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PEOPLE AND CULTURE COMMITTEE HIGHLIGHT REPORT TO BOARD

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

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

Trust Board Meeting Date	29 May 2025
Committee Meeting Date	15 May 2025
Chair	Ceri Jackson

KEY ESCALATION AND DISCUSSION POINTS

ALERT

(Alert the Board to areas of attention)

1. No alerts arose from this meeting.

ADVISE

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

2. The committee heard from **Mandy McWatt, Emergency Ambulance Practitioner (EAP)**, who shared her experiences with menopause and her career progression within the Welsh Ambulance Service. She highlighted the challenges she faced due to menopause symptoms, including memory issues, emotional struggles, and physical health problems. Despite these challenges, Mandy has recently successfully completed the EAP course and is also a Culture Champion at Newtown Station. 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.

Mandy hugely values her colleagues, and she strives to embody WAST's organisational behaviours. Members greatly appreciated hearing Mandy's story and discussed how resources for staff regarding the effects of menopause on women could be improved. Mandy was encouraged to continue her professional and personal development within the Trust. Her story highlighted her personal resilience, dedication to her role, and the importance of compassionate practices and support from your employer during challenging health events.
3. The **report from the Director of Cultural Change** and the **Director of People** was received with the following of particular note:
 - Our WAST Way, the programme aimed to provide leadership development opportunities for all



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staff, is being launched on 28 May.

- The development of the health diagnostics programme, which includes signposting to charities and other support services. The programme, based on individual health assessments for staff over the age of 46 who wish to participate, was promoted at the recent CEO Roadshows.
4. The **Q4 Operational Update** from the Executive Director of Operations highlighted several matters of interest related to our people and our culture, including:
- The Community Welfare Responder Project was presented at the ALF (Ambulance Leadership Forum) conference, garnering interest from others.
 - EMSC sickness absence has improved due to consistent policy application and supported with improved working environments, with positive feedback on the EMSC restructure. Culturally, the shift to 'keeping people at work' continues.
 - Turnover for band 3 entry-level roles remains high due to the challenging nature of call handling, but these roles often serve as stepping stones within the Trust. The approach to recruitment is constantly under consideration with a history of testing various approaches. The future may provide opportunity to increase reward through cross-training and direct contact resolution.
 - There has been good progress with respect to EAP training.
 - The Glangwili end of shift pod has been deployed to reduce shift overruns and improve meal breaks.
 - The NEPTs roster review working parties are ongoing, with the team actively responding to feedback
5. **Reflections** on the meeting were that it was well chaired, and discussions and energy were positive. Presentations were succinct and papers well structured. Robust triangulation of organisational activities was demonstrated which provided assurance to the committee of the progress of various workstreams. It was also considered how the committee could move towards having more of a strategic focus with regards to future business and reporting.

ASSURE

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

6. Feedback from the **2024 NHS Staff Survey** was received and it is summarised here at **Annex 1**, aligned to organisational themes of Our WAST Way. Action plans are being developed in directorates to develop targeted actions. Three priority focus areas have been identified, those being burn-out and well-being; regular, meaningful check-ins with managers; and involvement in change. The committee also looked in more detail at the responses on abuse from patients/public, which shows a marked increase in 2024. Additionally, colleague involvement in decision making and change results indicate that those working closest to the frontline may feel the least included in shaping decisions that impact them.

There is a structured approach to feedback to staff on our responses to the issues raised over the next 12 months. The People and Culture Plan metrics report below also indicates continued increase in network membership which, taken in conjunction with the staff survey participation rate, is a promising indicator that cultural initiatives are enabling inclusivity.



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7. The Committee scrutinises performance across several metrics within its remit. Whilst the board receives the **Monthly Integrated Quality and Performance Report (MIQPR)**, there are a range of additional metrics this committee receives, including wider **People and Culture Plan Metrics** (quantitative this quarter). Given this, the following areas of assurance will be of interest to the board noting the context our people are operating it and the good progress despite this:
- March 2025 showed a Trust wide reduction in sickness absence, indicating that the positive impact of the focus on wellbeing, compassionate practices and supportive work environments is being felt by colleagues. The reasonable assurance internal audit on Occupational Health and Wellbeing (below) also supports this.
 - A slight increase in turnover was 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-Covid.
 - An increase in PADR completion rates is reflected for March (82.38%); this represents the highest recorded rate within this dataset. PADR process improvements are in progress with a focus on making the conversation the core of the process, with the form acting as a simple tool to guide (not define) the discussion.
 - Once again there has been an increase in statutory and mandatory training compliance (87.84%, against a Welsh Government target of 85%). At 31st March 2025, 90.44% of colleagues required to attend Mandatory In-Service Training (MIST) had done so.
 - There has been an increase in formal employee relations cases, particularly related to safeguarding, indicating that staff feel more empowered to escalate concerns.
8. The **Annual Health and Safety Report** at **Annex 2** was received and approved. Its focus was on continuous and quality improvement through workplace inspections, internal audit and legislative compliance. The report acknowledged the sustained focus on diesel fumes impacting capacity to progress proactive objectives. This links to the MIQPR and WASPT highlight report which note progress on the use of fans outside A&E departments to reduce diesel fumes exposure. Additionally, the staff survey noted a sharp rise in reports of abuse from patients and the public; double the number reported for the same period last year. This increase suggests a combination of societal issues, increases in mental health problems, pressure across the health system, as well as a shift in internal culture where colleagues feel more confident speaking up. Members noted the need to connect the data on violence and aggression incidents with other reports to provide a comprehensive view in the MIQPR.
9. The vision in 2021 for the **Volunteer Strategy 2020-25** was for volunteers to add value to user experience and the care we provide; for our volunteers to have personally rewarding experiences; and that volunteering would strengthen the contribution made to community resilience. Members received a look back at the first four years and agreed that that vision is being realised and reviewed the significant achievements to date, including:
- Development of the Community Welfare Responder role
 - Volunteer service transition through an organisational change process



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- Development of a volunteer responder pathway
- Expansion of the St John Ambulance Cymru VAR schemes
- Volunteer management system – Go Assemble
- Volunteer conferences
- Significant increase in volunteer car drivers
- VCS oncology project
- Volunteer Steering Group refresh

The discussion emphasised the reach, impact, and ambition of the volunteer service, highlighting its significant contributions to patient care and community resilience, as well as ongoing efforts to expand and enhance volunteer roles. There is a commitment to integrate volunteers into the People and Culture Plan, ensuring their contributions are recognised and supported, and promoting diversity and inclusion within volunteer roles. The Committee recorded its thanks to Rhodri Jones, who was the inaugural Chair of the Volunteer Steering Group, whose tenure concludes this month.

10. The **Strategic Equality Objectives** for 2024-2028 are design equitable services; lead by example; be an employer of choice; and create allyship. A six-monthly progress update on those objectives was received and members were assured of progress, which includes:

- Sexual safety training programme
- People network growth and development
- Women's health and wellbeing sessions
- TU funded sanitary initiative and women's uniform
- Inflammatory bowel disease awareness campaign
- Ramadan and Iftar event
- Carer Confident Level 1 Award
- HIV education workshop
- Culture Champions open days
- EQIA policy and impact assessment guidance
- Executive Champions for equity, diversity and inclusion
- Allyship and Active Bystander training positive feedback
- Inclusive recruitment initiative within Digital Team, with members noting that the success here is a blueprint which could be replicated further in the organisation
- Maternity skin tone training resources

Members agreed there was a very good depth and breadth of the equality, diversity and inclusion work, with positive green shoots of improvements in the gender pay gap.

11. The **Internal Audit on Occupational Health and Wellbeing Support** was rated as reasonable assurance. The Audit, Risk and Assurance Committee (ARAC) received the audit on 1 May and their AAA report before the board sets out the issues discussed there. Members of the People and Culture Committee received those comments and noted that work is progressing to mitigate the identified actions, with several actions already completed. The focus for the Trust is now on using data to inform engagement of services and ensuring proactive health and well-being measures.

12. The **Speaking Up Safely Internal Audit** was rated as reasonable assurance. The Audit, Risk and



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Assurance Committee (ARAC) received the audit on 1 May and their AAA report before the board sets out the issues discussed there. Members of the People and Culture Committee received those comments, and also acknowledged the progress made and the continuous efforts required to improve the speaking up culture within the organisation.

13. The Welsh Ambulance Services Partnership Team (WASPT) is the board's local partnership advisory forum. The **WASPT highlight report** sets out the ongoing projects, upcoming challenges, and the steps being taken to address them in partnership. The following was noted from the March 2025 WASPT meeting:

- The first WAST Social Partnership Conference was held on 31 March 2025 and was a successful day with great engagement.
- The Wellbeing Objectives were shared, noting they had been developed in partnership.
- The WAST Charity (Elusen Gwasaneath Ambiwllans Cymru) strategy was shared with members, with views considered in the next iteration.
- Good progress on diesel fumes was noted.
- With respect to skills mix, options are being costed and any red line issues identified.
- There was positive feedback from staff on the EAP course, highlighting topics like ECG interpretation which was also shared in the staff story earlier.

Trade Union colleagues fed back to this meeting their experience at the recent ALF Conference and the benefits of that exposure and sharing challenges and opportunities.

14. The outputs of the Committee's **annual effectiveness review** were discussed and the terms of reference and annual report that were approved by Chair's Action were ratified. The committee's priorities for 2025/26 are a focus on equality, diversity and inclusion, as well the development of our people.

15. The **Audit Tracker** was reviewed and the Committee noted excellent engagement and progress with 75% (17% last quarter) of internal audit management actions due in the quarter now closed. Rationale for the closure of Audit Wales recommendations under the 2023/24 Review of Workforce Planning Arrangements were discussed. Whilst the actions were not implemented in full as originally intended, the committee was satisfied that the risks raised in the report were appropriately mitigated.

16. In the private session the committee reviewed progress against seven **suspensions over four months** which is a decrease from ten reported in the last quarter. Three cases are with the **Employment Tribunal** (an increase of five from the previous quarter). Members were assured on actions in place to manage these cases.

RISKS

Risks Discussed: The four risks within the remit of this Committee were discussed and whilst this data was presented to the Trust Board in March 2025, the risks have all been reviewed during this period with the



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activity due to be considered by the Executive Leadership Team on 21 May 2025.

160 –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.

201 – 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.

163 – 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.

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

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

COMMITTEE AGENDA FOR MEETING

Directors Update	Operations Quarterly Report Q4	Staff Story and Staff Story Update
NHS staff survey and action plan	WASPT highlight report	People and Culture Plan metrics and workforce scorecard
MIQPR	Volunteer Strategy Action Plan update	Strategic Equality Plan progress update
Annual health and safety report	Internal Audit on Occupational Health and Wellbeing Support	Risk management and BAF
Audit tracker Q4	Feedback from effectiveness review and priorities	Internal Audit on Speaking up Safely

COMMITTEE ATTENDANCE

Name	15 May 2025	12 August 2025	13 November 2025	10 February 2026
Ceri Jackson				
Bethan Evans				
Hayley Hutchings				
Hannah Rowan				
Angela Lewis				
Carl Kneeshaw				
Chris Turley				
Lee Brooks	From item 6			
Liam Williams	Penny Durrant			
Estelle Hitchon				
Andy Swinburn				



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COMMITTEE ATTENDANCE				
Name	15 May 2025	12 August 2025	13 November 2025	10 February 2026
Alex Crawford				
Trish Mills				
Damon Turner				
Marcus Viggers				
Christian Fox				
Tim Cahalane				

	Attended
	Deputy attended
	Apologies received
	No longer member