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

CONFIRMED MINUTES OF THE PEOPLE AND CULTURE COMMITTEE MEETING (OPEN SESSION) HELD AT CARDIFF MRD AND REMOTELY VIA MICROSOFT TEAMS ON 18 FEBRUARY 2025

Chair: Ceri Jackson

Members:

Ceri Jackson	Non-Executive Director and Chair (MRD)
Bethan Evans	Non-Executive Director (virtual)
Hayley Hutchings	Non-Executive Director (virtual)
Hannah Rowan	Non-Executive Director (virtual)

Prescribed Attendees:

Lee Brooks	Executive Director of Operations (virtual)
Alex Crawford	Assistant Director of Planning and Transformation (virtual)
Christian Fox	Trade Union Partner (MRD)
Estelle Hitchon	Director of Partnerships and Engagement (MRD)
Carl Kneeshaw	Director of People (MRD)
Angela Lewis	Director of Culture Change (MRD)
Trish Mills	Director of Corporate Governance/Board Secretary (MRD)
Lizzie O'Shea	Freedom to Speak up Lead Guardian (MRD)
Andy Swinburn	Executive Director of Paramedicine (virtual)
Chris Turley	Executive Director of Finance and Corporate Resources (virtual)
Damon Turner	Trade Union Partner (virtual)
Marcus Viggers	Trade Union Partner (MRD)

Attendees:

Rhiannon Beaumont-Wood	Non-Executive Director (virtual)
Mark Churchill	Ambulance Care Assistant (MRD)
Kat Cobley	Head of Inclusion and Engagement (virtual)
Sarah Davies	People and Culture Directorate Business Manager (virtual)
Dr Catherine Goodwin	Assistant Director Inclusion, Culture and Wellbeing (MRD)

Caroline Jones	Corporate Governance Officer (virtual)
Fflur Jones	Audit Wales (virtual)
Osian Lloyd	Head of Internal Audit (virtual)
Sara Mills	Head of Culture and OD (virtual)
Alex Payne	Corporate Governance Manager (MRD)
Liz Rogers	Deputy Director of People and Culture Directorate (MRD)
Liam Williams	Executive Director of Quality and Nursing (virtual)

Apologies:

Julie Boalch	Assistant Director of Corporate Governance and Risk
Tim Cahalane	Trade Union Representative
Jo Kelso	Head of Workforce Education & Development
Mark Marsden	Trade Union Partner

121/24	<p>WELCOME AND APOLOGIES FOR ABSENCE</p> <p>The Chair opened the meeting of the People and Culture Committee by welcoming everyone and introduced Hayley Hutchings and Rhiannon Beaumont-Wood, recently appointed Non-Executive Directors attending; Hayley as a member of the Committee and Rhiannon as part of her induction. She also welcomed Mark Churchill who was attending for the Staff Story agenda item.</p>
122/24	<p>DECLARATIONS OF INTEREST</p> <p>No new declarations were made in addition to the standing declarations which were already noted on the Trust Register of interests.</p> <p>RESOLVED: That no new declarations were received.</p>
123/24	<p>MINUTES OF PREVIOUS MEETING, ACTION LOG AND HIGHLIGHT REPORT</p> <p>The Minutes of the Open meeting held on 14 November 2024 were considered and agreed as a correct record.</p> <p><i>Action 69/24 - To include in the next report (partnerships and engagement), outcomes and impacts using examples in terms of qualitative feedback as an overall partnership piece. Further discussion with the Chair, and Trish Mills to consider which data should be captured. The action was discussed and it was agreed that further discussion would be held regarding reporting of partnerships and engagement</i></p>

that are outside the remit of this committee, potentially with a view to taking that directly to the board. The action remained open.

Action 97/24 – *Angela Lewis agreed to ensure that change management principles and techniques are embedded in the leadership work being done, particularly through change and ensuring that change management is at the heart of leadership development.* Our WAST Way featured on the agenda and the action was closed.

Action 101/24 – *Chris Turley noted the mixed messaging in fire safety reporting in the People and Culture Metrics report and the Health & Safety report. One being highlighted as improving area and one flagged as red indicating a need for action. He agreed to take the lead with Fire Safety and the need for improvements and potential issue re data quality and ESR figures.* The figures reported were both correct as the timing of the reporting periods for each were different. A detailed annual fire safety update paper had been to Finance & Performance Committee. Additionally, Chris Turley highlighted that Fire Safety compliance training was just below 80%. The Committee were content with the level of assurance provided and the action was closed.

Members noted the highlight report from the meeting held on 14 November 2024 and had no further comments.

RESOLVED: That the

- 1) Minutes of the meeting held on 14 November 2024 were approved; and**
- 2) Actions 97/24 and 101/24 were both closed and action 69/24 remained open as set out above; and**
- 3) The highlight report from the 14 November 2024 meeting was noted.**

124/24

DIRECTOR UPDATE

Angie Lewis highlighted several areas of the report which included excitement around the upcoming International Women's Day on March 11, where both Hayley Jones-Dunne and Kat Copley would be attending an event at the House of Lords, hosted by Dame Tanni Grey-Thompson.

Angie flagged the people networks and the work that Laura Stephens had been involved with in terms of spotlights and culture change events. There were now 161 culture champions of whom 68% were from operational areas. Sara Mills expanded on Laura's work by explaining how Laura has been visiting stations and having conversations with

colleagues and promoting staff networks and initiatives. Sara emphasised the importance of going out to colleagues rather than expecting colleagues to come forward, and thanked Laura for her efforts and the EMS and Ambulance Care colleagues for welcoming her.

Angie Lewis praised Catherine Goodwin for presenting at the Tackling Workplace Sexual Harassment in the public sector conferences, supported by Welsh Government. Hannah Rowan expressed her appreciation for Catherine's work and commented on positive feedback she had received from another Board about how interesting and helpful the presentation had been.

Catherine Goodwin's work was recognised and a sexual safety training programme pilot for operational colleagues will start in March.

Carl Kneeshaw spoke of the development of a coaching award linked to the emergency ambulance practitioner development pathway, aimed at professionalising the service and ensuring continuous development across the Trust.

He referenced the recruitment of essential skills tutors within education development, which would support colleagues in literacy, numeracy, and digital skills, enhancing their employability and career progression within the Trust. He emphasised the alignment of these initiatives with the workforce plan agreed last year, focusing on continuous development and strengthening the employee offer.

He mentioned the moving on process which looked at people's experience at work. This would be discussed in more detail later in the agenda.

Lastly, the job evaluation improvements were noted, ensuring that job descriptions and adverts were able to be progressed in a timely manner.

Andy Swinburn praised the investment in the skills tutors, noting that WAST excelled in providing our people with a range of additional skills.

Hannah raised her concern about shift overruns with anecdotal feedback suggesting that progress that had been made was not felt on the frontline and queried what was being done to communicate any improvements to colleagues.

Lee responded by confirming that this would be included in the outputs from the Welsh Ambulance Services Partnership Team (WASPT) to the

organisation, acknowledging that the general theme was one of containment, meaning the situation was neither worse nor improved. This was considered a degree of success given the Winter period. Lee went on to say that an agreement with TU Partners to conduct a series of task & finish groups in March/April had been agreed. The aim of the groups was to explore additional steps to further reduce shift overruns, conceding that most of the issues were outside the Trust's control.

Ceri provided some of her reflections from the paper which included:

- the positive light on the Equality, Diversity and Inclusion work and its progress;
- welcoming the climbing over 100 places in the workforce employer index; and
- celebrating the 225 applications for flexible working.

Angie Lewis indicated that whilst the improvement in the workplace employer index was a positive sign of progress, there was still room for improvement. She emphasised that the external accreditations and recognitions, such as the disability confidence commitment and the carers' confidence, were deliberate efforts to hold the organisation accountable and to seek external help to improve further. Angie committed to providing additional context on where the Trust stands overall in the index at the next meeting.

RESOLVED: That

- 1) The positive progress being made, visible in the Director Update, was noted; and**
- 2) Angie Lewis agreed to provide additional context on the Workforce Employer Index relating to the Trust's position in the index.**

125/24

OPERATIONS QUARTERLY REPORT

Lee Brooks began by expressing his condolences to the friends, family and colleagues of Jason Jones and Carl Merritt who had passed away recently.

He also congratulated Jerry Adams, a Community First Responder, who had recently been awarded his MBE at Buckingham Palace.

Lee Brooks highlighted several key points for Committee Members:

- The initiation of the E-timesheet workshop and its alignment with the migration of GRS to a cloud-based solution which was scheduled for next year.
- The conclusion of changes within EMS Co-ordination, including the introduction of new roles and the single allocator model, which faced challenges during the Winter, but was now showing positive feedback from staff.
- Collaboration between the operational, medical and clinical teams to improve clinical supervision for Advanced Paramedic Practitioners (APP), and the inclusion of prescribing for all Band 7 APPs was highlighted.
- The progression of palliative care paramedics, including the potential for advanced practice and external financial support.
- Discussions were ongoing with Trade Union Partners to agree on the rules of engagement for the next roster review, accepting the learning opportunities from previous experiences.
- The joint efforts of Ambulance Care and EMS Coordination to ensure Urgent Care Staff adhered to their scope of practice, with high compliance rates, was praised. Opportunities for clinical supervision in Ambulance Care was mentioned.

Members were content with the comprehensive report and no queries were raised.

RESOLVED: That the Operations progress was noted.

126/24

STAFF STORY – Mark Churchill

Mark Churchill has been a WAST employee for the past 10 years; he shared his career journey and experiences. Before joining the Trust, Mark had a diverse career, including 33 years with South Wales Police, where he developed skills in communication, investigation, and community engagement. He also worked for a drug and alcohol charity and as an investigator for the Office of National Statistics. These roles equipped him with valuable skills in dealing with people, building trust, and handling complex situations.

In his current role, Mark works in Ambulance Care, primarily transporting vulnerable and elderly patients to their medical appointments, including those in dementia units, dialysis units, and oncology. He emphasised the importance of building relationships with patients, providing social support, and ensuring their safety and comfort.

He highlighted the dedication of his colleagues and their commitment to treating patients with dignity and respect.

Mark also discussed areas for improvement within the Trust, particularly around communication and planning. He mentioned that staff often felt their suggestions for improvement were not heard or acted upon, leading to frustration. He suggested that localising planning could improve efficiency and reduce stress for both staff and patients. Mark also called for better integration of diversity training into mandatory training sessions to ensure all staff understood acceptable behaviour and practices.

Angie Lewis expressed her appreciation for Mark Churchill's openness and honesty in sharing his story. She acknowledged the positive aspects of his narrative, particularly highlighting the value of his extensive previous experience and how it contributed to his current role. Angie also noted the importance of Mark's feedback on training and communication, emphasising the need to connect and make training more accessible to colleagues. She thanked Mark for his contributions and for being candid about areas for improvement.

Bethan Evans thanked Mark Churchill for joining the committee and sharing his story, appreciating his honesty and transparency. She acknowledged the positive aspects of his work, particularly the relationships built with patients. Bethan noted that some of Mark's points resonated with her from her visit to Hawthorn station. She recognised the challenges in communication within a geographically dispersed organisation and asked Mark what one change would make the most significant difference in helping staff feel more appreciated and valued.

Mark Churchill responded to Bethan Evans by stating that there was not a single "golden nugget" to fix everything, but rather a combination of small improvements. He emphasised the importance of communication and local planning. Mark highlighted that staff often find the planning unrealistic and unachievable, leading to frustration. He suggested that

localising planning could significantly help staff and improve the overall service.

Hannah Rowan thanked Mark Churchill for his focus on what could be improved and stressed the importance of learning from those who knew the job well. She reflected on the specific issues Mark mentioned, such as inaccurate timings from hospitals and planning not being aligned with road conditions. Hannah highlighted the importance of addressing specific problems that make the job more difficult and worsen the patient experience. She expressed curiosity about how these issues were being taken forward.

Marcus Viggers appreciated Mark's balanced feedback, but noted that in the EMS and clinical directorates, staff ideas were often listened to and implemented if valid. However, he acknowledged that this level of engagement might not be present in Ambulance Care, currently.

Lee Brooks responded by emphasising the significant advancements made in Ambulance Care, referencing Mark Harris's recent presentation at the Trust Board. He highlighted the progress since the McClellan review of 2013, noting that the idea of devolving back to Health Boards was no longer discussed, which was a testament to the progress made. Lee acknowledged Mark Churchill's perception and thanked him for his honesty. He pointed out the structural differences between Ambulance Care and EMS, noting that Ambulance Care Managers handled larger teams and had less capacity compared to their EMS counterparts. Lee mentioned ongoing efforts to introduce clinical oversight for ACA staff, which could offer new career paths. He also addressed the planning issue, cautioning against creating a divide between field staff and control room staff.

RESOLVED: Mark Churchill's story was well received and the improvements suggested were noted.

Staff Story Diagram – Ela Lewis

The Staff Story Diagram from the previous meeting was received for information and was noted.

OUR WAST WAY

Angie Lewis explained that Our WAST Way was a key piece of work in culture change and invited Sara Mills to share her presentation with the Committee.

Sara Mills provided an update on the progress of the WAST Way project, emphasising its importance in driving cultural change within the organisation.

Sara focused on the vision and progress which aimed to articulate what good leadership looked like at different levels within the Trust, promoting a culture of compassion, inclusive and connected leadership. Three core leadership principles were developed,

- Care
- Value Everyone
- Connect

The project included structured development opportunities aligned with the principles to support leaders and managers at various career stages and create a more engaged, motivated and productive workforce.

Sara emphasised the link between staff experience and patient experience, noting that the culture within the organisation could significantly impact how staff interacted with each other and with patients.

Members were able to share their views, with Estelle Hitchon expressing concern about the environment that created poor managers and questioned whether the recruitment process focussed enough on disposition rather than just qualifications. She highlighted the pressure on middle management and suggested this could lead to poor behaviour. Andy Swinburn spoke of the importance of professionalising leadership as a skill set, noting that both disposition and qualifications were necessary for effective leadership.

Bethan asked how the Trust planned to measure performance against the leadership behaviours and how line managers would be trained to respond positively and constructively to 360 feedback.

Andy Swinburn responded by saying both attitude and disposition skills were crucial for effective leadership and that the Trust could implement specific metrics together with regular evaluations, which may include feedback from 360 reviews, appraisals and direct observations. He also

suggested providing training programmes which focussed on both technical and soft skills required for effective leadership.

Hannah reflected on the importance of addressing specific issues raised by staff and ensuring the Trust took steps to improve the work environment.

Angie Lewis summarised the discussion by emphasising the importance of the leadership behaviours and principles in driving cultural change within the organisation. She highlighted the need for clear leadership behaviours and structured development opportunities as key drivers for achieving true cultural change. She also acknowledged the rich insights and questions raised and mentioned the importance of continuous learning and improvement based on the feedback received.

RESOLVED: That the Committee

- 1) took assurance from the update provided on the WAST Way;**
- 2) commented on and received the content of the update; and**
- 3) committed to the role in this agenda.**

128/24

CULTURAL THEMES AND TRENDS REPORT

Liz Rogers provided an overview of the key data related to employee relations, turnover, and moving on interviews for the period from July to December 2024. Key points included:

- 63 new disciplinary cases, a significant increase compared to the same period last year.
- 18 requests for respect & resolution (R&R) cases, a slight decrease from the previous year.
- The average duration for a case to be closed was 33 days, a significant improvement from previous averages.
- Fast track cases saw a 18% increase, with 14 cases during the period.
- Complex cases, particularly those involving sexual safety concerns, took longer to resolve, with an average of 209 days.
- The average duration for cases involving police investigations was 122 days.

There was a significant increase in the number of cases resolved through informal action, such as training and development or informal conversations.

Liam Williams raised a point about the importance of ensuring that local resolution genuinely led to the cultural change the Trust was seeking. He emphasised the need for confidence that local resolution not only addressed the immediate issue but also contributed to a true cultural shift, preventing the recurrence of similar issues.

Liz Rogers discussed the feedback from the moving on interview pilot data, highlighting the depth of information now available through the new process, which went live across the Trust in January. Key points included:

- The new process included a digital trigger and reminder for managers to conduct interviews or for leavers to complete the questionnaire.
- The data provided insights into reasons for leaving, levels of satisfaction with workplace relationships, recognition, and whether thoughts and ideas were heard.
- There were differences in feedback based on gender, with significantly more female leavers than male leavers.

The data also covered areas such as career progression, coaching, and mentoring opportunities.

Angie Lewis discussed the Speaking Up Safely data, emphasising its importance as the first meaningful insight available to the committee. Key points included:

- 65 concerns were raised in the last six months, with a notable increase in October during the Speaking Up Safely month and its promotion at CEO Roadshows.
- The number of anonymous concerns decreased after rapport was built with those reporting a concern by Lizzie O'Shea.
- 63% of the concerns were related to incivility.
- Many concerns were resolved at a local level or by senior leaders, which aligned with the vision of addressing issues at the most appropriate level.

There was a focus on understanding and mitigating detriment experienced by individuals who came forward with concerns.

RESOLVED: That the Committee

- 1) accepted and noted the report and presentation deck;**

- 2) **noted the rollout of Moving on Conversations across the organisation with future updates to be received through the Cultural Themes and Trends report; and**
- 3) **noted the Speaking Up Safely case volumes identified in the report.**

129/24

COMPASSIONATE PRACTICES UPDATE AND ACTION PLAN (Compassionate Practices Deep Dive)

Liz Rogers provided an update on the compassionate practices, highlighting the following points:

- The journey began in 2022, inspired by work from Aneurin Bevan University Health Board.
- 224 colleagues have been trained in compassionate practices, with more to follow.
- 70 colleagues have received investigating officer training, and additional training sessions on misogyny and sexual safety have been conducted.
- An internal audit identified four actions, most of which were completed, with some still in progress.
- An external evaluation by a university in Austria was underway, analysing quantitative and qualitative data to assess the effectiveness of the initiatives.

The focus was on embedding compassionate practices across all managerial activities, not just disciplinary processes, to create a consistent and supportive work environment.

Members welcomed the update and no queries were raised.

RESOLVED: The Committee

- 1) **confirmed assurance on the progress against the audit actions; and**
- 2) **noted the progress against the action plan.**

130/24

PEOPLE AND CULTURE PLAN METRICS UPDATE AND WORKFORCE SCORECARD

Angie Lewis provided an update on the People and Culture Metrics, focusing on the following points:

- The inclusion of safeguarding data for the first time, reflecting the work done with Liam William's team on behaviours and sexual safety concerns. The transparency in reporting 45 open safeguarding cases, including elements of sexual misconduct was a crucial step towards addressing these issues and ensuring accountability.
- People networks are thriving, with a significant number of participants leading to better communication, collaboration and morale.

Providing updates on change management showed a commitment to continuous improvement and adaptation. This helped in keeping everyone informed and aligned with the Trust's goals.

Angie discussed the review of People and Culture Metrics, highlighting the following recommendations:

- It is proposed to continue alternating between qualitative and quantitative metrics.
- The categorisation of metrics under the three Cs will be maintained: culture, capacity, and capability, linked to the People and Culture Plan.
- The current quantitative measures will be maintained while adding safeguarding and speaking up safety metrics.
- Reporting will continue spotlighting specific issues during the qualitative reporting.

Angie Lewis reiterated the importance of equality, diversity, and inclusion as a golden thread through the People and Culture work. She highlighted key priorities for the upcoming year, including the Clinical Model Transformation Programme, and sought feedback on whether any important areas were missing from the priorities list.

Angie Lewis highlighted the importance of the metrics in understanding the impact of initiatives and ensuring that the Trust was moving in the right direction. Angie also mentioned the importance of evaluating the effectiveness of actions and continuing to build on the work done so far.

Members queried what good would look like in 2028. The response highlighted the vision for 2028, emphasising the importance of understanding what tangible difference would be seen and how the Trust would feel and operate differently. Angie Lewis confirmed that the

team were actively considering and planning for the long term visions referencing previous discussions and materials.

Angie Lewis also confirmed that progress would be measured through employee relations, speaking up and other activities. It was noted that these measures would eventually stabilise and drop, indicating progress.

RESOLVED: That the Committee

- 1) received and commented on the progress to date;**
- 2) supported the recommendations made in relation to metrics; and**
- 3) supported the proposed priority focus areas for the 2025-28 IMTP.**

130a/24

MONTHLY INTEGRATED QUALITY AND PERFORMANCE REPORT (MIQPR)

Alex Crawford presented the MIQPR for December 2024/ January 2025 and pointed out the following key areas:

- During the winter period, hours lost to handover increased, which was a significant factor affecting staff experience. However, during peak periods, the Trust was able to produce above 95% of the required hours, reaching 97% at peak times.
- The abstraction rates were slightly below the benchmark of 30%, primarily driven by annual leave rather than sickness. Sickness rates showed a downward trend, with January figures at 8.12%, still above the target but improving.
- Stress and anxiety continued to be the leading causes of sickness, with a notable increase in short-term sickness during December. Long-term sickness trends showed some improvement.
- The flu vaccination uptake was 28.4%.
- There was significant progress in the Clinical Model Transformation (CMT) programme, particularly for corporate staff and operational staff in senior roles. Workshops in January helped reflect on the pace of the programme and adjust it to maintain momentum without causing burnout.
- The issue of shift overruns was addressed earlier in the meeting, so it was not elaborated on further in this report.

- Performance Appraisal and Development Review (PADR) completion rates increased but were still not at the desired level. Mandatory training compliance was above target.

Overall, the report highlighted key performance metrics, trends in sickness and abstraction rates, progress in the CMT programme, and the importance of maintaining a balanced pace to avoid staff burnout.

Ceri Jackson queried the figures relating to applications received which stated that 714 of the 1248 received were from underrepresented groups. The figure was an error and would be corrected in the next report.

RESOLVED: That

- 1) the MIQPR report was considered, and the Committee took assurance from the update given; and**
- 2) Alex Crawford would revisit the number of applications received from underrepresented groups and ensure this was updated in the next report.**

131/24

INTERNAL AUDIT REPORT: RESOURCING POLICY

Lee Brooks acknowledged that the limited assurance audit was anticipated and had to a certain extent been expected. The committee was informed that the primary issue was the outdated resourcing policy, which required a holistic refresh. The team has committed to addressing this in the upcoming year, working with Trade Union Partners to meet the timeline set out in the management response, aiming for completion by October.

Lee emphasised the significant amount of work required to review and republish the resourcing policy, but was committed to achieve this. It was recognised there was a need to develop departmental focused standard operating procedures to separate policy from procedure.

Damon Turner highlighted that within the policy the main issues raised by members, included overruns, and TOIL, which were significant concerns for their members.

Actions to address recommendations include ongoing oversight and monitoring of working time regulations, establishing a reporting mechanism using the senior operations team, and developing departmental standard operating procedures.

Bethan Evans noted there were significant variances in working time breaches across different areas, with the southeast showing the highest number of 11-hour breaches. A detailed analysis report was planned to understand and address these variances. Lee Brooks agreed to provide a report for Committee once the findings were known.

RESOLVED: That the Resourcing Policy audit was received and noted the commitment to progress a refreshed policy.

132/24

WASPT HIGHLIGHT REPORT – JANUARY 2025

Christian Fox mentioned that WAST had been invited to deliver a session at the annual Ambulance Leadership Forum (ALF) conference next month, to talk about WAST's experience, learning and activities of building respectful and cohesive relationships. TU Partners were asked to feed back to the Committee at the next meeting on this.

A Social Partnership Conference was due to be held in March to look at how to build relationships and move forward following a recommendation from an earlier ACAS report. Staff were working together to present key aspects of partnership working at the conference. Liz Rogers had been organising the Social Partnership Conference with preparations well underway for guest speakers and internal speakers from the Trust being finalised.

Health boards are working with WASPT to provide the necessary electrical infrastructure for the new Dyson fans purchased to reduce exposure to diesel fumes for members.

Christian mentioned ongoing issues with members being unable to take TOIL, linked to delays at hospitals. A task and finish group has been set up to address these issues and find a way forward.

Christian briefly mentioned that they were starting to look at planning for Christmas, although it was still early in the year.

RESOLVED: That the

- 1) detail contained within the report was noted; and**
- 2) TU representatives would provide feedback to the Committee on their experience at the ALF conference.**

133/24

INTERNAL AUDIT REPORT: EXPOSURE TO FUMES

The internal audit provided reasonable assurance across the areas of work. Management actions have been confirmed, and several had progressed since the report was completed.

It was recognised that progress has been made in securing and rolling out Dyson fans for heating to address temperate weather conditions.

Efforts were underway to secure a master class with an expert public health consultant to further address the issue.

Liam Williams acknowledged the challenges in ensuring compliance with mitigation measures. The Health and Safety team, Operations team, and Trade Union Partners were all involved in this effort.

RESOLVED: That the exposure to fumes internal audit report was received.

134/24

ANNUAL EFFECTIVENESS REVIEW 2024/25

Trish Mills presented the annual effectiveness review, stressing that they provided a valuable chance for the committee to collectively assess its effectiveness.

Estelle mentioned the need to triangulate the information received in the Committee with what was seen at Board level and during Non-Executive visits.

Sara Mills stressed the importance of connecting metrics to the specific issues the committee aimed to address. She proposed that metrics should be linked to particular cultural themes or issues, such as social partnership and leadership and management, to offer a clearer direction and focus. Sara also mentioned that rather than using all available metrics, it would be more effective to associate specific metrics with particular projects, like "Our WAST Way," to provide a more focused evaluation and clearer narrative.

Catherine Goodwin voiced her discomfort with including Respect & Resolution (R&R) disciplinary cases and suspensions under the Speaking Safely metrics. She stressed that speaking up safely covered a broader range of issues, such as raising concerns about patient safety, and should be considered separately from disciplinary matters.

Liam Williams emphasised the need to distinguish between reporting specific incidents where staff did not feel safe under the Speaking Up

Safely initiative and the general reporting of patient safety incidents through the Datix system. He pointed out that most patient safety incidents were reported through the Putting Things Right team and stressed that these two reporting routes should remain separate to prevent confusion.

Angie Lewis recognised that much of the reporting on equality, diversity, and inclusion was statutory and mandatory. She suggested that there should be more focus on visible indicators such as sick absence, discipline, grievance, and R&R metrics, and emphasised that these should be reported separately from the Speaking Up Safely metrics.

Ceri Jackson stressed the importance of triangulating the Monthly Integrated Quality Performance Report (MIQPR) metrics with other reports to provide context. She noted that while the MIQPR included many relevant metrics, it was essential to link them to the broader context of the People and Culture Committee's work. Ceri also mentioned the need for the MIQPR to be more tailored to the Committee's needs, while recognising the challenge of ensuring that the context from other parts of the report was not lost.

Trish Mills discussed the importance of concentrating on the strategic direction and the long-term impact of the Committee's work. She suggested that the committee should shift its focus from merely monitoring the implementation of plans to evaluating their outcomes and impact. Trish highlighted the need to ensure that the metrics and reporting provided to the Committee were aligned with the strategic objectives, offering a clear line of sight to the desired outcomes. Additionally, she emphasised the importance of triangulating metrics and ensuring that the Committee received reports that linked various elements together, providing a comprehensive view of the Trust's progress.

Carl Kneeshaw explained that the skills mix was part of the broader strategic workforce plan, emphasising that having the right people in the right place at the right time was crucial for determining the skills mix, which was an operational aspect of the plan. He highlighted that workforce planning involved analysing the strategic workforce plan, identifying what was needed, and implementing the requirements back into the model to ensure the Trust had the appropriate skills mix to meet its needs.

Chris Turley endorsed the inclusion of the skills mix in the Committee's considerations, noting the importance of capturing the broader context of both clinical and non-clinical elements, even while focusing on specific parts of the business. He mentioned that incorporating the skills mix would help address the broader capacity perspective and ensure that the committee's focus aligned with the Trust's overall objectives.

Lee Brooks supported the inclusion of volunteers in the Committee's considerations, emphasising that volunteers were an integral part of the organisation, much like paid staff, and should be included in the People and Culture Committee's remit. However, he expressed caution regarding the inclusion of the skills mix, noting the potential for overlap with other committees such as Quest and Finance and Performance. Lee highlighted the importance of avoiding duplication and confusion when addressing the skills mix from both clinical and budgetary perspectives.

Trish observed that the Committee had not received standalone reports on leadership and management development and succession planning until the current meeting, where the "Our WAST Way" was presented. She suggested considering changes in the wording around the capability section to better reflect the committee's focus and responsibilities.

Trish also raised the possibility of including additional elements under capability, such as HEIW commissioning, registration and revalidation, learning and development, and assurance on the armed forces covenant. There was a discussion on whether to include assurance around DBS and driving licence checks, but it was noted that these were transactional and managed by Shared Services. The discussion also touched on whether to specifically highlight the skills mix, but it was noted that this fell under the strategic workforce plan and was more operational. Additionally, it was suggested to include volunteers in the capability section, as they are considered part of the Trust.

A discussion was facilitated as outlined above to consider what changes and improvements could be made to the Committee's operations. The draft Annual Report was reviewed, however the final Report for submission to the Audit, Risk and Assurance Committee, and the revised Terms of Reference for 2025/26, would be circulated for approval by Chair's Action after the meeting.

RESOLVED: That

- 1) Committee discussed its remit in line with the terms of reference;**

- 2) **Members evaluated the cycle of business and proposed potential changes and improvements;**
- 3) **The draft Annual Report was reviewed; and**
- 4) **The final Annual Report and revised Terms of Reference for 2025/26 would be circulated for approval by Chair's Action.**

135/24

RISK MANAGEMENT AND BOARD ASSURANCE FRAMEWORK

Trish mentioned that the risk management report was not a fresh set of risks for the Committee because it had been seen at the Board previously. She was discussing with Julie about potentially changing the cycle to better align with the committees.

Trish highlighted the four top risks, noting that two were rated at 20 (sickness and reputation).

Risk 160 - High absence rates;

Risk 163 - Maintaining Effective & Strong TU Partnerships;

Risk 201 - Reputation;

Risk 558 - Deterioration of staff health and wellbeing.

Trish pointed out that the Trade Union relationship risk had reduced to a score of 12.

The health and well-being of staff risk remained unchanged, with new mitigations and actions updated.

Ceri Jackson expressed concern about taking assurance on the items listed in the risk report because the information might be outdated or inaccurate due to the timing of the report. She noted that the end of March is only six weeks away, and it is important to ensure that the deadlines are met.

Trish assured members that all risks have had reviews, and there were new mitigations and actions updated. The risks were coming to the Executive Leadership Team for further review.

Trish suggested that if the timing of the report could not be aligned, the report should include a summary of any significant updates or issues that needed attention. This would ensure that the committee was aware of the most current and critical information, even if the full report was slightly outdated.

Carl also provided assurance that the team had been working on updating the risks and actions, and the next iteration of the report would show completed or removed actions, as well as any additional

ones that come on stream. He mentioned that the updated report would be presented to the Board, providing more accurate and current information.

RESOLVED: That

- 1) The report was considered and discussed; and**
- 2) Future reports where reporting was out of alignment to meetings, an updated position would be provided in the SBAR.**

136/24

DEEP DIVE ON RISK 160 (High Absence Rates): Managing Attendance

Liz provided a detailed presentation on the deep dive into managing absences risk by way of a presentation. She highlighted the comparison of sickness absence data from the last quarter of 2024 against 2023, noting the trends and patterns observed, noting that the general trajectory of sickness was downward, which was positive.

She identified areas with higher levels of sickness absence, specifically in integrated care and EMS, and discussed potential drivers for these increases.

Liz outlined the actions planned in response to these challenges, emphasising the importance of targeted interventions and ongoing monitoring to mitigate the impact of high absence rates.

She also mentioned the national position of ambulance services, comparing their sickness absence rates to provide context and benchmarks.

Additionally, Liz spoke to the performance of corporate service teams, noting that some teams showed very small to zero absences in the last five months, while others experienced increases due to significant workloads and ongoing changes.

She shared a case study from Swansea and Neath, where the introduction of welfare pods led to a consistent reduction in sickness absence and positive feedback from staff regarding stress levels and mental health.

Estelle Hitchon raised a question about the calculation of sickness absences, specifically comparing WAST's method to that of West Midlands Ambulance Service. She noted that WAST counts all days in the week as sick days if someone is off for their shifts and not back for

the following days, whereas West Midlands only counts the working days. Estelle questioned whether this method was right, wrong, or indifferent, as it seemed to her that it might be skewing the data.

Carl Kneeshaw agreed to review how sickness was recorded to ensure alignment with other UK ambulance services; noting that West Midlands recorded their data differently.

RESOLVED: That

- 1) the contents of the presentation were noted; and**
- 2) Carl Kneeshaw agreed to review how sickness was reported in line with other UK ambulance services.**

137/24

AUDIT TRACKER Q3 2024/25 REPORTING

Trish Mills discussed the audit tracker, pointing out that the current format was a long spreadsheet, and that work was ongoing to developing more intelligent reporting. She highlighted that 17% of the actions were closed, with three more pending confirmation of evidence. Additionally, over 40% of the actions had moved dates, but she assured members that there was robust challenge and confirmation when dates were moved. Trish emphasised that the goal was to avoid moving dates unless absolutely necessary and to ensure that high-priority recommendations were addressed promptly.

Trish Mills asked the committee to endorse the approach of closing the outstanding actions from the Trade Union Release Time audit, acknowledging that they may not be closed in the originally envisaged manner but ensuring that the risks were mitigated.

Ceri Jackson mentioned that at the Audit Committee, it was agreed that for items on their third revised date, the responsible Director would be invited to provide an update. This process ensured accountability and transparency for actions that had been delayed multiple times.

RESOLVED: That

- 1) the new Internal Audits and Audit Wales reviews within the remit were received and reviewed;**
- 2) the management actions to address recommendations in the Audit Tracker be monitored; and**
- 3) the update provided in respect of the two audit actions relating to Trade Union Release Time were received and considered and confirmed a closed position.**

138/24 POLICIES FOR APPROVAL

The Committee recognised that the policies listed below had all been through the appropriate route and were approved by Committee.

Occupational Health Policy
Recruitment and Selection Policy
Occupational Immunisation Policy
Equality Impact Assessment Policy
Bank Worker Policy

RESOLVED: That the five policies listed above were approved.

139/24 CONSENT ITEM – Not discussed in the meeting

Committee Cycle of Business Monitoring Report & Committee Priorities.

140/24 CONSENT ITEM – Not discussed in the meeting

Welsh Ambulance Services Partnership Team (WASPT) Minutes of the meeting held on the 15 November 2024.

141/24 REFLECTIONS AND SUMMARY OF DECISIONS/ACTIONS

Reflections on the meeting were that the discussion regarding Our WAST Way was of particular importance given its role in leadership and management development and in driving cultural change. The approach taken to the facilitation of the committee effectiveness review was commended. The focus on more strategic as opposed to transactional matters of business was acknowledged, and Members felt that the hybrid approach worked well.

142/24 ANY OTHER BUSINESS

Nothing raised.

143/24 DATE OF NEXT MEETING

The next meeting is scheduled for the 15 May 2025.

