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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 FRIDAY 30 AUGUST 2024

Chair: Ceri Jackson

Members:

Ceri Jackson Non-Executive Director and Chair (MRD)
Bethan Evans Non-Executive Director

Prescribed Attendees:

Lee Brooks Executive Director of Operations
Alex Crawford Assistant Director of Planning and Transformation
Christian Fox Trade Union Partner
Estelle Hitchon Director of Partnerships and Engagement
Angie Lewis Director of People and Culture (MRD)
Trish Mills Director of Corporate Governance/Board Secretary (MRD)
Andy Swinburn Executive Director of Paramedicine
Chris Turley Executive Director of Finance and Corporate Resources
(MRD) (left at 13:10)
Damon Turner Trade Union Partner

Attendees:

Julie Boalch Head of Risk/Deputy Board Secretary (MRD)
Sarah Davies People and Culture Directorate Business Manager
Dr Catherine Goodwin Assistant Director Inclusion, Culture and Wellbeing
Sara Mills Head of Culture and OD
Steve Owen Corporate Governance Officer
Linda Phillips SWFP (MRD)
Felicity Quance NWSSP Audit and Assurance
Julie Stokes Head of People Services
Tim Villanueva Trainee Clinical Psychologist
Kayleigh Wheeler (Staff Story) (MRD)
Nicola White Head of Health and Safety (H and S Item only)
Liam Williams Executive Director of Quality and Nursing

Apologies:

Kathryn Cobley Head of Inclusion and Engagement
Caroline Jones Corporate Governance Officer

Jo Kelso	Head of Workforce Education & Development
Mark Marsden	Trade Union Partner
Rachel Marsh	Executive Director of Strategy, Planning and Performance
Lizzie O'Shea	Freedom to Speak up Lead Guardian
Alex Payne	Corporate Governance Manager
Hannah Rowan	Non-Executive Director
Joga Singh	Non-Executive Director
Marcus Viggers	Trade Union Partner

57/24 WELCOME AND APOLOGIES FOR ABSENCE

The Chair welcomed everyone to the hybrid meeting of the People and Culture and confirmed the meeting was quorate.

58/24 DECLARATIONS OF INTEREST

No new declarations were made in addition to the standing declarations which were already noted on the Trust Register of interests.

RESOLVED: That no new declarations were received.

59/24 MINUTES OF PREVIOUS MEETING, ACTION LOG AND HIGHLIGHT REPORT

The Minutes of the Open meeting held on 9 May 2024 were considered and agreed as a correct record.

Action 07/24 - Ceri updated Members of conversations that had been held relating to Equality, Diversity and Inclusion (EDI) initiatives and reiterated that EDI is a priority on the agenda. Hannah Rowan suggested Non-Executive Directors might support more EDI initiatives. Further conversations were needed once Hannah Rowan returned from holiday. It was agreed to close the action with any significant updates being reported back.

Action 34/24 in relation to increased workload and significant change was referenced within the Director Update and the action was closed.

Action 36/24a The local system for managing sickness absence in Pembrokeshire and the potential to scale this system across the organisation had been added to the managing attendance action log. Work was progressing well with conversations at Caernarfon reinforcing the importance of sharing best practice; the action was closed.

Action 36/24b – Focus on achieving consistency in record management approaches together with need for individual approaches while maintaining consistency was

recognised. Staff knowledgeable about record management sensitivities were involved. Members agreed to close the action.

Action 39/24 Violence and aggression would be discussed later in the meeting and therefore the action was closed.

Action 40/24 Diesel fumes communications have been placed on Siren for ease of accessibility for staff. This would be considered ongoing work, and the action was closed.

Action Qu02 Concerns were raised about relief gap powers and reassurance was provided regarding recruitment efforts. This would need to be communicated to QUEST.

Members agreed that a process to ensure actions assigned to other Committees were promptly communicated by providing an extract of relevant information from the minutes to the appropriate person.

RESOLVED: That the

- 1) minutes of the meeting held on 9 May 2024 were approved; and**
- 2) Actions as set out above were agreed.**

60/24

DIRECTOR OF PEOPLE AND CULTURE DIRECTORATE UPDATE

Angie Lewis emphasised the Trust's focus on change management, particularly in addressing change hotspots. Angie Lewis provided Members with reassurance that a robust change management workstream under the clinical transformation model, had been implemented with a specific focus on people. It was suggested that the Committee maintain focus on change at future meetings given the significant portfolio of change underway.

There was recognition for EMT colleague, Lindsey Keyes, who had been nominated for Skills Academy Wales Higher Apprentice of the Year; this is the third year running the Trust has won this highly regarded Higher Apprenticeship award for our EMT Induction Programme.

Engagement sessions had been held across Wales with the EMT2 workforce to discuss potential changes, with positive feedback from the direct conversations with staff on the changes and their impact. Andy Swinburn shared that staff feedback was positive and reassuring, and staff were keen to emphasise the ability to do more for patients, rather than just having additional funds, and consistently highlighted how the increased scope of practice would enable them to offer more to patients.

A virtual session had been held with newly qualified paramedics to address their concerns about the changes. Insights received from the Newly Qualified Paramedics (NQPs) process had prompted a review of support method for NQPs.

Following the Big Bang recruitment there was successful onboarding of newly qualified paramedics.

Angie Lewis confirmed she had been personally recognised across the UK as one of the top 30 most influential HR practitioners for the work on culture change and sexual safety. Additionally, she mentioned the publication of an article in an international People and Culture Review Journal about the Trust's People and Culture Plan.

Damon Turner extended congratulations, along with others, to Angie Lewis for receiving an award for influence. He also expressed appreciation for the Trust's acknowledgement of the significant change affecting staff.

Liam Williams observed the relationship between change and quality improvement/management systems with emphasis on continuous quality improvement and its integration with change initiatives.

RESOLVED: That

- 1) positive feedback had been received for the team's efforts in embracing challenges and change;**
- 2) follow up sessions with NQPs would be progressed; and**
- 3) showcasing best practices in driver education was recognised.**

61/24 OPERATIONS QUARTERLY REPORT

It was recognised that due to the reporting cycle some of the information in the report had been superseded.

Lee Brooks began by congratulating the Chair, Ceri Jackson, on her appointment as Vice Chair of the Trust.

Lee Brooks highlighted the following areas of the report:

- **Manchester Arena Inquiry Submission (MAI):**
 - The MAI submission had been made to the Commissioners which outlined the Trust's financial ask associated with addressing the inquiry recommendations.
- **Risk 594:**

- Risk 594, Lee confirmed this had now been incorporated into the immediate release protocol.
- **Center of Excellence Standards:**
 - Issue with call handling quality resolved, the Trust was no longer in remediation.
- **EMSC Reconfiguration:**
 - New management roles were imminent.
 - Excitement among EMSC staff about new structures and career progression.
- **Single Allocator Model:**
 - Small scale implementation is planned to familiarise staff with the new approach to mitigate the risk of overwhelming colleagues.
- **Team-Based Working:**
 - Virtual meeting with London Ambulance Service held.
 - Visit scheduled to learn about their team-based approach.
 - Trade union partners invited to observe.
- **EMT3 Role:**
 - Progressing towards planning stages for training by the end of the year.
- **End of Shift OVERRUNS:**
 - Improvement in managing long overruns.
 - Investigations revealed procedural issues with hot swaps.
 - Efforts to align CAD and financial reporting data.
- **Pod Approach at Swansea Bay:**
 - Positive impact in relation to progress on missed meal breaks and stress-related sickness.
 - Encouragement from the Health Board's new Chief Executive, Abigail Harris.
- **111 Vacancies:**
 - Timeline for achieving budgeted establishment had been extended.
 - Optimism about reaching establishment before winter.
- **Clinical Model Transformation:**
 - Numerous pilots and trials underway.
 - Strong engagement and communication efforts.
 - Collective effort to support changes for the upcoming winter.
- **Acknowledgements:**
 - Recognition of the team's hard work and positive progress.
 - Appreciation for the ongoing efforts to manage significant challenges.

Members were encouraged by the positive progress and improving figures with appreciation for the team's hard work.

Time off in lieu (Toil) and the difficulties some staff faced in accessing this in the normal way was raised.

Lee Brooks explained the benefits and positive impact of Team based working and spoke of an upcoming visit to London Ambulance Service (LAS) where managers are on duty at the same time as their teams consistently, allowing for briefings, debriefings and collective team meetings. LAS benefited from being resource rich with less geographical spread compared to WAST, however consideration of how these practices could be adapted was being explored.

RESOLVED: That the Operations progress was noted.

62/24

STAFF STORY – Kayleigh Wheeler Co-Chair of Voices Network

Angie Lewis introduced Kayleigh Wheeler, highlighting her involvement in the Voices Network, her leadership qualities and her desire to continue to learn and improve.

Kayleigh attended a recent CIPD award ceremony which was a valuable opportunity to connect with colleagues. Kayleigh was an example of the diversity and uniqueness of individuals across the Trust.

As an Operations Manager based in North Wales, Kayleigh gave a presentation in which she shared her background and experiences. Having been with the Trust since 2014 she has held various roles including Operational Team Leader and Operations Manager. She is also involved in volunteering particularly with Space Careers UK and holds roles supporting the LGBTQ+ community within the Trust.

Her background in acoustic engineering has enabled her to work with some well-known bands. Being neurodivergent and having been diagnosed with dyslexia and autism has helped Kayleigh become an advocate for diversity and inclusion.

Kayleigh highlighted her leadership style and achievements including her work with McDonald's as Planet Champion and her involvement with the London Olympics.

Kayleigh went on to share her experiences of poor behaviour from colleagues, including homophobia, misogyny and sexual harassment. She became a co-chair of WAST Voices Network to channel her energy into activism and support for others.

Kayleigh explained that she was about to commence a Masters in Advanced Management for Health, Innovation and Transformation at Swansea University and aims to achieve Chartered Manager status and continue advocating for issues like cross-border contract impacts within the NHS.

Members praised Kayleigh for her presentation highlighting her talents and diverse career background.

Estelle Hitchon spoke of the emphasis on recognising the full history and talents of individuals beyond their current roles and the importance of considering a person's overall abilities and experiences when promoting within the Trust. She also acknowledged Kayleigh's resilience and positive attitude despite past challenges.

Kayleigh summed up by saying there were still ongoing frustrations and barriers within the Trust but recognised the positive changes and improvements with increased accessibility to senior leaders and transparency from the top down.

RESOLVED: That the presentation was well received and the challenges faced were recognised.

63/24

PEOPLE AND CULTURE PLAN METRICS UPDATE

Angie Lewis spoke of the commitment to provide quarterly updates to the Committee on progress against the People and Culture Plan.

The report included both quantitative and qualitative data with insights and feedback included throughout the agenda.

Emphasis was on connecting all elements of the meeting to see the overall picture and ensuring continuity. Referencing Lee Brook's paper on Operations she highlighted the impact of overruns on sickness absence, demonstrating the interconnectedness of initiatives.

There was a focus on digital literacy as an Integrated Medium-Term Plan (IMTP) deliverable with significant investment in training to improve staff confidence and effectiveness using digital tools which had provided positive feedback.

The Staff Survey free text comments indicated a need for senior leaders to be aware of scrutiny and challenges regarding leadership. The survey feedback that could be perceived negatively could also be seen as a positive in that staff felt able to share their views and it gave the Trust an opportunity to address any concerns.

Lee Brooks shared his concern over the length of time it took to release the data from the NHS survey which hadn't allowed the Trust time to respond to the feedback. He asked if there was anything that could be done to improve engagement in the next survey.

Angie Lewis confirmed a robust action plan had been put in place to ensure there was more proactive measures adopted to encourage participation and feedback

had been given to HEIW regarding delays in receiving the data for the 2023 survey results.

Reference was made to some key findings from the recent nursing retention plan that had been developed. This plan had been produced by the nursing retention lead and provided valuable information regarding the experiences of nursing staff within WAST. It also highlighted areas of good practise and areas for improvement which are now being taken forward.

Angie confirmed it was important to balance the numerical data with richer feedback and their was an ongoing need to make connections between the different elements of the report, especially regarding EDI initiatives. This will continue to be a focus going forward.

RESOLVED: That the report was received and the progress to date was commented on.

64/24

WORKFORCE SCORECARD AND MONTHLY INTEGRATED QUALITY AND PERFORMANCE REPORT

Angie Lewis drew the Committee's attention to several key points within the report relating to the following:

Sick Absence:

- There was a consistent downward trend in sick absences, particularly in the EMS operations area.
- A short-term increase in July was due to gastro problems and colds, but August showed a positive downward trend, which is unusual for the summer holiday period.
- Despite increasing concerns and disciplinary cases, sick absence is reducing, indicating positive progress.

Job Evaluation:

- Job evaluation is facing challenges due to high volume and resourcing issues.
- An action plan is in place to reduce the backlog and address process issues.
- Additional resources are being allocated to improve the situation.

Statutory and Mandatory Training:

- Good progress is being made in this area.

Occupational Health:

- Challenges due to sick absence, maternity leave, and team changes were being addressed and were expected to be resolved soon.

An expected increase in employee relation cases specifically in relation to sexual safety and inappropriate behaviour was viewed positively, in that staff were feeling more comfortable to come forward. Additional investigating officers were also in place to provide additional capacity to respond to this increase.

RESOLVED: That the report was received, and the reported performance and associated actions were commented on.

MIQPR

Alex Crawford highlighted some key areas for Members relating specifically to the PCC:

Performance Challenges:

- Red and Amber performance remained challenging but has improved.
- Handover delays were still an issue.

Data Quality and Call Handling:

- Working through data quality issues with 111 services.
- 111 call handling performance is stabilising, though the abandonment rate was still above the 5% target.
- Staffing issues and sickness absence have impacted performance.

Sickness Absence:

- A spike in sickness absence was noted during the CAD rollout, driven by stress and anxiety.
- Efforts are underway with wellbeing and psychology teams to support staff, and the situation is improving.

Ambulance Care:

- Performance is stable, but changes are expected in the coming months due to restructuring.
- Efforts are focused on clinical model transformation to improve performance.

Support for Staff:

- Emphasis on supporting staff through changes and addressing performance issues.

Bethan Evans queried the recruitment gap that had been identified and how easily would it be to fill this gap. Lee Brooks confirmed the vacancy gap had been identified through financial spend monitoring, indicated by unspent funds. Recruitment had been paused due to potential financial impacts from anticipated role re-banding. Lee confirmed that 42 EMT positions had recently been advertised to target areas with the most significant shortages. Work was ongoing to understand and address the gaps and timelines for filling them. Establishment was hoped to be at 98% by the end of this financial year.

Lee Brooks confirmed that EMS was setting the benchmark for the rest of the Operations Directorate relating to sickness management. Two Assistant Directors were focusing on integrated care with 111 and ambulance care where there had been an unusual increase in sickness compared to EMS. Reasons were not clear for the increase however efforts were being made to address the issue.

Ceri Jackson recognised the challenges faced and commented on the steady and significant progress being made.

RESOLVED: That the June/July report was considered.

65/24

CULTURAL THEMES AND TRENDS REPORT

Angie Lewis provided a summary of the report highlighting the following:

Employee Relations and Sick Absence:

- Regular deep dives were conducted on specific issues, with recent focus on employee relations and sick absence.
- Employee relations cases were increasing, reflecting efforts to encourage colleagues to speak up and prioritise psychological safety.
- Sick absence rates had not significantly increased, which was seen as positive.

Compassionate Practices:

- The Trust is embedding compassionate practices, aiming for sustained improvement rather than punitive measures.
- Fast-track cases have decreased, likely due to the seriousness of recent cases.
- Efforts were ongoing to reduce the average duration of cases, despite challenges such as resource constraints and police involvement.

Managing Attendance:

- There was a downward trajectory in sick absence, but it remained a high-level risk.
- Initiatives were in place to support staff, address concerns, and manage attendance actively.
- Stress, anxiety, and depression are the most common reasons for sick absence, with some cases linked to disciplinary actions.

Cultural Reviews:

- Cultural reviews were being conducted to explore the correlation between sick absence and wider cultural issues.

Andy Swinburn commented on the misconception that mistakes lead to immediate disciplinary action, but the data showed this was not the case. Most cases were due to behavioural issues and not clinical errors. There was interest in understanding the outcome of cases involving inappropriate behaviour, such as whether they resulted in informal discussions or more severe actions. Andy asked that a distinction be made between making a clinical error and being negligent.

Members also noted that local managers were relied on to lead on cultural behaviours with significant effort and resources invested in training. A trend of individuals raising concerns indicated trust in their manager's ability to handle issues appropriately. Managers were reaching out for advice on handling difficult situations, showing a proactive approach and were being trained to set the tone and culture for their teams.

The Health and Care Professions Council (HCPC) is the registering body for paramedics and other allied health professionals. They conducted a session with the Executive Leadership Team on cultural trends, inappropriate behaviour and sexual safety across ambulance services. Collaboration with HCPS focuses on learning from referrals and identifying common themes.

National work was ongoing to develop programmes for HR specialists to handle sexual safety complaints and new legislation coming in October 2024 would impact how those complaints were managed. Training sessions with Trade Union partners were planned to address these changes in legislation.

RESOLVED: That the ongoing work was noted.

66/24

ANNUAL HEALTH AND SAFETY REPORT

Liam Williams confirmed the report would cover the full range of Health and Safety work and requested that members note the detailed conversations on the work ongoing to reduce the impact and the environmental impact of diesel fumes; however, did not labour the points already made. The workstream was being led at Executive level and contributed to direct conversations with Trade Union colleagues through Welsh Ambulance Services Partnership Team.

He stated that Nicola White would spend some time highlighting the work that had been undertaken in relation to violence and aggression.

The report covered a wide range of topics related to keeping people safe, providing assurance of compliance, collaboration with others and future plans. It included performance metrics from 2022 to 2024 to show the impact of workforce expansion and investment.

The Team had grown from four to 12 members in October 2022, adding roles such as a Deputy Head, Violence and Aggression Strategic Manager, DSC, manual handling advisor and four Band 6 posts. The team was selected to ensure a diverse range of age demographics and skill sets, including NHS and non-NHS experience.

Corporate Risk 199 embedding a mature health and safety culture was reduced from a high risk of 20 to a target score of ten by December 2023. Other directorate risks related to team resource capacity and Covid-19 have also been closed.

Legislative Compliance - An internal Audit by Shared Services last year awarded the Trust reasonable assurance across all six criteria. The legislative compliance register had improved with ongoing efforts to increase compliance levels.

The Health and Safety policy now included a statement of intent, a comprehensive arrangement section and a training needs analysis. New procedures for expectant mothers and cost assessment have been developed, with training to support these procedures.

The top five themes for non-patient incidents include slips, trips, falls and manual handling, with patient handling being a key focus.

With regards to Health and Wellbeing, focus areas included meal breaks, diesel fume exposure, shift overruns and workplace stress. Reported incidents decreased by 52% from April 2021 to March 2023, partly due to meal breaks being recorded on a different platform and team interventions.

Performance and Reporting - Members were informed of the introduction of frequency rates for comparison with other ambulance sectors. A 23% decrease in reporting rate from April 2021 to March 2023. Significant improvement in RIDDOR submission compliance was attributed to team expansion and close collaboration with operational colleagues.

Violence and Aggression – the majority of incidents were verbal aggression which showed a slight increase over the last three years. Increased reporting indicated staff confidence in addressing these issues. Post Covid-19 pandemic mental health issues have escalated, affecting incident rates.

Manual Handling incident frequency rate decreased by 36% from April 2022 to March 2023. The recruitment of a new manual handling advisor led to a deep dive into incidents and the development of training and safety procedures. The improved collaboration with the training school led to the development of risk assessment skills for ambulance care staff.

Attention was drawn to the 100% completion of workplace risk assessments and inspections in collaboration with Trade Union Partners and operational teams.

Other highlights included updates on training and development, partnership and collaboration, achievements and recognitions and future plans which include:

- Undertaking a baseline assessment for Health and Safety management.
- Continuing improvements in the metric dashboard and health and safety culture.
- Focus on succession planning and resilience within the team.

Liam Williams mentioned the work of the Health and Safety Committee and time would be given to maintaining a balanced focus on all workstreams at an upcoming away day.

Members noted the maturing culture of health and safety at WAST and the

focused attention the team has had on this throughout the year.

The Health and Safety Annual Report 2023/24 was approved.

RESOLVED: That the

- 1) Contents of the report were received; and**
- 2) The Health and Safety Annual Report 2023/24 was approved.**

67/24

WASPT HIGHLIGHT REPORT

The Report covered the meeting from 2 May 2024 with a verbal update provided on the 9 July 2024 meeting. Key points were as follows:

May 2nd Meeting:

- No red alerts were reported.
- Positive engagement and discussions on specific policy applications, leading to a new six-weekly session with trade union colleagues (TU) to address these issues.
- Discussion on the CAS system going live.

July 9th Meeting:

- Focused on the EMT 2/3 proposal and next steps.
- Session on the clinical transformation model to keep everyone informed.
- Updates on the non-pay elements of the 2022-2024 collective agreement, including occupational health and unsocial hours pay, to reassure the Committee of progress.

The improving relationships between Trade Union Partners, Managers, Directors and Non- Executives was noted.

RESOLVED: That relationships were strong, and progress was being made.

68/24

STRATEGIC WORKFORCE PLAN

The commitment from last year's audit on workforce planning was referenced and the development of this plan was evidence of significant progress having been made to deliver a key document that is necessary in every organisation. The Trust was leading the way in terms of creating a Strategic Workforce Plan across the NHS in Wales and was working with HEIW to share the approach taken and the final product for wider circulation.

Angie Lewis acknowledged the significant effort required to develop the Strategic Workforce Plan and praised the team's work. Linda was introduced to provide more context and background to its development. The Strategic Workforce Plan aims to address current and future workforce needs, improve recruitment, retention, productivity, and process efficiency. The plan aligns with various strategies and includes data highlights, such as demographic trends and workforce characteristics.

Key risks identified include an aging workforce, unclear career pathways, and retention challenges.

To ensure the Strategic Workforce Plan remains dynamic and relevant, it would be managed by the Integrated Technical Planning Group (ITPG). The ITPG has developed a Workforce Monitoring Report to provide snapshots of recruitment and leavers, aiding in forecasting and aligning with other operational needs. The ITPG reports to the Strategic Planning Group, which then reports to the Executive Leadership Team (ELT) and the Senior Leadership Team (SLT) in Operations. Regular reviews and updates will be conducted, with quarterly updates to the ELT and potential annual updates for the Committee. All planned activities are detailed in Section 5 of the document.

Estelle Hitchon stressed the importance of proactive planning to avoid future issues and acknowledged the critical nature of the ongoing work.

Andy Swinburn raised a concern about the need for greater professional involvement in developing work profiles, recruitment, and retention strategies. He suggested involving relevant professionals earlier in the process for better outcomes.

Alex Crawford highlighted the dynamic nature of the workforce plan and its integration with clinical plans being developed by Andy Swinburn and Liam William's teams. He appreciated that the plan consolidates various other plans, creating a comprehensive strategy. The plan had been reviewed by the Integrated Planning and Development Group and the Assistant Director Leadership Team, ensuring representation across the Trust. Alex Crawford emphasised the importance of including both operational roles and corporate functions in the plan.

Bethan Evans commented on the plan's importance as a cornerstone for achieving future goals, focusing on having the right people in the right roles. The top five workforce planning risks were crucial to the plan's success, despite external challenges. She inquired about an operational plan to track progress and adapt to external factors, stressing the need for strategic use of funding and involvement of key personnel across WAST to prioritise resources effectively.

Chris Turley acknowledged the financial constraints that will impact the workforce plan and emphasised the importance of career development and clear career paths within the Trust. He noted that while some roles have clear progression, others do not and suggested thinking more flexibly about career pathways.

Ceri Jackson also highlighted the need for continued engagement and suggested strengthening the plan's focus on diversity. Appreciating the comprehensive and

engaging nature of the plan the importance of using available resources effectively was stressed.

The 2024-2030 Strategic Workforce Plan was received and reviewed by the Committee. Some amendments were agreed and endorsed for approval by Trust Board. The Committee recognised the criticality of this work in aligning with our long-term vision and Integrated Medium-Term Plan.

RESOLVED: That the Strategic Workforce Plan 2024-2030 was endorsed subject to some agreed amendments.

69/24

PARTNERSHIPS AND ENGAGEMENT REPORT

This was the first report of its kind which focused on the Regional Partnership Boards (RPB) and the Wellbeing of Future Generations (Wales) Act, with a working group developing Wellbeing objectives. Engagement in relation to the refreshed clinical model was split between internal and external communications. Estelle highlighted political engagement and the upcoming WAST Awards. She also mentioned the recent addition of the Charity to the Directorate portfolio and the appointment of a Head of Charity. Estelle planned to review the Directorate's structure and roles, emphasising succession planning.

It was suggested that the report should highlight the impact and outcomes of collaborations and partnership work for the Committee's understanding, including examples and qualitative feedback in future reports to highlight the impact and outcomes of partnerships and processes. The importance of understanding the outcomes of collaborations was emphasised. Additionally, a desire to see more context on third sector collaboration and partnership work in future reports was expressed.

Alex Crawford spoke of the ongoing efforts in the Strategy, Planning and Performance Directorate to integrate intelligence, information, and influence through strategic planning processes. He has worked with his team to define the desired state for managing relationships with Health Boards and partners.

Liam Williams had encouraged the creation of an additional funding tracker to monitor non-core funding sources like RPB funding. This tracker would help keep track of start and end dates, as well as reporting requirements, which was currently not centralised. Progress was being made on this, and it would aid in organising and understanding the various areas of work.

Trish Mills confirmed that the Committee was tasked with overseeing partnerships and engagement related to people and cultural change with other forums looking at relationships and collaborations. There was a need to map out these engagements clearly ensuring they aligned with the Committee's priorities.

The report signified a move towards more strategic engagement and partnership working, aligned with broader organisational and national priorities.

RESOLVED: That Members considered and discussed the report.

70/24 END OF SEASON FLU REPORT 2023-24

The Trust's final uptake of staff vaccinated for the Seasonal Influenza Campaign 2023/24 was 36.5%, which was a decrease of 8% from last year's campaign. This was due in part to hybrid working and the ability to reach people throughout the day. Lessons learnt from this campaign have informed an extensive list of areas that require continued development for future flu campaigns.

RESOLVED: That the report was noted.

71/24 STRATEGIC EQUALITY PLAN (SEP) ANNUAL REPORT FOR 2023/24

The Strategic Equality Plan Annual Report 2023/24 was endorsed. Of note there remains work to be done to realise the Trust's ambition of becoming a truly inclusive organisation; notwithstanding this and the Workforce Race Equality Standard report, there is positive traction particularly around networks being established for Black, Asian and Minority Ethnic colleagues. It was acknowledged that the accessibility standards need to be considered more fully in the presentation of future reports.

RESOLVED: That the Strategic Equality Plan Annual Report for 2023/24 was endorsed.

72/24 ANNUAL WORKFORCE EQUALITY MONITORING REPORT 2023/24

The Annual Workforce Equality Monitoring Report 2023/24 was endorsed. Of note, challenges remained in key areas which included incomplete monitoring data on ESR, limited participation in the NHS Staff Survey and time to engage in EDI initiatives due to operational pressures.

RESOLVED: That the Workforce Equality Monitoring Report 2023/24 was endorsed.

73/24 ANNUAL GENDER PAY GAP REPORT 2023/24

The Gender Pay Gap Report 2023/24 was endorsed. Of note, the gap remained consistent at 5.6% with fewer women in pay bands 8a and above. Flexible working is often disproportionate towards women in the workplace.

RESOLVED: That the Gender Pay Gap Report 2023/24 was endorsed.

74/24 WELSH LANGUAGE ANNUAL REPORT 2023/24

The Welsh Language Annual Report 2023/24 was endorsed. The report was presented bilingually, and the breadth and depth of the report was appreciated by members. The introduction of a standards baseline is a new feature for 2024/25 to more objectively report on and increase standards compliance.

RESOLVED: That the Welsh Language Annual Report 2023/24 was endorsed.

75/24 RISK MANAGEMENT & BOARD ASSURANCE FRAMEWORK REPORT

The report data was the same as presented in May 2024 due to the reporting cycle; however, assurance was provided to Committee in that the risks had been reviewed and updated according to the risk management governance framework.

The four risks within the remit of the Committee were reviewed as below:

160 – High absence rates impacting on patient safety, staff wellbeing and the Trust's ability to provide a safe and effective service; whilst it remains at a rating of 20 (5x4) an improvement is beginning to show in specific areas of the business and there are early indications of a positive downward trajectory across the organisation against a backdrop of increasing concerns and disciplinary cases.

Committee acknowledged that elements of the risk had been discussed throughout the agenda linked closely to the People & Culture Plan performance metrics and cultural themes and trends. Two areas of focus were discussed in that EMS are setting a benchmark for the rest of operations; however, Ambulance Care has an off trend increase in sick absence.

201 – Damage to the Trust's reputation following a loss of stakeholder confidence which remains at a score of 20 (4x5). The risk is inextricably linked to several of the metrics measured and discussed at PCC.

163 – Maintaining effective and strong Trade Union partnerships remains at a score of 16 (4x4). The risk was presented in detail to the Welsh Ambulance Services Partnership Forum for the first time in May 2024.

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

RESOLVED: That the contents of the report were considered and discussed.

76/24 AUDIT TRACKER & AUDIT REPORTS

The Audit Tracker was reviewed, and the Committee noted the update with a reduced number of actions closed in quarter. Plans to close more actions off in Q3 were expected.

The Internal Audit on Disciplinary Case Management report was received with reasonable assurance. The purpose of the audit was to assess the adequacy of the arrangements in place for the management of the disciplinary process, and to focus on the demonstration of compassionate leadership principles, in addition to compliance with the Trust's defined disciplinary processes.

The Volunteers Governance Internal Audit was presented and received reasonable assurance. The purpose of the audit was to review the adequacy and effectiveness of the Trust's governance and operational management of volunteer activities.

RESOLVED: That the

- 1) Disciplinary Case Management Internal Audit Report was received; and**
- 2) Volunteers Governance Internal Audit Report was received.**

77/24 POLICIES FOR APPROVAL

The Professional Regulation Policy was approved by Committee, and the NHS Wales Respect and Resolution Policy formally adopted. It was acknowledged that the HR Starting Policy had been reclassified as a Standard Operating Procedure and the rationale for that was approved by the Policy Group and the Executive Leadership Team.

RESOLVED: That the

- 1) Professional Regulation Policy was approved; and**
- 2) NHS Wales Respect and Resolution Policy was formally adopted.**

78/24 COMMITTEE CYCLE OF BUSINESS MONITORING REPORT & PRIORITIES

Members received the Cycle of Business Monitoring Report, and the Committee priorities update with no issues to escalate.

RESOLVED: That the Cycle of Business Monitoring Report and the Committee Priorities were received.

79/24 CONSENT ITEMS

No comments were received on the items for consent.

80/24 KEY MESSAGES FOR BOARD

Any messages for Trust Board would be included in the highlight report from the Committee.

81/24 ANY OTHER BUSINESS

Carl Kneeshaw would join WAST as the Director of People from 1 November 2024 and will begin by engaging in several key events during October. Angie Lewis will continue in the role of Director of People and Culture until Carl arrives and will then take up the role of Director of Culture thereafter.

82/24 DATE OF NEXT MEETING

The next meeting was scheduled for the 14 November 2024.