

Enw'r Pwyllgor / Name of Committee	People, Organisational Development & Culture Committee (PODCC)
Cadeirydd y Pwyllgor/ Chair of Committee:	Professor John Gammon, Independent Member
Cyfnod Adrodd/ Reporting Period:	Meeting Held on 20 th June 2022
Y Penderfyniadau a'r Materion a Ystyriodd y Pwyllgor / Key Decisions and Matters Considered by the Committee:	
<ul style="list-style-type: none"> • Review of PODCC Terms of Reference – the Committee received the PODCC Terms of Reference for annual review, noting the revised planning objectives aligned to PODCC. The Committee approved the PODCC Terms of Reference, for onward ratification by Board. • Chair's Action – the Committee ratified the approval via Chair's action of the Interpretation and Translation Policy which had been revised to reflect the inclusion of Primary Care. • Staff experience: Transforming Staff Feedback into Positive Change – the Committee received the Staff experience: Transforming staff feedback into positive change report which detailed the programme of culture change being adopted by Hywel Dda University Health Board (HDdUHB). Organisation Development Relationship Managers (ORDM) and the Workforce and Organisational Development (W&OD) team will work across all service areas of HDdUHB to develop People Culture Plans with the aim of transforming staff experience. Members were encouraged by the retention data presented, however noted a task and finish group is being established to progress flexible/agile working which was noted as a primary reason for staff resignation. Members proposed a more cohesive means of reporting across all work streams which effectively captures and demonstrates the work undertaken without the risk of duplicating information and requested an update be provided to PODCC in December 2022. Members received receive assurance on the actions to Transform Staff Experience into Positive Culture Change. • Staff Wellbeing Plan – the Committee received 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. Members noted that operational challenges experienced by staff have impacted the completion of actions around the 'Creating spaces that enable our people and services to thrive' theme. Funding from Welsh Government has been received to support the 'encouraging learning and innovation' theme and County Partnership Forums will be allocated funds based on headcount and provided with a catalogue of ideas and suggestions to support staff wellbeing. Members noted that feedback from staff indicated a requirement for staff wellbeing areas and expressed concern around the lack of available space to provide suitable, safe rest areas for staff. In relation to community settings, it was noted that whilst space to support staff wellbeing is available, resources such as external tables, chairs were not. The Committee noted the implementation of recommendations made in the Wellbeing Action Plan in relation to staff experiences during COVID-19, however requested a review and revision of the action plan to provide greater assurance on 20th October 2022. • Staff Value and Appreciation - the Committee welcomed members from the Culture and Workforce team who each provided an overview of their role. 	

Members received the Staff Value and Appreciation report which provided a research based overview of the Staff Value and Appreciation programme and summarised the required amendments to the employee recognition package to embed formal recognition for staff through awards and commendation and to encourage informal staff appreciation across the Health Board. An enhanced staff recognition package has been approved which includes Cymeradwyaeth Hywel's Applause 2022, Chair's Commendation, Local Recognition Award, Long Service Award and retirement and death in service recognition. Members were pleased to learn that a return to in-person events is anticipated in 2023 and Independent Members welcomed the opportunity to be part of the employee recognition awards scheme. The Committee noted the newly developed programme of work in relation to staff value and appreciation and endorsed the direction of travel to enable the growth of the value and appreciation culture in HDdUHB.

- **Medical Staff Recruitment Final Audit Report** – the Committee received 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 having a negative impact on patient care and the lack of onboarding procedures which may detrimentally affect the recruitment process. Members were pleased to note all management actions relating to the recruitment function have now been closed, with the exception of one action relating to the recruitment process which will be closed following the recruitment training session with the consultant development programme. Members received assurance that mitigating actions are being implemented within the stated timescales, with monitoring via the Audit Committee tracker.
- **Medical Appraisal, Revalidation and Job Planning** – the Committee received 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. 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 the coming months. Members noted the significant number of job plans awaiting the approval process, however, gained some assurance that that the trajectory for completed job plans is forecast to increase significantly by the end of 2022, with a focus on job plans for Speciality and Associate Specialist (SAS) doctors in early 2022. The Committee noted the current attainment status of medical appraisal, revalidation and recent improvement in job planning across HDdUHB and endorsed the intentions for ongoing development and quality improvement.
- **Planning Objectives** – The Committee received the Workforce & Organisational Development Planning Objectives (PO) update report, providing an update on the progress made in the development and delivery of the 17 POs aligned to PODCC, demonstrating where progress has been made. The Committee noted that the current status shows that 16 POs are on track and one is behind schedule:
 - **PO 21 integrated Occupational Health & Staff psychological wellbeing** work is ongoing around the Once for Wales Occupational Health and Wellbeing Service, however it is recognised that work undertaken pre

COVID-19 requires updating as services have developed over the last two years. A 'Plan on a Page' is being completed with a view to progressing the status of this PO.

The Committee received assurance on the current position in regard to the progress of the Workforce & OD Planning Objectives aligned to PODCC.

- **Black, Asian and Minority Ethnic (BAME) Advisory Group – Bullying and Harassment Task and Finish Group** – the Committee received the Bullying and Harassment Task and Finish Group (BHT&FG) Action Plan aimed at scoping issues relating to bullying and harassment 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. Members welcomed the progress made and emphasised that this work should inform the culture and DNA of HDdUHB. 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. The Committee noted and endorsed the BAME Advisory Group Bullying and Harassment Task and Finish Action Plan and requested a RAG rating be incorporated into the action plan for presentation to PODCC in December 2022.
- **Welsh Language and Culture Discovery Report** – the Committee received the Welsh Language and Culture report which outlined the scope and timeline of the proposed Welsh Language and Culture Discovery process. The discovery process will commence from August until October 2022 through engagement with internal and external stakeholders to review the achievements already made, look forward at the opportunities to further enhance the Welsh Language and Culture and 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. The design phase will build on findings from the discovery process and an initial plan will be shared with the Committee in February 2023 for approval. It is anticipated that following Board approval, the process will commence in April 2023. Members 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 Committee noted and endorsed the progress and associated timescales with the delivery of the Board-approved planning objective for Welsh language.
- **Welsh Language Annual Report** – 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. Members were pleased to note that the Electronic Staff Record (ESR) data demonstrates HDdUHB has the highest percentage in Wales for Welsh language skills. Members noted that compliance with Welsh language standard 107a (translation of all job descriptions) had proved challenging, as currently it is not financially viable to translate. Work to identify frequently used/generic job descriptions for translation is underway. The Committee noted and endorsed the Welsh Language Annual report 2021/2022.
- **Stonewall Assessment** – The Committee received 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. Members were pleased to note that HDdUHB had gained a Silver award in recognition of work undertaken, and had ascended to the position of 194th on the 2022 Stonewall WEI from a previous ranking of 337th and that work is being progressed with the aim of HDdUHB ranking amongst the top 100 following assessment in September 2022. Members expressed disappointment that part of the Stonewall assessment entailed responding to key questions in the assessment process which did not fully reflect the significant amount of work undertaken; however, were reassured that an action plan is being developed in readiness for submission in September and in depth detail to emphasise the work undertaken will be provided to enhance the assessment process. Members requested an updated action plan which reflects the criteria required for the Stonewall assessment and demonstrates the culture, diversity and inclusion policy of HDdUHB. The Committee received assurance on progress to implement the Strategic Equality Objectives and improve the experience and support available to LGBTQ+ individuals.

- **Workforce Dashboard** – the Committee received the “Performance Assurance & Workforce Metrics” report, including an update, as at 30th April 2022, on workforce metrics as well as key performance indicators (KPI), providing assurance of delivery against national framework targets. Members commended the high level of provision for dementia training and the favourable comparative sickness levels against other health boards. Noting that the attainment level for band 2 and band 3 staff, excluding nursing staff, is low, Members were advised that training courses will be identified which can be mapped to Level 2 and Level 3 skill sets to provide the opportunity for staff to attain the required level of skills. The Committee considered the performance NHS Delivery Framework metrics and noted the content of the report as assurance of performance in key areas of the Workforce and OD agenda.
- **Corporate Risks Assigned to PODCC** – the Committee received 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 – *Risk 1406 - risk of insufficient skilled workforce to deliver services outlined in Annual Plan 22/23 & deliver UHB strategic vision by 2030*. Members were informed that the risk rating has been 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. Members noted the requirement to include primary and secondary care in this breakdown. The Committee received assurance that all identified controls are in place and are working effectively and all planned actions will be implemented within stated timescales.
- **Research & Innovation Sub Committee Report** - The Committee received and noted the Research & Innovation Sub-Committee (R&ISC) update report following the meeting held on 9th May 2022.
- **Corporate Employment Policies** – The Committee approved the Work life Balance/Flexible Working Policy, the Retirement Policy, the Disclose and Barring Policy, Underpayments and Overpayments Policy and the All Wales Pay Progression Policy. In terms of the Underpayments and Overpayments Policy, it was noted that the document contains 9 pages relating to the recovery of overpayments and only 2 pages in relation to underpayments, however Members received assurance that actions are underway to address the principals in place.

- **Outcome of Advisory Appointments Committee** - The Committee received the Advisory Appointment Committee (AAC) report, providing an update on the outcome of the AACs held between 21st March 2022 and 1st June 2022 and on behalf of the Board approved the appointments of Mr Nitin Vijay Deshmukh, Consultant in Trauma and Orthopaedics with an interest in Lower Limb Arthroplasty Surgery based at Withybush General Hospital, with an immediate commencement date, and Dr Agnieszka Werewka, Consultant in Radiology based at Glangwili General Hospital, with a commencement date to be confirmed.

Materion y mae angen Ystyriaeth neu Gymeradwyaeth Lefel y Bwrdd are u cyfer / Matters Requiring Board Level Consideration or Approval:

- The revised People, Organisational Development & Culture Committee Terms of Reference, appended

Risgiau Allweddol a Materion Pryder /Key Risks and Issues/ Matters of Concern:

- **Staff Wellbeing Plan** - whilst funding has been secured to support staff wellbeing, it is acknowledged that the provision of safe, secure rest areas for staff is limited due to the lack of available space across sites.

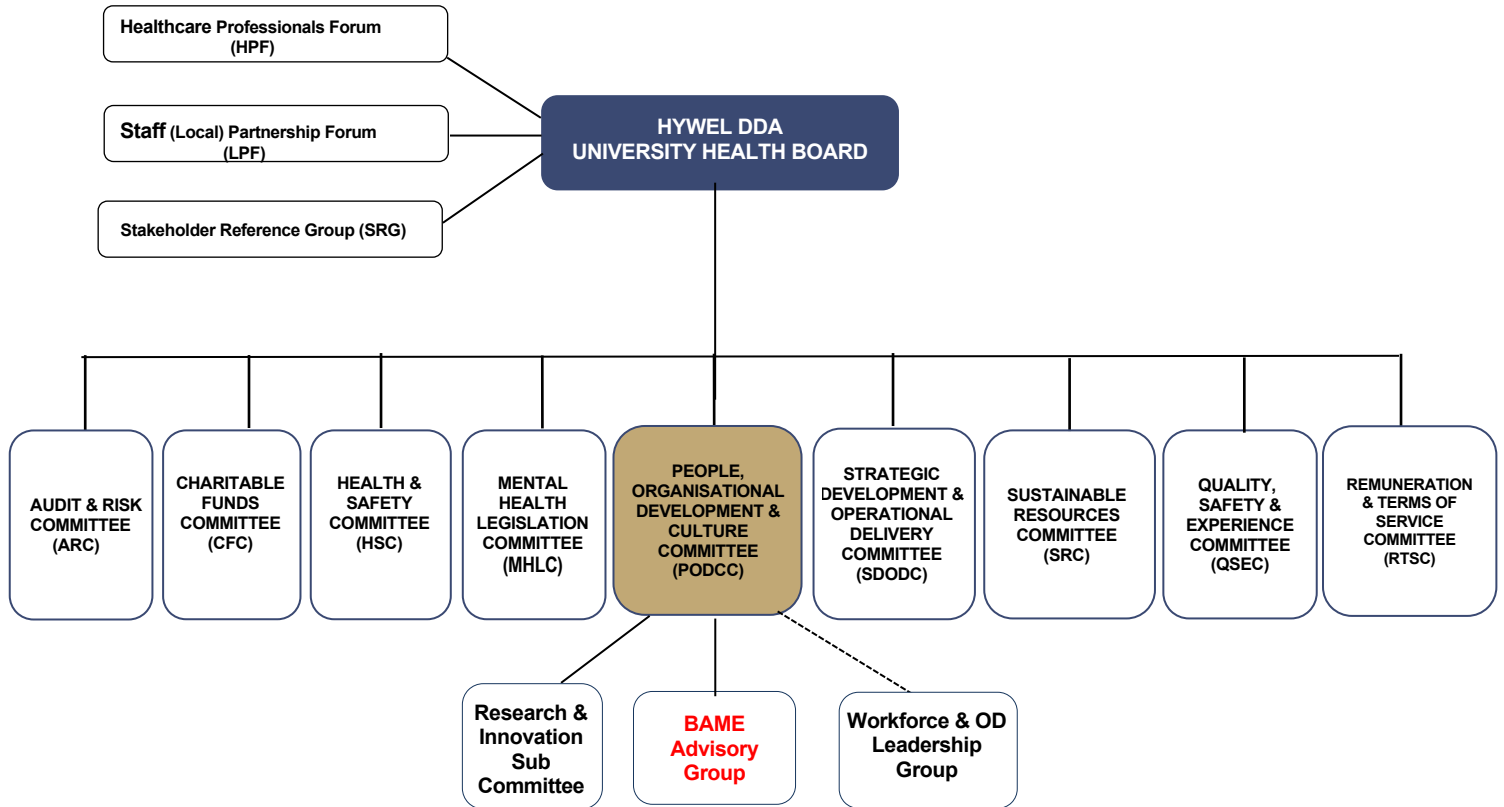
Busnes Cynlluniedig y Pwyllgor ar gyfer y Cyfnod Adrodd Nesaf / Planned Committee Business for the Next Reporting Period:

Adrodd yn y Dyfodol / Future Reporting:

In addition to the items scheduled to be reviewed as part of the Committee's work programme, following up progress of the various actions identified above will be undertaken.

Dyddiad y Cyfarfod Nesaf / Date of Next Meeting:

18th August 2022



PEOPLE, ORGANISATIONAL DEVELOPMENT & CULTURE COMMITTEE

TERMS OF REFERENCE

Version	Issued To	Date	Comments
V0.1	Hywel Dda University Health Board	29.07.2021	Approved
V0.2	PODCC	20.06.2022	Approved
V0.2	Hywel Dda University Health Board	22.07.2022	For Approval

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 1st 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 (HDdUHB) 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 HDdUHB'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 To seek assurance on the management of principal risks within the Board Assurance Framework (BAF) and 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.
- 2.7 To recommend acceptance of risks that cannot be brought within the UHBs risk appetite/tolerance to the Board through the Committee Update Report.
- 2.8 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 HDdUHB's activities.
- 3.2 Consider the implications for workforce planning arising from the development of HDdUHB'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 HDdUHB's values and behaviour framework, future-proofed to ensure their continuity and success.
- 3.4 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 (~~PO 1A, 1B, 1F, 1G, 1H, 1I, 2A, 2B, 2D, 2I, 2J, 2K, 2L, 2M, 3G, 3N 4I~~).
- 3.5 Consider the second 'Discovery' phase of the pandemic learning that is conducted to understand more about staff experience in order that approaches to rest, recovery and recuperation can be shaped over the next 2 years including a 'thank you offering' to staff (PO 1H).
- 3.6 Receive 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 (PO 3G).
- 3.7 Receive the R&D Annual Report for approval prior to submission to the Health and Care Research Wales, to ensure the UHB increases its R&D/R&I capacity, research output and research income.
- 3.8 ~~Seek assurances on the requirements arising from HDdUHB's regulators, WG and professional bodies (PO 3B).~~
- 3.9 Ensure robust mechanisms are in place to deliver effective staff engagement in accordance with HDdUHB's values and behaviour framework.
- 3.10 Seek assurances that there is the appropriate culture and arrangements to allow HDdUHB to discharge its statutory and mandatory responsibilities with regard to Welsh language provision (workforce & patient related).

- 3.11 Approve Appointments made by the Advisory Appointments Committee.
- 3.12 Refer people, culture and organisational development matters which impact on quality and safety to the Quality, Safety & Experience Committee (QSEC), and vice versa.
- 3.13 Approve workforce and organisational development policies and plans within the scope of the Committee.
- 3.14 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.
- 3.15 Agree issues to be escalated to the Board with recommendations for action.

4. Membership

4.1 Formal membership of the Committee shall comprise of the following:

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

4.2 The following should attend Committee meetings:

In Attendance
Director of Workforce & Organisational Development (Lead Executive)
Medical Director/ Deputy CEO (for PO-3G)
Director of Public Health (for PO-2A and 4I)
Director of Nursing, Quality & Patient Experience (for PO-1B, 1I and 2M)
Director of Communications (for PO-3N)
Chair of HDdUHB Staff Partnership Forum

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, and two other Independent Member(s), together with a third 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 UHB 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 The minutes and action log will be circulated to members within **ten** days to check the accuracy.
- 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 UHB'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 UHB'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.

Planning Objectives Aligned to People, Organisational Development & Culture Committee

P.O. Ref	Planning Objective	Executive Lead
1A	Develop and implement plans to deliver NHS Delivery Framework targets related to workforce within the next 3 years (with 2021/22 being year 1). See specific requirements 1.A.i	Director of Workforce & Organisational Development
1B	<p>"Building on the success of the command centre, develop a longer-term sustainable model to cover the following:</p> <ul style="list-style-type: none"> - One single telephone and email point of contact - the ""Hywel Dda Hub"". This will incorporate switchboard facilities and existing service based call handling functions into one single call-handling system linking patient appointments, online booking and call handlers - All specialist teams (primary care, patient support, staff support) to have their calls answered and routed through this single point of contact - Further develop the operation of the surveillance cell set up to support Test, Trace and Protect for as long as required - Further develop the incident response and management cell set up to support our COVID-19 response for as long as required - Further develop the Sharepoint function, or look at similar other systems that our Local Authority partners use, to facilitate tracking, auditing and reporting of enquiries, responses and actions - Develop and implement a plan to roll out access for all patients to own records and appointments within 3 years (from 2022/23)" 	Director of Nursing, Quality & Patient Experience
1F	<p>Following the development of processes to co-design with our staff every stage and element of our HR offer that embody our values. This will address:</p> <ol style="list-style-type: none"> 1. the way the Health Board recruits new staff and provides induction; 2. all existing HR policies; 3. the way in which employee relation matters are managed and 4. equitable access to training and the Health Board's staff wellbeing services. <p>The resulting changes to policies, processes and approaches will be recommended to the Board in March 2023 for adoption</p>	Director of Workforce & Organisational Development

1G	By October 2022, develop directorate/team level people culture plans across the whole organisation coordinated by the Health Board's OD Relationship Managers. These plans will lead to more good days at work for our staff and incorporate the personal development plans	Director of Workforce & Organisational Development
1H	Following the development and design of the "Making a Difference" Customer Service programme, implement a plan to focus on delivery and measuring outcomes (linked with the Board Assurance Framework), with all members of staff to have completed the programme by September 2024.	Director of Workforce & Organisational Development
1I	To embed and sustain a family liaison service in appropriate inpatient and clinical settings from April 2023	Director of Nursing, Quality & Patient Experience
2A	Develop a Health Board specific plan by October 2023 that supports the sustainable delivery of Health Board commissioned services for unpaid Carers and responds to the Regional Carers Strategy, the findings within the population assessment and market stability report and influences the implementation of the Mid and West Wales Health and Care Strategy by supporting individuals in their homes and communities.	Director of Public Health (Temporarily re-assigned to the Director of Workforce and OD)
2B	By March 2023, implement series of actions to enhance Hywel Dda as a culturally competent organisation. This is able to support and recognise individual needs of employees, patients and carers.	Director of Workforce & Organisational Development
2D	By September 2022 to develop a multi-disciplinary clinical and non-clinical education plan and begin implementation from October 2022. This plan will incorporate the expansion of the Apprenticeship Academy in terms of its scope, scale and integration with social care	Director of Workforce & Organisational Development
2I	By February 2023 develop an integrated Occupational Health & Staff psychological wellbeing offer with a single point of contact which supports staff to remain in work, offers support when absent and provides alternative opportunities when health impacts on an individual's ability to be in role.	Director of Workforce & Organisational Development
2J	By March 2023 design a comprehensive range of Leadership Development pathways to create cohorts of leaders needed to address the challenges ahead. This will include the design of a graduate leadership team for health and social care.	Director of Workforce & Organisational Development
2K	By March 2023, demonstrate progression of actions from the first staff discovery report focused on how we can better support staff in work and their wider lives to support Health and wellbeing.	Director of Workforce & Organisational Development
2L	By June 2022 develop a plan to ensure the retention of our new and existing staff through the improvement of our engagement with staff and a reduction in turnover. This plan should, as a	Director of Workforce & Organisational Development

	minimum achieve the Welsh average retention rates across all staff groups in the initial phase and achieve best in Wales as a minimum over its whole duration	
2M	To sustain and develop the Arts in Health Programme by March 2023 to promote and encourage the use of the arts in the healthcare environment to make a positive contribution to the well-being of our patients, service users and our staff.	Director of Nursing, Quality & Patient Experience
3G	Implement the Research and Innovation Strategic Plan (2021-24) to increase research, development, and innovation activity, and the number of research investigators sufficient to deliver the Health Board, Welsh Government and HCRW expectations and improvement targets (see specific requirement 3.G.i). The plan will be implemented in partnership with universities, life science companies, and public service partners, so as to maximise the development of new research, technologies and services that improve patient care and health outcomes. The portfolio will target an expansion of activity into new areas of organisational, clinical and academic strength, including ophthalmology, orthopaedics, women and children's health, sexual and primary care. A function spanning clinical engineering, research and innovation (TriTech) will also target a threefold increase in technology trials	Medical Director/ Deputy CEO
3N	During 2022/23, undertake a Welsh Language and Culture Discovery process that seeks the views of staff, patients, partners, exemplar organisations and the local population regarding ways to make Hywel Dda a model public sector organisation for embracing and celebrating Welsh Language and Culture (in the way we communicate, offer our services and design our estate and facilities for example). The resulting Discovery Report is to be presented for Board approval in Q4 2022/23 and, in light of this, a comprehensive and ambitious Welsh Language and Culture Plan will be presented to Board for approval in March 2023 with implementation starting in April 2023 at the latest. Any elements that can be implemented during 2022/23 should be, subject to appropriate approvals.	Director of Communications
4I	By March 2023 further develop the Health Board plan to drive forward improved outcomes for Veterans and members of the Armed Forces community, in relation to NHS priority treatment guidance and recruitment strategies, and report on progress annually.	Director of Public Health (Temporarily re-assigned to the Director of Workforce and OD)