amongst these staff is related to financial challenges given that salaries are likely to be at the lower end of pay scales. Ms Jenkins confirmed engagement is ongoing and informed Members that no data is available to ascertain the reasons for increased resignation levels amongst certain staffing groups, however detailed work to gain a better understanding of the reasons for resignation will be undertaken.

Ms Sharon Daniels thanked the Workforce and Organisational Development (W&OD) team for their support at the nursing conference, and requested the opportunity to provide Members with feedback regarding the evaluation of the conference, providing a focus on the delivery framework that has been developed against the nursing and midwifery strategy. In relation to work life balance, Ms Daniels acknowledged there is a challenge in changing behaviour amongst nursing staff and conversations and discussion with staff around perceptions of work life balance should be addressed.

	<p>Prof. Gammon advised that any interventions in HDdUHB that interact or impact with any of the Planning Objectives aligned to PODCC, should be documented within the papers submitted to demonstrate the elements of work being undertaken which have a cultural impact or a cultural shift.</p> <p>Prof. Gammon acknowledged that the role of Organisational Development Relationship Managers (ORDM) has positively impacted the Health Board and the report addressed the cultural intentions, primary, secondary measures, identified priority areas, sites and professional groups in a positive light. However, Prof. Gammon suggested a more cohesive way of reporting across all work streams to effectively capture and demonstrate the vital work being undertaken without the risk of duplicating information. Ms Jenkins supported a more collaborative method of working and reporting and welcomed the opportunity to work with colleagues across W&amp;OD. Mrs Gostling noted that work to provide one dashboard encompassing all of the work undertaken by W&amp;OD is being progressed.</p> <p>Mrs Gostling, noted that whilst a positive work life balance is the overall aim, staff rosters are scheduled six weeks in advance and therefore limit flexibility. Additional work around rosters is required to support work life balance.</p> <p>It was agreed that an update of the Workforce Experience: Transforming Staff Feedback into Positive Change report be presented to PODCC in December 2022.</p>	<p>LG/SJ</p> <p>CSO</p>
	<p>The People, Organisational Development &amp; Culture Committee <b>RECEIVED ASSURANCE</b> on the actions undertaken to transform staff experience into positive culture change.</p>	

<p><b>PODCC (22)49</b></p>	<p><b>STAFF WELLBEING PLAN: DISCOVERY REPORT ACTION PLAN</b></p> <p>Members were presented with the Discovery Report Action Plan: Progress report providing an update on the implementation of recommendations made in the Discovery Report relating to staff experiences of working during COVID-19.</p> <p>Ms Christine Davies informed Members that the report provided an update on actions resulting from various wellbeing surveys that have been undertaken and included themes that derived from the medical engagement scale.</p> <p>Ms Elin Brock advised that the focus of the report was on impact and whilst there are some long term goals identified, progress on short term goals had been made. Referring to the proposal to align the work of W&amp;OD, Ms Brock proposed incorporating the Discovery Report Action Plan into the main dashboard.</p>	
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In terms of the three amber rated actions within the *Creating spaces that enable our people and services to thrive* theme , Members were advised that operational challenges experienced by staff have resulted in delays in completion of these actions.

In relation to the *Encouraging Learning and Innovation* theme, Ms Brock informed Members that these actions were reliant on receipt of Welsh Government Funding which has delayed progress, however, was pleased to advise that funding has now been received. Furthermore, with a full complement of staff now in post, a workplan is in place and work is on schedule for completion over the next couple of months.

Ms Raynsford, expressed concern that despite the allocation of Charitable Funds to create staff wellbeing areas, the pace of action appears slow. Having visited several hospital areas, Ms Raynsford advised that feedback from staff indicated the requirement for safe, secure spaces to rest and relax. In response Ms Brock explained that in November 2021, when funds had been approved, the proposal was to immediately consult with operational teams, however due to operational pressures these discussions were postponed. The plan going forward, is for County Partnership Forums (CPF) to allocate funding based on headcount and contact has been made with CPFs to inform them of the available funding. CPFs have been requested to submit a response outlining ideas and proposals by 1<sup>st</sup> September 2022. Mr Robert Blake informed Members that work on a number of proposals, in line with other Health Boards is being developed to provide suggestions to CPF's.

Ms Davies expressed concern around the lack of available space to provide suitable, safe rest areas for staff and it was acknowledged that this is a matter should be raised at Board level.

Ms Ann Murphy expressed concern around reaching HDdUHB staff who are not based at acute hospital sites, such as those in community based settings, Mental Health and Learning Disabilities (MHL), who have access to available space for the provision of rest areas, however, may require suitable equipment such as furniture.

Prof. Gammon sought clarification around the understanding of the RAG rating in the action plan in Appendix 1. The narrative against progress made in some areas does not align, some actions rated as green are described as progress 'in draft form' and are therefore incomplete. Prof. Gammon proposed the action plan be reviewed to provide greater assurance regarding the progress of actions.

It was agreed that an update of the Staff Wellbeing Discovery Report Action Plan will be provided to PODCC on 20<sup>th</sup> October 2022.

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	The People, Organisational Development & Culture Committee <b>NOTED</b> the implementation of recommendations made in the Wellbeing Action Plan in relation to staff experiences during COVID-19, however requested review and revision of the action plan to provide assurance.	
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<b>PODCC (22)50</b>	<b>STAFF VALUE AND APPRECIATION</b>	
	<p>Mr Blake presented with the Staff Value and Appreciation report and introduced members of the Culture and Workforce Experience Team to the Committee. Members noted that the report provided a research based overview of the Staff Value and Appreciation programme and summarised the required amendments to the recognition package. Acknowledging the importance of staff retention and the impact staff turnover has on HDdUHB, Members were informed work is being undertaken to review wellbeing, models of work and staff experience.</p> <p>Mr Blake informed Members that the aim of Staff Value and Appreciation is to undertake a programme of work to embed formal recognition for staff through awards and commendation and to encourage informal staff appreciation across the Health Board.</p> <p>Ms Charlotte Lawrence provided an overview of the staff recognition package which had been refreshed in line with research, best practice, a focus on staff voice and organisational values and goals with a view to positively impacting HDdUHB employees and attracting and retaining staff. A recognition package has been approved to enhance the current provision and includes Cymeradwyaeth Hywel's Applause 2022, Chair's Commendation, Local Recognition Award, Long Service Award and retirement and death in service recognition.</p> <p>Mrs Hardisty welcomed greater recognition for staff and enquired to the timescales for a return to 'in-person' as opposed to virtual events. Mr Blake confirmed that 2023 is the anticipated timescale for in-person events to resume. Ms Davies noted that a return to in-person gatherings would require funding, which would need to be factored into budgets for the next financial year.</p> <p>Recognising the value of conferences, and noting that conferences have only been organised for nursing staff, Mrs Hardisty enquired if there were any plans to hold conferences for other employees such as allied health professionals or ancillary staff. Mr Blake undertook to ascertain the feasibility of organising conferences for all employees following a return to in-person events.</p> <p>Independent Members welcomed the opportunity to be part of the employee recognition scheme.</p> <p><i>Mr Rob Blake, Mr Daniel Blyth, Ms Charlotte Lawrence, Ms Denise Fitzsimmons, Ms Hayley Owens, Ms Sarah Russell, Ms Joanne Thomas, left the meeting.</i></p>	

	<p>The People, Organisational Development &amp; Culture Committee:</p> <ul style="list-style-type: none"> <li>• <b>NOTED</b> the newly developed programme of work in relation to staff value and appreciation and</li> <li>• <b>ENDORSED</b> the direction of travel to enable the growth of the value and appreciation culture in HDdUHB.</li> </ul>	
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<p><b>PODCC (22)51</b></p>	<p><b>MEDICAL STAFF RECRUITMENT FINAL AUDIT REPORT</b></p>	
	<p>Ms Sally Owen presented the Medical Staff Recruitment Audit Update Report which outlined the review of Medical Staff Recruitment in line with HDdUHB Internal Audit plan for 2021/22. The report considered the inherent risks of delays in recruiting medical staff resulting in high locum costs and a negative impact on patient care and the lack of onboarding procedures which may detrimentally affect recruitment, the Health Board's reputation and future ability to recruit.</p> <p>Ms Owen informed Members there were a number of management actions relating to the recruitment function and advised that with the exception of one action relating to the recruitment process all other actions had now been closed. For assurance, Ms Owen advised that the outstanding action will be closed later this week, following the recruitment training session with the consultant development programme.</p> <p>Prof. Gammon enquired whether Ms Owen could provide reassurance that the management response to the actions which remain outstanding, will ensure they are achieved within the appropriate timescales. Ms Owens recognised the Electronic Starter Form (ESF) as key in the development of this part of the audit and once established the ESF will ensure any gaps in the recruitment process are closed.</p> <p>Mrs Gostling confirmed that actions would continue to be monitored via the Audit Committee tracker.</p>	
	<p>The People, Organisational Development &amp; Culture Committee <b>RECEIVED ASSURANCE</b> that mitigating actions are being implemented within the stated timescales.</p>	

<p><b>PODCC (22)52</b></p>	<p><b>MEDICAL APPRAISAL, REVALIDATION AND JOB PLANNING</b></p>	
	<p>Members were presented with the Medical Appraisal (MA), Revalidation and Job Planning report which provided an update on the progress made by the Culture and Workforce Experience team following the PADR review report presented to PODCC in April 2022.</p> <p>Medical staff participate in MAs, an annual process which underpins the General Medical Council's (GMC) process of revalidation, an evaluation of doctor's fitness to practise. The appraisal focuses on development and assurance and is designed to enable doctors to demonstrate that they are meeting the objectives and principles set out in the GMC Good Medical Practice framework. Whilst MAs, revalidation and job planning</p>	



are not presented or promoted as being performance management tools, they are processes which support a doctor's ability to develop, keep up to date and perform their roles effectively, efficiently and safely.

MA compliance rate for HDdUHB has remained relatively stable since April 2021, above 90%, however MA compliance for April 2022 had reduced by 6% from 96% to 90%. The high number of approved missed MAs recorded during the suspension of appraisal during the period March 2020 – April 2021 provided much needed flexibility during a challenging period however, it has taken some time for doctors to return to the routine of regular annual appraisal. For this reason, non-engagement processes have been reinstated, along with increased communications and it is hoped that a rise in compliance will be realised over coming months.

The report highlighted the significant increase in the number of recommendations for revalidation deferrals to date since 2021, as a result of COVID-19, primarily due to challenges around obtaining the patient feedback aspect of supporting information, which is an essential requirement for a revalidation recommendation to be made. The appraisal and revalidation team have issued correspondence and feedback forms for patients to complete and return, however the uptake is minimal which delays the deferral further.

In relation to Job Planning, despite continued challenges and service pressure, the percentage of current, fully approved job plans has increased by between 1% and 3% since July 2021. Continued efforts by Consultants, SAS doctors and operational teams to fully engage with the process and teams are working hard to meet the targets set.

Prof Kloer informed Members that the focus early in 2022, has been on job planning for SAS doctors due to changes in the contracts for SAS doctors, which now requires job planning to be in place, prior to funding being secured for these posts.

Mrs Hardisty congratulated Prof. Kloer, Mr John Evans and the team on the achievements and progress made in relation to medical appraisals, revalidation and job planning. Noting the significantly high response rate of 87% on the All Wales Survey, Mrs Hardisty enquired whether the response was specific to HDdUHB or an all Wales response. Mr Evans confirmed this survey was an all Wales survey. Prof Kloer commented that the revalidation of doctors is dependent upon engagement with the appraisal process which may influence the rate of compliance with appraisal feedback.

Prof. Gammon enquired how 23% of doctors can be employed by HDdUHB without a valid job plan in place. Prof. Kloer clarified that appraisal is a requirement of the revalidation process, contractually doctors are required to have a job plan and confirmed that 23% doctors are working to a job plan, however the requirement is for the job plan to

	<p>be approved annually and there are a significant number of job plans awaiting the approval process. Mr Evans confirmed the trajectory of completed job plans is forecast to increase significantly by the end of 2022.</p>	
	<p>The People, Organisational Development &amp; Culture Committee:</p> <ul style="list-style-type: none"> <li>• <b>NOTED</b> the current attainment status of medical appraisal, revalidation and recent improvement in job planning across HDdUHB</li> <li>• <b>ENSORED</b> the intentions for ongoing development and quality improvement</li> </ul>	

<p><b>PODCC (22)53</b></p>	<p><b>PLANNING OBJECTIVES UPDATE</b></p>	
	<p>Mrs Gostling presented the Workforce &amp; Organisational Development (OD) Planning Objectives Update which detailed the revised set of Planning Objectives (POs) aligned to PODCC. The current status of POs as at quarter 1 demonstrated that 16 POs are on track and PO 2I which is linked to a single point of contact for health and wellbeing is behind schedule.</p> <p>Mrs Gostling explained that all Wales work is ongoing around the Once for Wales Occupational Health &amp; Wellbeing Service, however it is recognised that work undertaken pre COVID-19 requires updating as services have developed. A 'Plan on a Page' is being completed with a view to progressing the status of PO 2I.</p> <p>Prof. Gammon enquired whether assurance could be received that the current POs and metrics in place adequately reflect primary care and the workforce challenges. Ms Davies advised that the POs relating to ODRM and retention (1G and 2L) are on track. In regard to PO 2J – Future Shot Leadership Programmes, this may require revision based on emerging themes around primary care and the development work required to support the planned cluster initiative.</p> <p>Referring to the Accelerated Cluster Programme, an all Wales initiative, Mrs Hardisty suggested reviewing the requirements of OD to formulate a proposal/bid. Ms Davies and Mrs Hardisty undertook to develop this idea further.</p> <p>In terms of the workforce element, Prof. Gammon enquired whether PODCC is adequately reflecting the requirements of primary care, membership and planning objectives. In response, Mrs Gostling confirmed that all work undertaken in respect of POs is reflective of the whole organisation. Attendance at PODCC is aligned to POs, however representation could be sought from Allied Health Professionals (AHP) and Primary Care to ensure all aspects and views are considered. It was agreed that, POs and PODCC membership be reviewed in light of OD and workforce challenges in Primary Care to ensure inclusivity of both membership and consideration of all aspects and views in PODCC.</p>	<p><b>JH/CD</b></p> <p><b>LG/JW</b></p>

	<p>Referring to the complex area of the contractual framework for employees external to HDdUHB such as dentistry, Mrs Hardisty, commented that links with university programmes may be required, which in turn will impact the workforce of HDdUHB.</p> <p>Prof Gammon reiterated that all reports should reflect the POs aligned to PODCC.</p>	
	The People, Organisational Development & Culture Committee received <b>ASSURANCE</b> on the current position in regard to the progress of the Workforce & OD Planning Objectives aligned to PODCC.	

<b>PODCC (22)54</b>	<b>DEEP DIVE: RECRUITMENT</b>	
	Deferred to 18 <sup>th</sup> August 2022.	

<b>PODCC (22)55</b>	<b>WORKFORCE EFFICIENCY</b>	
	Deferred to 18 <sup>th</sup> August 2022.	

<b>PODCC (22)56</b>	<b>BLACK, ASIAN AND MINORITY ETHNIC (BAME) ADVISORY GROUP – BULLYING AND HARRASSMENT TASK &amp; FINISH GROUP ACTION PLAN</b>	
	<p>Mr Steve Morgan presented the BAME Bullying and Harassment Task and Finish Group (BHT&amp;FG) Action Plan. The BAME Advisory group recommended the establishment of a task and finish group to scope issues relating to bullying and harassment and to develop a greater understanding of the existing processes in order to consider recommendations for change in terms of a formal policy to deliver improvements. An action plan derived from feedback received and aims which targets advantages, disadvantages and timelines has been completed, to include primary and secondary measures to formulate an informative structured assessment.</p> <p>Mr Morgan welcomed the considerable engagement with BAME colleagues and W&amp;OD and emphasised that the most insightful exercise has been to enable BAME Advisory Group Members to share lived experiences and perceptions. Actions which arose from engagement with staff included exit interviews, departmental issues, lack of accessibility to training, the requirement for cultural awareness training, overstating person specification requirements, interview processes and greater BAME representation at interview and formal employee relations panels.</p> <p>Dr Augusta Umughele reported an eagerness from staff to be involved in the group and reported increased confidence and trust in staff participating with a genuine desire to improve and make change.</p>	

	<p>Prof Gammon thanked Mr Morgan and Dr Umughele for the excellent work undertaken and emphasised that this work should inform the culture and DNA of HDdUHB.</p> <p>Mrs Hardisty commented that the 9% figure shown in the action plan in relation to staff engagement with training and development opportunities appeared low. Ms Amanda Glanville advised that the equitable access questionnaire formulates the data within the action plan, and certain areas were targeted as part of the survey. Ms Glanville acknowledged disappointment that only 9% of responses has been received, however further investigation through a deep dive may prove beneficial in providing further understanding to improve response figures.</p> <p>Referring to the recruitment challenges highlighted in the action plan, Mrs Hardisty enquired whether this included elements of job descriptions which set a requirement for several years previous experience at an attained level, which may exclude applicants external to Wales. In response, Ms Owen advised that templates for job descriptions are being reviewed and focus groups and volunteers are engaging in this process to ensure best practice is achieved.</p> <p>Referring to the action plan Prof. Gammon, , proposed a RAG rating be incorporated to identify whether the actions and interventions are on track and to provide greater assurance. Further suggesting that the action plan be linked to the culture work around behaviours, thinking and leadership which may add value and could expedite the progress of work undertaken. It was agreed that an updated report and action plan be presented to PODCC in December 2022.</p> <p>Ms Raynsford requested confirmation, that staff working in community settings are involved in the work undertaken by the BAME Advisory Group. Dr Umughele informed Members that community settings have been included within the BAME Healthcare Awards and posters provided links for community staff, however acknowledged that this is an area for improvement.</p>	<b>CSO</b>
	<p>The People, Organisational Development &amp; Culture Committee <b>NOTED</b> and <b>ENDORSED</b> the BAME Advisory Group Bullying and Harassment Task and Finish Action Plan.</p>	

<p><b>PODCC</b> <b>(22)57</b></p>	<p><b>WELSH LANGUAGE AND CULTURE DISCOVERY REPORT - REMIT</b> <i>Ms Enfys Williams joined the meeting.</i></p> <p>Ms Hughes-Moakes introduced the Welsh Language and Culture report which outlined the scope and timeline of the proposed Welsh Language and Culture Discovery process.</p> <p>The Discovery process will follow three developmental stages:</p>	
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- **Discover** - from August to October 2022 engagement with internal and external stakeholders will review achievements already made and look forward at the opportunities to further enhance the Welsh Language and Culture (WL&C). Research will be conducted to gain an understanding of how other organisations in Wales have successfully embraced different languages and embedded their nation's culture into their organisations. There will be a focus on enhancing the patient and staff experience beyond providing a bilingual service.
- **Design** – building on findings from the discovery process, the WL&C plan will be developed and an initial draft will be shared with PODCC in order that feedback and comments can be received. It is anticipated that the Plan will be shared with Board in March 2023 for approval.
- **Deliver** – Following Board approval, delivery of the Plan will begin in April 2023, however it was noted that should particular elements of the discovery process be aligned with current ways of working and resourcing, implementation of some elements may commence earlier.

Ms Enfys Williams advised that engagement with service users and staff through online and established forums and representation at the National Eisteddfod in Tregaron will inform the discovery process and recognised the need to include those without internet access and community based staff. Ms Williams requested endorsement of the approach adopted and the timelines proposed for the discovery project.

Noting that Pembrokeshire has no Welsh language forum Mrs Hardisty, , requested reassurance that Pembrokeshire would be given equal standing in the discovery process. Ms Williams undertook to include Pembrokeshire College in the established list of contacts and should any additional partners be identified for inclusion in the engagement process, requests should be forwarded to Ms Williams. Ms Raynsford noted the close links maintained with Pembrokeshire Association of Voluntary Services (PAVS) and commented on the renewed enthusiasm, pace and commitment for developing the discovery process.

Prof. Gammon thanked Ms Hughes-Moakes and Ms Williams and acknowledged the strategic approach in developing the Welsh language standards to promote our culture and heritage in terms of recruitment and support for patients and communities in the Health Board.

The People, Organisational Development & Culture Committee **NOTED** and **ENDORSED** the progress and associated timescales with the delivery of the Board-approved planning objective for Welsh language.

<p>(22)58</p>	<p>The Committee received the Welsh Language Annual report 2021/2022 which provided a reflection of the activity and progress made to enhance and embed the Welsh Language and Culture in HDdUHB.</p> <p>Ms Williams informed Members the progress had been delayed over the last year, mainly in response the restrictions posed as a result of COVID-19 which limited the ability to meet staff in person. The Electronic Staff Record (ESR) data demonstrates HDdUHB has the highest percentage in Wales for Welsh language skills. Ms Williams was pleased to report that staff are undertaking online courses and developing their Welsh language skills.</p> <p>Compliance with Welsh language standard 107a (translation of all job descriptions) has proved challenging, as currently it is not financially viable to translate all job descriptions. Work to identify frequently used/generic job descriptions for translation is underway.</p>	
	<p>The People, Organisational Development &amp; Culture Committee <b>NOTED</b> and <b>ENDORSED</b> the Welsh Language Annual report.</p>	
<p>PODCC (22)59</p>	<p><b>STONEWALL DIVERISTY CHAMPIONS PROGRAME UPDATE</b></p> <p>Members received the Stonewall Diversity Champions Programme update report which outlined HDdUHB's commitment to implementing its Strategic Equality Objectives and its role as a Stonewall Diversity Champion. The report detailed the ongoing work that supports individuals who identify as Lesbian, Gay, Bisexual, Transgender, Queer or questioning (LGBTQ+), including staff members, service users or those who come into contact with the Health Board.</p> <p>Each year a robust and detailed assessment is undertaken by Stonewall Cymru to assess the progress made in terms of the Diversity Champions Programme Criteria. Members were informed the results of the assessment were generally positive, and demonstrated significant improvements across the majority of services. HDdUHB had gained a Silver award in recognition of work undertaken, and has ascended to the position of 194<sup>th</sup> on the 2022 Stonewall WEI from a previous ranking of 337<sup>th</sup>.</p> <p>Ms Kathryn Cobley acknowledged there is significant work to be undertaken to increase the ranking of HDdUHB to the within the top 100 in Wales. Feedback from reviews undertaken highlighted the requirement for increased social events and the provision of advisory sessions and specialist training and work is ongoing to address these issues.</p> <p>Mrs Hardisty noted that on obtaining a score of 62.5/200 in the Stonewall assessment, HDdUHB has received the Silver award and appreciating the considerable amount of work demonstrated in the Stonewall Diversity Champions Programme update report enquired how the Health Board could evidence this work undertaken as part of the</p>	

	<p>Stonewall assessment process. Mrs Gostling expressed disappointment that part of the Stonewall assessment entailed responding to a series of specific questions which did not allow for further clarification to be provided, however confirmed an action plan has been developed in readiness for submission in September 2022 and in depth detail would be provided to enhance the assessment process.</p> <p>Ms Cobley informed Members that detailed feedback from Stonewall is received verbally. Visible support from the Board is required by Stonewall in addition to commitment to the Stonewall network through Planning Objectives. A diversity and inclusion plan is due for completion in September 2022, which includes a section for LGBTQ+ and it is anticipated this will include specific actions for Board Members.</p> <p>Members request an updated action plan which reflects the criteria required for the Stonewall assessment and demonstrates the culture, diversity and inclusion policy of HDdUHB.</p>	<b>CSO</b>
	<p>The People, Organisational Development &amp; Culture Committee <b>RECEIVED ASSURANCE</b> on progress to implement the Strategic Equality Objectives and improve the experience and support available to LGBTQ+ individuals.</p>	

<b>PODCC (22)60</b>	<p><b>WORKFORCE DASHBOARD: PERFORMANCE ASSURANCE &amp; WORKFORCE METRICS</b></p> <p>Members were presented with the “Performance Assurance &amp; Workforce Metrics” report, including an update, as at 30<sup>th</sup> April 2022, on workforce metrics as well as key performance indicators (KPI), providing assurance of delivery against national framework targets.</p> <p>Prof. Gammon enquired whether further assurance could be provided in relation to the career development of Band 2 and Band 3 roles excluding nursing staff. Ms Glanville informed Members of the considerable operational and service pressures which impact the ability to release staff for training, however there is a notable increase in staff accessing training courses. Work will be undertaken to review training courses which can be mapped to level 2 skills.</p> <p>Prof. Gammon commended the high level of provision for dementia training and the favourable comparative sickness levels against other health boards.</p> <p>The People, Organisational Development &amp; Culture Committee:</p> <ul style="list-style-type: none"> <li>• <b>CONSIDERED</b> the performance NHS Delivery Framework metrics and <b>ADVISED</b> of any issues arising that need to be escalated to the next Public Board meeting.</li> <li>• <b>NOTED</b> the content of the report as assurance of performance in key areas of the Workforce and OD agenda.</li> </ul>	
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<b>PODCC</b>	<b>CORPORATE RISKS ALLOCATED TO PODCC</b>	
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(22)61	<p>Members were presented with the “Corporate Risks Assigned to PODCC” Report, noting there is one risk currently aligned to PODCC as the potential impacts of the risk relate to the workforce – <i>Risk 1406 - risk of insufficient skilled workforce to deliver services outlined in Annual Plan 22/23 &amp; deliver UHB strategic vision by 2030.</i></p> <p>Mrs Gostling informed Members that the risk rating is assigned following a review of staff across the whole of HDdUHB, however a breakdown of the data to identify individual staff groups is required for the purpose of targeting individual service areas for improvement. Alignment with operational risks holding a workforce theme is required, to aid the process of mitigating these risks. Prof. Gammon noted the requirement to include primary and secondary care.</p> <p>Referring to the target for absence levels of between 9% and 12%, Prof. Gammon sought clarification for the RAG rating assigned to the current absence level of 7.2%. Mrs Gostling undertook to validate the rating, however noted that the figures for absence do not exclusively relate to sickness absence and include maternity and special leave.</p>	LG
	<p>The People, Organisational Development &amp; Culture Committee <b>RECEIVED ASSURANCE</b> that:</p> <ul style="list-style-type: none"> <li>• All identified controls are in place and working effectively.</li> <li>• All planned actions will be implemented within stated timescales and will reduce the risk further and/or mitigate the impact, if the risk materialises.</li> </ul>	

<b>PODCC</b>	<b>OPERATIONAL RISKS ALLOCATED TO PODCC</b>	
(22)62	No operation risks are currently highlighted.	

<b>PODCC</b>	<b>RESEARCH &amp; INNOVATION SUB COMMITTEE REPORT</b>	
(22)63	The Committee received the Research & Innovation Sub-Committee (R&ISC) update report following the meeting held on 9 <sup>th</sup> May 2022.	
	The Committee <b>NOTED</b> the Research & Innovation Sub-Committee update report.	

<b>PODCC</b>	<b>CORPORATE &amp; EMPLOYMENT POLICIES</b>	
(22)64	<p>Members were presented with the following policies for ratification:</p> <ul style="list-style-type: none"> <li>- <b>Policy 126 Work/Life Balance – Flexible Working Policy</b> – Members noted that this Policy has been updated following some revisions to Section 33 of the NHS Terms and Conditions of Service handbook which will come into effect on 13<sup>th</sup> September 2022. The amendments ensure it is explicit that staff are not limited to the number/frequency of applications and that requesting flexible working is a day one employment right.</li> <li>- <b>Policy 002 Underpayments and Overpayments of Salary Policy</b></li> </ul>	



- **Policy 124 - Retirement Policy**– Members noted that these policies have been reviewed locally by the Task and Finish Group and have been shared with the Local Partnership Forums, the Local Negotiating Committee (LNC) and the Staff Partnership Forum (SPF) and consultation with all staff via the global messaging system.

Ms Hardisty noted the Underpayments and Overpayments of Salary Policy contained 9 pages relating to recovery of overpayments, however only 2 pages relating to underpayments which does not provide a balanced approach. Ms Heather Hinkin advised Members that the disproportionate breakdown relating to actions required to recover overpayments and underpayments has reduced considerably in the revised policy. Noting that 90% of overpayments are due to late submission of documents, discussions with management staff are underway to address this issue and the right to appeal has also been built into the policy.

Members approved the Underpayments and Overpayments Policy, however, noted that actions are underway to address the principals in place.

- **Policy 948 Disclose and Barring Service Policy** – Members noted that the DBS Policy has been developed following benchmarking across the UK and consultation with the Wales Disclose Barring Service Advisor who has commended the Policy and deemed it best practice. The revisions have been shared with the Local Partnership Forums, the LNC and SPF and consultation with all staff via the global messaging system.

- **All Wales Pay Progression Policy** – Members noted that the revised policy has been approved by the HDdUHB Staff Partnership Forum (SPF) via Chairs action given that next SPF meeting is not due to take place until 2<sup>nd</sup> August 2022. Due to only minor amendments from an all Wales level, there was no requirement to undertake consultation via global.. This process is in line with Policy 190 Written Control Documentation

The Committee **APPROVED** the:

- Policy 126 Work/Life Balance – Flexible Working
- Policy 002 Underpayments and Overpayments of Salary
- Policy 124 - Retirement
- Policy 948 Disclose and Barring Service
- All Wales Pay Progression Policy

PODCC (22)65	<b>OUTCOME OF ADVISORY APPOINTMENTS COMMITTEE</b>	
	The Committee received the Advisory Appointments Committee (AAC) Report, providing an update on the outcome of the AACs held between	

	<p>21<sup>st</sup> March 2022 to 1<sup>st</sup> June 2022, and approved the following appointments on behalf of the Board:</p> <ul style="list-style-type: none"> <li>• Mr Nitin Vijay Deshmukh appointed to the post of Consultant in Trauma and Orthopaedics with an interest in Lower Limb Arthroplasty Surgery based at Withybush General Hospital, with an immediate commencement date.</li> <li>• Dr Agnieszka Werewka appointed to the post of Consultant in Radiology based at Glangwili General Hospital, with a commencement date to be confirmed.</li> </ul>	
	<p>The Committee <b>APPROVED</b> the outcome of the AAC appointments held between 21<sup>st</sup> March 2022 and 1<sup>st</sup> June 2022 on behalf of the Board.</p>	

<b>PODCC (22)66</b>	<p><b>PODCC WORKPLAN 2022/23</b></p> <p>The PODCC workplan for 2022/23 was received for information.</p> <p>The workplan will be revised to include the following additions:</p> <ul style="list-style-type: none"> <li>- An update on Staff Experience to 15<sup>th</sup> December 2022.</li> <li>- An update of the Staff Wellbeing Discovery Report Action Plan to 20<sup>th</sup> October 2022</li> <li>- An update of the BAME Bullying and Harassment Report and Action Plan to 15<sup>th</sup> December 2022</li> <li>- An updated action plan which reflects the criteria required for the Stonewall assessment and demonstrates the culture, diversity and inclusion policy of HDdUHB to 15<sup>th</sup> December 2022</li> </ul>	
	<p>The Committee <b>NOTED</b> the PODCC workplan for 2022/23.</p>	

<b>PODCC (22)67</b>	<p><b>ANY OTHER BUSINESS</b></p> <p>Prof Gammon informed Members, that Mr Steve Morgan is due to retire from his current position within HDdUHB, however will return within a different role. Prof. Gammon expressed gratitude for the service given to HDdUHB, in particular Mr Morgan's ability to deal with situations in a calm manner, showing true compassion and leadership, and wished Mr Morgan the in his new role.</p> <p>Both Ms Hardisty and Ms Gostling reiterated Prof. Gammon's comments, and commended Mr Morgan for his dedication and commitment.</p>	
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<b>PODCC (22)68</b>	<p><b>MATTERS FOR ESCALATION TO BOARD</b></p> <ul style="list-style-type: none"> <li>• <b>Staff Wellbeing Plan</b> The People and Cultural Development Committee received assurance in relation secured funding to support staff wellbeing, however it is acknowledged that the provision of safe, secure rest</li> </ul>	
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	areas for staff is limited due to the lack of available space across sites.	
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<b>PODCC (22)69</b>	<b>DATE AND TIME OF NEXT MEETING</b>	
	18 <sup>th</sup> August 2022 at 9.30 a.m. - Boardroom, Ystwyth Building, Hafan Derwen, St David's Park, Carmarthen.	