![Hywel Dda University Health Board logo - GIG CYMRU NHS WALES / Bwrdd Iechyd Prifysgol Hywel Dda University Health Board]

HYWEL DDA UNIVERSITY HEALTH BOARD

Healthcare Professionals Forum (HPF)

Health Board Partnership Forum

Stakeholder Reference Group (SRG)

- AUDIT & RISK ASSURANCE COMMITTEE (ARAC)
- CHARITABLE FUNDS COMMITTEE (CFC)
- ETHICS PANEL (EP)
- HEALTH & SAFETY COMMITTEE (HSC)
- MENTAL HEALTH LEGISLATION COMMITTEE (MHLC)
- PEOPLE, ORGANISATIONAL DEVELOPMENT & CULTURE COMMITTEE (PODCC)
- QUALITY, SAFETY & EXPERIENCE COMMITTEE (QSEC)
- REMUNERATION & TERMS OF SERVICE COMMITTEE (RTSC)
- STRATEGIC DEVELOPMENT & OPERATIONAL DELIVERY COMMITTEE (SDODC)
- SUSTAINABLE RESOURCES COMMITTEE (SRC)

- RESEARCH & INNOVATION SUB COMMITTEE (RISC)
- BAME ADVISORY GROUP
- STRATEGIC PEOPLE PLANNING AND EDUCATION GROUP (SPPEG)
- WORKFORCE & OD LEADERSHIP GROUP

PEOPLE, ORGANISATIONAL DEVELOPMENT & CULTURE COMMITTEE

TERMS OF REFERENCE

Version	Issued To	Date	Comments
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PEOPLE, ORGANISATIONAL DEVELOPMENT & CULTURE COMMITTEE

1. Constitution

1.1 The People, Organisational Development & Culture Committee (the Committee) has been established as a Committee of the Hywel Dda University Health Board (HDdUHB) and constituted from 1 August 2021.

2. Purpose

The purpose of the People, Organisational Development & Culture Committee is:

2.1 To provide assurance to the Board on compliance with legislation, guidance and best practice around the workforce and OD agenda, learning from work undertaken nationally and internationally, ensuring Hywel Dda University Health Board (the Health Board) is recognised as a leader in this field.

2.2 To provide assurance to the Board on the 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.

2.3 To provide assurance to the Board on the organisation's ability to create and manage strong, high performance, organisational culture arrangements.

2.4 To receive an assurance on delivery against all relevant Planning Objectives falling under Strategic Objectives 1 (*Putting people at the heart of everything we do*), 2 (*Working together to be the best we can be*), 3 (*Striving to deliver and develop excellent services*) and 4 (The best health and wellbeing for our communities) (see Appendix 1), in accordance with Board approved timescales, as set out in Health Board's Annual Plan.

2.5 To provide assurance that the organisation is discharging its functions and meeting its responsibilities with regard to the research and innovation activity carried out within the Health Board.

2.6 Provide assurance that there are appropriate arrangements to ensure education and commissioning meets future workforce needs.

2.7 To seek assurance on the management of risks on the Corporate Risk Register (CRR) allocated to the Committee and provide assurance to the Board that risks are being managed effectively and report any areas of significant concern e.g. where risk tolerance is exceeded, lack of timely action.

2.8 To recommend acceptance of risks that cannot be brought within the Health Board's risk appetite/tolerance to the Board through the Committee Update Report.

2.9 To receive assurance through Sub-Committee Update Reports and other management group reports that risks relating to their areas are being effectively managed across the

whole of the Health Board's activities (including for hosted services and through partnerships and Joint Committees as appropriate).

3. Key Responsibilities

The People, Organisational Development & Culture Committee shall:

3.1   Seek assurances that people and organisational development arrangements are appropriately designed and operating effectively to ensure the provision of high quality, safe services/programmes and functions across the whole of the Health Board's activities.

3.2   Consider the implications for workforce planning arising from the development of the Health Board's strategies and plans or those of its stakeholders and partners, including those arising from joint (sub) committees of the Board.

3.3   Ensure robust mechanisms are in place to foster a strong and high-performance organisational culture of effective leadership, innovation and continuous improvement, in accordance with the Health Board's values and behaviour framework, future-proofed to ensure their continuity and success.

3.4   Ensure the Health Board is meeting its responsibilities with regard to statutory and mandatory training.

3.5   Seek assurance on delivery against all planning objectives aligned to the Committee, considering and scrutinising the plans, models and programmes that are developed and implemented, including the annual workforce plan and associated commissioning plan, supporting and endorsing these as appropriate.

3.6   Receive the Research & Innovation (R&I) Annual Report for approval prior to submission to the Health and Care Research Wales, to ensure the Health Board increases its Research & Development/R&I capacity, research output and research income.

3.7   Ensure robust mechanisms are in place to deliver effective staff engagement in accordance with the Health Board's values and behaviour framework.

3.8   Seek assurances that there is the appropriate culture and arrangements to allow the Health Board to discharge its statutory and mandatory responsibilities with regard to Welsh language provision (workforce & patient related).

3.9   Approve appointments made by the Advisory Appointments Committee.

3.10   Refer people, culture and organisational development matters which impact on quality and safety to the Quality, Safety & Experience Committee (QSEC), and vice versa.

3.11   Approve the workforce and organisational development policies and plans delegated to the Committee. Suggested to change to adopt left as approve as needs to be our policy

3.12   Review and approve the annual work plans for any Sub-Committee which has delegated responsibility from the People, Organisational Development & Culture Committee and oversee delivery.

3.12   Agree issues to be escalated to the Board with recommendations for action.

4.   Membership

4.1   Formal membership of the Committee shall comprise the following:

Member
Independent Member (Chair)
Independent Member (Vice Chair)
3 x Independent Members

4.2   Membership must include an Independent Member from the Quality, Safety and Experience Committee.

4.3   The following should attend Committee meetings:

In Attendance
Director of Workforce & Organisational Development (Lead Executive)
Medical Director
Director of Public Health
Director of Nursing, Quality & Patient Experience
Director of Communications
Chair of HDdUHB Staff Partnership Forum
Director of Therapies and Health Sciences

4.3   Membership of the Committee will be reviewed on an annual basis.

5.   Quorum and Attendance

5.1   A quorum shall consist of no less than three of the membership and must include as a minimum the Chair or Vice Chair of the Committee, together with a third (3) of the In Attendance members.

5.2   The membership of the Committee shall be determined by the Board, based on the recommendation of the UHB Chair, taking into account the balance of skills and expertise necessary to deliver the Committee's remit, and subject to any specific requirements or directions made by the Welsh Government.

5.3   Any senior officer of the UHB or partner organisation may, where appropriate, be invited to attend, for either all or part of a meeting to assist with discussions on a particular matter.

5.4   The Committee may also co-opt additional independent external 'experts' from outside the organisation to provide specialist skills.

5.5   Should any officer member be unavailable to attend, they may nominate a deputy with full voting rights to attend in their place, subject to the agreement of the Chair.

5.6   The Chair of the Health Board reserves the right to attend any of the Committee's meetings as an ex officio member.

5.7   The Head of Internal Audit shall have unrestricted and confidential access to the Chair of the People, Organisational Development & Culture Committee.

5.8   The Committee can arrange to meet with Internal Audit and External Audit (and, as appropriate, nominated representatives of Healthcare Inspectorate Wales), without the presence of officers, as required.

5.9   The Chair of the People, Organisational Development & Culture Committee shall have reasonable access to Executive Directors and other relevant senior staff.

5.10   The Committee may ask any or all of those who normally attend but who are not members to withdraw to facilitate open and frank discussion of particular matters.

6. Agenda and Papers

6.1   The Committee Secretary is to hold an agenda setting meeting with the Chair and/or Vice Chair and the Lead Director (Director of Workforce & OD), at least **six** weeks before the meeting date.

6.2   The agenda will be based around the Committee work plan, identified risks, matters arising from previous meetings, issues emerging throughout the year, and requests from Committee members. Following approval, the agenda and timetable for request of papers will be circulated to all Committee members.

6.3   All papers must be approved by the Lead/relevant Director.

6.4   The agenda and papers will be distributed **seven** days in advance of the meeting.

6.5   A draft Table of Actions will be issued within **two** days of the meeting. The minutes and Table of Actions will be circulated to the Lead Director within **seven** days to check the accuracy, prior to sending to Members (including the Committee Chair) to review within the next **seven** days.

6.6   Members must forward amendments to the Committee Secretary within the next **seven** days. The Committee Secretary will then forward the final version to the Committee Chair for approval.

7. In Committee

7.1   The Committee can operate with an In Committee function to receive updates on the management of sensitive and/or confidential information.

8. Frequency of Meetings

8.1   The Committee will meet bi-monthly and shall agree an annual schedule of meetings. Any additional meetings will be arranged as determined by the Chair of the Committee in discussion with the Lead Executive.

8.2　The Chair of the Committee, in discussion with the Committee Secretary, shall determine the time and the place of meetings of the Committee and procedures of such meetings.

9.　Accountability, Responsibility and Authority

9.1　Although, as set out within these terms of reference, the Board has delegated authority to the Committee for the exercise of certain functions, it retains overall responsibility and accountability for ensuring the quality and safety of healthcare for its citizens, through the effective governance of the organisation.

9.2　The Committee is directly accountable to the Board for its performance in exercising the functions set out in these terms of reference.

9.3　The Committee shall embed the Health Board's vision, corporate standards, priorities and requirements, e.g. equality and human rights, through the conduct of its business.

9.4　The requirements for the conduct of business as set out in the Health Board's Standing Orders are equally applicable to the operation of the Committee.

10.　Reporting

10.1　The Committee, through its Chair and members, shall work closely with the Board's other Committees, including joint/sub committees and groups, to provide advice and assurance to the Board through the:

　　10.1.1　joint planning and co-ordination of Board and Committee business;
　　10.1.2　sharing of information.

10.2　In doing so, the Committee shall contribute to the integration of good governance across the organisation, ensuring that all sources of assurance are incorporated into the Board's overall risk and assurance framework.

10.3　The Committee may establish sub-committees or working/task and finish groups to carry out on its behalf specific aspects of Committee business. The Committee will receive an update following each sub-committee or working/task and finish group meeting detailing the business undertaken on its behalf. The Sub-Committee reporting to this Committee is:

　　10.3.1　Research & Innovation Sub-Committee

The management group feeding into this Committee is the:

　　10.3.2　Workforce & OD Leadership Group

There are also other links to this Committee through the:

　　10.3.3　Staff Partnership Forum
　　10.3.4　University Partnerships

The advisory group feeding into this Committee is the:

10.3.5   Black Asian Minority Ethnic (BAME) Advisory Group

10.4   The Committee Chair, supported by the Committee Secretary, shall:

10.4.1   Report formally, regularly and on a timely basis, to the Board on the Committee's activities. This includes the submission of a committee update report, as well as the presentation of an annual report within six weeks of the end of the financial year.
10.4.2   Bring to the Board's specific attention any significant matters under consideration by the Committee.
10.4.3   Ensure appropriate escalation arrangements are in place to alert the UHB Chair, Chief Executive or Chairs of other relevant Committees, of any urgent/critical matters that may compromise patient care and affect the operation and/or reputation of the UHB.

10.5   The Board Secretary, on behalf of the Board, shall oversee a process of regular and rigorous self-assessment and evaluation of the Committee's performance and operation, including that of any sub committees established.

11. Secretarial Support

11.1   The Committee Secretary shall be determined by the Board Secretary.

12. Review Date

12.1   These terms of reference and operating arrangements shall be reviewed on at least an annual basis by the Committee for approval by the Board.

Appendix 1 – Planning Objectives aligned to Committee

Strategic Objective	Domain	Strategic Goal	Planning Objective	Executive Lead
1	Our People: We have the people we need to achieve our purpose and strategy	1. Grow and Train our Workforce We have the right people we need, with the right skills and knowledge	1a Develop an attraction and recruitment plan (which enables service sustainability) and deliver a plan which is designed to streamline and modernise processes, recruitment from different talent pools, attract and support candidates	Director of Workforce and OD
2			1b Develop career progression opportunities for all that want them, and for those that don't ensure they have appropriate development to be the best they can in their role.	Director of Workforce and OD
1		2. Support and Retain our Workforce. Our people feel motivated and supported	2a Engage with and listen to our people to ensure we support them to thrive through healthy lifestyles and relationships	Director of Workforce and OD
2			2b Continue to strive to be an employer of choice to ensure our people are happy, engaged and supported in work to further stabilise our services.	Director of Workforce and OD
1			2c Develop and maintain an overarching workforce, OD and partnerships plan	Director of Workforce and OD
3	Our Future: Building a better health care system for future generations	5: World class infrastructure We are building the infrastructure needed to provide high quality care	5b Research and Innovation	Medical Director
2		6: Sustainable services Designing and implementing more sustainable services	6c Continuous Engagement -To establish an overarching programme of work for continuous engagement with a set of continuous engagement plans that make it easier for people to have	Director of Communications and Engagement

			conversations with us. This will: 1. Increase public confidence and trust in the reputation of the Health Board 2. Offer greater ability of service users to influence services and to be better informed. 3. Improve decision making that is driven by public feedback. 4. Enhance visibility of the Health Board's values through open and transparent communication.	
3	Our Communities: Our population is healthy, and we have a positive impact on the determinants of health	8: Positive impact beyond health As an organisation we have a positive impact beyond health	8d Welsh Language and Culture - Building on the Welsh language and Culture Discovery process, we will deliver a Welsh Language plan that supports our ambitions to enhance our Welsh language and culture across the health board and engages and inspires our staff, patients, and broader communities. We will also seek to achieve the KPIs outlined within the Bilingual Skills policy, Cymraeg 2050, and More than Just Words	Director of Communications and Engagement