



**GIG**  
**CYMRU**  
**NHS**  
**WALES**

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

## **PEOPLE AND CULTURE COMMITTEE ANNUAL REPORT 2024/25**

### **INTRODUCTION**

1. The Trust's Standing Orders and Committee Terms of Reference require that Board Committees evaluate their effectiveness annually and present an annual report to the Trust Board.
2. As the factors underpinning effective governance can change, for example as people leave, organisations restructure, or strategy shifts, regular reviews of Board Committees ensure governance remains fit for purpose.
3. Standing Orders, Committee terms of reference, and Codes of Governance provide that Boards should routinely assess the effectiveness of their governance arrangements, of which the Board's Committees form an integral part.
4. The committee met on 18 February 2025 and through a facilitated discussion reviewed its effectiveness, its terms of reference, and its operating arrangements. This Annual Report reflects on the effectiveness of the committee in 2024/25 and proposes changes to terms of reference.

### **PURPOSE OF THE COMMITTEE**

5. The committee is established to enable scrutiny and review of the Trust's arrangements for all matters pertaining to its workforce, both paid and volunteer, and organisational culture and behaviour to a level of depth and detail not possible in Board meetings. The committee will provide assurance to the Board of the Trust's leadership arrangements; behaviours and culture; training, education and development; equality, diversity and inclusion; health, safety and welfare; people and culture related partnerships and engagement; the Welsh Ambulance Services Partnership Team (advisory group); and Welsh Language, in accordance with its stated objectives and the requirements and standards determined by the Welsh Government, the NHS in Wales and other regulatory bodies.

## MEMBERSHIP AND ATTENDANCE

6. The committee met four times as scheduled in 2024/25 and was quorate on each occasion.
7. The committee is supported by the Chair and three Non-Executive Directors (NED) as members, and several core attendees with good attendance. The membership of the committee changed in year following changes to the NED composition. Joga Singh left the Trust Board on the 31 August 2024 and following her appointment as a NED in Autumn 2024, Hayley Hutchings is now a member of the committee. The meeting of the committee in February 2025 was her meeting.
8. During the year the leadership structure within the People and Culture Directorate changed and the role of the Director of People and Culture was separated to provide for a Director of People and a Director of Culture Change. Angela Lewis begun in the role of Director of Culture Change in Autumn 2024. Carl Kneeshaw was appointed to role of Director of People, with November being his first meeting of the committee.
9. The chart below illustrates attendance of members and prescribed attendees as listed in the terms of reference for 2024/25. The Committee welcomed non prescribed attendees at various meetings as well as external guests.

COMMITTEE ATTENDANCE				
Name	9 MAY 2024	8 AUGUST 2023	16 NOVEMBER 2023	20 FEBRUARY 2024
Ceri Jackson				
Bethan Evans				
Joga Singh				
Hayley Hutchings				
Hannah Rowan				
Angela Lewis				
Carl Kneeshaw				
Chris Turley		Left at end of item 13		
Lee Brooks	Sonia Thompson			
Liam Williams	Jonathan Turnbull-Ross			
Estelle Hitchon				
Andy Swinburn				
Alex Crawford				
Trish Mills	Julie Boalch			
Damon Turner				
Marcus Viggers				
Christian Fox	Hugh Parry			
Tim Cahalane				

	Attended
	Deputy attended
	Apologies received
	No longer member

10. The Chair of the Committee until 31 March 2024 Paul Hollard, completed his eight year tenure on the Board at the end of the 2023/24 financial year. Ceri Jackson became the Chair from 1 April 2024. Due to the aforementioned changes to the committee composition in year there are no changes to membership proposed at this time.

## **COMMITTEE'S VIEWS ON EFFECTIVENESS**

### Feedback from membership

11. The committee's effectiveness was assessed through a facilitated discussion held at the meeting on the 18 February 2025, which included a review of its terms of reference and cycle of business.

### **Enhancing Report Writing and Assurance**

- Respondents strongly emphasised the need for clarity and precision in both the committee's requests and the submitted reports. They suggested implementing a standard pro-forma to minimise duplication and enhance focus. Additionally, the importance of having a clear objective for each report was highlighted, along with the suggestion to provide questions in advance to tailor presentations more effectively.
- Suggestions included shorter, less verbose papers, and fewer but more in-depth reports to allow for quality discussions. The use of visual aids and succinct presentations were also recommended to improve understanding and engagement.
- Participants expressed a desire for a shift towards a more strategic focus. They recommended linking reports together to provide a cohesive understanding of issues and employing thematic focuses to enhance the relevance of discussions.
- There is a call for a more manageable meeting agenda that allows ample time for discussions and deeper dives into significant topics. This includes taking papers as read to maximise discussion time and ensuring that reports are concise with a clear ask directed at the committee.

## **Strengths of the Committee**

- The committee benefits from strong leadership. Responses praised the chairing style for being inclusive and keeping meetings on schedule. This effective governance helps maintain focus and ensures productive discussions.
- Members appreciate the high level of engagement and the quality of discussions during meetings. Features such as the hybrid meeting format were highlighted as particularly effective, allowing for broad participation. The respectful and open environment fosters good debates and challenging discussions, which are viewed positively.
- Good secretariat support and the responsiveness of the People and Culture team are crucial elements that contribute to the committee's success. The development of specific metrics and continuous feedback are also valued, enhancing the committee's effectiveness.
- The use of staff stories is a powerful tool for making real-life impacts tangible. Having the right people in the room, including supportive challenges from Non-Executive Directors enhances the richness of discussions and the committee's ability to reflect on and address key issues.

## **Areas for Improvement**

- Respondents expressed a strong desire for a more strategic focus and a streamlined approach to meetings. Suggestions included reducing the number of reports and papers to allow for more in-depth discussions on fewer, more significant topics. There is a call for shorter agendas and clearer, more concise presentations to ensure that time is used effectively.
- The issue of overlapping content with other committees (MIQPR in particular) was mentioned. Recommendations included better coordination and consideration of overlaps, as well as potentially eliminating the SBAR format to simplify the documentation process.
- Providing questions before meetings and allowing more time for questioning during sessions were suggested to enhance engagement. Additionally, a focus on practical implications ('the so what') and actionable outcomes from discussions is encouraged.
- There is a need to focus meetings more on issues that directly impact the committee's objectives and less on operational details that could be managed at a different level. Respondents want themes for meetings that allow for

deeper exploration of specific issues and connecting the dots across various topics.

- The workload associated with preparing for committee meetings is a concern, with too much falling on too few people. Improving the diversity of the committee and ensuring presenters are concise and focused on outcomes are also highlighted as areas for improvement.

12. Changes to operating arrangements as a result of the above are set out at paragraph 20. Areas not drawn through to changes include:

- The length of the meetings arose frequently in feedback. All attempts will of course be made to reducing length of the meetings where that is appropriate. This is however a quarterly meeting with a large remit. The agenda will continue to be set with the chair and executive leads shortly after the last meeting with a strong focus on the flow, timing, and specifics for particular reports. This will be done with the above feedback in mind.
- An integral aspect of our annual effectiveness reviews is to ensure the committee focuses on the appropriate matters at the optimal times. Adjustments to the terms of reference and cycles of business have now been made to reflect this. Consequently, directors have considerable influence over the content of papers presented to the committee. We encourage report writers to consider this and reflect on the feedback regarding the volume and focus of papers, as well as approaches to presentations, when preparing submissions.
- The aim of the new templates, writing and presentation guidance is to reduce the volume of papers and ensure more succinct presentations which will go some way to reducing overall length of meetings. A new short form paper will be offered where a fuller SBAR report is not needed.

### Management of the committee's work programme

13. The committee has a cycle of business that is aligned to its terms of reference. All matters scheduled for oversight and review have been brought to the committee and in this respect, it has discharged its responsibilities in providing assurance to the Board. The committee's business in 2024/25 included:

13.1. **The lived experiences of our people** were shared at the meetings:

- In May the Committee heard from a member of staff on the front line – **Matthew T Jones, a Locality Manager** in Pembrokeshire who attended the committee to share his learning on the work he has undertaken on the attendance and sickness within his locality. Matt’s reflections included: having a safe space to learn from mistakes in the beginning of the project, linking into the People & Culture Plan, an excellent example of how a whole team in the Emergency Medical Service has been involved in supporting staff back into work following a period of absence, the work that has been done to support staff in complex cases and the innovation and creative thinking within his team.
- In August, **Kayleigh Wheeler, Operations Manager Ambulance Care**, shared her journey to her current leadership role at WAST. Despite facing homophobia, misogyny, and bullying, Kayleigh received support from colleagues and became active in the WAST Voices network. She aims to amplify quieter voices and address bullying and harassment through various campaigns and sessions. Her presentation highlighted her resilience and commitment to positive change at WAST. While challenges remain, Kayleigh believes the organisation is progressing with improved accessibility and transparency of senior leaders.
- In November, **Ela Lewis**, with a background in nursing (registered nurse) and currently a Senior Project Manager for the Connected Support Cymru project, shared her inspiring journey as a change champion. Ela highlighted the crucial role of creating a supportive environment where colleagues can express their emotions and collaborate effectively on the change journey. Ela's contributions, especially in volunteer coordination and the implementation of remote clinical devices, have been notably impactful, earning her widespread gratitude within WAST.
- In February the committee heard from **Mark Churchill**, a colleague from Ambulance Care spoke to the committee of his role. In his current role, Mark transports vulnerable and older patients within Ambulance Care. Mark emphasised the importance of building relationships, providing social support, and ensuring patient safety and comfort. He highlighted the dedication of his colleagues and their commitment to treating patients with dignity and respect.

- 13.2. The **2024-2030 Strategic Workforce Plan** was received in August. This was reviewed and endorsed by the committee before approval by the Trust Board. This Plan directly aligned to the focus of the IMTP and the Trust's long-term vision.
- 13.3. At the August meeting the committee received a suite of **annual reports in respect of 2023/24** for consideration which required approval by the Trust Board. These were the **Strategic Equality Plan Annual Report 2023/24**, the **Workforce Equality Monitoring Report 2023/24**, the **Gender Pay Gap Report 2023/24**, the **Welsh Language Annual Report 2023/24**. The latter report was presented bi-lingually, and the breadth and depth of the report was appreciated by members.
- 13.4. The committee began receiving a **Cultural Themes and Trends** report at every other meeting. In August data relating to employee relations cases, sickness and training and the impact on the culture at WAST, was received. It was noted that there had been an increase in employee relations cases, but as of August 2024 over 200 individuals had received training in compassionate practices, and 70 had attended investigating officer training. In February the committee received an introduction to the 'WAST Way', which will launch in Q1/Q2 2025/26. The framework sets out clear leadership behaviours based on three core principles of 'care', 'valuing everyone', and 'connecting'.
- 13.5. Related to this at its meeting in February 2025 an update was received on the work around **compassionate practices** and the related actions in the compassionate practices action plan.
- 13.6. The committee noted the significant amount of change taking place across WAST which brings pressure on our people, both with respect to change itself, but also the pace of change. This was the primary focus for the meeting of the committee in November, at which a session was delivered on **change management**. The aim is for change management to become a natural part of every process, whilst having oversight of the impact of change on our people. d. Angela Lewis confirmed her commitment to ensuring that change management principles and techniques are embedded in the leadership work within the Trust, particularly through our 'The WAST Way'. This will ensure that change management is at the heart of leadership development. This following progress related to this work was noted:

- 12.6.1 **Change Community:** The Trust has established a change community focused on creating a culture of collaboration, trust, and growth. This community aims to build a supportive, non-judgmental environment where colleagues can practice new skills, test their thinking, build confidence and competence, and share experiences to learn from each other.
- 12.6.2 **Structured Approach:** The Trust has developed and implemented a structured approach to change management centred around the ADKAR model, which focuses on individual change to achieve organisational results. This model breaks change down into clear stages and is action and outcome focused.
- 12.6.3 **Embedding Change Management:** The approach is being embedded within the clinical model transformation programme, with dedicated change leads from the change community supporting program workstreams. The goal is to ensure a consistent approach to change management across the programme.
- 13.7. The committee received an update on the Trust's **Speaking Up Safely** arrangements at its meeting in February 2025, and it was noted at the November meeting that the Audit, Risk and Assurance Committee were assured on our speaking up arrangements. Additionally, the CEO roadshows in Autumn 2024 included a focus on speaking up, with board members pledging their support.
- 13.8. The **Partnerships and Engagement report** related to the remit of the committee was received in August. This focused on regional Partnership Boards and the Wellbeing of Future Generations Act. The report signifies a move towards more strategic engagement and partnership working, aligning with broader organizational and national priorities.
- 13.9. The committee received insights from the **NHS Staff Survey** which focused on stress and burnout in the workplace and the links between addressing these issues with our overarching People and Culture ambitions and Health and Wellbeing Plan.

- 13.10. The **Staff Development Outline Plan** was received in May. It was noted that this is a deliverable in the People and Culture Plan, which aims to provide equity in development opportunities for our people to undertake their roles and benefit from progression opportunities.
- 13.11. Related to this activity, the committee acknowledged the significant volume of **learning and development** taking place at all levels of the Trust. The committee was introduced to the '**WAST Way**' in year, a behavioural approach which intends to enable a culture of compassionate, inclusive and collaborative leadership includes leadership behaviours which are drafted and engagement on these is underway.
- 13.12. **Health and Safety updates** were received with a focus on RIDDOR compliance, risk assessment compliance, manual handling, the effects of diesel fumes on our people (which was also the subject of the advisory group WASPT discussions), and violence and aggression. These updates included several positive aspects such as high compliance rates for RIDDOR reporting which demonstrates a grip of control and flows of work in the Trust. Additionally in August, the committee received the **2023/24 Health and Safety Annual Report** which was approved. Members noted the maturing culture of health and safety in WAST and the focused attention the team had throughout the year.
- 13.13. The **Health and Well-being Plan 2025-2029** was received in February 2024 for comment and subsequently received in November 2024. The committee endorsed the Plan for submission to the Trust Board for approval. The plan showed the high-level outcomes, with local action plans sitting behind them focusing on meeting the basic needs of staff, promoting well-being, providing preventative and reactive support, all while maintaining service quality.
- 13.14. A follow up report on the **Seasonal Influenza Campaign 2023/24** report was received. The Trust's final uptake of staff vaccinated for the **Seasonal Influenza Campaign 2023/24** was 36.5%, which is a decrease of 8% from last year's campaign. Lessons learnt from this campaign have informed an extensive list of areas that require continued development for future flu campaigns.

- 13.15. The Committee received assurance on the processes in place for 2024 **registration and revalidation** with respect to the Nursing and Midwifery Council and noted 100% compliance.
- 13.16. **Updates are received from the Director of People and Culture** at each Committee, and these were changed in year to reflect a new look and a balanced view on both successes and challenges. Following the change to the structure of the People and Culture Directorate in year and the separation of the people and culture elements of the Director's remit, the committee began receiving updates from the Director of People and the Director of Culture Change as of November 2024.
- 13.17. **Operational updates** are received at each meeting and often generate a good deal of discussion, particularly related to system pressures.
- 13.18. The **MIQPR** and **People and Culture Plan metrics** were received at each meeting, with a particular focus on sickness absence levels, recruitment, PADRs, statutory and mandatory training, moving on interviews, and shift overruns. At the May meeting a deep dive was received on the **disciplinary processes and compassionate practices** approach in the Trust.
- 13.19. In private session in August, the committee received the **2023/24 Workforce Race Equality Standards Report** for 2024. The report and proposed action plan were endorsed and subsequently submitted to the Trust Board for approval.
- 13.20. The committee approved the following **policies** in year:
- Homeworking Policy
  - Professional Regulation Policy
  - NHS Wales Respect and Resolution Policy
  - Welsh Language Policy
  - Driving At Work Policy
  - Occupational Health Policy
  - Recruitment and Selection Policy
  - Occupational Immunisation Policy
  - Equality Impact Assessment Policy
  - Bank Worker Policy

- 13.21. In private session the Committee looks at **suspensions** over four months and **Employment Tribunal** cases.
- 13.22. **Reflections** are taken at the end of meetings and included:
- In May, it was noted that the first hybrid meeting post-Pandemic worked well, but that there are procedural considerations which must be considered given this approach. Additionally, it is important to ensure there are sufficient breaks included.
  - In August it was noted that the meeting was well Chaired and there were many positive items being discussed, including the staff story and the progress shown within the Health and Safety Annual Report.
  - In November, the committee felt that the discussions were less transactional and future focused, The importance of taking a holistic view of people and culture activities was noted.
- 13.23. The Committee **cycle of business** was approved in May 2024.
- 13.24. **Risks** relevant to this Committee are reviewed at each meeting and the agenda is driven by these risks. The highest rated risks, sickness absence (160), reputation (201) and latterly Trade Union relationships (163) were the focus and drive agenda setting. Risk 163 was presented in detail to the WASPT for the first time in May 2024, in recognition that this risk is dynamic.
- 13.25. The **annual effectiveness review** was conducted in the February 2025 meeting. As detailed earlier in this Return the approach to the 2024/25 review was different to previous years.
- 13.26. The **Audit tracker** and actions assigned to the committee were reviewed at each meeting. Good progress is being made to close management recommendations.
- 13.27. The reasonable assurance **Retention of Staff** Internal audit report was received, Key matters arising from included finalisation and ratification of the 'moving on interview' process. The purpose of this audit was to evaluate and determine the adequacy of the systems and controls in place within the Trust in relation to staff retention.

- 13.28. The **Seatbelt Action Plan** Internal Audit was received, which gave a reasonable assurance opinion. The purpose of this audit was to review the deployment of the seatbelt action plan, to ensure the safety of crews and patients on board Trust vehicles, and to assess compliance.
- 13.29. The reasonable assurance Internal Audit on **Disciplinary Case Management** was received. The purpose of this audit was to assess the adequacy of the arrangements in place for the management of the disciplinary process, and to focus on the demonstration of compassionate leadership principles, in addition to compliance with the Trust's defined disciplinary processes.
- 13.30. The reasonable assurance Internal Audit report on **Volunteers Governance** was received. The purpose of the audit was to review the adequacy and effectiveness of the Trust's governance and operational management of volunteer activities.
- 13.31. The **Exposure to Fumes** internal audit report was received, with a reasonable assurance opinion. The purpose of this audit was to evaluate the actions being taken by the Trust to ensure the health and wellbeing of staff exposed to fumes as a result of delays in handovers of care at hospital.
- 13.32. The **Resourcing Policy** internal audit was received, with a limited assurance opinion. The purpose of this audit was to review the Trust's Resourcing Policy, its compliance with national terms and conditions, and to assess its application as an enabler for effective resource production.
14. The Board received a highlight (AAA) report from this Committee by email circulation following each meeting which included alerts, advice, and areas of assurance. In November that report was provided verbally due to the proximity of the meeting and the Board meeting.
15. The **Committee's priorities for 2024/25** are reviewed at each meeting and a more detailed update appears later in this report. The Committee also reviews progress against its cycle of business at each meeting.
16. The Committee is serviced by one Sub-Committees, which is the Welsh Ambulance Service Partnership Team (WASPT). WASPT held its first meeting in April 2023 and the AAA Highlight Reports provided to each meeting set out the work of this advisory forum in the year.

17. The operational and corporate sub-structures that feed into WASPT, including local partnership forums were formed in 2023. These forums provide opportunities for resolution and escalation at a more local level, focusing WASPT on strategic issues.

## **PROPOSED CHANGES TO THE TERMS OF REFERENCE**

18. The proposed changes to terms of reference for this committee for 2024/25 are marked up in **Annex 1** and include:

18.1. The purpose section has been amended to include a responsibility to take account of the Trust's wellbeing objectives.

18.2. The delegated responsibilities have been re-ordered to align to the People and Culture Plan.

18.3. Wording has been amended to avoid duplication and provide clarity.

18.4. Additions include:

- Assurance that workforce and resourcing plans are fit for purpose and ensure the right skills mix (noting that there is a desire to avoid duplication with other committees, particularly the Quality, Experience and Patient Safety Committee).
- Enhanced assurance reporting on leadership development and succession planning
- Inclusion of HEIW commissioning intentions
- Clarification on membership nomenclature
- Emphasis on the need for three Non-Executive Directors over and above the quoracy requirements

19. The cycle of business for the committee has been amended in line with the adjustments to the terms of reference. Reporting frequency was discussed in the February meeting and has been reflected in the cycle of business for 2025/26 which was approved by Chair's Action.

## PROPOSED CHANGES TO THE OPERATING ARRANGEMENTS

20. Proposed changes to operating arrangements for this committee are set out below. Some are relevant to arrangements across other committees also and they include:

- 20.1. Members were encouraged to pose questions to report writers before meetings and allowing more time for questioning during sessions were suggested to enhance engagement. There is functionality in Ibabs to do this.
- 20.2. Bringing into the committee the progress reports on 'what good looks like' for the strategic objective of 'enabling our people to be the best they can be' will support the call for more of a strategic focus.
- 20.3. A reduction in the reporting against the audit tracker is being considered by ARAC in an attempt to reduce volume for committees and increase assurance. More detail on this will come back to the committee in due course.
- 20.4. New report front covers and SBAR templates have been developed. They include a short form report which includes a requirement to set out purpose of report and alignment to strategic objectives, wellbeing objectives and health and care quality standards. This will be accompanied by writing guidance and presentation guidance.
- 20.5. Writing guidance will set out the purpose of executive summaries in an attempt to ensure they are reflective of the comments received by members of this and other committees, particularly as they relate to a greater focus on outcomes.
- 20.6. Feedback following meetings on reports – both positive and where there are areas of improvement – are encouraged from committee membership. This will ensure we are working towards a continuous improvement in paper length and assurance.

20.7. A 'reading room' will be established in Ibabs for documents that members may wish to review for further information, but which are not vital for scrutiny and oversight.

20.8. Continue with agenda setting meetings and encourage themes for meetings to aid in the flow and triangulation. Members are encouraged to review the agenda both when it is commissioned and closer to the meeting and alert the secretariat if insufficient time has been allocated. Likewise, presenters should ensure they are cognisant of the time allocated which includes time to present and for discussion.

## COMMITTEE PRIORITIES

### Priorities for 2024/25

21. The Committee received an update on progress against its priorities at each meeting. The 2024/25 priorities were:

Priority	Progress
Impact of wellbeing initiatives on our people.	<ul style="list-style-type: none"> <li>• The upcoming Cultural Themes and Trends Report (to be received at the February 2025 meeting) will include consideration of the employment relations cases, sickness absence and compassionate practices. There will also be a focus session (as part of the Cultural Themes and Trends item) on sickness absence received at the February 2025.</li> <li>• The Health and Wellbeing Plan which was received by the Committee in November 2024 - includes commentary on the Trust's approach to understanding the impact of wellbeing initiatives on our people. This Plan was subsequently approved by the Trust Board at its meeting in November 2024.</li> <li>• The Committee regularly receives the People and Culture Plan Metrics, the Workforce Scorecard, and the MIQPR, through which it will understand the impact of various wellbeing initiatives on our people. Additionally, the Committee receives the output of 'Pulse Surveys' and annual NHS Staff</li> </ul>

Priority	Progress
	<p>Survey, with the associated actions plans – both of which are programmed in the Committee’s Cycle of Business.</p>
<p>Culture of conversations with a focus on communication and conversations with managers and their people.</p>	<ul style="list-style-type: none"> <li>• The Trust’s focus on a ‘Culture of Conversation’ continues. A significant aspect of our improvement strategy is moving beyond simply focusing on the completion rates of PADR. We are working towards making every PADR conversation meaningful, ensuring that these discussions reflect our values of compassion, inclusivity, and collaboration.</li> <li>• This shift aligns with the development of <i>Our WAST Way</i>, a new behaviours and development framework for leaders and managers that outlines their responsibilities in creating a positive and supportive work environment. The Committee will receive updates regarding the development of <i>Our WAST Way</i> at its meeting in February 2025. The ‘<i>Our WAST Way</i>’ intends to incorporate the importance of change management skills for our people. It is noted that the Committee received an update on development on change management initiatives in the Trust at its meeting in November 2024.</li> <li>• Additionally, the Committee continues to have a focus on the organisational culture, with ‘Cultural Themes and Trends’ reports being brought forward regularly. The Committee received this report at its meeting in August 2024. The next ‘Cultural Theme and Trends Report’ will be received by the Committee in February 2025, in line with the Cycle of Business.</li> </ul>

Priority	Progress
<p>A continued focus on equality, diversity and inclusion and the implementation of the strategic equality objectives.</p>	<ul style="list-style-type: none"> <li>• The Committee has an ongoing focus on equality, diversity and inclusion – with the relevant business having been incorporated into its annual Cycle of Business. The Director of Culture will provide updates to the Committee regarding the work of the Equality, Diversity and Inclusion Steering Group (EDISG), as required. The EDISG will be supporting the implementation of the Strategic Equality Objectives from which the Director of Culture will provide assurance to the Committee.</li> <li>• The Trust is committed to ensuring that equality, diversity and inclusion are integral to all we do within People and Culture. Rather than viewing EDI as a separate initiative, we strive to make it a continuous golden thread that connects every workstream. By doing so, we help colleagues see and embrace EDI as foundational to our work, creating a space where decisions are influenced by our commitment to inclusion and equity.</li> <li>• Alongside embedding EDI into our everyday practices (through delivery of our Strategic Equality Objectives), we are committed to driving forward the successful delivery of our Statutory Action Plans. Specific initiatives will also include partnering with Higher Education Institutions to increase student diversity and launching targeted campaigns to attract candidates from a wide variety of backgrounds for the full range of career opportunities within WAST.</li> <li>• At the August 2024 meeting the Committee received the Strategic Equality Plan Annual Report for 2023/24, the Annual Workforce Equality Monitoring Report for 2023/24, the Annual Gender Pay Gap Report for 2023/24, and the Workforce Race Equality Standards Report for 2023/24, and the Welsh Language Annual Report for 2023/24. These are the key matters of annual</li> </ul>

Priority	Progress
	reporting regarding equality, diversity and inclusion.
The Trust's approach to development of our people.	<ul style="list-style-type: none"> <li>• At its meeting in May 2024 the Committee received the 'Staff Development Outline Plan' which is a deliverable of the People &amp; Culture Plan. The aim of this is to provide equity in development opportunities for our people to undertake their roles and benefit from progression opportunities.</li> <li>• At the May meeting the Committee were assured that mapping was underway on professions and roles, which will define skills and competencies. An update will be given to the Committee at a future date. It is noted that the 'Learning and Development' reporting is still in development.</li> <li>• The People and Culture Plan metrics – which the Committee receives at every meeting – includes metrics regarding the statutory and mandatory training (giving organisational compliance figures) in addition to the MIST compliance.</li> <li>• The People and Culture Plan metrics provided to the Committee also include qualitative feedback regarding the Trust's learning and development initiatives, which enables us to take a continuous improvement approach to the development of our people.</li> </ul>

### Priorities for 2025/26

22. It is good practice for Committees to set priorities for the forthcoming year when they review their effectiveness. The committee will do so at its May 2025 meeting, and these will be provided to the board at its May meeting.

23. Progress on priorities will be reported to the Committee quarterly and to the Board through its highlight report.