

**CONFIRMED MINUTES OF THE PEOPLE AND CULTURE COMMITTEE MEETING  
(OPEN SESSION) HELD REMOTELY VIA MICROSOFT TEAMS ON  
05 SEPTEMBER 2022**

**Chair: Paul Hollard**

**PRESENT:**

Paul Hollard	Non Executive Director and Chair
Hugh Bennett	Assistant Director, Commissioning & Performance
Julie Boalch	Head of Risk and Deputy Board Secretary
Lee Brooks	Director of Operations
Sarah Davies	Workforce and OD Business Manager
Bethan Evans	Non Executive Director
Mair Evans	NWSSP Audit
Dr Catherine Goodwin	Deputy Director of Workforce and OD
Liam Williams	Director of Quality & Nursing
Estelle Hitchon	Director of Partnerships and Engagement
Melfyn Hughes	Welsh Language Officer
Ian James	Trade Union Partner
Jo Kelso	National Ambulance Training College
Trish Mills	Board Secretary
Joanna Paskell	Paramedic (Staff Story)
Jeff Prescott	Corporate Governance Officer
Hugh Parry	Trade Union Partner
Liz Rogers	Organisational Culture & Workplace Wellbeing Lead
Hannah Rowan	Non Executive Director
Joga Singh	Non Executive Director
Andy Swinburn	Associate Director of Paramedicine
Chris Turley	Director of Finance and Corporate Resources

**APOLOGIES:**

Paul Seppman	Trade Union Partner
Angela Roberts	Trade Union Partner

**43/22**

**WELCOME AND APOLOGIES FOR ABSENCE**

The Chair welcomed all to the meeting of the People and Culture Committee and advised that the meeting was being audio recorded. Apologies were recorded from Paul Seppman and Angela Roberts.

#### **44/22 DECLARATIONS OF INTEREST**

No new declarations were made in addition to the standing declarations which were already noted on the Trust register.

**RESOLVED: That no new declarations were received.**

#### **45/22 MINUTES OF PREVIOUS MEETING AND ACTION LOG**

The Minutes of the Open meeting held on 22 February 2022 were considered and agreed as a correct record. The Action log was considered, reviewed and updated.

**RESOLVED: That the Minutes of the meeting held on 22 February 2022 were AGREED.**

#### **46/22 DIRECTOR OF WORKFORCE & OD UPDATE**

Dr Catherine Goodwin presented the Workforce and OD update and gave a brief overview of highlights within the Directorate. These included a new survey focussing on sexism and the Trust's presence at Pride Cymru, which had proven to be a very successful and well attended event. In other areas, the Occupational Health and Wellbeing Team had established the Road to Recovery Group which was inclusive of any staff member living with a long-term health condition, including long Covid.

The report also noted that the recruitment team had been working tirelessly to ensure additional EMS staff were recruited in time for winter pressures. In addition to running large volume recruitment and selection campaigns, they had been engaging with schools and colleges and attending various events, such as the Royal Welsh show, to raise the profile of careers within the Welsh Ambulance Service. Finally, Dr Goodwin informed Members that this would be her last Committee as Interim Director of Workforce & OD and welcomed the appointment of Angela Lewis, who would be taking up the substantive role shortly.

Members received the update and noted the volume and scale of the ongoing work which was being undertaken to ensure sufficient recruitment across the Trust. Members also queried the timescales for feedback following the staff survey around sexism. Dr Goodwin stated that the survey would be left open for one month before the data was collated and fed back to the Committee. Members then thanked Dr Goodwin for her input and contributions to the Committee during her spell as Interim Director of Workforce & OD and looked forward to her continued contributions as she returned to her previous role.

**RESOLVED: That the update was NOTED.**

## 47/22 OPERATIONS QUARTERLY REPORT

Lee Brooks introduced the Operations Quarterly Report as read and gave a brief overview and update on some of the main areas covered within the report. These included the latest position on the Roster Review which was on track and due to go live at the end of September. Members also heard that a great deal of work had been done on Integrated Care, particularly around suft patterns and rostering although this was still in the development phase.

The report also gave an update on the 111 Press 2 programme which went live in the Hywel Dda Health Board area on the 20th June. This service was operated by the Health Board in collaboration with the Trust and connected callers requiring urgent mental health support to a specialist practitioner with further roll outs of the service expected throughout the summer. Lee Brooks concluded by updating Members on the sustained and severe operational pressures that the Trust was facing, with August 2022 being the second worst month on record in terms of lost hours due to handover delays. However, it was noted that while Amber waiting times remained higher than the Trust would like to see, they were down overall when compared to recent performance data.

Members received the update and queried whether any feedback or updates were available following the roll out of the 111 Press 2 programme. Lee Brooks stated that at present, no activity data was available as this was managed by Hywel Dda Health Board although a small amount of activity had been monitored via the 111 service.

**RESOLVED: That the update was NOTED.**

## 48/22 STAFF STORY – VIOLENCE & AGGRESSION

Joanna Paskell spoke to Members about her recent experience of violence and aggression within the workplace after being assaulted by patient. Members heard how Joanna had attended, treated, and conveyed the patient to the Emergency Department. However, on arrival at the hospital the patient became aggressive and abusive towards her and hospital staff. While transferring the patient from their stretcher to the bed, the patient assaulted Joanna by punching her in the chest causing sufficient bruising and pain to require treatment at the hospital.

As a result of this incident Joanna was off work for several months. South Wales Police investigated this case and Joanna was required to give a statement about the incident. In September 2022, a file was sent to the Crown Prosecution Service for a charging decision and the following month the CPS authorised a charge of Assault by Beating of an Emergency Worker. On 17th January 2022 at Cardiff Magistrates Court, the defendant pleaded guilty to assaulting Joanna, which thankfully meant that she did not have to attend Court.

Members heard that following the assault, Joanna found it difficult to understand why someone she was trying to help would act so violently. Joanna also felt that support at a local level was insufficient with no debrief held by immediate line managers who did not appear to appreciate the impact that the incident had on her.

However, Support was provided Dylan Parry, the Trust's Violence & Aggression Case Manager who was in regular contact with her throughout the process and afterwards, liaising with Joanna, South Wales Police, and the CPS, to ensure she was kept up to date with progress in the case and any outcome. Joanna also expressed her appreciation for the support she had received from Lee Brooks, Executive Director of Operations, who had written to her following the incident.

Members thanked Joanna for her courage in speaking with the Committee and for explaining the extent of the physical and psychological effects she had experienced following the assault. Members queried whether issuing body armour to staff would be helpful, particularly in situations where there was a risk of violence and aggression. Joanna Paskell felt that it may not be practical for staff to wear body armour at all times although this was only her opinion and other colleagues may feel differently should they be offered the opportunity.

Members then asked if there was anything more that the Trust could do to support staff and to reduce the risk of exposure to violence and aggression. Joanna Paskell stated that perhaps more could be done at local level, particularly around training for line managers to help them provide support and guidance for members of their staff who have experienced violence and aggression.

**RESOLVED: That the staff story was NOTED.**

## **49/22 CORPORATE RISK REGISTER AND BOARD ASSURANCE FRAMEWORK**

Julie Boalch presented the Corporate Risk Register and Board Assurance Framework report, drawing out highlights for the Committees attention. The purpose of the report was to provide the Committee with an update in respect of the corporate risk activity since the previous meeting in May.

The report showed that there were currently 16 Corporate Risks on the register, 4 of which were assigned to the People and Culture Committee for oversight. In addition, Risk 199 had transferred to the Committee from the Quality, Patient Experience and Safety Committee (QuEST) for oversight given that the Health & Safety function and programme of work were now included in the Terms of Reference and cycles of business for the People and Culture Committee.

Members were asked to note that there were a number of actions outlined at the July 2022 Trust Board meeting which would mitigate real time, avoidable harm in the context of extreme and sustained pressure across the urgent and emergency care service. These actions would further mitigate the Trust's highest scoring risks 223 and 224 and would be incorporated into the Board Assurance Framework during the scheduled review of those risks.

It was acknowledged that, whilst QuEST had oversight of risks 223 and 224, these remained the Trust's highest scoring risks, affecting every area of the organisation and, therefore, updates would continue to be presented in relation to these two risks.

Members also heard that there has been one change to the risk scores since the last meeting in May 2022 with Risk 201 (Damage to Trust reputation following a loss of stakeholder confidence) being increased to 20 (4x5) from 15 (3x5) as the ability to mitigate issues outside of the organisation were not within the Trust's control and these were contributing to the effects on the Trust's reputation.

Members received the report and commented on the current risks before noting the incorporation of the avoidable harm action plan into the Board Assurance Framework in relation to risks 223 and 224.

**RESOLVED: That**

**1. The contents of the report and the risks to the relevant Committee were DISCUSSED.**

**2. The 'avoidable harm' action plan will be incorporated into the BAF to support further mitigation of Risks 223 and 224 was NOTED.**

**3. The improved Board Assurance Framework was NOTED.**

**4. The adoption of the new nationally agreed Risk Matrix including scoring levels, review schedules and risk descriptors was NOTED.**

**5. The 2022/23 Risk reporting timetable was NOTED.**

**6. The transfer of Risk 199 to the People & Culture Committee was NOTED.**

**7. The increase in score of Risk 201 from 15 to 20 was NOTED.**

**50/22**

**IMPROVING ATTENDANCE PROJECT – PROGRESS UPDATE**

Liz Rogers gave a progress update on the Trust's Improving Attendance project plan. Sickness Absence levels were recognised as a significant concern for the Trust and to address the levels, the Project Plan had been developed and was being delivered into the organisation by a joint team from WOD and Operations.

Member heard how over the last quarter, the Improving Attendance team had been working hard supporting managers within Operations to improve attendance across their teams. This engagement was having a positive impact and there had been a culture shift with managers having a real focus on supporting attendance and a move away from a place where absence was accepted as inevitable and something that could not be managed effectively.

The report showed a month-on-month reduction in long term sickness absence since April from 6.18% to 5.70% in May and 5.18% in June. In addition, more long term sickness cases were being closed than opened every month since March. Short term sickness absence figures had fluctuated with April reporting a figure of 4.96% while May was 3.25% and June was 3.94%. However, mental health related absence had reduced month on month while musculoskeletal absence had increased slightly in May before reducing again in June, bringing it back to the April figure.

Members were informed that Covid absence had been an issue in June and July as there has been an increase in figures through those months. This was also reflected in community figures. The end of May showed Covid absences down to around 50 a day across the workforce in Operations. June saw absences rise to 133 at the end of the month then hit a peak of 170 on 10th July. In terms of Operations May saw a solid reduction in levels with EMS absence reducing from 12.89% to 9.74% and Ambulance Care from 10.97% to 8.71%.

Members received the report and queried whether any further work had been done, particularly around stress, anxiety and depression to try and understand whether these absences were work related or as a result of external non-work related issues. Liz Rogers commented that while it wasn't possible to always determine the root cause, the Trust was committed to supporting employees in their recovery and in terms of mental health support, were fortunate to have such an effective Wellbeing structure within the organisation which had proven vital in the recovery of staff members.

**RESOLVED: That the Committee COMMENTED on the report and the contents were NOTED.**

## **51/22 HEALTH AND SAFETY UPDATE INCLUDING ANNUAL REPORT**

Nicola White provided an update to the People and Culture Committee on health and safety performance as well as key issues and activities in the period from 1st April 2021 - 31st March 22. The report was presented as read with Members attention being drawn to the most relevant areas of note.

These included changes to the National Health and Committee Terms of Reference which were reviewed to align to a more strategic arrangement. These were subsequently approved by the Executive Management Team with a view to being implemented fully in 2022/23.

Other highlights included the development of the Health and Safety Workforce Transformation Business Case which detailed a proposal for a tiered approach for effective integration of the team into the Trust leadership structures. It was expected that a decision would be agreed during 2022, the outcome of which would influence the delivery of the 5-year Working Safely Programme Plan.

Members received the update commented on the valuable work which had been undertaken so far to introduce and embed the updated health and safety culture within the Trust. Members then queried whether any potential risks had been identified which may need to be brought to the Committees attention. Nicola White informed Members that concerns had been raised around noise levels, particularly within Clinical Contact Centres. However, following a visit by the Health and Safety Executive (HSE), it was determined that although the levels would be continually monitored and improvement actions were identified, no further concerns were noted.

Members also heard that the HSE would be focusing its attention on risks around violence and aggression and manual handling. However, the Trust was well placed in this respect and had recently appointed a new Violence and Aggression manager and Manual Handling manager.

**RESOLVED: That the contents of the report were NOTED.**

**52/22**

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

Hugh Bennett gave an update on the Monthly Integrated Quality and Performance Report (MIQPR). The report provided key metrics on performance for July 2022 across the Trust, with the exception of Sickness where June 2022 was reported.

The report contained information on 28 key indicators at a highly summarised level which aimed to demonstrate how the Trust was performing across four integrated areas of focus:

- Our Patients (Quality, Safety and Patient Experience);
- Our People;
- Finance and Value; and
- Partnerships and System Contribution.

These four areas of focus broadly correlated with the quadruple aims set out in 'A Healthier Wales' and as previously agreed, the metrics would be updated on an annual basis, to ensure that they continued to represent the best way of tracking progress against the Trust's plans and strategies.

Members attention was drawn specifically to performance around call answering, ambulance response times, ambulance care, hours produced, response abstractions, sickness absence, post-production lost hours, handover lost hours and staff wellbeing measures.

Disappointingly, the indicators showed that in many areas there was a continued poor picture in terms of the quality and safety of the service that the Trust provided to patients. Demand across the 111 and EMS services increased in June 2022 and this, coupled with other factors such as the continuation of the Covid-19 variants, high levels of sickness absence and extreme handover lost hours continued to impact on the Trust.

Hugh Bennett and Liz Rogers then discussed the Staff Wellbeing Deep Dive. The aim of this was to look at the available data and anecdotal information on wellbeing to help understand how staff were doing in terms of wellbeing, what that meant to the organisation, where the Trust was currently at and where it would like to be. In addition, the deep dive would look at the Trust's strengths, weaknesses, opportunities and risks as well as considering what else would be valuable to have in terms of information for evaluation and decision making before deciding what actions to take forward.

The deep dive showed that many members of staff now had low levels of resilience and were exhausted as a result of system pressures and the residual effects of Covid. There had also been no respite through the summer months in terms due to ongoing issues with handover delays and service demand. In response, the Occupational Health and Wellbeing Department were able to refer staff to outside agencies for Wellbeing support as well as having an in house Wellbeing service. However, the number of people leaving the organisation had increased over the last 3 years with around 10% leaving over the previous 12 months alone.

Members received the report and expressed concern that performance was still below that which would be expected and desired despite the best efforts of staff within the Trust, especially those providing frontline EMS services. Furthermore, the current performance was during the summer period and all indications were that the situation would only become worse as winter approached. However, it was unclear what, if anything, could be done differently to alleviate the pressures the Trust and its staff were facing as ultimately, this may be beyond the control of the Trust alone and indicative of wider pressures across the entire system.

In terms of wellbeing, Members noted that the latest deep dive did not provide any information on instances or allegations of sexism within the Trust. It was also observed that trends from exit interviews, which may help identify common reasons for staff leaving the Trust were not being routinely captured. Hugh Bennett and Liz Rogers agreed that further work would be done to incorporate measures on sexism while also considering how themes and trends from exit interviews could be captured.

**RESOLVED: That**

**1. The July 2022 Integrated Quality and Performance Report and actions being taken and determine whether:**

**a) the report provides sufficient assurance;**

**b) whether further information, scrutiny or assurance is required, or**

**c) further remedial actions are to be undertaken through Executives was  
CONSIDERED**

**2. The deep dive (Appendix 2) on Staff Well-Being measures was  
CONSIDERED.**

## 53/22 WORKFORCE PERFORMANCE SCORECARD REPORT

Dr Catherine Goodwin and Liz Rogers presented the Workforce Performance Scorecard Report as read but drew Members attention to the progress which had been made with PADR's. The report showed that completion rates across the organisation had increased to 65.18%, representing a 13% increase on the figure reported at the last meeting of the People and Culture Committee.

Members heard that following a series of deep dives across the organisation, Phase 1 of the PADR Refresh process was now complete and a new form had been produced. Phase 2 would involve development and launch of a manager toolkit to support colleagues and managers through the PADR process and subsequently improve completion rates across the organisation. Phase 3 of the process would involve transfer of this form to the Electronic Staff Record (ESR), enabling PADR data and information to be fully reportable, to inform organisational training and intervention plans. It was envisaged that the ESR version of the form would be live by November 2022.

Members received the report and commented on the progress around PADR compliance rates, the new form and the integration with ESR which were all seen as positive steps forward for the service.

**RESOLVED: That the Committee RECEIVED and COMMENTED on the reported performance and associated actions.**

## 54/22 CYCLE OF BUSINESS AND COMMITTEE PRIORITIES

Trish Mills provided the Committee with a draft cycle of business as the final step in the 2021/22 effectiveness review process. The process included a review of the terms of reference, with the amendments subsequently being approved by the Trust Board in May 2022.

The cycle of business was intended to provide order and structure as well as setting a Committee work plan for the year. This, together with the Board Assurance Framework, would drive agenda setting and allow papers to be planned in advance, giving Directors and report writers the opportunity to plan ahead. The process would also allow for easy tracking of the Committee's adherence to the cycle which was regarded as a marker of an effective Committee.

Members received the draft cycle of business and noted the benefits of the process, particularly around streamlining the discussions within the Committee while also refining the workflow and involvement of sub-committees.

**RESOLVED: That**

- 1. the cycles of business were REVIEWED, any amendments were proposed, and the cycle was APPROVED as a first version.**
- 2. the Committee is not supported at this stage by a sub-committee structure was CONFIRMED.**

**3. the Committee could, if required, request a deep dive into certain aspects of the cycle of business.**

## **55/22 WELSH LANGUAGE ANNUAL REPORT**

Trish Mills and Melfyn Hughes gave a brief update on the Welsh Language Standards Annual Report, drawing Members attention to the 111 service which had seen a sharp increase in Welsh language demand due mainly to the last two Health Boards integrating into 111 Wales. Despite answering more calls in Welsh as a result of this, the percentage of calls dropped by 24.3% compared to 2020/21.

Melfyn Hughes informed Members that data from 111 calls and visits to the Trust's website had showed a sustained and increasing demand for Welsh language services. However, it was also noted that there had been a steady drop over the past 3 years in compliance for the number of staff recording their Welsh Language Skills on ESR.

The Workforce and OD Directorate had indicated that an issue may lie with the links between the 'trac' system and ESR, with trac not being able to record anyone with '0 – No skills' in ESR. To address this, the issue had been raised with Shared Services as in order to carry out a reliable mapping exercise of the Trust's Welsh language skills capacity, this needed to be 100%.

Furthermore, the Workforce Systems Assistant had created a link to a form to capture any missing competence information. A monthly report would also be run to check which members of staff were missing any of the competencies. An email would then be sent to them with the link to the form, asking them to fill it in with a deadline of a month's time.

Members received the report and noted the increase in demand for Welsh language services as well as the efforts being made by the Trust to provide and promote access to those services.

**RESOLVED: That the annual report was NOTED and ENDORSED.**

## **56/22 REVISED PAY PROGRESSION POLICY**

Liz Rogers updated the Committee on the revised Pay Progression Policy for NHS Wales, which was to be adopted by the Trust. Members were advised that the Policy had been slightly updated and the latest version now included reference to the Respect and Resolution policy, in place of the Grievance Policy. As this was an All Wales policy, it was simply for the Committee to note and adopt the policy.

**RESOLVED: That the Committee NOTED and formally ADOPTED the revised Pay Progression Policy for NHS Wales.**

57/22

## **INTERNAL AUDIT REPORT**

Trish Mills introduced the Internal Audit Report as read, briefly touching upon the current position with regards to the Internal Audit tracker. Jo Kelso then discussed the Learning organisation advisory audit, noting that there were four recommendations from the audit, all of which were accepted by the Trust. Of those, three had already been actioned with the final recommendation not due until December 2022 although this was well in hand.

Jo Kelso then provided the Committee with assurance regarding the improvements made to the driving licence check processes, in response to recommendations made in the 2019/20 WAST Drivers' Medicals Internal Audit Report. Compliance during the reporting period from 1st April 2021 – 31st March 2022 was 92%.

Members received the reports and audit findings and noted the contents and recommendations. Members also noted the improvement in compliance around the driving licence check processes. No further queries were raised.

### **RESOLVED: That**

- 1. the contents of the report were CONSIDERED and NOTED**
- 2. the Internal Audit Plan activity was CONSIDERED.**
- 3. the two current Internal Audit Reports relevant to the Committee were RECEIVED.**
- 4. the Trust's proposals to address each recommendation with the inclusion of revised completion dates was CONSIDERED.**
- 5. any specific items that the Committee wishes to see raised to Senior Management and Audit Committee were AGREED.**

58/22

## **SEASONAL INFLUENZA CAMPAIGN AND END OF SEASON FLU REPORT 2021/22**

Andy Swinburn updated the Committee on the seasonal Influenza Campaign for 2021/22 and detailed the uptake of the Flu Vaccine within the Trust. The report showed that the final uptake of staff vaccinated was 38.46%, which was a decrease of 11.4% from the previous year's campaign.

The number of patient-facing staff that were recorded as receiving the vaccine for the 2021/22 campaign had also notably decreased by 11.1%. It was suggested that for the second year, the Covid-19 pandemic had continued to influence the success of the campaign. This, compounded with a variety of other influencing factors, had impacted the delivery and uptake of the vaccination.

The paper also set out the constraints experienced throughout the campaign which included difficulties experienced with vaccine delivery, operational pressures, reporting mechanisms and communication with staff.

Following the review of the 2021/22 campaign, recommendations had been devised that were based upon some of the key areas of learning and improvement.

The aim of these was to streamline current processes, remove duplication of effort and improve engagement with the workforce.

Members received the report and queried whether more could be done by the Trust to improve the uptake of Influenza vaccinations amongst staff for the upcoming 2022/23 period.

Andy Swinburn commented that work was underway with the Communications team to promote the upcoming Flu campaign along with incentivisation schemes but due to new working practices, with many staff now working from home or having limited access to the Trust premises, it had proven to be more problematic in arranging and encouraging staff to come in or book their flu vaccinations.

**RESOLVED: That**

**1. the findings from the seasonal influenza campaign 2021-22 were NOTED.**

**2. the suggested recommendations in the report were explored further, particularly in relation to reporting mechanisms and engagement with staff.**

**59/22**

## **RAISING CONCERNS FRAMEWORK**

Trish Mills provided the Committee with an overview of the work underway to develop a framework for raising concerns and speaking up. The report showed that the 'Freedom to Speak Up' Task and Finish Group had been formed to develop the framework. The report also set out the role and remit of the Group.

Members were informed that the Group would report into the Assistant Directors Leadership Team and aim to complete their work by March 2023, including the roll-out of the Work In Confidence platform. In the meantime, staff could continue to raise concerns through the traditional routes of line management and escalation set out in the All Wales Procedure for Raising Concerns, and through the sensitive issues function in Datix whilst the new framework was in development.

Members received the report and queried what mechanisms were in place for the Committee to receive assurance that progress was being made on the framework and the mechanisms for staff to raise concerns. Trish Mills noted that while some of the assurance would come via the Quality and Performance framework, a standalone report to the Committee could be produced if necessary.

**RESOLVED: That the update was NOTED.**

**60/22**

## **WASPT ADVISORY GROUP UPDATE**

Trish Mills updated the Committee on developments with the WASPT advisory group and advised Members that a number of meetings with the joint chair of WASPT had taken place. During these meetings, the Terms of Reference had been discussed, looking at any amendments which may be required.

In addition, work was underway to set a date for the shadow WASPT group to meet as well as discussions on representation and membership. Trish Mills confirmed that for the purposes of oversight and governance, the WASPT advisory group would continue to report into the People and Culture Committee. Liz Rogers further commented that discussions had been very positive and steady progress was being made.

**RESOLVED: That the update was NOTED.**

**61/22 MINUTES OF SUB GROUPS**

The Minutes of the sub-groups were presented as read and for information purposes only.

**62/22 ISSUES TO BE RAISED AT BOARD**

The Chair informed Members that discussions with Trish Mills would take place outside of the meeting to determine which items would be taken forward and raised at Board.

**63/22 ANY OTHER BUSINESS**

There was no other business

**64/22 DATE OF NEXT MEETING**

The date of the next meeting was scheduled for 29 November 2022.