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Ymddiriedolaeth Brifysgol GIG  
Gwasanaethau Ambiwylans Cymru  
Welsh Ambulance Services  
University NHS Trust

**CONFIRMED MINUTES OF THE PEOPLE AND CULTURE COMMITTEE  
OPEN MEETING HELD AT CARDIFF MRD AND REMOTELY  
VIA MICROSOFT TEAMS ON 12 AUGUST 2025**

**MEMBERS PRESENT:**

Ceri Jackson	Committee Chair
Bethan Evans	Non-Executive Director
Hayley Hutchings	Non-Executive Director
Hannah Rowan	Non-Executive Director

**PRESCRIBED ATTENDEES**

Estelle Hitchon	Interim Executive Director of Planning & Performance/ Director of Partnerships and Engagement
Angela Lewis	Director of Culture Change
Carl Kneeshaw	Director of People
Trish Mills	Director of Corporate Governance/Board Secretary
Penny Durrant	Deputy Director of Nursing, Quality and Governance
Christian Fox	Trade Union Partner
Damon Turner	Trade Union Partner
Marcus Viggers	Trade Union Partner

**IN ATTENDANCE:**

Julie Boalch	Assistant Director of Corporate Governance and Risk
Kat Cobley	Head of Inclusion and Engagement
Sarah Davies	Head of Change and People Insights
Colin Dennis	Chairman
Meshack Ezeadim	Aspiring Board Member Programme Member
Catherine Goodwin	Assistant Director Inclusion, Culture and Wellbeing
Paul Greatorex	Service Manager 111 ( <i>Item 7: Staff Story</i> )
Sarah Harland	Corporate Governance Officer
James Houston	Head of Strategy Development
Melfyn Hughes	Welsh Language Service Manager
Fflur Jones	Audit Wales
Alison Kelly	Business and Quality Manager
Jo Kelso	Head of Workforce Education and Development
Ferdi Lashari	Duty Operations Manager ( <i>Item 7: Staff Story EMS Response</i> )
Gregory Lloyd	Assistant Director of Clinical Delivery
Osian Lloyd	Head of Internal Audit – NWSSP
Sara Mills	Head of Culture and OD
Sonia Thompson	Assistant Director of Operations
Greg Parry	Organisational Development Manager
Sarah Parry	Business Manager, People and Culture
Alex Payne	Corporate Governance Manager

Liz Rogers Deputy Director of People and Culture  
Graham Stockford Deputy Head of Health and Safety  
Rebecca Smith Organisational Development Manager  
Ceri Wheeler Practice Coach 111 (*Item 7: Staff Story Integrated Care*)

**OBSERVERS:**

Christian Muinos Trainee Clinical Psychologist

**APOLOGIES:**

Timoth Cahalane Trade Union Representative  
Alex Crawford Assistant Director of Planning and Transformation  
Lee Brooks Executive Director of Operations  
Lizzie O'Shea Speaking Up Safely Guardian  
Rachel Marsh Interim CEO  
Mark Marsden Trade Union Partner / WASPT Co-Chair  
Andy Swinburn Executive Director of Paramedicine  
Chris Turley Executive Director of Finance  
Liam Williams Executive Director of Quality and Nursing

**1. WELCOME AND APOLOGIES**

1.1.1 The Chair welcomed members and apologies were noted.

**The Committee RESOLVED to: The apologies were noted.**

**2. DECLARATIONS OF INTEREST**

2.1 No interests were declared.

**The Committee RESOLVED to: No new declarations were declared.**

**3. MINUTES FROM THE PREVIOUS MEETING**

3.1 The Minutes from the meeting of the People and Culture Committee held on 15 May 2025 were agreed as a correct record with no amendments requested.

**The Committee RESOLVED to: The minutes of the open meeting held on 15 May 2025 were confirmed as a correct record.**

**4. ACTION LOG AND MATTERS ARISING**

4.1 The Action Log was considered:

4.2 16.4/15 May 2025 Review of TUP Risk (Risk 163) by WASPT – The action generated was to take the TU Partners' risk into the WASPT for discussion for a detailed review to assess its movement over time and consider any additional mitigation measures. Once discussed in WASPT, this will be fed back to the PCC via the WASPT AAA. Update 21/05/2025. This matter was programmed for discussion at WASPT on the 30 May 2025. The discussion held on the 30 May 2025 was fed back to the Committee via the WASPT AAA. Given this position, action proposed for closure, status updated to 'complete'.

- 4.3 18.4/15 May 2025 Feedback from Effectiveness Review: Committee Cycle of Business Monitoring Report and 2025/26 Priorities It was agreed the Committee would receive proposed priorities for consideration, via email circulation. Colleagues in the Corporate Governance Team to progress this request. Update 04/06/2025 from Trish Mills. The committee priorities for 2025/26 are a focus on equality, diversity and inclusion as well as the development of our people. This was set out in the May AAA circulated to members. Action proposed for closure, status updated to 'complete'.

**The Committee RESOLVED to: Consideration was given to the Action Log.**

## **5. DIRECTOR UPDATE (COMBINED REPORT)**

- 5.1 The Directors' update presented by Angie Lewis and Carl Kneeshaw covered several key areas. Angie highlighted positive engagement with the Aspiring Board Members programme, ongoing work on the Anti-Racist Wales Action Plan, and recognition for the digital team's achievements. Angie described efforts to widen access to roles and the successful launch of the 'WAST Way' at the recent Leadership Symposium. Angie also referenced the upcoming Mastering Diversity Conference in Cardiff on 11 September, where WAST will be hosting the "Health Zone", delivering sessions on the value of people networks and how to promote inclusion in the workspace.
- 5.2 Carl discussed visible support for staff through events such as Cardiff Pride and the Eid celebration, emphasising the importance of inclusive practices. Carl provided a detailed update on the skills mix review and the challenges in recruiting newly qualified paramedics (NQPs), explaining that in addition to the 21 original offers, an additional 35 roles have been offered as two-year fixed term contracts, resulting in 56 out of 80+ graduates having been offered employment. Ongoing collaboration with partners aims to address current and future workforce pipeline concerns. Carl also noted a major review of workforce procedures to improve safety, efficiency and staff wellbeing; including safeguarding and mentoring initiatives.
- 5.3 Both Directors stressed that diversity and inclusion are being embedded throughout the organisation's culture and operations.
- 5.4 The Committee discussed the NQP recruitment issue, creative solutions including the use of fixed term contracts for affected graduates, the importance of maintaining skill mix and service quality and the impact of these changes on organisational structures and also noted the reputational implications. Regular updates on workforce planning and skill mix, including NQP recruitment will be provided to the Committee, with ongoing consultation with Trade Union Partners and a focus on safe, sustainable service delivery.

**The Committee RESOLVED to: The Director Update Report was noted.**

**6. OPERATIONS REPORT Q4 2024/2025**

- 6.1 Sonia Thompson presented an overview of the Operations Report Q4 2025/26, key highlights as follows:
- Sonia highlighted the launch of Assemble, a new volunteer management system that improves access to volunteer demographics, availability and communication. The system was well received by volunteers and considered a significant advancement.
  - The refurbishment of the Llangunnor site was completed, with the new name "Ty Tywi". The EMS control staff also relocated from Bryn Tirion to Ty Elwy, and the life X control room solution was implemented; streamlining incident sharing with Police and other services.
  - Sonia described efforts to pilot team based working in EMS, inspired by a visit to London Ambulance Service. Workshops were held, and teams are developing pilot plans for small scale tests, with updates expected in September.
  - Significant feedback was received on the roster review process, especially regarding its impact on staff. The team is working closely with Trade Union colleagues to find a workable solution.
  - The new Emergency Ambulance Performance Framework went live, requiring review and changes to over 50 standard operating procedures. The team is now preparing for the second phase later in the year.
- 6.2 Hayley Hutchings asked about the implementation and scoping of electric vehicles (EVs). Sonia reported on the ongoing evaluation and pilot planning. Hayley also raised concerns about shift overruns, Sonia advised that while external factors such as hospital handover delays are significant, internal efficiencies and new initiatives such as Wait 45 are being pursued.
- 6.3 Hannah Rowan requested analysis on why reduced handover delays have not led to expected decreases in community wait times. It was agreed this would be taken offline as it doesn't relate to People and Culture.
- 6.4 The Chair emphasised the importance of hearing staff experiences, acknowledging positive feedback from crews on the increased number of calls responding to in a shift.

**The Committee RESOLVED to: The Operations Report Q4 2024/25 was noted.**

## **7.1 STAFF STORY: QUALITY AND SUPPORT DAY**

7.1.1 Sonia Thompson explained that Quality and Support Days are monthly events where managers connect directly with frontline staff to have open conversations, gather feedback and address operational and wellbeing concerns. Initially launched to improve seatbelt compliance, the initiative has expanded to cover topics such as health and safety, uniform standards and equipment use. These days are tailored by individual teams, with recent themes shared and future dates planned.

7.1.2 Sonia invited staff to share their experiences:

**Ferdi Lashari** (Duty Operations Manager – EMS Support) shared that Quality and Support Days have been insightful for managers, allowing them to spend time outside hospitals, listen to staff, and address morale issues related to hospital delays. These days help managers connect with staff they don't regularly see, resolve small problems like IT or iPad issues; and provide staff with someone to talk to, improving overall engagement and support. Ferdi also spoke his involvement in WAST Voices, going to hospital sites with occupational health and wellbeing teams, especially around the Christmas period, to address financial and other staff concerns.

7.1.3 **Ceri Wheeler** (Practice Coach 111 – Integrated Care) reported that Quality and Support Days have helped break down silos within the organisation, allowing staff from different areas to learn about integrated care and appreciate its complexity. These days boost staff confidence, encourage rapport between managers and staff, and inspire open communication. Ceri emphasised that managers who engage directly with staff are seen as true leaders, and staff feel respected and valued when managers invest time in them.

7.1.4 **Paul Greateorex** (Service Manager 111 – Integrated Care) stated that Quality and Support Days are essential for integrated care, having adapted the approach to fit the control centre environment. Paul explained that they use consistent questions to gauge staff welfare and job satisfaction, encourage open dialogue, and regularly share "you said, we did" responses to staff feedback. Paul highlighted the importance of face-to-face engagement, an open door policy and giving staff meaningful time for feedback, and acknowledged that these efforts have led to increased staff participation, valuable suggestions and better management of change within the team.

7.1.5 Bethan Evans supported the value of Quality and Support Days for dispersed teams but cautioned against themed days feeling imposed, preferring open ended conversations. Bethan asked if feedback, including negative responses, is being gathered to improve the initiative. Sonia confirmed that feedback is collected via a Microsoft form with both structured and narrative responses; and emphasised that all feedback is used to shape future events. Sonia also

added that a range of managers, including herself, engage in these conversations with staff and sometimes patients, with support remaining the central focus.

- 7.1.6 Angie Lewis described Quality and Support Days as one of the organisation's most effective tools for gathering valuable frontline insight, complementing other feedback sources such as HIVE and staff surveys. Angie stressed the importance of using all feedback, including less positive views, and confirmed that it is being acted on and communicated back to staff.

**The Committee RESOLVED to: Noted the staff stories and the impact of the Quality and Support Days.**

## **7.2 STAFF STORY UPDATE – MANDY MCWATT**

- 7.2.1 Angie Lewis reported on her visit to Newtown Station, praising Mandy McWatt and her team for their positive energy and the impact in maintaining morale and engagement at the station. Angie praised Mandy's exceptional contributions to the team spirit and acknowledged the ongoing good work in Newtown.

**The Committee RESOLVED to: Noted the update.**

## **8. PEOPLE AND CULTURE METRICS**

- 8.1 Angie Lewis shared highlights from the first HIVE pulse survey, which had a 9% response rate and 843 text comments focused on Care, Connect, and Value. While 63% of staff reported regular conversations, feedback showed mixed experiences around decision-making and autonomy. Angie stressed the need to clarify staff influence and role-specific autonomy, with plans to repeat the survey to improve participation and track progress. Bethan and Hayley emphasised the value of open feedback and suggested learning from high-response areas and engaging staff during support days. Angie agreed and outlined steps to boost engagement without overwhelming staff.
- 8.2 James Houston stressed the importance of using HIVE survey data to guide planning as the organisation refreshes its IMTP, highlighting the challenge of managing workload alongside transformation. Angie agreed, advising that the Executive Leadership Team (ELT) regularly addresses these pressures and emphasised using survey insights within Directorates to support staff and improve engagement, particularly in areas with low participation.
- 8.3 Penny Durrant raised concerns about survey fatigue, referencing low engagement with the current violence and aggression survey, and suggested shared learning across Directorates to improve response rates. Angie advised that Sarah Davies, Head of Change and People Insight, is coordinating survey

timing and integrating staff data to avoid overwhelming staff. Angie also committed to following up with Penny outside the meeting to share effective engagement strategies and ensure a coordinated organisational approach to survey planning.

- 8.4 Carl Kneeshaw shared key people and culture metrics, highlighting a positive drop in sickness absence, the lowest since March 2021, attributed to a supportive environment and wellbeing initiatives. Statutory training compliance reached 89.13%, exceeding Welsh Government targets, and 71% of relevant staff signed up for Mandatory In Service Training (MIST). Personal Appraisal Development Review (PADR) compliance dipped slightly due to the WAST Way rollout but is expected to recover. Turnover remains stable at 8%, indicating general staff satisfaction. These metrics offer a snapshot of organisational health and performance.
- 8.5 Hayley Hutchings raised concerns about recruitment delays potentially leading to lost candidates and asked what actions were being taken to improve timelines. Carl explained that while overall time to hire is in line with other NHS organisations in Wales, delays often occur during shortlisting due to limited proactive planning by line managers. The recruitment team is encouraging clearer timelines, and there's no evidence of candidate loss, as most applicants remain committed. Carl added that a new Head of Strategic Workforce Planning, Systems and Recruitment will be appointed to develop a Recruitment Strategy, review the process and explore AI solutions.

**The Committee RESOLVED to: The People and Culture Metrics were received and commented on progress to date.**

## **9. MONTHLY INTEGRATED QUALITY AND PERFORMANCE REPORT**

- 9.1 James Houston provided an update on the Monthly Integrated Quality and Performance Report, acknowledging that many Committee members may have already seen it through other forums. James highlighted key metrics including 249 safeguarding risks in June (93% processed within 24 hours), five RIDDOR incidents mainly related to manual handling and slips, and 42 violence/aggression incidents, mostly involving threatening behaviour. James reported a downward trend in shift overruns and handover delays, attributing improvements to work within specific health boards and expressing optimism about new initiatives.
- 9.2 Estelle Hitchon reported feedback from other Committee Chairs about the MIQPR report being duplicative across multiple Committees and Board meetings, and proposed convening Committee Chairs, including Colin Dennis as the Chair of the Trust Board, to discuss more effective reporting methods to avoid repeated conversations and ensure relevant indicators are reported efficiently.

- 9.3 The Chair emphasised that, although many metrics in the People and Culture report are not green, the Committee's focus is on seeking assurance regarding ongoing work in this area. The Chair noted disappointment regarding sickness rates not reaching the target, but stressed that keeping people in work is the right priority. The Chair also supported the idea of improving reporting and assurance processes.

**The Committee RESOLVED to: considered the June 2025 Integrated Quality & Performance Report.**

**10. DEEP DIVE ON VIOLENCE AND AGGRESSION**

- 10.1 Penny Durrant presented a Deep Dive on Violence and Aggression (V&A) which highlighted its legal recognition as a significant occupational risk and its strategic importance across the organisation. Penny outlined operational challenges, particularly in unpredictable environments and contact centres, where verbal incidents are common and under reporting persists due to workload and perceptions. A new hashtag-based reporting system is being proposed to ease logging. While moderate/severe harm incidents remain low, there's a shift toward prolonged verbal aggression with delayed psychological impacts. Case management focuses on balancing immediate resolution with long term prevention, supported by policy compliance and timely investigations. Staff value visible leadership, prompt follow up, and relevant training, which are now standard. Volunteers have access to support, though reporting improvements are underway. Training needs to be more flexible and role-specific, and national collaboration continues. A sector-wide survey is in progress but requires better promotion. Media attention is growing, reinforcing zero tolerance. Forward priorities include enhancing training, boosting survey responses, sustaining national engagement, and ensuring strong staff involvement in shaping prevention and support.
- 10.2 Estelle highlighted that the "With Us, Not Against Us" campaign, developed by WAST, has become a leading example across UK ambulance services and is now adopted nationally. WAST has been proactive in publicising legal outcomes of V&A cases, ensuring confidentiality while using open court cases as a deterrent. Estelle emphasised WAST's leadership in national violence and aggression prevention efforts.
- 10.3 Bethan Evans thanked Penny for the V&A presentation, stressing its importance and noting that staff should not face abuse at work. Bethan found the decrease in reported incidents and the geographical data interesting. Bethan enquired about post-incident debriefing and support for staff affected by V&A, specifically the timeliness of support and whether managers receive specific training for these debriefs. Graham Stockford responded that the V&A function conducts weekly reviews of all incidents, with case managers providing tailored support to affected staff and

managers, especially for urgent cases. Graham reported that case managers are engaging in courses to help managers develop the necessary skills and empathy. Bethan followed up by asking if there is dedicated training for managers in conducting debriefs, Graham explained that this is a work in progress, with current case management demands limiting the ability to implement more effective training at present.

- 10.5 Penny recognised that, similar to the "Speaking Up Safely" issue, increased reporting is encouraged but resources are limited, and emphasised the goal of offering bespoke training for managers to handle incidents earlier. Angie highlighted a significant increase in reported V&A incidents, suggesting underreporting remains an issue, and stressed the need to make reporting easier. Angie added that staff in contact centres have become accustomed to a concerning level of abuse, and management is working to improve follow-up and debriefing. Both Penny and Angie agreed on the importance of quick, efficient reporting and equipping managers to identify red flags and support staff wellbeing. Sonia Thompson highlighted the importance of staff reporting V&A incidents and seeing that action is taken, describing it as a strong message.

**The Committee RESOLVED to:**

- 1. The Deep Dive report was received and discussed.**
- 2. The Committee were assured by the findings of the Deep Dive and the actions being taken to minimise the impact of V&A incidents on staff, including strengthened case management, improved data insight, targeted training and ongoing partnership with Police and national forums were noted.**

**11. PEOPLE DEVELOPMENT PLAN**

- 11.1 Jo Kelso explained that the People Development Plan, delayed due to work on the Strategic Workforce Plan, is now progressing and involves mapping professional groups, engaging staff through focus groups, supporting career movement and ensuring time for staff development, with the Committee asked to note progress and endorse the approach.
- 11.2 Greg Lloyd said the People Development Plan is helpful, especially for paramedics, as it provides clear career pathways and supports workforce retention within WAST and recognised the importance of this approach given current challenges with newly qualified paramedics and ongoing discussions about their roles.
- 11.3 Hannah Rowan expressed support for the People Development Plan, highlighting its proactive approach to career progression and its value in addressing generational differences in career expectations. Hannah welcomed the plan's focus on healthy, learning oriented career paths, even

when traditional advancement isn't available, and looks forward to seeing staff feedback as the plan is shared more widely.

- 11.4 Colin Dennis discussed the need for the organisation to adapt to longer working lives and changing job roles, including staff moving from field to call centre positions. Colin stressed the importance of preparing for rapid changes in work due to artificial intelligence and technology, and ensuring staff have opportunities to develop new skills for future roles.
- 11.5 The Chair welcomed the direction of the People Development Plan, highlighting its importance for staff retention and wellbeing, particularly in light of recent job changes among paramedics, and concluded by affirming the significance and urgency of workplace adaptability, thanking Jo for her presentation and acknowledging the value of the discussion.

**The Committee RESOLVED to:**

- 1. Noted the progress made to date in implementing the People Development Plan & development of the associated Policy.**
- 2. Supported continued development of professional group frameworks and professional proficiencies.**
- 3. Endorsed the next phase of work: piloting individual development plans, identifying desirable transferable skills and finalising professional groups.**

**12. END OF SEASON FLU CAMPAIGN REPORT**

- 12.1 Greg Lloyd reported a second year of decline in staff flu vaccination rates, consistent with national and international trends. Despite this, over 1000 staff were vaccinated internally, with an overall uptake of 28.9%. Feedback from staff included concerns about too many vaccinations, health issues post-COVID, perceived lack of need, non-patient-facing roles, vaccine fatigue, conspiracy concerns and sickness recorded after vaccination.
- 12.2 Challenges included reduced occupational health clinics and fewer peer vaccinators completing training. Greg expressed his gratitude to the occupational health teams and peer vaccinators for their efforts in maintaining the vaccination programme despite these challenges.
- 12.3 Positive steps included improved volunteer access and successful large event clinics. Recommendations for next year focus on better accessibility, more peer vaccinators, dedicated clinics and improved communication.

- 12.4 Bethan Evans expressed disappointment with the overall flu vaccination rate, particularly among patient facing staff, and asked Greg about planning for the upcoming campaign, including progress, vaccine procurement and new engagement strategies. Greg confirmed that planning is on track, with a meeting scheduled to finalise plans and recommendations, adding that the trivalent vaccine has been procured Wales-wide by Welsh Government, and they are awaiting updates to ESR training modules for peer vaccinators.
- 12.5 The Chair commented that Greg's report was very comprehensive, acknowledging that the vaccination rate is not where they would like it to be, but expressed assurance that the challenges have been identified and steps are being taken to address them.
- 12.6 Catherine Goodwin reported that additional assurance was provided by meeting with the Behavioural Science Unit at Public Health Wales to gain insights on increasing vaccine uptake and advised of an upcoming meeting with Greg and the team to further discuss improvements.

**The Committee RESOLVED that: The End of Season Flu Campaign Report was noted.**

**13. WASPT HIGHLIGHT REPORTS – 30 MAY 2025 AND 24 JULY 2025 (to include Terms of Reference 2025/26)**

- 13.1 Christian Fox provided key highlights of the July meeting as follows:
- The July WASPT meeting covered updates on leadership, costings, union perspectives and operational support.
  - There was a correction to previously reported Trade Union activity costs, clarifying the difference between base pay and overtime backfill, with assurance provided by Carl Kneeshaw, who advised that previously reported costings were incorrect because they combined base pay and overtime backfill figures, resulting in an inflated total. Carl explained that the actual cost is somewhere between the two, and finance colleagues have now separated the figures to provide a more accurate breakdown
  - Trade Unions discussed the potential for industrial action following the Welsh Government pay review, advising members to prepare and assess voting intentions.
  - Operational updates included positive outcomes from ACAS colleagues responding to high-acuity calls, with a significant proportion acting as first responders.
  - The report aimed to provide assurance, clarify financial data and update on union and operational activities.
- 13.2 The Chair thanked Christian for his summary and confirmed that the WASPT Terms of Reference were approved by the Trust Board at the end of July 2025.

**The Committee RESOLVED to:**

- 1. The WASPT Highlight Reports from 30 May 2025 and 25 July 2025 were noted.**
- 2. The Terms of Reference were noted in line with the approval at Trust Board.**

#### **14. CULTURAL THEMES AND TRENDS REPORT**

- 14.1 Carl Kneeshaw summarised the Cultural Themes and Trends Report by highlighting employee relations data, including 59 new disciplinary cases, mainly for inappropriate behaviour, and 26 new R&R cases, with a spike linked to roster review concerns. Carl reported an average case closure time of 21 days, adding that some take longer due to external involvement. Sexual safety concerns accounted for less than 1% of new cases and are trending downward. The new “moving on conversations” process has improved engagement and feedback from leavers, while the “Speak Up Safely” initiative saw 48 concerns raised, mostly around incivility, bullying and inappropriate behaviour, with over half resolved and learning shared across teams. These efforts collectively support a compassionate, inclusive, and high-performing workplace culture.
- 14.2 Damon Turner welcomed the Cultural Themes and Trends Report and asked whether “moving on conversations” were conducted face-to-face or via a form, and questioned the variation in response rates across departments, recognising higher returns in medical and clinical areas. Carl explained that individuals can choose their preferred method, face-to-face or form, and that while it’s too early to identify trends, engagement tends to be higher when staff have feedback or are leaving under a process. Carl added that more data over time will help improve participation and communication. In response to Damon’s query about whether retire-and-return staff are included, Carl clarified that the process currently covers only those leaving the organisation, but this would be double-checked.

**The Committee RESOLVED that: Accepted and noted the contents of the Cultural Themes and Trends Report and the supporting presentation.**

#### **15. SPEAKING UP SAFELY REPORT**

- 15.1 Catherine Goodwin presented the Speaking Up Safely Annual Report, key highlights as follows:
- WAST is the first organisation in Wales to appoint a full time Guardian, which has led to increased awareness and engagement with the Speaking Up Safely process.
  - Over the past year, 113 concerns were raised (56% directly to the Guardian, 44% via the working confidence form, which starts anonymously).
  - Most concerns relate to inappropriate behaviours, bullying and wellbeing, with operational colleagues most represented both as speakers and as the subject of concerns.

- There has been a shift towards more openness post contact with the Guardian, with most concerns moving from confidential or anonymous to open or resolved.
  - Key barriers remain such as fear of retribution, perceived bias and confidentiality concerns. Work is ongoing to address these, including piloting a detriment risk assessment and improving feedback mechanisms.
  - Lessons learned are shared regularly, and there is a focus on supporting protected groups and improving confidentiality around staff information.
  - The organisation is working to ensure timely follow-up, enhance manager training and maintain consistency and transparency in disciplinary processes.
  - Incivility is recognised as an ongoing issue, with efforts to promote kindness and support across the organisation.
- 15.2 The Chair expressed assurance from quarterly meetings with Catherine, Angie and Carl and confirmed the organisation is on the right track with development of the Speaking Up Safely framework. The Chair acknowledged ongoing concerns about confidentiality and detriment, noting these are challenging areas that require time to address. The Chair also emphasised that while progress and successes should be celebrated, the journey is long and continuous improvement is needed. The importance of visible and intentional leadership in maintaining momentum and progress on Speaking Up Safely was highlighted.
- 15.3 Bethan Evans commended the openness and courage reflected in the Speaking Up Safely Annual Report, recognising its vital role in driving cultural change within WAST. Bethan acknowledged that the report offers strong assurance through its transparency around challenges, expressing confidence in the team's continued progress. Whilst recognising the discomfort often involved in this work, Bethan praised the organisation for confronting and documenting difficult issues rather than avoiding them, and thanked Catherine, the team, and the wider organisation for their determination and ongoing support of the initiative.
- 15.4 Hannah Rowan enquired whether data from the Speaking Up Safely initiative could be used to identify specific departmental challenges and whether the data could be disaggregated to pinpoint hotspots and guide targeted interventions. Catherine explained that current data volumes are too small to identify clear patterns or specific departments, though early signs are emerging. Catherine added that conversations with staff who raise concerns sometimes lead to suggestions for local initiatives or training, and in some cases, managers are engaged based on these discussions.

- 15.5 The Chair concluded by asking the Committee to take assurance from the Annual Report and endorse the integration of Speaking Up Safely principles into broader leadership, confidentiality and equity and inclusion strategies, confirming that the Committee agreed to this endorsement.

**The Committee RESOLVED that:**

- 1. Received assurance from the preparation of the Speaking Up Safely Annual Report for 2024-2025 in relation to the Speaking Up Safely arrangements in the Trust.**
- 2. Endorsed the Trust wide integration of the Speaking Up Safely (SUS) principles into leadership development, confidentiality practices and equity and inclusion strategies.**

**16. STRATEGIC EQUALITY REPORTS 2024/25**

- 16.1 Angie Lewis introduced the Strategic Equality Plan Annual Report, Gender Pay Gap Report and Workforce Diversity Reports for discussion and endorsement ahead of their submission to the Trust Board for approval. Angie acknowledged past EDI concerns while noting this year's progress and ongoing challenges and expressed gratitude to Kat Cobley and the team before handing over for the presentation.
- 16.2 Kat Cobley presented the Strategic Equality Reports, key highlights as follows:
- Kat highlighted significant progress in equality, diversity, and inclusion (EDI) over the past year, noting many small wins and examples of good practice that collectively show a cultural shift in the organisation.
  - Kat emphasised the statutory requirement to publish the annual report, gender pay gap, and workforce diversity data, outlining the timeline and governance process for these reports.
  - Key achievements included the growth of eight people networks (including Welsh language), increased staff and community engagement and impactful events led by the Black, Asian, and Minority Ethnic network.
  - Leadership and culture improvements were acknowledged, with EDI now more embedded in leadership programs, symposiums and executive-level priorities.
  - The organisation received external recognition, such as being shortlisted for the Health Service Journal (HSJ) award for Inclusive Recruitment, winning an HPMA Allyship and Active Bystanding training, and achieving the Stonewall Bronze Award and the Carer Confident Level 1. Training initiatives such as allyship, bystander and sexual safety training are being rolled out, with evidence of positive staff engagement and behaviour change.
  - Workforce diversity metrics showed small but positive increases in representation of ethnic minorities, disabled staff, LGBTQ+ staff, and women, though some groups remain underrepresented compared to the Welsh population. The gender pay gap decreased slightly but remains an area for further work.

- Community engagement was strong, with targeted outreach at events such as Pride and the Big Halal Expo, and initiatives supporting carers and those with learning disabilities.
  - Service user impact was demonstrated through improved access, training, and resources, such as the learning disability flagging system and accessible communication standards.
  - Challenges included attendance at training, engagement with senior leaders, financial constraints, and ongoing underrepresentation in the workforce. Mitigations include targeted training delivery and continued rollout of inclusive recruitment.
  - Kat concluded with a preview of upcoming actions, including further rollout of the inclusive recruitment model, disability passport scheme and continued focus on accessible communication and diversity initiatives.
- 16.3 Members welcomed the progress in EDI, praising its openness and depth, while raising concerns about gender pay gap clarity, representation of non-binary and trans colleagues, and the underrepresentation of women in senior roles; emphasising the need for visible leadership, intersectionality, and inclusive messaging, with suggestions to improve data transparency and address organisational barriers.
- 16.4 Kat acknowledged system limitations in gender reporting, explaining influences on the gender pay gap, and outlining initiatives such as leadership development and qualitative surveys. Kat reinforced that all EDI activities are open to everyone and highlighted growing engagement from managers.
- 16.5 Angie Lewis stressed that safety at work is foundational to EDI, noting that some colleagues feel less safe than others. Sara shared that the “WAST Way” leadership programme will use EDI data to shape future initiatives and ensure better representation. The Chair raised questions about the necessity of disability passports and strategic board support, prompting further reflection. Kat also noted efforts to promote intersectionality through network collaboration and inclusive training.
- 16.6 The Chair confirmed that the Committee endorsed the Strategic Equality Plan Annual Report, the Gender Pay Gap Report and the Workforce Diversity Report for 2024/25 for onward submission to the Trust Board for approval, before publication.

**The Committee RESOLVED that: The Committee discussed and endorsed the Strategic Equality Plan Annual Report for 2024/25, Gender Pay Gap Report 2024/25 and Workforce Diversity Report for 2024/2025 for their onward submission to the Trust Board for approval.**

## **17. WELSH LANGUAGE ANNUAL REPORT 2024/25**

17.1 Melfyn Hughes delivered an overview of the Welsh Language Annual Report 2024/25, key highlights as follows:

- The Trust has implemented a new Welsh Language Policy to foster a bilingual ethos, improve compliance with Welsh language standards and provide an active offer.
- Strategic alignment has been strengthened, with the Welsh Language Advisory Group now reporting to the EDI Steering Group.
- Welsh language call handling performance has significantly increased from 18% to 45% in the previous year and remains stable at 45.7%, though overall demand for Welsh Language calls is low. Improvement plans include better call handler profiling and opt-out flexibility for callers.
- Non-Emergency Patient Transport Services (NEPTS) call handling performance declined from 89% to 77% due to fewer Welsh-speaking call takers, and recruitment of Welsh speakers is being prioritised as part of the strategy for 2026–27.
- The Trust has established a Welsh Language standards compliance baseline, focusing on correspondence, document publication, signage and reception services, with good compliance noted in correspondence and signage.
- Upcoming deliverables include a gap analysis across services and the development of a Welsh Language clinical consultation plan.

17.2 Bethan Evans thanked Melfyn for his leadership in promoting the Welsh language and emphasised the importance of developing the clinical consultation plan. Melfyn explained that the team is establishing a baseline and determining the plan's placement within the organisation.

17.3 Trish Mills echoed thanks to Melfyn and recognised Kate Evans for her translation work, clarifying that the clinical consultation plan is a 5 year requirement with ongoing discussions to ensure it addresses patient safety and service changes.

17.4 The Chair acknowledged the progress made, highlighted the need to endorse the Annual Report and the Year 3 "More Than Words" Action Plan, and confirmed the committee's support.

### **The Committee RESOLVED to:**

- 1. Endorsed the Annual Report 2024/25 and recommends for approval by the Trust Board and for publishing the report on the Trust's website.**
- 2. Received the Year 3 'More Than Just Words' Action Plan Progress Report for assurance.**

## **18. RISK MANAGEMENT AND BOARD ASSURANCE FRAMEWORK**

- 18.1 Julie Boalch presented the current risks under the Committee's oversight, adding that the data had been shared with the Trust Board and is now progressing through governance processes for executive sign-off. Julie highlighted several initiatives discussed earlier in the meeting, such as sickness absence trends, well-being support, flexible working, quality and support days and inclusive practices; which are all actively mitigating these risks.
- 18.2 Julie reported that risks 163 (Trade Union Partnerships) and 558 (Staff Health and Wellbeing) have been discussed at relevant meetings, with risk 201 (Reputational Harm) is planned for a detailed review in August to consider separating stakeholder confidence and patient experience into distinct risks.
- 18.3 The Chair enquired as to the reasons for revised dates on several actions within risk 160 (High Absence Rates), seeking clarification on delays. Carl Kneeshaw explained that delays in completing some risk actions, such as those in risk 160, are due to reduced workforce and vacancies within the People Services Team, requiring prioritisation of immediate cases over other actions. Carl reported successful recruitment but anticipated another vacancy and advised that he and Liz Rogers would review dates to ensure prioritisation of higher risks.

**The Committee RESOLVED to: Considered and discussed the contents of the report. The Chair confirmed that assurance on the risks has been received, acknowledging that risk topics had been discussed extensively throughout the agenda.**

## **19. AUDIT TRACKER Q1 2025/26 REPORTING**

- 19.1 Trish Mills reported that no audit actions were closed this quarter, though work is ongoing for all items and some were close to completion, including Speaking Up Safely actions which can now be closed due to report presentations.
- 19.2 Trish emphasised that the lack of closures is not due to inactivity but to resourcing issues and dependencies, such as the resourcing policy being linked to e-timesheets. Trish reassured the committee that there should be no concerns, as progress is being made, and noted that some actions on volunteer governance were closed ahead of schedule.
- 19.3 The Chair confirmed there were no questions or concerns raised and asked the Committee to receive assurance and note that four actions are on their second and final revision date.

**The Committee RESOLVED to:**

- 1. Received assurance on the monitoring of management actions to address recommendations in the Tracker, noting any revised dates for actions.**
- 2. Noted that four actions are on their second and therefore final revision dates.**

**20. CYCLE OF BUSINESS MONITORING REPORT AND REVIEW OF PRIORITIES 2025/26**

- 20.1 Trish Mills explained that the WRES report is deferred to November due to the timing of feedback from the Welsh Government, and the Revalidation and Registration Report will also come in November as the HCPC Revalidation has only just closed, adding that these will be scheduled appropriately next year. Trish also stated that the agenda's focus on EDI and development reflects committee priorities, as seen throughout the meeting.

**The Committee RESOLVED to: These matters were noted.**

**21. WASPT MINUTES – MARCH 2025 AND MAY 2025 MEETINGS**

- 21.1 Received.

**The Committee RESOLVED to: The minutes were received.**

**22. COMMITTEE HIGHLIGHT REPORT – 15 MAY 2025 MEETING**

- 20.1 Received.

**The Committee RESOLVED to: The Committee Highlight Report 15 May 2025 was received.**

**23. SOCIAL PARTNERSHIP REPORT**

- 23.1 Damon Turner reported that since the Social Partnership Report was published, some TU members and managers have participated with Welsh Government and other organisations to develop initiatives that will help position the organisation as an exemplar employer in Social Partnership.

**The Committee RESOLVED to: The Social Partnership Report was noted.**

**24. REFLECTIONS AND SUMMARY OF DECISIONS/ACTIONS**

- 24.1 Reflections on the meeting focused on the quality and effectiveness of the papers, with participants noting that concise and well-written reports from the People and Culture Directorate enabled meaningful discussion and assurance. The Chair and others highlighted the value of intentional agenda structuring, which helped connect topics such as health and safety and EDI and noted that the deep dive into the violence and aggression risk was especially important. There was consensus that the meeting allowed valuable contributions,

avoided information overload, and that the staff story presentation provided a practical example of positive impact, demonstrating the benefits of hearing directly from staff about initiatives that make a difference.

**25. ANY OTHER BUSINESS**

25.1 None declared.

**26. DATE OF THE NEXT MEETING**

26.1 The next meeting is scheduled for the 13 November 2025.

**The meeting closed at 14:40**