

**CONFIRMED MINUTES OF THE PEOPLE AND CULTURE COMMITTEE MEETING  
 (OPEN SESSION) HELD REMOTELY VIA MICROSOFT TEAMS ON 17 AUGUST 2023**

**Chair: Paul Hollard**

**PRESENT:**

Paul Hollard	Non-Executive Director and Chair
Lee Brooks	Executive Director of Operations
Judith Bryce	Assistant Director of Operations (joined for item 59/23)
Alex Crawford	Assistant Director of Planning and Transformation
Ian Cross	Volunteer Car Service Driver (joined for item 58/23)
Sarah Davies	People and Culture Directorate Business Manager
Bethan Evans	Non-Executive Director
Dr Catherine Goodwin	Assistant Director Inclusion, Culture and Wellbeing
Estelle Hitchon	Director of Partnerships and Engagement
Melfyn Hughes	Welsh Language Services Manager (left after item 65/23)
Ross Hughes	NWSSP Internal Auditor
Caroline Jones	Corporate Governance Officer
Fflur Jones	Audit Wales
Jo Kelso	Head of Workforce Education & Development
Kathryn Cobley	Head of Inclusion and Engagement (left after item 61/23)
Angie Lewis	Director of People and Culture Services
Sara Mills	Head of Culture and OD
Trish Mills	Board Secretary
Gareth Parry	Operations Manager (VCS) (left after item 59/23)
Hannah Rowan	Non-Executive Director
Paul Seppman	Trade Union Partner
Marinella Stoicheci	Risk Officer
Joanne Sullivan	HR Business Partner (left after item 61/23)
Andy Swinburn	Director of Paramedicine
Chris Turley	Executive Director of Finance and Corporate Resources (left during 66/23)
Damon Turner	Trade Union Partner
Dee Udeze-Chibuzor	Head of Workforce Transformation and Planning
Liam Williams	Executive Director of Quality and Nursing (left after item 72/23)

**APOLOGIES:**

Julie Boalch	Head of Risk/Deputy Board Secretary
Liz Rogers	Deputy Director of People and Culture

Joga Singh  
Mark Marsden

Non-Executive Director  
Trade Union Partner

### **53/23 WELCOME AND APOLOGIES FOR ABSENCE**

The Chair welcomed all to the meeting of the People and Culture Committee and asked that members focus on the people and culture aspects, recognising that other forum receive similar reports.

Apologies were recorded from Julie Boalch, Liz Rogers, Joga Singh and Mark Marsden.

### **54/23 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.**

### **55/23 MINUTES OF PREVIOUS MEETING, ACTION LOG AND HIGHLIGHT REPORT**

The Minutes of the Open meeting held on 9 May 2023 were considered and agreed as a correct record.

An update was provided on action 29a/23 with guidance for line managers to allow time where possible, for staff time off for non-Christian festivals. Guidance to be shared at a later date – action closed.

29b/23 Potential prayer space was proving a challenge across the estate due to the need to increase operational space. Multi-use rooms would be explored with prioritisation given to non-Christian needs – action closed.

Trish Mills confirmed that the alert raised within the highlight report was a good news alert.

**RESOLVED: That the**

- 1) minutes of the meeting held on 9 May 2023 were AGREED; and**
- 2) action log was reviewed and updated.**

### **56/23 DIRECTOR OF PEOPLE AND CULTURE DIRECTORATE UPDATE**

Angie Lewis gave an update on recent developments within the People and Culture Directorate, providing an overview on good news stories as well as some challenges.

The national recognition of two staff members, Ashley Page, ACA2, who received a special recognition award for his work to improve equality and inclusion for LGBTQ+ communities in Wales, and also to Catherine Wynn-Lloyd who won the 2023 Employers for Carers Award was noted. Additionally, it was noted that a number of colleagues had completed the foundation change management course and become change practitioners, with a further smaller cohort becoming accredited practitioners. Sarah Davies was acknowledged for her invaluable work to ensure training was delivered with some more still to do.

Whilst sickness absence saw a slight increase in July, the trajectory was going down which was due to the collaborative working across the Trust, recognising that whilst supporting staff when they were ill was important, there was a need to avoid the sickness in the first instance if possible.

It was noted that the Trust would be the first ambulance service in the UK to pilot a scheme for newly qualified paramedics (NQPs), which would accelerate NQPs learning by offering the opportunity to experience an alternative NQP process that would offer this cohort exposure to our newest services such as the Clinical Service Desk, the Cymru High Acuity Response Unit and Advanced Paramedic Practitioner rotations.

Following the recent BBC Wales story on sexual safety and misogyny, feedback as a whole has been relatively positive with our people welcoming the proactive and sensitive approach to this difficult issue. There had been a slight increase in individuals coming forward, which was welcomed in line with our Speaking up Safely programme. The Speaking up Safely platform has commenced with three Guardians identified for a soft launch in July, and formal launch in September.

Members were mindful that the challenging financial outlook for 2023/24 and the additional savings that the Trust may be required to find would have an impact on both our staff and patients.

The challenges with partnership working currently that management and Trade Union Representatives were working through, as they get back into a rhythm following industrial action, was noted. Everyone recognised that there was a period of healing during which engagement was sensitive, however there was a good partnership working basis upon which to have those discussions.

Members received the update and noted the key messages from the Directorate, recognising the importance and significance of the work being undertaken.

**RESOLVED: That the update from the Director of People & Culture was NOTED.**

## **57/23 OPERATIONS QUARTERLY REPORT**

Lee Brooks accepted that this report had been circulated and reviewed in other meetings and took the report by members as read.

Paul Hollard referenced the importance of the report which covered the wider portfolio of the Operations Directorate.

Paul Seppman gave positive feedback on some of the work which was ongoing in relation to the EMSC challenges around retention, also noting that work had started around the six week relief work. He added that there were issues which needed to be discussed further at the meeting being held next week.

Paul Hollard requested an update on the NHS Charities Together award as part of the volunteering strategy and how it is developing.

**RESOLVED: That the Operations Quarterly Report was NOTED.**

## **58/23 STAFF STORY – VOLUNTEER CAR SERVICE DRIVER, IAN CROSS**

Angie Lewis introduced Ian Cross, Volunteer Car Service Driver. Ian, who has been volunteering for 40 years with the last three also for the Trust, more recently with his dog Buddy accompanying him, was recently awarded the British Empire Medal. Members heard of the regular journeys Ian undertakes in South Wales and his trips further afield to support patients to receive treatment, and his enjoyment in what he does around his full-time job.

Lee Brooks suggested the partnering of a volunteer driver perhaps with an oncology patient or those needing to access frequent treatment for a period of time to provide continuity for the patient. Whilst the idea was welcomed the logistics of the volunteer's availability would not always mean this was feasible.

Improvements which could enhance the experience of volunteers such as ease of access to personal protective equipment (PPE), in car communication methods and signage were discussed and the Committee agreed to review progress on these at the November meeting.

Members thanked Ian for his service and the comfort and support he and Buddy give to our patients and their families.

**RESOLVED: That the**

**1) staff story was welcomed; and**

**2) progress on the issues identified be reviewed at the November meeting.**

**VISIBLE VALUABLE VOLUNTEERING**

Judith Bryce gave a presentation to the Committee which provided an overview of the progress made since the strategy was launched and the work undertaken to review the issues.

Whilst delivery of strategic objectives for years one and two were somewhat impacted by the pandemic, in the last 18 months the volunteer scope and a governance framework have been developed with investment in all aspects of volunteering and enhanced inclusion of our volunteers into #TEAMWAST, including access to the 24/7 health support line and counsellors.

The volunteer team in the Operations Directorate supported a strengthened voice of the volunteers through the Volunteer Steering Group. The Chair of this group also attends Management Team meetings, WAST leadership symposiums and management training, allowing a more embedded relationship between these structures.

Some issues raised by the volunteers were consistent with those faced by staff. The Trust has worked hard to address the issues and has invested both time and money to improving matters such as a mileage upgrade, introducing pain relief to be administered, and uniform – to name a few.

Additionally, Community First Responders (CFRs) have increased by 224, with a total of 690 expected by the end of the 2023/24 financial year. This has meant more volunteers responding to incidents this year including to Red calls and thereby improving the mean response times for these calls. CFRs are closing 300-400 patient episodes of care on scene, with support from the Clinical Support Desk. The Volunteer Car Service undertook 25,944 journeys this year including journeys to Scotland and London. There are plans to grow that service from 98 to 200 by the end of the financial year.

Andy Swinburn queried the number of CFRs who became paid members of staff, and how to make this a viable route, and requested to be involved in the transition route. Kathryn Cobley was keen to learn about the possibilities of recording the equality monitoring data for volunteers and was assured that a new management system was being progressed which would capture this data going forward.

Members heard of the extent of the successful schemes introduced for volunteers and commended the team for the exemplar work. The benefit of volunteers in the challenging financial climate was emphasised, and the Committee welcomed a further focus on volunteers at the Trust's Annual General Meeting on 27 September, where the full extent of the advances made would be showcased.

**RESOLVED: That the progress to date in delivering the Volunteer Strategy Action Plan, was discussed and received.**

## **60/23 WELSH LANGUAGE STANDARDS ANNUAL REPORT**

The Welsh Language Standards Annual Report 2022-23 was presented bilingually for the first time by the Welsh Language Services Manager, Melfyn Hughes, which was welcomed. The report would be presented to the Board at its September meeting.

It was noted that the Welsh Language Framework and related deliverables have been included in the Trust's Integrated Medium-Term Plan (IMTP). This incorporates compliance with the Welsh Language Standards.

The Operations Directorate were reviewing the calls answered in Welsh to the 111 and NEPTS services at their weekly performance meeting, and this metric would be monitored in the Committee metrics in the MIQPR.

The Committee commended Melfyn for the extensive amount of work to promote and advance the Welsh Language within the Trust in response to the Welsh Government's More than Just Words Action Plan.

**RESOLVED: That the Welsh Language Standards Annual Report 2022-23 was noted and endorsed.**

## **61/23 RISK MANAGEMENT & BOARD ASSURANCE FRAMEWORK REPORT**

Trish Mills presented the 'Risk Management and Board Assurance Framework' report. The report in respect of the Trust's principle risks, specifically the six risks relevant to the remit of this Committee were considered.

Risk 160 (High absence rates impacting on patient safety, staff wellbeing, and the Trust's ability to provide as safe and effective service)– Whilst progress was being made to reduce sickness absence, high absence rates impact on patient safety, staff wellbeing and the Trust's ability to provide a safe and effective service. The risk rating remains under review and is currently at a rating of 20 (5x4) as of July 2023.

Risk 201 – (Damage to Trust reputation following a loss of stakeholder confidence) -The score for this risk remains high and has been static for some time. Damage to the Trust's reputation following a loss of stakeholder confidence remains at 20 (4x5). The bi-annual partnerships and engagement report will be discussed at the November Committee meeting, which will include a deep dive on this risk. The risk rating will be de-escalated as soon as is appropriate.

Risk 163 – (Maintaining Effective & Strong Trade Union Partnerships) - Whilst the national pay dispute has ended for the majority of Trade Unions, relationships with Trade Union Partners need to be approached sensitively. There are a range of issues that require engagement and partnership working, alongside the full implementation of all aspects of the Trust annex. The score has increased from 12 (3x4) to 16 (4x4).

Updates were provided for risks 199 (failure to embed an interdependent and mature health and safety culture which could cause harm and a breach in compliance with health and safety statutory legislation – score of 15). As noted above, the recent internal audit on health and safety received a reasonable assurance rating. Risk 558 (deterioration of staff health and wellbeing in the face of continued system pressures as a consequence of workplace experiences) remains static at a score of 15.

Risk 557 – potential impact on services as a result of industrial action was de-escalated and closed.

The Committee also reviewed risks 223 and 224 and agreed that the risk commentary box within the Board Assurance Framework was useful to provide rationale for these high rated risks where the Trust's actions were unable to reduce them from 25. (Risk 223: The Trust's inability to reach patients in the community causing patient harm and death & Risk 224: Significant handover delays outside A&E departments impacts on access to definitive care being delayed and affects the trust's ability to provide a safe and effective service).

Members received the report and noted the current position in relation to risks that were relevant to the Committees remit along with the Trust's two highest scoring risks which were assigned to Quest.

**RESOLVED: That the**

- 1) the review of each high rated principal risk including ratings and mitigating actions was noted;**
- 2) the increase in score of Risk 163 from 12 to 16 was noted;**
- 3) the closure of Risk 557 from the Corporate Risk Register was noted.**

## **62/23 MONTHLY INTEGRATED QUALITY AND PERFORMANCE REPORT**

Alex Crawford gave a brief overview of the main points from the Monthly Integrated Quality and Performance Report.

The June/July 2023 Monthly Integrated Quality and Performance Report ("MIQPR") and the quarter one Quarterly Workforce KPIs showed that continued high handover delays remained a significant pressure on our people. The Committee noted:

- Shift overruns have decreased as part of focused work under the IMTP, the WAST Annex and pilot programmes;

**RESOLVED: That the June/July 2023 Integrated Quality and Performance Report and actions being taken were considered.**

## **63/23 WORKFORCE PERFORMANCE SCORECARD REPORT**

Angie Lewis shared some important points with Members as set out below:

- Sickness absence levels were reduced with June figures at 7.51%. There had been a slight increase in July, but it remained on a downward trajectory. Short term absence audits had commenced with the Operations Directorate and would be rolled out further over the next six months, with targeted support to line managers in response to the themes emerging.
- Personal Annual Development Review (PADR) rates for June 2023 were 73.1%, an increase from 72.0% from the last meeting, however it did not achieve the 85% target.
- Statutory and Mandatory Training rates had increased in June to 77.53% however it did not achieve the 85% target. The Committee noted that the Executive Management Team would have a focus on these metrics at a directorate level.
- Staff Turnover had seen a positive decline from a peak of 11.64% in July 2022 to June's figure of 9.79%. Staff wellbeing offers continue to be promoted, together with the WAST Voices Network activity continuing.
- There was an increasing number of disciplinaries. Angie Lewis would review and monitor themes and trends.

**RESOLVED: That the Committee received and commented on the performance scorecard and associated actions.**

## **64/23 PEOPLE AND CULTURE PLAN METRICS**

The metrics proposed to measure the impact of the People and Culture Plan were

presented under the Plan's headings of Culture, Capacity and Capability giving a holistic evaluation of the Plan's effectiveness in enhancing organisational culture, fostering a sense of belonging and optimizing the capabilities of our people.

Further to the deep dive into stress-related sickness absence, the Committee noted that addressing sickness absence, especially those incidences relating to mental health issues and stress, required a comprehensive approach. Treating individual sources or causes of stress was likely to provide temporary relief but did not address the root of the problem. This was an example of a focus on organisational culture, the Trust were investing in long-term solutions that would create lasting, positive change.

Incidents reported under the freedom to speak up safely platform were expected to increase initially, meaning staff felt more comfortable to report concerns and could be viewed as a success in relation to the People and Culture Plan, with levels then falling as changes in culture take place.

Similarly, with moving on or exit interviews, an increase would capture data not only from those leaving the organisation, but also those moving to alternative roles within the Trust and could be viewed as a success.

The metrics were endorsed and would be monitored by the Committee quarterly.

**RESOLVED: That the Committee received and endorsed on the proposed People and Culture Plan metrics.**

## **65/23 CULTURAL TRENDS AND THEMES**

The presentation relating to this item was taken as read by members with questions invited.

Aligned to the metrics in the People and Culture Plan, a new report was presented that illustrated cultural themes and trends. Three broad areas featured including planned actions to address findings and the impact that will be seen from those actions related to:

- Employee relations, including compassionate practices and respect and resolution;
- Moving on Interviews; and
- Managing Attendance at Work, building on the successful reduction in sickness absence over the last year

The Committee agreed a few adjustments and that the report would be considered on a bi-annual basis. A focused session would be held with Trade Union colleagues on their concerns regarding condensing of compassionate practices training.

**RESOLVED: That**

- 1) The usefulness of the information collected in enabling the People and Culture Plan and IMTP deliverables was discussed;**
- 2) The report in conjunction with the proposed people and culture metrics was considered; and**
- 3) The proposal to bring this review on a bi-annual basis was agreed.**

**66/23 ABSENCE MANAGEMENT**

The report provided a broader context for the continued high S10 recording which included all anxiety, stress, depression and mental health related illness, noting that stress was not a formal mental health classification and there was currently no recording within the electronic staff record (ESR) of the source of stress; an overview of current interventions; both at an individual support level and organisationally that the Trust provides for its people.

A healthy workplace culture was essential to reduce the S10 sickness absence recognising that multiple factors contribute to mental ill health or stress, and that identifying a source of stress within this absence code was highly subjective. However, potential drivers included missed meal breaks, overruns, and hand over delays; Datix reporting would support this. Members recognised that staff did need to take responsibility for their own wellbeing.

Support at the Trust for colleagues with stress related issues includes a range of in person and online options, which range from occupational health and clinical psychology to REACT training.

**RESOLVED: That the themes in the report were discussed and commented on.**

**67/23 STAFF DEVELOPMENT OUTLINE PLAN**

Andy Swinburn's presentation was well received with members recognising the associated concerns and actions to assess the level of skill fade due to handover delays and the number of patients attended to.

Timescales for milestones and review dates/actions would be drawn up and presented as a development plan should skill fade be identified and approved.

The objective was to gather evidence around skill fade and determine perception versus reality and how staff feel linking back to the stress and anxiety that may be felt by staff.

The proposal to endorse the work was agreed with the language around the impact not the problem being the focus, should a survey be commissioned.

**RESOLVED: That the work to gather evidence around skill fade be endorsed.**

**68/23 WELSH AMBULANCE SERVICE PARTNERSHIP TEAM (WASPT) ADVISORY GROUP HIGHLIGHT REPORT – 14 JUNE 2023**

The Welsh Ambulance Service Partnership Team (WASPT) highlight report was received and the operational sub-structures that feed into WASPT were noted within the report.

There were no alerts from this meeting however items discussed included:

- Six week relief
- Revised pay offer and WAST specific annex
- EMS establishment
- Diesel engine exhaust emissions

These forums would provide opportunities for resolution and escalation at a more local level, focusing WASPT on strategic issues.

**RESOLVED: That the highlight report of 14 June 2023, was noted.**

**69/23 TU RELEASE TIME INTERNAL AUDIT REPORT**

The limited assurance Trade Union Release Time Internal Audit was received by the Committee and actions will be tracked in the audit tracker.

Angie Lewis confirmed the outcome of the audit was shared with Trade Union colleagues and realistic timeframes for management actions agreed.

**RESOLVED: That the actions from the Trade Union Release Time Internal Audit Report will be progressed and monitored.**

**70/23 POLICY REPORT**

Members recognised that the report had been to a number of Committees, and it was realised that policies were extant until they were renewed. A programme of work was underway with TU Partners, working closely with the Policy Lead, to review the process.

Members noted the policies relevant to this Committee together with those NHS Wales National policies that were also beyond their review date with confirmation from the employer's unit that timelines were being reviewed for these to be progressed.

Paul Seppman confirmed the robustness of the Policy Group and the detailed discussions that were held.

**RESOLVED: That the contents of the Policy report and the programme of work in development to mitigate risk and bring policies in line with appropriate review dates was considered.**

**71/23      AUDIT TRACKER**

The audit tracker is undergoing a full review and together with the guidance for the organisation, will be available for the meeting of the Audit Committee in September 2023.

This guidance has been shared with Internal Audit, Audit Wales and socialised at the Executive Management Team. Additionally, it was noted that before the Committee at this meeting are the internal audit reports for Trade Union Release Time (limited assurance) and Health and Safety (Reasonable Assurance).

The Committee also noted the upcoming internal audits within the remit of this Committee for the remainder of 2023/24. These are Seatbelt action plan (quarter two); Retention of staff (quarter two/three); Disciplinary case management – compassionate leadership (quarter two/three), and the Volunteers Governance (quarter four).

**RESOLVED: That**

- (a) the work planned and in train for the audit tracker and guidance document which the Audit Committee will review on 14 September was noted;**
- (b) the internal audit reports 'Trade Union Release Time' and 'Health and Safety', were received and reviewed; and**
- (c) any further action required with respect to the open actions under the oversight of this Committee be advised.**

**72/23      HEALTH & SAFETY PERFORMANCE REPORT Q1, 2023/24; HEALTH & SAFETY INTERNAL AUDIT REPORT**

The Health, Safety and Violence and Aggression Quarterly Report was received with the Committee giving recognition to the improvements being made. The following was noted:

- The number of violence and aggression incidents remains high at 168 for the quarter. Physical assaults on staff in this reporting period are 18, with incidents of verbal abuse amounting to 146. Collaborative working with the Association of Ambulance Chief Executives (AACE) regarding violence and

aggression training continues with the aim of improving the current training. Toolbox talks, raising awareness of case management support are taking place to support staff.

- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) compliance has been sustained; with manual handling patients and violence and aggression highest reported by cause.
- Statutory health and safety, fire safety and manual handling training compliance continue to be below the Trust and Welsh Government standards. All staff are encouraged to bring their training levels up to Trust expectations.
- The reporting of incidents for diesel fumes exposure has continued to reduce into quarter one. The Health and Safety Committee would be reviewing this in detail at their Autumn meeting with a report being presented to Welsh Ambulance Service Partnership Team.

#### Health and Safety Internal Audit Report

The reasonable assurance Health and Safety Internal Audit was received with the Auditors recognising the Trust's commitment to improving health and safety and the work undertaken to date.

#### **RESOLVED: That**

- 1) the contents of the report were noted; and**
- 2) the ongoing commitment to improving health and safety was noted and**
- 3) the Health and Safety Internal Audit Report was received.**

**73/23**

#### **COMMITTEE PRIORITIES AND CYCLE OF BUSINESS MONITORING REPORT**

The Committee's priorities for 2023/24 are listed below and are progressing well:

- Carry over the Committee priority to support the implementation and championing of the strategic equality objectives, including Welsh Language, to promote an inclusive organisation.
- Development and implementation of the Speaking Up Safety Framework.
- Development and Progress of the People and Culture Plan

The Committee also reviewed its progress against its cycle of business.

Members noted the cycle of business monitoring document which had been provided along with the report.

**RESOLVED: That the Committee Priorities and Cycle of Business update was noted.**

**74/23 SUMMARY OF ACTIONS AND DECISIONS, AND REFLECTION**

Paul Hollard reflected on the discussions held recognised the value in the time spent on culture and volunteering and invited Members to comment on the meeting.

Volunteer car service actions would taken forward by Gareth.

**RESOLVED: That Members reflected upon the meeting and resulting actions were AGREED.**

**75/23 ISSUES TO BE RAISED AT BOARD**

The discussions from today's meeting would be included within the highlight report which would be presented to the next Trust Board meeting.

**76/23 ANY OTHER BUSINESS**

No matters were raised.

**77/23 DATE OF NEXT MEETING**

The date of the next meeting is 16 November 2023.