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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>	30 May 2024
<b>Committee Meeting Date</b>	09 May 2024
<b>Chair</b>	Ceri Jackson

### KEY ESCALATION AND DISCUSSION POINTS

#### ALERT

(Alert the Board to areas of attention)

1. N/A

#### ADVISE

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

2. Key progress was noted as part of the **Director of People and Culture** update including:
- Continued progress of the Culture Champions Network and the positive impact on shaping Trust culture; an increased focus on visibility, programme of support and opportunities to empower CCs in their roles.
  - Positive engagement and interactions across the Trust.
  - Attended the CIPD Awards with the Voices Advocates.
  - Time with TU colleagues and a road trip to North Wales for the partnership sessions “walking in each other’s shoes”.
  - Executive Leadership Team 360 process undertaken demonstrating to continuous learning and development.
  - Clinical transformation workshops with focus on change management and building the change management capability.
  - Commitment and endorsement on investigation team to move forward – ready to go to advert for those posts.
  - Assurance given on Occupational Health work plan.
  - Members assured about the roadshows as well as the positive engagement balanced with realism in relation to the level of change taking place across the Trust.
  - Counselling sessions being offered by the EAP providers has increased to 8 sessions.



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- Appointed to full time, dedicated guardian role from next month.
  - Implementation of a dedicated investigation team.
3. The Committee received the **Operational Update**, highlighting key areas including:
- Relief planning has been extended following a successful first stage pilot from 5 to 6 weeks' notice. The move is expected to improve the working experience of our people.
  - The EMSC restructure has been agreed in principle to increase management, leadership support capacity and career development opportunities.
  - Quality and Support days have been held promoting culture and behaviours in key areas such as seat belt and safety harness use, process, and policy; all providing opportunities to have conversations with operational managers. Themes and trends data gathered from these sessions.
  - End of Shift Overruns (EoS) – Good progress noted with a reduced average EoS overrun length reducing to a lower level than the last 15 months. The holding area has been lost at the Grange University Hospital which was highlighted as an issue. New premises are being sought.
  - Operations staff encouraged to drop into culture workshops which utilise the CEWS tools to facilitate feedback from staff on their experiences and expectations.
  - CAS replacement project for NHS 111 went live successfully on 30 April 2024 and a major achievement for the Trust and all involved.
4. **Staff Story - A View of Front Line Leadership** – Matthew T Jones, Locality Manager in Pembrokeshire, attended the meeting to share his learning on the work he has undertaken on attendance and sickness absence. Matt started as a student paramedic in 2010 and worked in Surrey for a year before returning to WAST in Pembrokeshire in 2013. He became a clinical team leader in 2019 and then acted up as a locality manager during the pandemic. He was appointed permanently in May 2020 and transitioned into the Duty Operations Manager (DOM) role and then substantively as a Locality Manager.
5. Matt has faced some challenges in leading a team that he used to work within as a colleague, in dealing with high sickness rates and outdated stations and had concerns regarding the support available to colleagues off long term. 'Chat with Matt' sessions were set up to discuss key issues such as sexual safety, sickness, handover delays, overruns, and an opportunity to explain things to staff. For example, the national Managing Attendance at Work Policy and delivering it local, making the most of the People and Culture Plan as a guide to support staff and to have open and honest conversations with them. There was a clear need for change with abstraction rates.
6. Matt adopted a new system on O365 Microsoft planner to track and manage staff absences and other operational matters. He said it was very intuitive and visual and helped him and the DOMs to provide timely and appropriate support to staff, linking in with Information Governance and ensuring confidentiality. A year on from using the system, it is clear when staff have received welfare calls, occupational health referrals etc and it intuitively tracks staff to enable customisation in the way absence is managed. The capability to attach long term sick records, e-files, staff information, time and date stamp of actions, letters to be sent out or supportive actions due, is invaluable. The results and benefits have been realised as a whole system change building a team back from 25% sickness to 7% and PADR rates. Angie Lewis and Jason Killens visited Pembrokeshire station and saw this in action, acknowledging that a lot has been achieved in a short space of time and most of it done in house by Matt and his team. Station facilities were improved by creating quiet rooms for staff to reflect and relax. He said he did this with very little money and with the help of the estates team and the staff themselves.



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7. Matt's reflections included: having a safe space to learn from mistakes in the beginning of the project, linking into the People & Culture (P&C) Plan, an excellent example of how a whole team in EMS has been involved in supporting staff back into work following a period of absence, the work that has been done to support staff in complex cases and the innovation and creative thinking.
8. Committee reflected how impressed they were with the progress, Matt's innovation and creative thinking resulting in whole scale support for staff and managing absence and how this approach could impact staff nationally. Matt could provide a podcast on this topic and forge connections with the north to roll the concept out across the whole service and delve into the issues with moving from buddy to boss and supporting that transition, considering the WAST way and experience for future leadership development sessions. One point is to ensure that staff records on the planner are linked back centrally to main personnel files.
9. Angie commended Matt for his great leadership from the front line, noting that the system and tools are great; however, it is the passion, commitment, and desire to help staff have a positive working experience which came through. Being keen to keep shining a light where we see great practice happening, learning, and evolving, failing fast and moving on and scaling up of successful projects.
10. The Committee received insights from **NHS Staff Survey** focussing on stress and burnout in the workplace and discussed the links between addressing these issues with our overarching People & Culture ambitions and the Health and Wellbeing Plan. The results will increase awareness of these issues and develop meaningful actions against the cultural transformation work.
11. **The Staff Development Outline Plan** was presented acknowledging it is a deliverable of the P&C plan aiming to provide equity in development opportunities for our people to undertake their roles and benefit from progression opportunities. Mapping is underway on professions and roles and will define skills and competencies and create a progression diagram tapping into external best practice in this area.
12. The Committee were pleased to approve the **Homeworking Policy** and acknowledged that the **Exit Interview Policy** has been reclassified as a Standard Operating Procedure.
13. **Reflections** on the meeting were that it worked positively as a hybrid meeting; however, there is a structural challenge in considering all the items on the agenda ensuring energy and full input towards the end of the meeting. More breaks and consent items will be considered. Attendees thanked Ceri Jackson as her first time in the Chair and commended Angie Lewis on winning the International Culture Award.

## ASSURE

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

14. The Committee received a paper on the **People and Culture plan Metrics**, including quantitative data that highlighted achievements and challenges related to the plan, such as the international award for culture, the work on change management, and the dedicated investigation team. She also mentioned positive trends, such as reduced turnover, sick absence, and missed compliance capability, as well as areas of concern, such as stress and burnout. More detailed information will be shared in the next



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meeting.

15. A deep dive on the disciplinary processes and the compassionate practices approach was presented to Committee. The highlights included the increase in workload due to the rise in cases related to sexual safety and inappropriate behaviour, and the efforts to reduce the duration and harm of disciplinary cases. The introduction of three independent investigators and the importance of decision making officers having the capacity and pace to deal with cases. Concern was raised regarding the harm caused by suspensions and the need to improve in that area.
16. The **Monthly Integrated Quality and Performance Report** ("MIQPR") and the **Q4 Workforce Scorecard** show that continued system pressures including handover delays remain a significant pressure on our people. Demand in NHS 111 coupled with the decrease in the number of call handlers commissioned will have an impact on staff wellbeing. There was acknowledgement on the sustained improvement made on sickness absence; however, there is work to do. Committee were assured that there is a dynamic plan in place on areas such as Muscular Skeletal issues, Manual Handling and Mental Health that remain a priority given the challenging 6% sickness absence target.
17. **Committee were assured on the Health & Safety (H&S) Report** which several positive aspects such as high compliance rates for RIDDOR reporting which demonstrates a grip of control and flows of work in the Trust. A low number of RIDDOR incidents were reported in Quarter 4. There remain areas of concern in relation to mandatory training and increasing instances of violence and aggression. There is ongoing work and initiatives to address these issues such as the Right Care Right Person with the Police in the coming 12-24 months on the association of Mental Health with incidents of violence and aggression. Several highlights included:
  - An IOSH article on H&S in December 2023 on the Trust's efforts.
  - The Head of H&S has been invited to join an editorial board.
  - The CEO has been invited to discuss learning with Blue Light partners across the UK.
  - The H&S Annual report will be presented to the next meeting.
18. The Health & Safety Committee (H&SC) will continue discussions in relation to diesel fumes and key monitoring within the next quarter as a priority area for the Trust. This will continue to be monitor at Committee through the H&SC AAA report. New fleet solutions are being explored.
19. **WASPT highlight report** was received following their meeting on 19 February 2024, with no specific issues escalated. A verbal update noted from the 2 May 2024 meeting was provided acknowledging that whilst there were open and constructive discussions it was a challenging meeting. Focus on the nature of the issued being raised and ensuring this is done in the right forum was a key issue with a resolution to meet and progress this. The committee members praised the work of the WASPT team, expressed their support for the partnership approach, and asked questions about the data quality, the feedback mechanisms, and the future plans for the WASPT.
20. In private session the Committee reviewed progress against four **suspensions over four months** which is the same number as reported in the last quarter. Each of these cases have police involvement which increases the time taken to close the investigations noting the impact on individuals. Four cases were lodged with the **Employment Tribunal** (an increase of two from the previous quarter). Members were assured on actions in place to manage these cases.



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21. The **Audit Tracker** was reviewed, and the Committee noted the update with 14 internal audit actions related to Committee were closed in quarter.
22. The reasonable assurance **Retention of Staff Internal Audit** report was received, with key matters arising including finalisation and ratification of the 'Moving on Interview' process, with a clear timetable for its roll out; and evaluation of the effectiveness of the initiatives that have recently been introduced to improve staff retention. The roll out of moving on interviews was welcomed. The **Seatbelt Action Plan**
23. Members received the **Committee Cycle of Business (CoB)** updated following the effectiveness review conducted in Q4 along with the Q1 **Monitoring Report**. The CoB for 2024/25 was approved.

## RISKS

**Risks Discussed:** The four risks within the remit of this Committee were reviewed as below:

**160** – High absence rates impacting on patient safety, staff wellbeing and the Trust's ability to provide a safe and effective service remains at a rating of 20 (5x4). Committee acknowledged that elements of the risk had been discussed throughout the Agenda including controls, mitigations and additional actions being taken.

**201** – Committee received a deep dive on this risk - Damage to the Trust's reputation following a loss of stakeholder confidence which remains at a score of 20 (4x5). The risk is inextricably linked to several of the metrics measured at PCC and is not solely related to performance and will include key issues such as the impact of diesel fumes, for example, that was discussed at length during the meeting. The latest reputation audit closed in May 2024 and evidence there is more work to do to understand our service offer. The qualitative feedback is being thematically reviewed and triangulated against intelligence from the ELT 360 and stakeholder engagement. This will inform the revised influencing plan. To continue to mitigate the risk is to position and promote WAST as a credible 'system voice', shape the media narrative and political engagement; formal and informal engagement with key stakeholders, internal communications in light of the strategy, engaging the Board, senior leaders and TUPs on their influencing role. Building confidence, improving performance and patient experience will lead to enhanced morale and improved cultural climate.

**163** – Maintaining effective and strong Trade Union partnerships remains at a score of 16 (4x4). The risk was presented in detail to the Welsh Ambulance Services Partnership Forum for the first time in May 2024 recognising this is a dynamic risk.

Risk **558** (deterioration of staff health and wellbeing in the face of continued system pressures as a consequence of workplace experiences) remains unchanged at a score of 15 (3x5).

The Committee acknowledged risks **223 and 224** overseen by the Quality, Safety & Patient Experience Committee; however, considered at each of the Board Committees given they impact every area of the Trust.

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



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Director of People and Culture Update	Operations Quarterly Report Q4	Staff Story – A View of Front Line Leadership
NHS Staff Survey	People and Culture Plan metrics update	Workforce scorecard and MIQPR
Health & Safety Report	Staff Development Outline Plan	Risk management and BAF
Deep Dive on Risk 201	Audit tracker and Retention of staff and Seatbelt Action Plan internal audit	Policies for Approval <ul style="list-style-type: none"> <li>• Homeworking Policy</li> <li>• Exit Interview Policy - reclassified SOP</li> </ul>
Cycle of business 2024/25 and monitoring report	WASPT Highlight report	

COMMITTEE ATTENDANCE				
Name	9 MAY 2024	8 AUGUST 2023	16 NOVEMBER 2023	20 FEBRUARY 2024
Ceri Jackson				
Bethan Evans				
Joga Singh				
Hannah Rowan				
Angela Lewis				
Chris Turley				
Lee Brooks	Sonia Thompson			
Liam Williams	Jonathan Turnbull-Ross			
Estelle Hitchon				
Andy Swinburn				
Rachel Marsh	Alex Crawford			
Trish Mills	Julie Boalch			
Damon Turner				
Mark Marsden				
Christian Fox	Hugh Parry			
Tim Cahalane				

	Attended
	Deputy attended
	Apologies received
	No longer member