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Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Pwyllgor Pobl, Datblygu Sefydliadol a Diwylliant/ People, Organisational Development and Culture Committee

DYDDIAD Y CYFARFOD: DATE OF MEETING:	18 August 2026
TEITL YR ADRODDIAD: TITLE OF REPORT:	Delivery Against Planning Goals Aligned to the People, Organisational Development and Culture Committee
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Lisa Gostling (Executive Director of Workforce & OD / Deputy CEO)
SWYDDOG ADRODD: REPORTING OFFICER:	Angharad Lloyd-Probert Senior Project Manager (Strategic Planning) Anna Bird, Assistant Director of Strategic Partnerships, Diversity and Inclusion

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 Health Board approved the 2026/27 Annual Plan in March 2026, based on requirements specified in the NHS Wales Planning Framework 2026/29 and against the Escalation Framework, which was subsequently submitted to Welsh Government on 31 March 2026. Since submission, Welsh Government (WG) has issued further communication that noted the plan was unacceptable and unsupportable given the expected financial outturn for 2026/27.

For 2026/27, **Planning Goal 1** has been aligned to the People Organisational Development and Culture Committee (PODCC), namely:

Planning Goal 1: Thriving Teams

As in previous years it is the expectation that PODCC will receive an update on the progress made in the development (delivery) of the Planning Goals for onward assurance to the Board through the Board Assurance Framework.

Cefndir / Background

One key aspect of the Annual Plan remains our Planning Goals (previously referred to as Planning Objectives). Of the eight Planning Goals one is aligned to this Committee –:

- Planning Goal 1: Thriving Teams

Asesiad / Assessment

The overarching status of the PG is **On Track**. Highlight reports for the individual components of the PG can be found in Appendix 1 demonstrating evidence of the work

which has been completed, as well as actions which are planned over the forthcoming months.

Argymhelliad / Recommendation

The Committee is asked to:

- **RECEIVE ASSURANCE** on the current position regarding the progress of the Planning Goal aligned to the People, Organisational Development, and Culture Committee, in order to assure the Board that the Planning Goal is progressing and is on target, and to raise any concerns where a Planning Goal is identified as behind in its status and/or not achieving against its key deliverables.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Cyfeirnod Cylch Gorchwyl y Pwyllgor: Committee ToR Reference:	3.1.5 Seek assurance on delivery against all planning goals aligned to the Committee, considering and scrutinising the plans, models and programmes that are developed and implemented, including the annual workforce plan and associated commissioning plan, supporting and endorsing these as appropriate.
Cyfeirnod Cofrestr Risg Datix, Teitl a Sgôr Risg Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	6. All Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Nodau Cynllunio 2026/27 Planning Goals 2026/27	1. Healthy, Thriving Teams
Hypergyswllt i Amcanion Llesiant HDdUHB 2026 Hyperlink to HDdUHB Well-being Objectives 2026	3. Create people-centred employment and development opportunities that support workforce transformation, reflect the changing needs of

Model Cymdeithasol ar gyfer Iechyd a Llesiant : (wedi'i gwblhau ar gyfer newid strategol a/neu newidiadau sylweddol i wasanaethau) A Social Model for Health and Wellbeing : (complete for strategic change and/or significant service changes)	1. A Social Model for Health and Wellbeing will complement and integrate with other ways of working, values, principles and objectives.
Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	3 Year Plan and Annual Plan 26-27
Rhestr Termau: Glossary of Terms:	Explanation of terms is included within the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y cyfarfod hwn: Parties / Committees consulted prior to this meeting:	Value and Sustainability Group

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Any financial impacts and considerations are identified in the report
Ansawdd / Gofal Claf: Quality / Patient Care:	Any issues are identified in the report
Gweithlu: Workforce:	Any issues are identified in the report
Tegwch Iechyd: Health Equity:	Consideration and focus on risk is inherent within the report. A sound system of internal control helps to ensure any risks are identified, assessed and managed.
Risg: Risk:	Any issues are identified in the report
Cyfreithiol: Legal:	Any financial impacts and considerations are identified in the report
Enw Da: Reputational:	Any issues are identified in the report
Gyfrinachedd: Privacy:	Not applicable
Cydraddoldeb: Equality:	Not applicable

Planning Goal 1, Objective 1: Sustainable workforce in hospitals and communities.
1.1.1. Continue to deliver workforce stabilisation programme.
1.1.2. Develop 5-year workforce plans, in particular for Medical and Dental and Health Sciences.
1.1.3. Strategic review of our learning offer.

Executive Lead: Tracy Walmsley, Assistant Director of People Planning

Reporting Period: Quarter 1

Overall status: On track to deliver fully by year end

Rationale: This programme of work will continue through the year.

Progress against planned outcomes / trajectories / milestones (please provide SPC/data charts and an explanation of any variances)

Activities completed in previous reporting period

- Work continues to look at agency reduction. Medical and AHP are our outliers however progress is consistent, if more challenging in 2026/27 to deliver. A workforce stabilisation programme is being relaunched.
- Roll out of Allocate Tool complete via RL Datix contract. Usage is variable across operational teams making it challenging to assess benefits at this point.
- Weekly Hard to Fill vacancy activities / lists produced and shared to support stabilisation and reduce agency spend.
- Appointment Guidance for Resident and Specialty Doctor Grades drafted.
- Community and partnership recruitment events to support attraction and inclusion strategies.
- Varying levels of maturity for workforce planning across CCG's and incumbent services. Work is ongoing to feedback status to CCG's of all operational workforce plans to agree an action plan. May be helpful to "define" a workforce plan based on current need i.e. in year operational savings rather than strategic 10-year plan to focus attention. Under workforce stabilisation programme establishment reviews needed to assess and align work.
- Ongoing work to support the development of the Clinical Services Plan which includes validation of workforce requirements and associated training needs.
- Strategic refresh of learning offer is in progress, linked to governance, structure and delivery mechanisms.
- Art in Health programme is under development with a view to roll out and pilot in a defined staff group.

Activities planned for next milestone and reporting period

- Engagement with x 9 Clinical Service areas to develop processes to validate workforce data. This will include wider interdependency mapping and alignment of Therapies staffing requirements (as per staffing guidelines).
- Ongoing engagement will be prioritised for services requiring workforce planning engagement which may include training and development of operational workforce plans. This will be managed through a "risk lens" to manage the capacity of the team as well as the needs of the organisation.
- Ongoing support to assess opportunities to reduce variable spend in medical and AHP staffing groups which includes options to develop sustainable substantive workforce solutions.
- Continue discussions on the strategic refresh of the learning offer, aligned to the Workforce and Organisational Development OCP requirements.
- Confirmation and confirmed design of the Arts in Health pilot programme is anticipated during the next quarter, which is likely to include part-delivery of the programme.

Matters for information:

Risks to delivery: Usage of Allocate is variable making it challenging to assess benefits at this point.

Any other comments:



Submitted By: Lisa Gostling

Date Submitted: 27th July 2026



Planning Goal 1, Wellbeing Objective 2: Create an inclusive culture where everyone matters, individual needs are considered and staff well being is promoted and supported.

1.2.1. Enhance leadership capabilities ensuring the organisation is led with compassion [link to Risk 2305].

1.2.2. Continue to embed the national Speak Up and Sexual Safety in the workplace agenda

1.2.3. Improve the everyday experience of staff through effective workforce management processes and support

Executive Lead: Corinna Lloyd-Jones, Interim Assistant Director of Organisational Development / Heather Hinkin, Assistant Director of People Management

Reporting Period: Quarter 1

Overall status: On track to deliver fully by year end

Rationale: This programme of work will continue through the year.

Progress against planned outcomes / trajectories / milestones (please provide SPC/data charts and an explanation of any variances)

Activities completed in previous reporting period

- Staff Survey: 2025 Staff Survey Findings Report shared with PODCC in May 2026. To further encourage local ownership and a move from measurement to accountability, our internal WOD escalation measures in 2026-27 include the following Staff Survey measures as part of the staff experience domain. Relevant ODRMs are available for guidance and support on subsequent workforce actions within services/teams.
- Leadership and Management Competency Framework: NHS England Framework, which is the foundational model for Wales, went live in England on 6 July 2026. Speak Up – Make Meaningful Change (SUMMC): PODCC receives a six-monthly assurance report on the embedding of the SUMMC agenda. The next report is due to PODCC in August 2026.
- Sexual Safety: A Task and Finish Group was established in early 2025 to explore this agenda, focusing on creating a psychologically safe culture where staff feel confident to speak up and raise concerns. This work, alongside the development of the national NHS Wales Anti-sexual Harassment Policy (issued September 2025), has informed our Sexual Safety programme.
- From 1st April 2026, the majority of employee relations cases are now managed via the Employee Relations caseworker system which provides prompts on actions due by case and enables Workforce Managers to better deploy case allocation by individual.
- As part of 1.2.3, on 10th April 2026 the Health Board adopted the new All-Wales Disciplinary Policy and processes have been revised internally to accommodate the changes required. This policy is one of the outputs of an all-Wales Policy Group looking to reduce employee harm arising from employee relations cases.

Activities planned for next milestone and reporting period

- HEIW is leading and supporting implementation of the Leadership and Management Competency Framework across Wales however responsibility for delivery sits with individual organisations. Hywel Dda is a key HB partner in the programme planning phase, although progress is expected to vary throughout the year reflecting dependencies on national guidance, partner organisations' timelines and the phased release of supporting resources and requirements.
- Subject to final approval, implementation of our Sexual Safety Programme will be led by the newly established Sexual Safety at Work Group, with progress reported through the 6-monthly SUMMC report to PODCC.
- On 22nd July 2026, the Assistant Director of People Management is leading a discussion with the Bank Investigating Officers and the Assistant Heads of Workforce to share lessons learnt and identify areas where we can reduce investigation timelines.
- A research project has been commissioned on ways to provide employees with strategies to better enable them to remain in employment during an Employee Relations process that they are involved with, or enable it to proceed whilst they remain unfit for work. This project will utilise data from cases where sickness absence has significantly elongated the process for all involved.
- On 24th July 2026 the Director of Workforce and OD is leading a multi-professional group looking at how we improve Employee Relations case timelines.

Matters for information:

Risks to delivery:

Any other comments:



Submitted By: Lisa Gostling

Date Submitted: 27th July 2026



Planning Goal 1, Objective 3: Celebrate successes and promote innovation.
1.3.1. Enhance the suite of staff recognition schemes.
1.3.2. Implement research and innovation strategic plan

Executive Lead: Corinna Lloyd-Jones, Assistant Director of Organisational Development

Reporting Period: Quarter 1

Overall status: On track to deliver fully by year end
Rationale: This programme of work will continue through the year.

Progress against planned outcomes / trajectories / milestones (please provide SPC/data charts and an explanation of any variances)

Activities completed in previous reporting period

- Our funding request to enhance the Health Board’s 2026-27 Staff Recognition and Appreciation Programme was approved by the Charitable Funds Committee on 9 June 2026. This investment will support equitable and meaningful year-round appreciation that reinforces organisational values, staff morale, engagement and, ultimately, patient care. A Discover Phase is currently underway to gather staff insights and understand what recognition and appreciation means to staff across Hywel Dda, ensuring the future programme is shaped by staff experiences and priorities rather than assumptions.
- The 2026-27 Regional Innovation Co-ordination Hub (RIC) Activity Plan was approved by the Regional Partnership Board and Welsh Government in March 2026. To strengthen delivery of the programme and accelerate progress against national priorities, a B7 RIC Hub Innovation Improvement Specialist was appointed through a fixed-term secondment in June 2026. Progress continues across several regional innovation priorities, in addition to the national Pension Credit Scale-Up project.

Activities planned for next milestone and reporting period

- The refreshed Recognition and Appreciation programme will be shared with our Executive Director of WOD/Deputy Chief Executive for initial review and feedback in September.

Matters for information:
Risks to delivery:
Any other comments:

Planning Goal 2: Create a people centred inclusive culture and uphold a zero-tolerance response to racism, harassment, discrimination and sexual misconduct.

2.1.1. Continue to progress the work of the EDI Taskforce [link to Risk 2305].

2.1.2 Equip staff with the skills to be an inclusion ally and the confidence to challenge inappropriate behaviour.

2.1.3. Delivered structured learning sessions to improve experience of staff from protected characteristic groups.

Executive Lead: Anna Bird, Assistant Director of Business, Partnerships and Inclusion

Reporting Period: Quarter 1

Overall status: On track to deliver fully by year end

Rationale: This programme of work will continue through the year.

Progress against planned outcomes / trajectories / milestones (please provide SPC/data charts and an explanation of any variances)

Activities completed in previous reporting period

- All sub-groups to the EDI Taskforce (allyship, data and communications/engagement) have been established with Leads/Chairs identified. A draft delivery plan has been completed and will be presented at the EDI Taskforce.
- EDI is now embedded in all current leadership programmes, including LEAP, Hywel Dda Manager, STAR, New Medical Leadership programme.
- Active bystander training is being delivered by the Diversity and Inclusion Team as a rolling programme. Staff can book onto the training and in collaboration with the OD team, targeted delivery is being offered to Teams that require additional support.
- In addition, 93.12% of the workforce have completed the Anti-Racism e-learning.
- A programme of meetings have been established with colleagues who are neurodivergent to support learning from lived experiences of staff. The first meetings have been arranged in August and September.

Activities planned for next milestone and reporting period

- Draft Terms of Reference and action plans will be shared at the next EDI Taskforce meeting on 21/07/26
- To complement existing work, a programme of externally commissioned EDI training for 26/27 has been established with organisations who provide lived experience in neurodiversity, LGBTQ+ and anti-racism.

Matters for information:

Risks to delivery:

Any other comments:



Submitted By:

Date Submitted:



Planning Gaol 2, Objective 3: Support the development and testing of the national workforce solution on behalf of NHS Wales.
2.3.1. Implementation of the new workforce solution

Executive Lead: Tracy Walmsley, Assistant Director of People Planning

Reporting Period:	
Overall status:	
Rationale:	
Progress against planned outcomes / trajectories / milestones (please provide SPC/data charts and an explanation of any variances)	
Activities completed in previous reporting period	Activities planned for next milestone and reporting period
• The Health Board has engaged with NHSBSA, NWSSP and Consortium as a pilot site for the new Future Workforce Solution, the following activities have been completed to enabled proceeding through Stage Gate 1. • Scoping Document linked to FRG Part 1 completed and signed. • Attended the Introduction to Future NHS Workforce solution and domain specific intro session webinars. • Reporting and analytics capabilities, Workforce provider systems v1 and Interface list templates completed. • The Systems landscape questionnaire completed. • Confirmed the Health Board will implement all domains within the Future NHS Workforce solution – Core HR, Talent Acquisition, Career Development, Performance management, Compensation & Benefits, Payroll and Learning. • Appointed a Transformation Lead and SRO, and identified our other programme roles required to support during Foundational Readiness, and identified individual benefit owners. • Work is ongoing to establish a governance framework, and to assess resources need in preparation for FRG Part 2.	• Complete reflection on FRG Part 1 as an early adopter. • Identify domain team members by L3 process to provide insights into the future solution set up. • Develop an understanding of required business process changes and complete the change impact assessment template. • Guidance and template to be shared with domain team members ahead of live kick-off and solution walkthrough videos. • Data cleansing and mapping.
Matters for information:	
Risks to delivery:	
Any other comments:	