

**CONFIRMED MINUTES OF THE PEOPLE AND CULTURE COMMITTEE MEETING
(OPEN SESSION) HELD REMOTELY VIA MICROSOFT TEAMS ON 09 MAY 2023**

Chair: Paul Hollard

PRESENT:

Paul Hollard	Non-Executive Director and Chair
Hugh Bennett	Assistant Director, Planning and Performance
Julie Boalch	Head of Risk/Deputy Board Secretary
Judith Bryce	Assistant Director of Operations
Alex Crawford	Assistant Director of Planning and Transformation
Sarah Davies	Workforce and OD Project Manager
Colin Dennis	Chair of the Trust
Bethan Evans	Non-Executive Director
Dr Catherine Goodwin	Assistant Director Inclusion, Culture and Wellbeing
Wendy Herbert	Assistant Director of Quality & Nursing
Estelle Hitchon	Director of Partnerships and Engagement
Melfyn Hughes	Welsh Language Services Manager
Fflur Jones	Audit Wales
Jo Kelso	National Ambulance Training College
Jason Killens	Chief Executive Officer
Trish Mills	Board Secretary
Donna Morgan	NWSSP Audit and Assurance
Hugh Parry	Trade Union Partner
Alex Payne	Corporate Governance Manager
Jeff Prescott	Corporate Governance Officer
Liz Rogers	Deputy Director of Workforce and OD
Hannah Rowan	Non-Executive Director
Andy Swinburn	Director of Paramedicine
Chris Turley	Executive Director of Finance and Corporate Resources
Nicola White	Head of Health and Safety
Liam Williams	Executive Director of Quality and Nursing

APOLOGIES:

Angie Lewis	Director of People and Culture Services
Paul Seppman	Trade Union Partner
Lee Brooks	Executive Director of Operations
Joga Singh	Non-Executive Director
Mark Marsden	Trade Union Partner

24/23 WELCOME AND APOLOGIES FOR ABSENCE

The Chair welcomed all to the meeting of the People and Culture Committee and advised that the meeting was being audio recorded. Apologies were recorded from Lee Brooks, Paul Seppman, Joga Singh, Angela Lewis and Mark Marsden.

25/23 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.

26/23 MINUTES OF PREVIOUS MEETING AND ACTION LOG

The Minutes of the Open meeting held on 14 March 2023 were considered and agreed as a correct record. The Action log was considered, reviewed, and updated.

RESOLVED: That the Minutes of the meeting held on 14 March 2023 were AGREED.

27/23 DIRECTOR OF PEOPLE AND CULTURE DIRECTORATE UPDATE

Liz Rogers gave an update on recent developments within the People and Culture Directorate, drawing out the main highlights for Members attention. These included the procurement of the MS365 Learning Management System, enabling all WAST staff to engage with learning content in a familiar and intuitive environment, in response to repeated feedback from colleagues.

Other positive developments saw the Trust apply for and gain Centre status to deliver ILM qualifications across Leadership & Management (Levels 2-4 initially) and Coaching & Mentoring (Level 5 initially). Gaining Centre Status would enable design/co-design, delivery, assessment and evaluation that met the needs of the Trust as it evolved with a genuine focus on the skills, knowledge and understanding that Trust staff needed to deliver the service, now and into the future.

Members received the update and noted the key developments within the Directorate, recognising the importance and significance of the work being undertaken, particularly in regards to the Trust achieving Centre status and the benefits this would bring to those in leadership and management roles.

RESOLVED: That the update was NOTED.

28/23

OPERATIONS QUARTERLY REPORT

Judith Bryce presented the Operations Quarterly Report as read, focussing only on the main points of the report for discussion with the Committee. Members attention was drawn to the recent disruption as a result of industrial action, the closure of the Covid-19 mobile testing units, and the work which must now be undertaken to review and implement the recommendations arising from the Manchester Arena public enquiry.

Other significant developments included the work which was underway to prepare documentation and submissions for the Covid-19 Public Inquiry. This involved the preparation of submissions that was capacity consuming across the Directorate, requiring the involvement of the Trust's most senior team members.

In January 2023, approval was given for analgesia (pain relief) to be issued to volunteer Community First Responders (CFRs). The plan to increase numbers of volunteers has successfully increased CFR teams by more than 130 new volunteers trained during 2022/23. There will be an additional 30 more volunteers trained in the new financial year due to phasing into April. Recruitment into the volunteer management and support team has also progressed well.

Finally, the Committee was updated on the reinstatement of the Intelligent Routing Platform, which had been suspended in late 2022 due to the significant impact upon Trust resources. The report noted that as a result of system rule changes, no more than 2% of the Trust's weekly call answering activity was for other services, which was much more manageable alongside a reduced call answer wait time for 999 users in Wales.

Members received the report and queried whether any feedback had been provided following the approval for CFRs to administer analgesia. Judith Bryce stated that this was a very recent development and unfortunately, it was too early for any feedback to have been provided. Members also noted the reinstatement of the Intelligent Routing Platform within the Trust and welcomed the changes which had resulted in reduced drains upon existing capacity.

RESOLVED: That the update was NOTED.

29/23 STAFF STORY

Dr Catherine Goodwin provided Members with an update on an earlier staff story from a member of staff who had discussed their experiences of racism, discrimination and issues they had observed around different faiths, particularly in regard to designated prayer space across Trust sites and religious holidays.

Members agreed two actions as a result of the observations and agreed to explore potential prayer space across Trust sites and to also look into time off for non-Christian festivals such as Eid and Ramadan as concerns were raised around non-Christians working holidays such as Easter and Christmas but not getting the same consideration for other faith based holidays.

RESOLVED: That the staff story was NOTED.

30/23 PEOPLE AND CULTURE PLAN

Liz Rogers presented the People and Culture Plan to Committee for endorsement prior to approval at Trust Board. Members were informed that the plan comprised a single overarching narrative, underpinned by an enabling framework which clearly outlined the Trust's ambitions in relation to Equality, Diversity and Inclusion, Culture and Behaviours, Wellbeing, Leadership and Management and Education and Training.

Liz Rogers expanded upon the plan, explaining that it was designed to be agile and dynamic in nature, with actions for years two and three to be formulated during the first year of delivery, in response to the evaluated impact of the preceding year's actions. The Plan centred around the 3Cs (Culture, Capacity and Capability) and was underpinned by The King's Fund's ABCs (Autonomy, Belonging & Contribution) of Core Needs at Work.

Members were informed that a "rich picture" had also been developed, with the aim of bringing to life the Trust's culture change vision for what it would look and feel like to work in the Welsh Ambulance Services NHS Trust in three years' time.

Members received the plan and noted the aims and overall vision for the Trust moving forward. Members queried how these aims would be communicated to staff and how progress against the stated goals would be measured given the scale of the tasks. Liz Rogers stated that a communication strategy would be developed to utilise all existing platforms such as Siren and other Trust publications to promote the plan to colleagues along with assistance from Trade Union partners to help promote the message to their members. In terms of monitoring effectiveness,

a number of metrics would be monitored along side feedback from staff to help determine progress.

RESOLVED: That The Committee RECEIVED and ENDORSED the plan for approval by Trust Board.

31/23 SPEAKING UP SAFELY UPDATE

Dr Catherine Goodwin outlined the current plan to roll out the freedom to speak up process across the Trust along with the closing report for the task and finish group. The report explained how the Trust was working towards becoming an inclusive psychologically safe organisation, providing multiple pathways for everyone to feel they can raise concerns.

These pathways included reverse mentoring to increase understanding, bystander training to increase confidence, and raising awareness of micro-aggressions to enable all staff to reflect on their own behaviours. In addition, the Trust's Voices Network provided people with a safe space and support to talk through options with Trade Union partners able to advocate for members.

The report noted that the All-Wales Speaking Up Safely process was being finalised and once that was published, the Trust would adopt that policy.

There was no date for this as yet but the Trust was part of the working group and had developed some of the toolkits in partnership.

Members received the report and welcomed the very positive approach and progress which had been made. Members commented on the importance of the work and observed that the measures and actions being undertaken would stand the Trust in good stead in terms of being at the forefront of addressing issues around speaking up safely and changing behaviours.

RESOLVED: That the Committee received the report and the contents, including the closure date, were NOTED and SUPPORTED.

32/23 CORPORATE RISK REGISTER AND BOARD ASSURANCE FRAMEWORK

Julie Boalch gave an update on the Corporate Risk Register and Board Assurance Framework (BAF), providing assurance in respect of the management of the Trust's principal risks, specifically the 6 risks that are relevant to Committee's remit. These were:

- Risk 160: High absence rates impacting on patient safety, staff wellbeing and the trust's ability to provide a safe and effective service.
- Risk 163: Maintaining Effective & Strong Trade Union Partnerships.
- Risk 199: Failure to embed an interdependent and mature health and safety culture which could cause harm and a breach in compliance with Health & Safety statutory legislation.
- Risk 201: Damage to Trust reputation following a loss of stakeholder confidence.
- Risk 557: Potential impact on services as a result of Industrial Action.
- Risk 558: Deterioration of staff health and wellbeing in as a consequence of both internal and external system pressures.

Additionally, the report also provided an update on the Trust's two highest scoring risks which are assigned to the Quality, Safety & Patient Experience Committee (QuEST) for oversight (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 were informed that each of the principal risks were presented to the Trust Board on 30th March 2023 and were updated as of 30th April 2023. Each risk had been reviewed in full during that period, including controls, assurances, gaps and mitigating actions.

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 contents of the report were NOTED.

33/23

WELSH AMBULANCE SERVICES PARTNERSHIP TEAM (WASPT) ADVISORY GROUP HIGHLIGHT REPORT

Trish Mills provided an update on the key areas discussed at the last WASTP meeting held on April 13th 2023. No alerts were identified for the attention of the Committee although advisories were given around WASPT sub-structures, elements of the IMTP 2023-26, the challenging revenue and capital financial plan for 2023/24, diesel engine exhaust emissions, and the issues of Trust staff portering patients at hospitals.

Members noted that the Executive Director of Quality and Nursing had presented an update on the issue of diesel engine exhaust emissions to the WASPT advisory group with a risk being developed in regard to this. The existing risks to delivery of the IMTP and the financial position were also discussed.

RESOLVED: That update was NOTED.

34/23

ENGAGEMENT FRAMEWORK DELIVERY PLAN AND REPUTATION AUDIT

Estelle Hitchon gave a verbal update on the latest position with the engagement framework before giving a presentation on the reputation audit. Members were informed that consultation with an external provider was currently underway and work on the engagement framework was temporarily paused, pending the outcome and recommendations from that provider.

Members heard that the reputation audit was conducted in Q3 of 2022/23, with a wide range of stakeholders targeted. Most participants were identified by sector only and given a mix of open and closed questions as well as some free text options where applicable. Of those approached, 46 had provided responses.

Of those responses, a number of clear views and perceptions were expressed about how the Welsh Ambulance Services NHS Trust was being run and how it was performing, with a wide range of opinions, both positive and critical. It was clear from the responses that those who had responded understood and appreciated the significant pressure that the Trust had been under in recent years and continued to be under.

Members received the update and recognised the concerns which had been raised by some of the stakeholders who had taken part in the reputation audit. Consequently, Members queried what more could be done in order to address these concerns. Estelle Hitchen noted that further discussion and exploration of the feedback would be required in order to gain a better understanding of the reasons and comments which were fed back to the Trust. Members agreed a Board development session would be the best forum for this to happen and that this should take place when timing allows. Once this had been done and Members had been afforded the opportunity to fully digest and take in the feedback, the findings could then be discussed further at Trust Board.

RESOLVED: That the update was NOTED.

35/23

CYCLES OF BUSINESS

Trish Mills provided the Committee with the updated Cycle of Business as the final step in the 2023/24 effectiveness review process. Members were informed that the cycle of business would be used to build the quarterly Committee agenda, with a monitoring report being provided to each meeting and where issues of escalation

were required i.e. where cycle needed to be adjusted or reporting was overdue, these would be drawn out in a short paper by the Board Secretary.

Members reviewed and approved the 2023/24 cycle of business and noted the cycle of business monitoring document which had been provided along with the report.

RESOLVED: That

1. the 2023-24 cycle of business at Annex 1 was REVIEWED and APPROVED.

2. the cycle of business monitoring document at Annex 2 was NOTED.

36/23

MONTHLY INTEGRATED QUALITY AND PERFORMANCE REPORT

Hugh Bennett gave a brief overview of the main points from the Monthly Integrated Quality and Performance report. The report contained information on 26 key indicators which painted a poor picture in terms of the quality and safety of the Emergency Medical Services (EMS). 111 call answering rates remained problematic, although the clinician call back rates were above or close to target. Non Emergency Patient Transport Services (NEPTS) performance was stable with the Urgent Care Services (UCS) being rebased through a modelling exercise.

The Emergency Ambulance Services Committee, Welsh Government and the 111 Programme Board were very supportive of the Trust through the pandemic, investing in a range of mitigations; however, funding for further initiatives is currently limited and is expected to worsen significantly in 2023/24. For 111 and NEPTS, the Trust could look to take a range of actions to optimise the balance between patient demand and capacity. However, for EMS and UCS, the Trust could not take sufficient actions within its control to mitigate the impact of the extreme handover lost hours. As a result, the People and Culture Committee, the Finance and Performance Committee and the Quality, Patient Experience and Safety Committee had expressed serious concern about the impact of handover lost hours on patient safety and staff well-being. It remained critical to patient safety that handover lost hours were reduced in line with Ministerial expectation and that further actions to shift patient demand were supported.

Members received the report and raised concerns around the current performance of the Trust and the impact that this was having upon staff and patients. Members queried whether anything more could be done to help reduce the number of complaints and concerns being raised by service users and what additional support could be given to the staff who were dealing with those complaints.

Liam Williams confirmed that actions were being taken to try and reduce the backlog of complaints. Additional supervisions had been implemented and discussions had taken place with the Wellbeing team to see what support could be given to staff who were working on those concerns in order to help the deal with the current workload.

RESOLVED: That the March 2023 Integrated Quality and Performance Report and actions being taken, determining whether:

a) the report provided sufficient assurance.

b) whether further information, scrutiny or assurance was required, or

c) further remedial actions were to be undertaken through Executives was CONSIDERED.

37/23 WORKFORCE PERFORMANCE SCORECARD REPORT

Liz Rogers provided an overview of the key People and Culture performance data and trends up to March 2023 and the associated improvement actions. The report drew Members attention to a number of areas, including increased sickness absence for March, albeit with indicative figures denoting a reduction for April 2023, the impact of Industrial Action on delivery of MIST training (affecting Statutory and Mandatory training compliance rates and conclusion of the 2022-23 Flu vaccination programme, with 44.5% uptake.

In addition, the Committee was asked to note the following headlines:

Time to Hire: Currently the pan-Wales target was 44 days and the Trust had been improving consistently, returning a figure of 46.4 days in January, 43.6 days in February and 34.6 days in March 2023. This figure could be improved by ensuring that steps such as shortlisting and giving outcomes were within the targets set. Currently the target for shortlisting is 3 days and the Trust came in at 2.9 days. The target for delivering outcomes was 3 days and currently, the Trust was at 10 days. Members were informed that the Trust had implemented a vacancy control panel to help manage recruitment across the organisation. This would be closely monitored to ascertain the impact on achieving the desired KPIs. Alongside this, there would be a continuous drive to ensure managers were aware of the implications of any delay during recruitment on the KPIs.

Statutory and Mandatory Training Compliance: Completion of Statutory & Mandatory training at level 1 for the ten CSTF (Core Skills Training Framework) topics was at 77.26% for the Trust at the end of March 2023; this was the figure reportable to WG against a target of 85%.

PADRs: Completion rates across the organisation had increased to 73.69% - an increase of 8.51% on the figure reported at the last meeting of the People and Culture Committee and an increase of 14.42% over the last year.

Members received the update and noted the improvement in performance, especially around PADR compliance and recruitment times.

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

38/23 IMPROVING ATTENDANCE PROJECT PROGRESS UPDATE

Liz Rogers gave a presentation setting out the sickness absence data, up to and including February 2023. Members heard how the continual monitoring and focus on sickness absence had enabled support and access to internal and external interventions contributing to the decreasing absence rates. In February 2023, the reported Trust wide sickness absence had decreased to 7.99%, which was the lowest rate since May 2021, seeing a decrease in short term as well as long term absence.

However, indicative data for March 2023 suggested that there would be a slight increase in absence rates to 8.43%. This would predominantly be due to a rise in short term Covid-19 absence. In addition to management of sickness absence training for managers, further bespoke training and support had been undertaken with additional sessions booked across Ambulance Care (NEPTS) and Resource and EMS Response. This intervention had contributed to the reduction in absence across those Directorates.

The average length of days during a period of sickness had seen a reduction to 21.86 days compared with 24.8 days in April 2022 and a deep dive into mental health absence data had been undertaken. The Trust saw an increase in mental health related absence levels from 20.2% in January 2022 to 25.71% January 2023. It was noted that Mental health absence was made up of 94% front line staff and 6% non-front line. Work would continue to review trends and what further information could be established and what actions could be taken to reduce this.

Members received the presentation and noted the increased levels of stress related absence, particularly amongst EMS staff. Members noted that increased handover delays and missed meal breaks were likely to be contributing factors in stress related absence although there were likely to be several other contributing factors to stress amongst the workforce.

RESOLVED: That the update was NOTED.

39/23 FLU INCENTIVE

Andy Swinburn provided information and details of the Seasonal Influenza Campaign 2022-23 and the uptake of the flu vaccination during that period. The Report showed that the Trust's final uptake of staff vaccinated against the flu was 44.5%, a 6% increase from last year's campaign. There was also an increase seen in the uptake of patient-facing staff which was 5.2% higher on the previous year, ending the campaign with 46.3% receiving the vaccine.

Andy Swinburn acknowledged that despite the increase in uptake, the levels were still well below those seen in previous years. The report looked at the various reasons for this and offered a number of suggestions on how this could be improved.

Members received the report and noted the findings and issues documented in the seasonal influenza campaign. Members also commented that uptake of the flu vaccine being offered by the Trust may also have been affected by external factors such as staff receiving the vaccine elsewhere, such as alongside Covid-19 booster jabs or from their GPs.

RESOLVED: That the findings and issues documented in the seasonal influenza campaign 2022-2023 were NOTED.

40/23 WALES ANTI-RACIST ACTION PLAN UPDATE

Dr Catherine Goodwin introduced the Trust's Anti Racist Action Plan 2023. The report noted that although Welsh Government were producing separate plans and recommendations, the Trust felt that it was helpful to promote an anti discrimination approach that highlighted intersectionality by also including an LGBTQ+ Action Plan.

Members heard how the plans were essential for the Trust's continued cultural journey towards a truly inclusive organisation, with the recent staff story and the findings from the sexual safety survey reinforcing the need to be proactive.

Members welcomed the plans and recommendations and fully supported their implementation.

RESOLVED: That the implementation of the action plan recommendations were SUPPORTED.

RETENTION AND EXIT INTERVIEWS & RECRUITMENT BREAKDOWN FOR CANDIDATES FROM MINORITY COMMUNITY BACKGROUNDS

Liz Rogers provided two reports on retention and exit interview and a deep dive into recruitment data regarding candidates from Black, Asian and Minority Ethnic communities and their outcomes through the Trust's recruitment processes. The report on minority community applicants looked at various themes and factors from the previous 12 months in order to ascertain and understand why more applicants from this group were not successfully recruited.

Data showed that the Trust received a positive level of applications from Black, Asian and Minority Ethnic communities at circa 9% compared to census data of 5%. However, a significant number of those applicants were not successful following shortlisting. Despite this, those who did get to interview stage showed good levels of success with 26% receiving offers.

A number of additional factors were identified, including issues with qualifications, failed driving assessments and candidates withdrawing or not attending interviews. The data showed that of the 89 applicants from minority communities undertaking interviews, 23 candidates (26%) were successful. As a percentage, this was a positive outcome and suggested that when candidates from minority ethnic communities got to interview stage, they had good outcomes.

Liz Rogers then moved on to discuss the report on exit interviews which looked at the reasons given by staff for leaving which had increased in the last two years. The report noted the limited amount of feedback available through exit interviews and the work the team had since started on reviewing the exit interview process to relaunch it. Liz Rogers explained that a new 'Moving On Interview' Process had been developed which would supersede the existing Pre-Exit Interview Policy. This would apply to employees who were voluntarily leaving their role, regardless of whether they were leaving the Trust or commencing a new role in another department.

The report stated that the new process was still in the pilot stage and while some data had already been gathered, more time was needed to gain a more accurate picture and understanding of the reasons behind staff choosing to leave their roles. Given this, a further update on exit interviews was proposed for later in the year.

Members received the reports and noted the options and recommendations contained within. It was also noted that work would continue on reviewing recruitment processes to make them as accessible as possible. Members agreed to receive further updates on exit interviews later in the year.

RESOLVED: That:

- 1. the options and recommendations in the report were NOTED;**
- 2. the outcomes of the review of information were NOTED;**
- 3. the team will work on reviewing recruitment processes to make them as accessible as possible whilst ensuring standards was NOTED;**
- 4. this information will be used as the benchmark to measure interventions against was NOTED; and**
- 5. the Committee AGREED to receive further updates on progress;**
- 6. Members NOTED and COMMENTED on the Exit Interview Report and AGREED to receive a further report on progress later in the year.**

42/23 HEALTH AND SAFETY PERFORMANCE REPORT

Nicola White introduced the Health and Safety update and asked Committee Members to note the key aspects of the report. These were summarised as:

There had been further recent improvement regarding timely reporting of RIDDOR incidents (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) within the Trust however, this required focused attention in order to meet RIDDOR reporting timescales. This had resulted in a compliance increase of a further 25% in Q4 from Q3 resulting in 83.3% for Q4. This improvement was because of the implementation of the workforce review. Of the 23 RIDDORs reported in Q4 2023, two were outside of the Health and Safety Executive reporting requirements with the cause being Handler delays.

- A further Annual Plan has been developed for improving the management of health and safety.
- Statutory Health and Safety, Fire Safety and Manual Handling training compliance are below Trust's and Welsh Government standards. Managers are to encourage staff to bring their training levels up to Trust expectations.
- The rolling Workplace Risk Assessment compliance is at 27% with 73% requiring review. Managers are to be encouraged to undertake this review. A workshop with

the Health and Safety and Estates functions is scheduled in May 23 to explore improvements from themes generated from workplace audits.

Members received the report and noted the contents and key aspects summarised above. Members then discussed the results of a recent assessment around diesel fumes which were generated during handover delays as a result of needing the vehicles engine running in order to provide heat in the winter or cooling in the summer months. It was recognised that while test results showed that the fumes were well below the minimum standard and fully complied with requirements, it was still nonetheless a unpleasant environment to work in. Members acknowledged that although there was no immediate solution to this issue, bringing down handover times and reducing the time each vehicle was sat outside of emergency departments would have a very positive effect on reducing the emissions.

RESOLVED: That the contents of the report and the key aspects were NOTED.

43/23

WELSH LANGUAGE STANDARDS COMPLIANCE UPDATE

Melfyn Hughes updated the People and Culture Committee on the progress in developing the Trust's Welsh Language Framework. Members were informed of the 'More Than Just Words' Strategic Framework from Welsh Government which was designed to strengthen Welsh language provision in health and social care. Under this Framework, the Welsh language would be normalised, and the Active Offer embedded across the Health and Social Care Sector with clear lines of accountability to deliver Welsh language plans and services.

In addition, when developing the Welsh Language Framework, the Trust's Welsh Language Deliverables had been included in the Integrated Medium Term Plan 2023/26. This incorporated an action plan to implement the Welsh Government 'More Than Just Words' strategy with a focus on an active offer of Welsh across Trust services.

Members received the update and commented on the assurance they felt in regards to the progress being made in developing the Trust's Welsh Language Framework. Members then queried whether more could be done at all levels of the organisation and particularly at public meetings such as the Trust Board for Members to practice and utilise their Welsh language skills.

Members agreed that wherever possible, regardless of whether someone was a fluent Welsh speaker or not, every effort should be made to encourage, promote and enable them to use the language, even if this was at a basic conversational level for things such as salutations when answering calls, or welcoming people when introducing a meeting.

RESOLVED: That the Committee was ASSURED on progress in developing the Trust's Welsh Language Framework.

44/23 INTERNAL AUDIT TRACKER

Julie Boalch gave an update on the internal audit tracker and informed Members that there were currently 16 Internal Audit recommendations assigned to the Committee for oversight. Of those, only one recommendation relating to the Recruitment Practices review was currently overdue.

There were two outstanding recommendations relating to the Taking Care of the Carers report with one request to extend the deadline from the agreed deadline of November 2022 to the end of September 2024, so that the Health & Wellbeing Strategy can be delivered in full. The other extension was to take account of the staff survey being further delayed until Spring 2023.

In addition, the Audit Tracker was currently undergoing a full review and would be available for the next Audit Committee for scrutiny. Internal Audit were also undertaking their annual review of the tracker.

RESOLVED: That the update was NOTED.

45/23 POLICY UPDATE

Julie Boalch gave a verbal update on the current position with Trust Policies and explained that she was currently undertaking a Policy prioritisation exercise following the pressures of the last couple of years and the work which was still outstanding in regards to new policies coming through as well as current policies which were due for renewal.

The purpose of this was to enable to the Trust to know exactly where it was up to with its key policies and to determine a position statement. A meeting had been scheduled with the Policy Group and this matter was an agreed agenda item for discussion. To support this, contact had been made with all Trust Directorates asking them to review and prioritise all the policies which fell under their remit.

Once this feedback had been received and reviewed by the Policy group, a recommendation would be made to the Executive Management Team setting out the programme of work which would need to be performed over the next couple of years in order to finalise and implement the policies within the Trust.

Members received the update and noted the planned actions and progress being made. There were no further questions or comments.

RESOLVED: That the update was NOTED.

46/23 STAFF STORY UPDATE

The staff story update was given earlier (Minute 29/23) in lieu of the Staff Story item.

47/23 PEOPLE AND CULTURE COMMITTEE HIGHLIGHT REPORT

The People and Culture Committee Highlight report from 14th March 2023 was for information only.

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

48/23 LOCAL COUNTER FRAUD SERVICE REFERRAL FLOWCHART

The contents of the Local Counter Fraud service referral flowchart and summary were received and noted by the Committee.

RESOLVED: That the Committee RECEIVED and NOTED the summary and flowchart contained within Appendix 1.

49/23 SUMMARY OF ACTIONS AND DECISIONS, AND REFLECTION

Paul Hollard reflected on the day's discussions and invited Members to comment on the meeting before reviewing any actions which had been agreed.

Follow up actions were agreed around the staff story to explore potential prayer space across Trust sites and to also look into time off for non-Christian festivals such as Eid and Ramadan.

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

50/23 ISSUES TO BE RAISED AT BOARD

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

51/23 ANY OTHER BUSINESS

There was no other business.

52/23 DATE OF NEXT MEETING

The date of the next meeting is 17 August 2023.