

**CONFIRMED MINUTES OF THE PEOPLE AND CULTURE COMMITTEE MEETING
(OPEN SESSION) HELD AT CARDIFF MRD AND REMOTELY VIA MICROSOFT
TEAMS ON 15 MAY 2025**

Members:

Ceri Jackson Non-Executive Director and Chair (MRD)
Hayley Hutchings Non-Executive Director (virtual)

Prescribed Attendees:

Lee Brooks Executive Director of Operations (virtual) (from Item 6)
Alex Crawford Assistant Director of Planning and Transformation (MRD)
Christian Fox Trade Union Partner (MRD)
Estelle Hitchon Director of Partnerships and Engagement (MRD) (left after Item 18)
Carl Kneeshaw Director of People (MRD)
Angela Lewis Director of Culture Change (MRD)
Trish Mills Director of Corporate Governance/Board Secretary (MRD)
Andy Swinburn Executive Director of Paramedicine (virtual)
Chris Turley Executive Director of Finance and Corporate Resources (virtual)
Damon Turner Trade Union Partner (virtual)
Marcus Viggers Trade Union Partner (MRD)

Attendees:

Julie Boalch Assistant Director of Corporate Governance and Risk (virtual) (from Item 15)
Kathryn Cobley Head of Inclusion & Engagement (virtual)
Sarah Davies Head of Change and People Insights (virtual)
Penny Durrant Deputy Director of Nursing, Quality and Governance (virtual)
Sarah Harland Corporate Governance Officer (virtual)
Rhodri Jones Chair of VSG (virtual) (Item 12 only, joined at end of item)
Alison Kelly QPSE Business Manager (virtual)
Jo Kelso Audit Wales Head of Workforce Education & Development (virtual)
Mandy McWatt Emergency Ambulance Practitioner (virtual) (Item 7 only)
Sarah Parry Directorate Business Manager - P&C (virtual)
Alex Payne Corporate Governance Manager (MRD)
Felicity Quance Deputy Head of Internal Audit (virtual) (left after Item 18)
Liz Rogers Deputy Director of People and Culture Directorate (MRD)
Nicola White Head of Health & Safety (virtual) (Item 14 only)
Jenny Wilson Volunteering Manager (virtual) (Item 12 only)

Observers:

Skye Banks Compliance & Assurance Administrator (virtual)

Apologies:

Jason Killens	Chief Executive Officer / WASPT Co-Chair
Tim Cahalane	Trade Union Representative
Bethan Evans	Non-Executive Director
Fflur Jones	Audit Wales, Performance Audit
Lizzie O'Shea	Freedom to Speak Up Lead Guardian
Hannah Rowan	Non-Executive Director
Osian Lloyd	Head of Internal Audit
Mark Marsden	Trade Union Partner
Sara Mills	Head of Culture & OD
Liam Williams	Executive Director of Quality and Nursing

1. WELCOME AND APOLOGIES

- 1.1 The Chair welcomed members and 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 18 February 2025 were agreed as a correct record with no amendments requested.

The Committee RESOLVED TO:

To approve the Minutes of the People and Culture Committee held on 18 February 2025.

4. ACTION LOG AND MATTERS ARISING

- 4.1 The Action Log was discussed and updated.

5. DIRECTOR UPDATE (COMBINED REPORT)

- 5.1 Angie Lewis provided a Director Update focusing on several key areas. Angie announced the launch of a SharePoint page for change management tools and techniques, encouraging committee members to explore this resource. Additionally, Angie highlighted the development and rollout of training on sexual safety and sexual harassment by Kathryn Cobley and Hayley Jones Dunne, noting a well-attended session with Trade Union Partners. Angie also mentioned the upcoming launch of our WAST Way development programme on 28 May 2025, which will provide an interactive platform for identifying development channels and leadership focus for everyone.

- 5.2 Carl Kneeshaw provided an update on several key areas and announced the successful recruitment into the Essential Skills team, which aims to enhance colleague experience and invest in people by offering expertise in literacy, numeracy, digital literacy, mentoring and coaching. The team is looking to recruit additional colleagues, including a bilingual essential skills tutor and a digital skills trainer. Carl discussed the launch of a health diagnostic pilot programme focusing on cardiovascular disease awareness and prevention for staff aged 46 and above, which includes face-to-face consultations and personalised health reports. Carl mentioned ongoing work related to shift overruns and the financial challenges the organisation is facing, highlighting efforts to address these issues, including a report on the skills mix on emergency ambulances due at the end of May 2025.
- 5.3 Ceri Jackson asked Carl Kneeshaw two questions regarding the staff wellbeing initiative. First, Ceri enquired if the initiative was linked with any charities, such as the Stroke Association, which could provide helpful resources. Second, Ceri asked about the percentage of staff that fall within the 46+ age group targeted by the health diagnostic programme. Carl responded that while he did not have the exact percentage, a significant proportion of staff fall within this age bracket. He also mentioned that the initiative includes signposting to other charities and support services, and that the team will bring back data on the uptake of the programme to a future meeting.
- 5.4 The discussion emphasised the Non-Executive Directors (NEDs) participation in various events and initiatives within the Directorate to provide useful context and engagement opportunities. Ceri Jackson suggested inviting NEDs to events such as leadership symposiums. Angie mentioned that our 'WAST Way' launch would be virtual, with face-to-face sessions on crucial conversations and effective check-ins, encouraging NEDs to engage with colleagues and practice skills. Angie highlighted that by participating in development activities with colleagues this would provide valuable insights into the effectiveness of the training and specific communications would be sent to NEDs to encourage their attendance. Hayley Hutchings added that NEDs had already been invited to some research and innovation events.

The Committee RESOLVED to: The report was noted.

6. STAFF STORY – MANDY McWATT – IMPACT OF MENOPAUSE

- 6.1 Jacqueline McWatt, known as Mandy, is an Emergency Ambulance Practitioner (EAP) at Newtown ambulance station with 14 years' experience at the Trust. Mandy's menopause journey began after a hysterectomy at 29, leading to perimenopause systems in her late 30's. Despite these challenges, Mandy joined the Trust at 48 and faced difficulties during training, including memory issues, stress, hot flushes, mood swings and concentration problems. Mandy's

GP prescribed Hormone Replacement Therapy (HRT), which alleviated her symptoms, allowing her to continue working as an Emergency Medical Technician (EMT) and aspire to become a paramedic, though she faced setbacks due to recruitment criteria and not organisational priorities. From 2022 onwards, Mandy campaigned for WAST to consider the introduction of a band 5 technician role and this role was finally introduced in late 2024 and she completed the first EAP course in January 2025, learning new skills including mentoring new EMT students. Now a culture champion at Newtown Station, Mandy is affectionately known as “mother”, valuing her colleagues and striving to embody the Trust’s behaviours, contributing to a supportive and energetic work environment. Mandy’s story highlights her resilience, dedication to her role and the importance of support during challenging health journeys.

- 6.2 Hayley Hutchings enquired about support for staff experiencing menopause symptoms, Mandy suggested posters and awareness materials could be provided. Kathryn Copley mentioned the All Wales Menopause Policy and efforts to raise awareness and provide training.
- 6.3 Estelle Hitchon expressed gratitude for Mandy's positivity and commitment, adding that several Executive Leadership Team (ELT) members have also experienced menopause and highlighted the role of Trade Union Partners in raising awareness.
- 6.4 Damon Turner congratulated Mandy on her EAP course and encouraged further progression, clarifying that the EAP role decision was made by members, not the trade unions, and mentioned trade union efforts to provide sanitary products for staff.
- 6.5 Andy Swinburn shared personal reflections on the importance of menopause awareness and encouraged Mandy to consider her professional development within the Trust. Mandy was encouraged not to discount her long-standing aspiration to become a paramedic merely because of her age, which she felt was now a barrier to commencing training.
- 6.6 Angie and Carl thanked Mandy for her bravery in sharing her story, emphasising the importance of amplifying employee voices, staff awareness and promoting inclusion and continuous learning within the organisation.

The Committee RESOLVED to: Mandy McWatt’s story was well received and highlighted her personal resilience, dedication to her role and the importance of compassionate practices and support from your employer during challenging health events.

7. OPERATIONS REPORT Q4 2024/2025

- 7.1 Lee Brooks highlighted key points in his Operations Report. The Community Welfare Responder Project presentation at the Ambulance Leadership Forum (ALF) conference garnered regional interest. The Specialist Operations Response Team (SORT) expansion filled two band 7 posts, including a senior paramedic. Four scrutiny sessions for the Manchester Arena Inquiry are complete, with feedback expected by August 2025, and four actions will be managed through the corporate risk process. Emergency Medical Services (EMS) sickness absence rates have decreased due to consistent policy application and departmental improvements. Positive feedback was received post-winter for the EMSC restructure, with a formal review planned. The Organisational Change Process for Advanced Paramedic Practitioners is complete, and the team has transitioned to the Clinical Directorate. Turnover for band 3 entry level roles remains high due to the challenging nature of call handling. Emergency Ambulance Practitioner training has progressed well, with most participants completing the programme. The Glangwilli end of shift pod has been redeployed to reduce shift overruns and improve meal breaks. The Non-Emergency Patient Transport Service (NEPTS) roster review is ongoing, with the team actively responding to feedback.
- 7.2 Ceri Jackson asked Lee Brooks about the sickness trajectory and specific challenges in certain areas. Lee explained that while the overall organisational sickness rate is improving, specific areas like EMSC and Integrated Care still face challenges, which are consistent across these areas and not unique to specific sites. He emphasised the importance of a cultural shift towards keeping people at work rather than managing non-attendance and highlighted improvements in the working environment and management practices.
- 7.3 Estelle Hitchon asked about preparing new recruits for the challenging nature of call handling roles. Lee Brooks acknowledged the difficulty of the role, and the efforts made to improve recruitment processes, including open sessions and different testing methods. Despite these attempts, some recruits still find the role unsuitable after starting. Lee suggested that future convergence of call handling protocols might offer more rewarding experiences for call handlers, potentially improving job satisfaction and retention.

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

8. NHS STAFF SURVEY AND ACTION PLAN

- 8.1 The NHS Staff Survey discussion highlighted several key takeaways and decisions. Priority areas identified included addressing burnout and wellbeing, ensuring regular meaningful check-ins with managers and increasing staff involvement in change and decision making.
- 8.2 Directorate level data was shared with leads to develop actions in response to local themes. Free text responses revealed issues such as the volume of competing priorities, the emotional toll on staff, the need for consistent development pathways and the impact of barriers and positive role models on shaping culture.
- 8.3 There was a sharp rise in reports of abuse from patients and the public, highlighting the need to understand the gap between informal sharing in the survey and formal reporting. Only 30% of colleagues felt involved in decisions affecting their work, indicating a need to build mechanisms to support people to feel heard.
- 8.4 A robust communication and engagement plan was proposed to ensure visibility and connection between staff feedback and actions taken. Leadership development will focus on improving engagement and communication with staff, ensuring consistent practices across the organisation. It was emphasised that there is a responsibility on both the organisation to support staff and on individuals to flag concerns.

The Committee RESOLVED to:

- 1) The Survey and Action Plan were noted.**
- 2) Angela Lewis to explore potential reasons for the gap in terms of informal sharing of incidents and willingness to comment during staff survey and formal internal reporting.**
- 3) Sarah Davies advised she will develop a "We Said, We Did" document to connect staff feedback with actions taken; and**
- 4) Estelle Hitchon advised she will focus on improving engagement and communication practices across the organisation.**

9. INTERNAL AUDIT REPORT: SPEAKING UP SAFELY

- 9.1 Felicity Quance presented the key findings from the Speaking Up Safely Internal Audit Report, received by the Audit, Risk and Assurance Committee (ARAC) on 01 May 2025. The main high-priority finding was the need for better triangulation of concerns data from all sources and strengthening the reporting of concerns to provide effective oversight, including outcomes, themes, trends and timelines of actions. Other points included developing an action plan for additional actions identified from the self-assessment, ensuring appropriate pathways for lessons learned, enhancing training and development to embed the Speaking Up Safely framework into all operations,

and expanding reporting to ensure compliance with timescales and that staff feel comfortable speaking up.

- 9.2 Angela Lewis provided context on the adoption of the Speaking Up Safely framework, highlighting that the Trust is the only organisation in Wales to fully adopt the NHS England model by appointing a guardian. Angela emphasised the continuous process of identifying and addressing gaps, the importance of triangulating data while maintaining confidentiality and ensuring themes are identified and addressed appropriately.
- 9.3 Ceri Jackson reflected on the challenges of auditing the Speaking Up Safely process, noting that due to the sensitivity of the information and the reliance on individuals' willingness to share, it's not feasible to capture everything in a single report. Ceri emphasised that assurance should come from ongoing engagement with senior leaders and the visibility of actions taken in response to concerns. Ceri also highlighted the difficulty of auditing cultural change, suggesting that indicators such as reduced sickness absence, lower turnover, and greater openness among staff may better reflect progress, even if they fall outside traditional audit measures.

The Committee RESOLVED to: The report was noted.

10. WASPT HIGHLIGHT REPORT – 28 MARCH 2025

- 10.1 Christian Fox provided an overview of the WASPT highlight report, covering several key topics. The Social Partnership Conference was acknowledged as a successful event organised by Liz Rogers and her team in conjunction with Trade Union Partners, with plans to consider future dates for similar events.

The Committee RESOLVED to: The report was noted and updates were discussed to ensure progress in various areas.

11. PEOPLE AND CULTURE PLAN METRICS UPDATE AND WORKFORCE

- 11.1 Carl Kneeshaw discussed the People and Culture Plan metrics, noting that overall attendance is slowly improving due to cultural initiatives and upskilling line managers. There has been a slight increase in turnover this quarter, primarily due to retirements, not dissatisfaction with work. The health and well-being plan emphasises proactive support to keep staff at work through various initiatives.
- 11.2 Damon Turner raised concerns about the increase in safeguarding allegations and the influence of external agencies, questioning potential delays. Carl acknowledged these external influences and emphasised the organisation's efforts to ensure cases progress appropriately, using a multidisciplinary team approach to support line managers.

11.3 Hayley Hutchins expressed concerns that Personal Appraisal and Development Reviews (PADRs) might be seen as a tick-box exercise. Carl reassured members that the focus is on the quality of conversations, career development and regular meaningful interactions as part of our WAST Way initiative. Angie added that while there are exceptional PADR experiences, consistency across the organisation is needed, emphasising regular check-ins and conversations. The discussion highlighted the commitment to improving the PADR process and fostering a culture of supportive conversations between managers and staff.

The Committee RESOLVED to: The Committee received the report and took assurance from the People & Culture Plan Metrics Update and from the People and Culture Key Performance Indicators for the period of March 2025.

11.1 MONTHLY INTEGRATED QUALITY AND PERFORMANCE REPORT (MIQPR)

11.1.1 The MIQPR report included several key elements relevant to the committee. It highlighted extreme lost hours driven by handover delays, with efforts underway to address shift overruns through initiatives like the Glangwili scheme and facilitated working groups.

11.1.2 March 2025 saw high sickness absences, likely due to end-of-year leave uptakes, and overall sickness rates are being monitored with interventions aimed at improving attendance.

11.1.3 Ongoing work to improve efficiency in the NEPTS includes a focus on demand and capacity review and roster improvements.

11.1.4 There was a slight increase in turnover noted, primarily due to higher than average retirement rates, this trend is attributed to the workforce profile and individuals choosing to retire earlier or pursue second careers post the Covid-19 pandemic.

11.1.5 An increase in PADR completion rates is reflected for March 2025 (82.38%). This represents the highest recorded rate within the dataset PADR.

11.1.6 The report also mentioned the need to connect data on violence and aggression to ensure alignment with reported figures and staff survey insights.

11.1.7 There has been an increase in statutory and mandatory training compliance (87.4% against a Welsh Government target of 85%). As at 31 March 2025, 90.44% of colleagues required to attend Mandatory In-Service Training (MIST) had done so.

- 11.1.8 There has been an increase in the formal employee relations cases, particularly related to safeguarding indicating that staff feel more empowered to escalate concerns.
- 11.1.9 Additionally, upcoming changes to categorisation and reporting will start from 01 July 2025, in line with the implementation of the revised ambulance performance framework.

The Committee RESOLVED that: The Committee considered the March/April 2025 Integrated Quality and Performance Report.

12. VOLUNTEER STRATEGY 2020-2025 ACTION PLAN UPDATE (YEAR 5 PROGRESS)

- 12.1 Lee Brooks introduced the volunteering report, noting he had omitted the supplementary report on quality and support day. This supplementary report includes more details about people and compliance components, with plans to gather experiential input from managers and staff for a future meeting.
- 12.2 Jenny Wilson highlighted significant achievements in the volunteer strategy over the past four years, including the development of the Community Welfare Responder role, the transition to a holistic volunteer service, and the implementation of a volunteer pathway. Other accomplishments include the expansion of St John Volunteer alternative responder schemes, the launch of a new volunteer management system, and the reintroduction of volunteer conferences post Covid-19. Jenny noted a significant increase in volunteer car drivers and the development of the volunteer car service oncology project.
- 12.3 The Committee praised the comprehensive and impactful volunteer strategy, emphasising the professionalism and passion of the volunteers. Kathryn Cobby highlighted the invaluable support volunteers provide at various events, and there was a brief mention of the need to explore how the volunteer strategy fits within the broader Integrated Medium Term Plan (IMTP) and the importance of securing funding for volunteer initiatives. Lee Brooks addressed the integration of the volunteer strategy with broader organisational planning, moving towards embedding volunteering within the overall People and Culture Plan.
- 12.4 Future plans include exploring cross directorate volunteer opportunities, developing a volunteer policy, reviewing the drug formulary for Community First Responders, and creating a volunteer-to-career pathway. The discussion emphasised the importance of demonstrating the return on investment for volunteer roles to secure funding and highlighted the positive feedback from volunteers regarding the new volunteer management system. Overall, the

discussion focused on the cultural integration of volunteers, the importance of demonstrating their impact and value, and the future integration of the volunteer strategy within broader organisational planning.

- 12.5 Lee Brooks expressed gratitude to Rhodri Jones, for stepping up as the Chair of the Volunteer Steering Group and playing a critical role in the management team. As Rhodri prepares to hand over the Chair position, the committee joined Lee in thanking Rhodri for his significant contributions and the fantastic progress made over the past couple of years. Rhodri expressed gratitude for the kind words and acknowledged the ongoing work in the volunteer support structure. He noted that while there is still work to do on the volunteering initiatives, the next significant task is focused on enhancing the volunteer support structure. Rhodri thanked Lee and the Chair for their appreciation.

The Committee RESOLVED to: The report was noted.

13. STRATEGY EQUALITY PLAN – 6 MONTHLY PROGRESS UPDATE

- 13.1 Angie Lewis introduced the six-monthly Strategic Equality Plan (SEP) progress update to provide better visibility of the work being done on the equality, diversity and inclusion agenda, which is part of regular reporting to the Welsh Government and preparation for the annual report. Kathryn Cobley highlighted key achievements, including significant progress in sexual safety training with general awareness sessions and detailed half-day sessions for managers, increased activity and membership in people networks, and a successful inclusive recruitment initiative by the digital team that increased workforce diversity.
- 13.2 Kathryn Cobley mentioned next steps, such as increasing training delivery, supporting upcoming recruitment events and preparing the annual report for August 2025. Angie Lewis added that they are awaiting feedback from the Welsh Government and emphasised efforts to mitigate risks related to resources and capacity, ensuring the inclusion agenda is integrated across the organisation.
- 13.3 Estelle Hitchon enquired about broader lessons from the inclusive recruitment initiative, and Kathryn responded by highlighting the success of workshops for potential applicants, targeted outreach to minority communities and clarity in job adverts. The discussion also addressed recruitment challenges for paramedics, noting the need to promote various career opportunities within the ambulance service and collaborate with universities to improve diversity in paramedic recruitment.

The Committee RESOLVED that: The report was noted, and the Committee were assured of the substantial progress in various areas and outlined plans for continued improvement and engagement.

14. ANNUAL HEALTH & SAFETY REPORT

- 14.1 Nicola White provided several updates highlighting significant progress in Health and Safety compliance and performance across the Trust. The corporate Health and Safety risk (ID 199) achieved its target score of 10 in December 2023 and is reviewed every three months. An internal audit on exposure to diesel fumes was awarded a reasonable level of assurance against all objectives. Legislative compliance increased from 2.22 to 2.32 out of 3, providing a moderate level of assurance. There was a 66% reduction in over 7 day injuries and a 50% reduction in specified injuries, with manual handling of patients and slip trips and falls being common trends. Most reported incidents of violence and aggression were verbal abuse, mainly affecting contact centres, with a slight increase over two years and a 38% reduction last year. Manual handling incidents decreased from 2.86 to 1.25 since April 2022. Additionally, 100% compliance was achieved in workplace risk assessments, workplace inspections, noise assessments and first aid risk assessments.
- 14.2 Christian Fox commented that partnership working with the Health and Safety Team has improved significantly, highlighting stronger ties and collaboration, particularly due to regular meetings between Nicola White and Hugh Parry.

The Committee RESOLVED that:

- 1) The Committee approved the Health and Safety report, which will be presented to the Trust Board for information in May;**
- 2) The Committee acknowledged the significant progress made in Health and Safety compliance and performance; and**
- 3) Christian Fox highlighted the improved partnership working with the Health and Safety team**

15. INTERNAL AUDIT REPORT: OCCUPATIONAL HEALTH AND WELLBEING SUPPORT

- 15.1 Carl Kneeshaw and Felicity Quance both emphasised the value of the Occupational Health and Wellbeing Internal Audit for improving processes and fostering a proactive health and well-being culture.
- 15.2 Carl confirmed that work is progressing to mitigate the identified actions, with several already completed, and the focus is now on using data to inform service engagement and proactive measures.

- 15.3 Felicity added that the audit report was accepted, recommendations acknowledged, and that the Trust is committed to ensuring appropriate health and wellbeing needs for staff while encouraging service uptake.

The Committee RESOLVED that: The Committee noted the discussion at the meeting of the ARAC on 1 May 2025, and the assurance that was received following receipt of the Occupation Health and Wellbeing Support Audit Report and acknowledged that the agreed actions are currently in progress.

16. RISK MANAGEMENT AND BOARD ASSURANCE FRAMEWORK REPORT

- 16.1 The four risks within the remit of this Committee were discussed and whilst the data was presented to the Trust Board in March 2025, the risks have all been reviewed during this period with the activity due to be considered by the Executive Leadership Team on 21 May 2025.
- 16.2 Risk 160: High Absence Rates
High absence rates impacting on patient safety, staff wellbeing and the Trust's ability to provide a safe and effective service – remains static at a score of 20 (5x4) despite there being a significant reduction in absence levels. The Assistant Directors Leadership Team will undertake a deep dive of the risk on 28 May 2025 as part of a revised approach to risk.
- 16.3 Risk 201: Reputation
Damage to the Trust's reputation following a loss of stakeholder confidence which remains at a score of 20 (4x5). The tension in the reputational risk was noted that while the Trust has positive relationships with stakeholders, the patient experience remains poor due to harm in the community. A deep dive will be conducted on the risk over the summer to consider splitting it into a stakeholder risk and a patient experience reputational risk. This approach aims to address the different aspects of reputation and ensure the risk is accurately profiled. It is likely that this will be the last time that the committee will see this risk in this way.
- 16.4 Risk 163: Maintaining Effective and Strong TU Partnership
Maintaining effective and strong Trade Union partnerships remains unchanged at a score of 12 (3x4) has been closely reviewed the risk in advance of a discussion at the Trust's partnership team meeting in May 2025 to determine if any additional mitigation is needed and to evaluate its movement over time. It was acknowledged that while relationships are good, there are considerations such as the National Pay Award and the upcoming change in senior leadership which could impact on stability. It was noted that WASPT will look at this more closely.

- 16.5 Risk: 558: Deterioration of Staff Health and Wellbeing
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).
- 16.6 New Risks Identified: No new risks identified at this meeting for the register.

The Committee RESOLVED to: The report was noted, considered and discussed.

17. AUDIT TRACKER: Q4 2024-2025 REPORTING

- 17.1 Trish Mills reported a significant improvement in audit actions, with 75% now closed compared to the previous quarter's 17%. Trish attributed this progress to the dedication and tenacity of the team members involved. Additionally, there are no actions currently past their due date.
- 17.2 Trish provided details on how the team approached items from Audit Wales under the review of workforce planning arrangements. The committee received assurance and noted the rationale for closing the Audit Wales Review of workforce planning arrangements recommendations, acknowledging the substantial progress made

The Committee RESOLVED to:

- 1) The Committee received assurance on the monitoring of management actions to address recommendations in the Tracker, and noted any revised dates for actions; and**
- 2) The Committee noted the rationale for closure of the 2023/2024 Audit Wales "Review of Workforce Planning Arrangements" recommendations as detailed in section 9.**

18. FEEDBACK FROM EFFECTIVENESS REVIEW: COMMITTEE CYCLE OF BUSINESS MONITORING REPORT AND 2025/26 PRIORITIES

- 18.1 Trish Mills reported that the Audit, Risk and Assurance Committee (ARAC) received the Effectiveness Review Report endorsed the changes and challenged the team to streamline committees by addressing feedback on the volume of papers, meeting length and presentations. The committee will explore ways to improve efficiency in Q1 and Q2, with potential opportunities for streamlining in the Academic Partnership Committee.
- 18.2 Estelle Hitchon highlighted the uncertainty over the coming year due to factors such as a new Chief Executive Officer, potential industrial action and an upcoming election. Estelle emphasised maintaining focus on key areas such as working positively with trade unions, culture, work and safety while remaining

adaptable to changing circumstances. Trish Mills advised against setting too many priorities for the committee, suggesting a focus on existing areas like quality of patient safety and experience, and continuing progress in equality, diversity and inclusion (EDI).

- 18.3 Angie Lewis stressed the importance of not overloading the committee with priorities, suggesting a focus on the people and culture plan, IMTP and local delivery plans, with an intense focus on EDI and career development pathways. Carl Kneeshaw mentioned the need to revamp the people and culture plan, focusing on strategic intent and triangulating areas of progress, while remaining agile. Alex Crawford suggested keeping an eye on wellbeing objectives, aligning with the committee's focus areas.
- 18.4 Overall, the discussion emphasised maintaining focus on existing priorities, particularly EDI and the development of people, while being prepared to adapt to changes and revamp the people and culture plan. Ceri summarised that the focus should be on integrating priorities into the people and culture plan without adding significant new areas of work, considering legislative compliance and the political landscape.

The Committee RESOLVED to:

- 1) Action: It was agreed the Committee would receive proposed priorities for consideration, via email circulation.**
- 2) The Committee ratified the decision made by Chair's Action effective 24 April 2025 in relation to the outputs of the annual committee effectiveness review.**
- 3) The Committee noted the output of the Mentimeter survey hold on 18 February 2025.**
- 4) The Committee noted the proposed changes to operating arrangements for 2024/2025 and the outcome of the meeting of the ARAC on 1 May 2025.**
- 5) The Committee discussed and agreed its priorities for 2025/2026; and**
- 6) The Committee noted the Cycle of Business Monitoring Report for Q1 of 2025/2026.**

19. WASPT MINUTES – JANUARY 2025 MEETING

19.1 Received.

20. COMMITTEE HIGHLIGHT REPORT – 18 FEBRUARY 2025 MEETING

20.1 Received.

21. REFLECTIONS AND SUMMARY OF DECISIONS/ACTIONS

- 21.1 Ceri Jackson highlighted the honesty and openness of Mandy's staff story and acknowledged the excellent progress made regarding the volunteering strategy.
- 21.2 Trish Mills acknowledged the significant progress made particularly in closing 75% of the internal audit actions, a substantial improvement from the previous quarter.
- 21.3 The committee discussed the importance of maintaining focus on existing priorities such as EDI and the development of people, while being prepared to adapt to changes and revamp the people and culture plan.
- 21.4 They committee considered integrating well-being objectives into the reporting structure to ensure alignment with the committee's focus areas without creating additional work. Emphasis was placed on lifting the committee's focus to a more strategic level, ensuring that priorities align with the people and culture plan and IMTP. Overall, the reflections centred on acknowledging progress, maintaining focus on existing priorities, integrating well-being objectives and ensuring a strategic focus.

ACTIONS:

- 21.4 **Action 18.4: It was agreed the Committee would receive proposed priorities for consideration, via email circulation.**

22. ANY OTHER BUSINESS

- 22.1 None declared.

23. DATE OF THE NEXT MEETING

- 23.1 The next meeting is scheduled for the 12 August 2025.