



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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	18 August 2022
TEITL YR ADRODDIAD: TITLE OF REPORT:	People, Organisational Development & Culture Committee (PODCC) Self-Assessment 2021/22 Outcome Report
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Professor John Gammon, PODCC Chair Lisa Gostling, Director of Workforce and OD (Organisational Development)
SWYDDOG ADRODD: REPORTING OFFICER:	Joanne Wilson, Board Secretary Karen Richardson, Corporate & Partnership Governance Officer

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

The purpose of this report is to present to the People, Organisational Development & Culture Committee (PODCC) the outcome report and progress on the PODCC Self-Assessment 2021/22 Action Plan, and to consider whether this meets the expectations of the Committee.

Cefndir / Background

From 2020/21, a new approach to self-assessment was introduced to elicit greater feedback in order to shape and influence the agenda of PODCC going forward.

Members of PODCC completed a questionnaire to consider the Committee's effectiveness during the previous 12 months and, in addition to specific domain questions, comments were invited on any improvements for consideration to assist the Committee in drawing up its own plan for improvement. The recognition of what has worked well has been a helpful platform to move forward, and the greater focus on organisational risks to inform the agenda and work of the Committee will enable a further move towards providing a strategic outlook.

Asesiad / Assessment

Each question started with a statement, which set out 'what good looks like'. In response, Members described at least one example from the previous 12 months in which the Committee had been effective in this domain and shared at least one idea for improving the Committee's effectiveness in this domain over the coming year. The responses included a number of useful suggestions regarding ways in which the governance and operation of PODCC might be improved.

Following meetings with the Executive Lead, the Board Secretary and the Assistant Director of Assurance and Risk, responses to any suggested improvements were agreed, with progress on any identified actions provided below.

Question 1

The Committee seeks assurances in regard to:

- compliance with legislation, guidance and best practice around the workforce and OD agenda;
- implementation of the UHB's Workforce and 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;
- the organisation's ability to create and manage strong, high performance, organisational culture arrangements;
- 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.

It constantly seeks to strengthen the ways in which it achieves this, challenging itself to avoid tokenism, welcome contributions, engage with criticism and account for and learn from failings.

Please describe at least one example from 2020/21 in which the Committee has been effective in this domain.

Responses:

- **The performance assurance workforce matrix the development of this which gives us examples of sickness retirement forward planning of recruitment gives us information at our fingertips which can be updated regularly it's an active document which is what I like because it keeps on top of the measurements and the data we need and complies with the workforce an OD agenda and strategy**
- **The Committee has provided an effective platform to focus, develop and scrutinise pertinent planning objectives. There has been robust challenge of activity and delivery against timelines with many committee papers written to provide evidence of delivery against the agreed planning objectives. This has provided a level of assurance that is commendable and an example of good practice.**
- **The Committee has sought to meet the members of the WOD team at each meeting and therefore have a broad perspective on the work being undertaken.**
- **Learning about the Relationship Managers is a highlight.**
- **In establishing itself has made great strides in getting assurance in all of the 4 areas listed above.**
- **The UHB does have a workforce and OD strategy – I think this has been well put together and critically appraised by the Committee. The strategy has been recognised in Wales as a best practice model for workforce planning.**
- **Delivery against relevant Planning Objectives – SO1, SO2 are executed very well in difficult pandemic circumstances.**
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Please share at least one idea for improving the Committee's effectiveness in this domain over the coming year.

Suggestions Made for Improvement	Response	Progress
<p>To include within the performance assurance workforce matrix report a timeline to show when the commencement of people who are being developed for example of the grow your own, the international recruitment and the apprenticeship for these when are they going to be coming into the workforce.</p>	<p>This is already in place for nursing. This links with the route map and will develop over time as we start to progress the workforce plan. Assurance will be provided to PODCC via the Workforce Planning and Education Group (TORs are in draft and will be approved by PODCC).</p>	
<p>We need to ensure that the business of the Committee reflects the whole organisation and workforce from both secondary, primary and community care. Great emphasis needs to be given to workforce matters outside secondary care. This must be led and driven by relevant Executive leads.</p>	<p>During the year, agenda items will include deep dives from a range of services including primary care, as well as from other staff groups such as, allied healthcare professionals, medical and admin and clerical workforce to ensure that a whole system approach is ensured. The detailed work will be undertaken by the Workforce Planning and Education Group and assurance provided to PODCC.</p>	
<p>Would like to hear more about plans for other professions, namely Medical and AHPs.</p>	<p>See above – as the professional workforce plans are developed which will reported to PODCC.</p>	
<p>Feel unsighted on the development of non-medical Consultants for example</p>	<p>See above – as the professional workforce plans are developed which will reported to PODCC.</p>	
<p>The Committee has done exceptionally well in working with the OD and Workforce team in creating a set of key performance indicators. However, this has indicated that the organisation has further to go in</p> <ul style="list-style-type: none"> • ability to create and manage strong, high performance, organisational culture arrangements; 	<p>N/A</p>	<p>No action required.</p>

The Committee has been able to assure itself and the Board in areas of high performance and areas which require improvement, including some aspects of organisational culture.

Question 2

The Committee works **strategically**. This means it aligns its work with the Health Board's overarching strategic priorities and delivery plans. It commissions work in support of those priorities, providing the Board with the assurance necessary to have confidence in its ability to deliver.

Please describe at least one example from 2020/21 in which the Committee has been effective in this domain.

Responses:

- **In the sickness element of this report if we could break it down to those who have long Covid then that is part of our planning strategy to either put in support packaging or look at future deficits with people are still off sick.**
- **The best example of this has been the workforce planning/modelling work. A workforce strategy that clearly outlines our needs, future demands, and ambition as a Health Board. Each of the strategic objective are aligned to a delivery plan and operationalised to outline yearly deliverables.**
- **The vision for the Health Board to review and re-engineer its culture and values. A significant, pivotal piece of work with the committee making it clear that short term and more long terms measurable outcomes are needed to demonstrate impact**
- **Further development of the apprenticeship scheme**
- **The development of the Culture strategy.**
- **The Committee has been very effective in working strategically. It has ensured that there is a workforce and OD strategy and plans to support its delivery.**

Please share at least one idea for improving the Committee's effectiveness in this domain over the coming year.

Suggestions Made for Improvement	Response	Progress
To encourage reporting of potential future deficits at an early stage so that we can initiate some further planning or service changes to cover any deficits	This is a key part of the workforce plan which will be regularly reported to PODCC.	
Ensure that strategic interventions and associated planning objectives are not only delivered but we are clear how they are operationalised and the impact demonstrated/measured.	This is a key part of the workforce plan which will be regularly reported to PODCC. This is linked with future workforce reporting and tracking against other service	

	priorities, objectives and organisational risks. This will also link into Planning Objective (PO) 3H which is to develop a learning process for the planning objectives.	
Develop and monitor activity against the Health Board's ambition for Welsh Language and bilingual skills strategy	This will be monitored by PO 3N as part of the Welsh Language and Culture Discovery process. This is already scheduled on the Committee workplan for 2022/23.	No action required.
Examples of how changes are being made and sustained	Deep Dive Reports could be forward planned on the Committee's workplan. This will also link into PO 3H which is to develop a learning process associated with the planning objectives.	

Question 3

The Committee works **systemically**. This means it works effectively with the Board, other Board Committees, its sub-committees and other relevant parts of the organisation's governance and assurance system, in order to ensure that we spot connections and themes which have an impact on people, organisational development and culture. It guards against silo working. It gives balanced and meaningful 'air time' to the full range of the Health Board's service portfolio.

Please describe at least one example from 2020/21 in which the Committee has been effective in this domain.

Responses:

- **This new committee consolidated all workforce issues and the staff at the heart of everything it does when there's any deficits this initiates a deep dive to investigate the issues and report back.**
- **Request a presentation from the area that's been requested to be looked at.**
- **E.g. equity and diversity.**
- **Improving the lives of unpaid carers etc**
- **Issues identified within maternity and fed back in a timely manner**
- **Our commitment to eliminating inequalities by the development and approval of our revised Equality, Diversity and inclusion Policy. Also, BAME advisory group established**
- **Agenda setting meetings discuss cross committee matters which informs the agenda of PODCC**
- **Working with finance committee and sustainable resource to consider the impact of the Workforce strategy**

- Collaborations with QSEC with regards to workforce issues that could impact on the safety and quality of care eg. Mental health workforce plans, and health visiting services.
- Noting to Board good practice – Apprenticeship Scheme.
- It is early days but the desire to hear more about the MH/LD workforce against the All Wales Mental Health Workforce Plan will enable this.
- The Committee is very effective in this domain. The committee has significant IM representatives so it is unable to be siloed. It has ensured that the key objective of the Board is to see things through a People lens.

Please share at least one idea for improving the Committee’s effectiveness in this domain over the coming year.

Suggestions Made for Improvement	Response	Progress
It may be useful to provide an information sheet all presenters have the information sheet sent to them informing them that the members have read the information supplied and they have five minutes to present any updated information or data to that report or consolidate what they feel is the high ticket items and then the rest is open for questioning; as per the Board etiquette guide issued prior to each board meeting.	A handy hints presenters guide is issued by the Committee Services Officers to any presenters attending a Board Level Committee for the first time.	No action required.
To focus on the way staff are treated, rather than the issues reported.	During 2022/23, staff stories will be introduced, as well a report from the OD team to share the feedback received from staff from the ‘speaking up in confidence platform’ and other OD and workforce interventions.	
As the Committee is more established, I think greater linkages with QSEC is necessary – in particular the discovery report & impact on quality safety.	The Health Board has the Quality, Safety and Experience Committee (QSEC) which covers this area and issues are cross referred as required.	No action required.

Question 4

The Committee works **intelligently**. This means it draws on a diverse range of reliable data (both quantitative and qualitative) to triangulate information and reveal themes or patterns in regard to people, organisational development and culture. It uses a dashboard of key quality indicators to inform improvement. This relies on accurate interpretation of the data, which requires skill from both the providers and readers of the data.

Please describe at least one example from 2020/21 in which the Committee has been effective in this domain.

Responses:

- Now using SPC data charts find this much easier and more effective than the rag rating that we used to do.
- The development of a Performance Assurance and Workforce Dashboard – an effective tool to enable the committee to scrutinise performance metrics pertinent for the business of the committee. There have been a number of iterations which reflect committee discussions. This data enables informed decisions and necessary actions to be agreed.
- Process for the planned review and approval of health board workforce policies with a strategy of priority order timelines being adopted.
- The development of the dashboard has been a key highlight, excellent work which gives the committee information and assurance.
- The Committee has worked with the OD and workforce team to develop some exceptional workforce indicators – presented in a very professional and unique way. I work on a number of boards and the presentation of these indicators are the best.

Please share at least one idea for improving the Committee’s effectiveness in this domain over the coming year.

Suggestions Made for Improvement	Response	Progress
Once workforce deficits identified to bring to the committee so that the overview can be maintained from an early stage.	See above – as the professional workforce plans are developed which will reported to PODCC.	
Further develop our monitoring metrics to provide pertinent data from which informed decisions can be made.	The Performance Assurance & Workforce Metrics Report will continue evolving and improving to ensure inclusion of a broader range of metrics and key performance measures pertinent to the entire workforce and OD agenda.	
Continue to use the data.	N/A	No action required

Question 5

The Committee facilitates **learning**. This means it works openly and honestly, encouraging contributions from attendees which are a fair and reasonable reflection of the realities faced across all services. The Chair sets the leadership tone and is supported by other Independent Members and the Executives to hold this learning space. The style is one of high support/high challenge.

Please describe at least one example from 2020/21 in which the Committee has been effective in this domain.

Responses:

- **Workforce planning is at the court of this committee so good data gathering is really relevant and I think that has been achieved each time we have this meeting and even upgraded because it's presented well and updated regularly and it presents the achievements and the deficits.**
- **One of our main achievements has been the equity and diversity how we have led that and have actually been nominated in seven categories in the English Equity adversity award ceremony.**
- **At the core of this committee is our people/ staff and a fundamental principle is inclusion and participation. The committee invites teams and individuals to present and showcase their work and learn from observing the work of the committee and the governance processes associated with the committee assurance and scrutiny.**
- **Peer review of our Research and Innovation activity**
- **The meeting with the Relationship Manager team.**
- **The chair is exceptionally responsive and listens attentively. As IMs we have all learned together the people and culture issues facing the UHB.**

Please share at least one idea for improving the Committee's effectiveness in this domain over the coming year.

Suggestions Made for Improvement	Response	Progress
Provide greater support and coaching to colleagues which will further enhance individual and collective committee learning.	The Board is committed to supporting staff and has provided courses to increase the number of coaches within the Health Board. Attendance at the Committee also supports learning and development.	No action required.
Continue to encourage members of the teams to attend for their items.	N/A	No action required.
The Committee has received exceptional feedback from the people & OD team but for the future, some operational/clinical leadership insights might deepen our understanding especially as the UHB emerges out of the Pandemic.	Focus will move to other teams as the Committee Work programme is further developed.	

Question 6

The Committee champions **continuous improvement**. This means it uses an improvement mindset, as well as methodologies, which enable it to lead and oversee a clear journey of improvement in respect of 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.

Please describe at least one example from 2020/21 in which the Committee has been effective in this domain.

Responses:

- **When issues are identified to this committee the Deep Dave is requested then we can maintain this as a measurement tool to see if there is an improvement or failures in the planning and presentation to us in any future meetings**
- **The publishing of our Research and Innovation strategy with robust monitoring or its delivery.**
- **The increase in research income and research trials/studies.**
- **The improved relationship with Health Education and Improvement Wales (HEIW).**
- **The Committee receives an update from the Research and Innovation Committee.**

Please share at least one idea for improving the Committee's effectiveness in this domain over the coming year.

Suggestions Made for Improvement	Response	Progress
Where there are weaknesses or failures in system, departments, work areas, we should be informed at an earlier stage so that maintaining scrutiny can be done from a early stage. E.g. health visiting came to us when it was identified as having difficulties if it had of come earlier it could've been discussed by the executive Team and plants may have been put in place earlier	This links with how we ensure all workforce matters come to the Committee particularly for those areas where leaders of services are not members of the Committee. Also, as workforce planning further develops this will be incorporated within that process.	
We need to review the self-assessment process for sub committees!	This was planned however paused due to the pandemic. During the next 12 months a plan of work in this area will be agreed.	
Would be interesting to have direct input for training providers, not just the Universities, for e.g. Pembrokeshire College in relation to the Apprenticeship programme	This will be linked into the Workforce Planning and Education Group.	
Whilst not trying to do the work of Research and innovation Committee, the annual update from this Sub-Committee could be jointly presented by the Director for Research and Innovation (R&I) and Medical Director to bring it to life especially for those IMs who do not attend that Sub-Committee.	Invitation will be extended to Director R&I to attend alongside the Medical Director to present the report	

Question 7

The Committee works **proactively**. This means it is organised in its workplan, sensitive to the dynamic environment in which the Health Board operates, and searching in its enquiries. It is curious, and willing to pursue demanding issues in the interests of excellent patient care. It uses the organisation's risk management processes effectively to scrutinise risks and ensure that longstanding risks and issues do not become normalised or tolerated beyond the Board's risk appetite.

Please describe at least one example from 2020/21 in which the Committee has been effective in this domain.

Responses:

- **The midwifery issues were identified from a survey and reported back and acted on within days and this was an impressive reaction to listening identifying and putting in place issues to resolve the deficit in the service**
- **The discussions on the issues raised in ED**

Please share at least one idea for improving the Committee's effectiveness in this domain over the coming year.

Suggestions Made for Improvement	Response	Progress
The midwifery issues were discussed in one of our meetings held after the committee and unless the managers of these departments inform us of any future difficulties as part of their ongoing work then we may become caught out like we did with health visiting in the future so we need to discuss with the executive how managers report to them in the future.	As workforce planning is further developed this will be built into the process and reported to the Committee.	
To continue to monitor the response from services and receive assurance on impact of actions.	N/A	No action required.
The committee could devote more time on looking at its key risks in the risk register. It has taken some time to get the risks allocated to it. The Workforce and OD team have got on with dealing with developing plans to address the risks – this is proactive but the appreciation of the risks is not always obvious.	Further work is ongoing to develop workforce directorate risks. These will be shared appropriately with Committee. We will begin to have a deeper dive on the corporate workforce risk to enable a detailed discussion on the actions being taken to address the risk.	

Question 8

Are there any domains of effective assurance which you think are not covered above? What are they?

Responses:

- I think we effectively look at every range of staff who are employed within the University health board and I think that's what makes this committee open mind of effective and proactive.
- Assurance on new ways of working being implemented.
- The committee has been effective at oversight on Welsh Language, BAME engagement, customer service programme, carers report. These have been welcome and added value to the content of the committee.

For that missing domain/s.....

Please describe at least one example from 2021/22 in which the Committee has been effective in this domain.

- Equity and diversity are areas that stands out to me because we developed an equity diversity inclusion policy, equity and diversity posters, which are concise and are eye grabbing and to know that we have actually been put forward for seven awards as a Welsh Health board Within this field.
- When presentations are given to this Committee people are questioned in a valid supported way and whether there is a success or a failure I feel like I walk away from this Committee supported.
- The approval of the workforce plan.

Please share at least one idea for improving the Committee's effectiveness in this domain over the coming year.

Suggestions Made for Improvement	Response	Progress
As I mentioned previously that presenters should be informed from the beginning that the presentation they give should be short and concise so that it needs more times to question the presentation given in a valuable way	A handy hints presenters guide is issued by the CSO to any presenters attending a Board Level Committee for the first time.	No response required.
The Committee should have regular updates on the implementation of the Workforce Plan.	This will be built into the Committee workplan.	
I look forward to hearing more themes coming out of the Relationship Manager themes when they become more established in their roles.	This will be built into the Committee workplan.	

Extraordinary question relating to COVID-19

The Committee has sought to play a protective role in the COVID-19 response, specifically in terms of assurance around the wellbeing of staff, readiness in terms of assurance on the workforce plan and the performance consequences relating to patient care and implications

arising from it. It has made a range of adjustments to reflect the rapidly changing circumstances that the Health Board has faced. In your view:

1. *What went well?*

- **The health board reacted quickly to the advance unfolding within Covid by recruiting extra staff for cleaning portering and health care within a very fast timeframe.**
- **The Discovery report work.**
- **The discovery reports and their findings are exceptionally well put together and reported.**

2. *Even better if....?*

- **Coming to the end of the Covid period it would've been even better if dialogue had a started with these temporary recruited staff as they were given their notice that they will be finishing in March and they weren't offered permanent posts until the end of January where others had already applied and got jobs elsewhere.**
- **To do a repeat discovery report post pandemic and lessons learnt. Also, did we do what we said we would do and what did we learn?**

3. *What learning points should we take with us post COVID-19?*

Suggestions Made for Improvement	Response	Progress
The importance of focussing on staff wellbeing.	PODCC has received the Integrated Action Plan Update – Staff Wellbeing Plan, with a further update planned for PODCC in October 2022.	No action required.
In the event of anything like the Pandemic happening again we should now be thinking of future planning needs for example with the new build we may need to look at more individual side rooms which can be kept for staff isolation and also easy cleaning in the future ventilation will become a priority in the buildings that we develop and recruiting staff to cover such events and discussion needs to be taken on early for those to see you that wish to stay for example students came to us because the universities weren't up and active but they knew they were going to be temporarily employed until university started other people came and once they started working for us enjoyed working	The Health Board recognises that the pandemic has changed how the public and staff access services. All learning from the pandemic will be taken forward for consideration when finalising plans for the new hospital.	No action required.

with our teams and in the environment and if they had of been offered jobs earlier they would've stayed rather than looking for other areas.		
Maybe to focus more about what did the organisation learn and how we can embed and support that learning.	This was incorporated in the first Discovery Report and the learning was included in the wider culture plan. A second Discovery report is also planned during 2022/23.	

Argymhelliad / Recommendation

The People, Organisational Development & Culture Committee is requested to receive assurance that any actions from the PODCC Self-Assessment 2021/22 are being progressed within the agreed timescales.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	
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):	Governance, Leadership and Accountability
Amcanion Strategol y BIP: UHB Strategic Objectives:	Not Applicable
Amcanion Cynllunio Planning Objectives	Not Applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	10. Not Applicable

Gwybodaeth Ychwanegol: Further Information:

Ar sail tystiolaeth: Evidence Base:	NHS Wales Audit Committee Handbook PODCC Terms of Reference Published guidance from the Good Governance Institute Questionnaire responses
Rhestr Termau: Glossary of Terms:	Contained within the body of the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Diwylliant, Pobl a Datblygu Sefydliadol: Parties / Committees consulted prior to People, Organisational Development & Culture Committee:	APODC Members

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Not Applicable
Ansawdd / Gofal Claf: Quality / Patient Care:	Not Applicable
Gweithlu: Workforce:	Not Applicable
Risg: Risk:	Not Applicable
Cyfreithiol: Legal:	Not Applicable
Enw Da: Reputational:	Not Applicable

Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	Not Applicable