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## PEOPLE AND CULTURE COMMITTEE HIGHLIGHT REPORT TO BOARD

This report provides the Board with key escalation and discussion points at the last Committee meeting. A full list of items discussed appears at the end of the report to enable members to raise any questions to the Chair which have not been drawn out in the report.

The papers for this meeting can be found by following this [link](#) to the Committee page on the Trust website.

<b>Trust Board Meeting Date</b>	28 May 2026
<b>Committee Meeting Date</b>	5 May 2026
<b>Chair</b>	Ceri Jackson

### KEY ESCALATION AND DISCUSSION POINTS

#### ALERT

(Alert the Board to areas of attention)

1. No alerts arose from this meeting.

#### ADVISE

(Detail any areas of on-going monitoring, approvals, or new developments to be communicated)

2. The committee did not receive a **staff experience** at this meeting. An update was received on the previous staff experience given in February by Ben Collins, in relation to work around cultural improvements in EMS South Central.
3. The **report from the Director of Culture Change** and the **Director of People** was received. The report highlighted the significant external impact of the Trust's People and Culture work during the quarter, particularly through staff networks and leadership activity across the ambulance sector. Key achievements included national leadership on the neurodiversity pledge through the Disability Forum, wide engagement through International Women's Day activity and women's health events, and continued progress on inclusive recruitment initiatives.

Members were reminded of the recent decision not to appoint Newly Qualified Paramedics (NQPs) in the current year acknowledging the recent media interest. This is due to a reassessment of workforce demand following improved retention, changes to post-COVID planning assumptions, the introduction of a new clinical model, and ongoing financial pressures. This was noted in relation to the system-level decision by Welsh Government and Health Education and Improvement Wales (HEIW) not to commission the full-time direct entry paramedicine course this year. Assurance was



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provided that internal conversion routes to become a paramedic remain unaffected; that a dedicated project team are working on delivering a range of options to create capacity for NQP recruitment opportunities such as ring-fenced Emergency Medical Technician opportunities, flexible deployment options and continued engagement with universities and trade unions.

Members explored the impact of workforce decisions on managers and the balance between compassionate leadership, performance management and 24/7 service delivery. Assurance was given managers are being supported through organisational development, essential conversations training and access to People Services, with a focus on early intervention and avoiding escalation. The committee noted the inherent tension within people leadership and reaffirmed the importance of supporting sustainable leadership to maintain staff experience and long-term service resilience in a challenging financial context.

4. The committee was reminded of the breadth and depth of work underway across the **Operations Directorate from the Q4 update** which demonstrated the scale of insight, intelligence and staff feedback routinely captured across this large and complex directorate. Members noted the richness of information being generated through multiple routes, including quality and support days, culture reviews and routine operational engagement, providing strong assurance on how operational issues and staff experience are understood and responded to. Specific discussion highlighted the significant progress on TOIL, with an 80% approval rate over the winter period, reflecting positive collaboration and a focus on staff wellbeing. The Committee acknowledged the improved MIST training compliance following considerable management effort and welcomed the revised approach for the year ahead aimed at improving and sustaining that position.
5. Members **reflected** on the richness of information and intelligence presented throughout the meeting, while recognising that discussion at times became operational in nature. Members reflected on the inherent challenge of balancing detailed operational insight with a strategic, system-level perspective, particularly in relation to workforce pressures, leadership capacity and cultural change. There was recognition that the Trust is at a critical point in sustaining momentum on culture and people-focused improvement against a backdrop of financial constraint, and that continued focus, challenge and coherence across reporting will be essential to avoid regression and to support long-term organisational resilience.

## ASSURE

(Detail here any areas of assurance the Committee has received)

6. The committee received the **MIQPR** and the **People and Culture Plan metrics and workforce scorecard**. The committee welcomed the additional analysis included sickness absence and discussed areas of higher absence and acknowledged that while there had been a spike in a particular month, overall levels had reduced and were trending downwards. Assurance was provided that the Trust is broadly holding its position in comparison with other ambulance services. Members noted the actions being taken to do more in this area, including bolstering the wellbeing offer, focusing on the least performing areas, and undertaking targeted work to better understand what is



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driving absence and how improvements can be sustained over time.

Members discussed the capacity of investigating officers, recognising the positive impact of dedicated resource in reducing investigation times, while noting the potential knock-on effects where capacity is constrained and the importance of managing delays given the impact on staff experience.

7. Two related internal audits were reviewed as set out below. They had both been discussed in the Audit, Risk and Assurance Committee the week previously.
  - Job evaluation – reasonable assurance. Members discussed the progress made since the previous audit, including action taken to address historic backlogs, strengthen capacity and improve resilience within the function, particularly in the context of sustained organisational change and workforce transformation. Committee noted the positive direction of travel since the last review and that this triangulated the workforce metrics report.
  - Welsh language standards – reasonable assurance. Members discussed the strong foundations now in place, including clear roles and responsibilities, an established policy framework, and consistent statutory reporting, with recognition of progress in embedding Welsh language considerations into service delivery. Overall, the Committee was reassured by the direction of travel achieved with limited dedicated resources and noted the emphasis on cultural embedding rather than compliance alone.
8. The **NHS staff survey results** were reviewed. The Committee discussed the NHS Staff Survey findings, noting that following consideration at the Board. Further workshops had been held with the Executive Leadership Team and Trade Union colleagues to agree upon priorities for action. These conversations identified three critical areas for organisational focus (a) workload, capacity and resourcing, (b) leadership and management behaviours, and (c) fairness, opportunity and career experience.

Members were assured that actions to address these priorities are already reflected within the IMTP and Local Delivery Plans, providing a strong foundation to build from rather than starting afresh. However, the Committee noted the limited time available before the next staff survey in October, emphasising the importance of focusing on tangible, meaningful changes that can be evidenced and felt by staff over the coming months.
9. The **health and safety and violence and aggression report** from January to March 2026 was reviewed with members noting that incidents of violence and aggression remain a concern, particularly verbal abuse affecting contact centre staff, with higher prevalence in areas aligned to Betsi Cadwaladr and Aneurin Bevan University Health Boards. All incidents are reviewed and support is provided to affected staff, with improved reporting compliance evident. The committee reflected on the impact of wider system pressures and community frustration on staff experience, acknowledging that while a direct correlation has not yet been assessed, continued focus is required on prevention, staff support and mitigating the impact of sustained aggression on staff experience and wellbeing.



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10. The Welsh Ambulance Services Partnership Team (WASPT) is the Board's local partnership advisory forum. The **WASPT highlight reports** for January and March noted:
- a workshop on social partnership and the Public Procurement Act was held, including a collective self-assessment, with learning to be embedded through ongoing development sessions
  - the industrial injuries process was reviewed, noting progress but also continued reliance on paper-based systems, associated administrative burden, and variable quality of submissions
  - updates were received on skill mix changes, including EMT to EAP progression and the workforce skill mix programme, with assurance that there was no intention to pursue redundancies or voluntary exits
  - progress on ACAS actions and social partnership development days for line managers was noted
  - the draft IMTP and associated financial planning context were discussed, highlighting a highly challenging financial environment and a focus on embedding recent changes and maximising benefit
  - financial saving proposals were discussed, based on no redundancies, vacancy controls, a focus on recurrent savings, and protection of frontline services
  - workforce commitments were noted, including sexual safety, sickness absence, staff engagement, leadership development and recruitment approaches
  - updates were received on All-Wales disciplinary policy training, with assurance of alignment to national guidance, and on paid parental leave, confirming that any changes would need to be progressed on an all-Wales basis
  - shift overruns were reviewed, with actions taken, early signs of improvement, and emphasis on consistent application of SOPs, with progress noted on integrated overrun action planning, alternative dispatch models, the smart tether proof of concept, and quality and support days
  - actions linked to the non-pay elements of the 2024 collective agreement are now complete
11. The **Q4 Audit Tracker** report focused on high priority actions or actions from limited assurance audits that were on their final revised date. For this meeting it was only one – the audit on the Resourcing Policy and an action related to standard operating procedures. Members were assured that this would be progressed by the revised date and that there was no increased risk.
12. In the **private session**, the committee reviewed progress against suspensions over four months, and cases in the Employment Tribunal. Members were assured on the actions in place to manage these cases.
13. The committee received the **cycle of business monitoring report** and noted the Strategic Equality Plan will be presented in quarter 2 due to the timing of the meeting and end of year data production.



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## RISKS

### Risks Discussed:

As foreshadowed at the last meeting, risks 160 (sickness absence) and 558 (wellbeing) have been streamlined into one holistic risk. Risk 680 is the failure to prioritise people capability and organisational culture which could result in deteriorating employee experience, reduced wellbeing and absence. That risk is currently scored at 16 (4x4) and members were assured that the controls, gaps and actions were appropriately identified to mitigate the risk.

The first sight of the strategic board assurance framework (BAF) risk for strategic objective 2 – enabling our people to be the best they can be – was discussed. The risk is articulated as: *if the organisation is unable to create and sustain the culture, capability and capacity needed for our people to develop and perform at their best then we will not be able to build and maintain a skilled, engaged and empowered workforce capable of meeting current and future service demands resulting in reduced organisational resilience, impaired ability to innovate and improve, and failure to deliver our strategic objectives.*

The risk will continue to be developed with scoring (noting an open risk appetite for this strategic objective), controls and assurance, as well as actions – linked to the principal risk 680 above.

**New Risks Identified:** No new risks identified at this meeting for the register.

### COMMITTEE AGENDA FOR MEETING

Directors update	Operations quarterly report Q4	Staff experience and staff experience update
NHS staff survey update	People and culture plan metrics and workforce scorecard	Internal audit report – job evaluation
MIQPR	Health and safety, and violence and aggression – January to March 2026	Internal audit report on Welsh language standard
WASPT highlight report 22 January and 18 March	Risk management and board assurance framework	Audit tracker Q4
Cycle of business monitoring report		

### COMMITTEE ATTENDANCE

Name	5 May 2026			
Ceri Jackson				
Bethan Evans				
Hayley Hutchings				
Hannah Rowan				
Angela Lewis				
Carl Kneeshaw				
Chris Turley				
Lee Brooks				
Liam Williams				
Estelle Hitchon				



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COMMITTEE ATTENDANCE				
Name	5 May 2026			
Andy Swinburn	Attended			
James Houston	Apologies received			
Trish Mills	Attended			
Damon Turner	Attended			
Marcus Viggers	Attended			
Christian Fox	Attended			
Tim Cahalane	Apologies received			

Attended	Attended
Deputy attended	Deputy attended
Apologies received	Apologies received
No longer member	No longer member