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

**CONFIRMED MINUTES OF THE PEOPLE AND CULTURE COMMITTEE
OPEN MEETING HELD AT CARDIFF MRD AND REMOTELY
VIA MICROSOFT TEAMS ON 13 NOVEMBER 2025**

MEMBERS PRESENT:

Ceri Jackson	Committee Chair
Bethan Evans	Non-Executive Director (<i>left at midday</i>)
Hayley Hutchings	Non-Executive Director
Hannah Rowan	Non-Executive Director

PRESCRIBED ATTENDEES

Lee Brooks	Executive Director of Operations
Penny Durrant	Deputy Director of Nursing, Quality and Governance
Estelle Hitchon	Director of Partnerships and Engagement
Carl Kneeshaw	Director of People
Angela Lewis	Director of Culture Change
Trish Mills	Director of Corporate Governance/Board Secretary
Lizzie O'Shea	Speaking Up Safely Guardian
Andy Swinburn	Executive Director of Paramedicine
Damon Turner	Trade Union Partner
Marcus Viggers	Trade Union Partner (<i>absent between (11:19am and 12:36pm)</i>)

IN ATTENDANCE:

Hugh Bennett	Assistant Director of Commissioning and Performance
Kat Cobley	Head of Inclusion and Engagement
Sarah Davies	Head of Change and People Insights
Colin Dennis	Trust Board Chair (<i>left at midday</i>)
Catherine Goodwin	Assistant Director Inclusion, Culture and Wellbeing
Sarah Harland	Corporate Governance Officer (minutes)
Jo Kelso	Head of Workforce Education and Development (<i>left after Item 15</i>)
Richard Lewis	Essential Skills Tutor
Sara Mills	Head of Culture and OD
Sara Morris	Essential Skills Tutor
Hugh Parry	Trade Union Partner
Sarah Parry	Business Manager, People and Culture
Alex Payne	Corporate Governance Manager
Felicity Quance	Deputy Head of Internal Audit
Liz Rogers	Deputy Director of People
Yvonne Walker	Essential Skills Tutor

OBSERVERS:

Meshack Ezeadim Aspiring Board Member Programme Member
Bev Flood Head of People Services, Workforce & Organisational
Development (*left at midday*)

APOLOGIES:

Julie Boalch Assistant Director of Corporate Governance and Risk
Timoth Cahalane Trade Union Partner
Christian Fox Trade Union Partner
James Houston Assistant Director for Planning and Transformation
Mark Marsden Trade Union Partner / WASPT Co-Chair
Ed Roberts Assistant Director of Finance and Corporate Resources
Chris Turley Executive Director of Finance and Corporate Resources
Emma Wood Chief Executive and Co-Chair of WASPT

1. WELCOME AND APOLOGIES

- 1.1 The Chair welcomed members and apologies were noted. It was confirmed that the meeting met quorum.

- 1.2 The Chair invited everyone to pause and remember colleagues who are no longer with us, especially Paul Hollard, a former non-executive director and Chair of the People and Culture Committee, whose nearly 50 years of dedication to the NHS touched so many lives.

2. DECLARATIONS OF INTEREST

- 2.1 No new declarations of interest were made.

3. MINUTES FROM THE PREVIOUS MEETING

- 3.1 The minutes from the meeting of the People and Culture Committee held on 12 August 2025 were approved as a correct record with no amendments requested.

4. ACTION LOG AND MATTERS ARISING

- 4.1 There were no actions to discuss.

5. DIRECTORS' UPDATE

- 5.1 Angie Lewis and Carl Kneeshaw highlighted the success of the Mastering Diversity Conference, "Speaking Up Safely Month" and WAST Volunteers Conference. The NHS Staff Survey response rate was reported at 34% with two weeks remaining, and confidence expressed in surpassing the 40% target, WAST's rate is already well above other NHS Wales organisations.

- 5.2 Angie and Carl announced several recognitions, including Angie's Culture Pioneers Award, Healthcare People Management Association (HPMA) shortlisting for People Services, and Nursing Times finalist honours. Long service awards were given to Angela Williams (30 years), Sarah Davies and Laura Hurford (20 years). Carl and Angie are also participating in the NHS Tackling Inequalities Leadership Programme.

- 5.3 Continued focus on sharing best practice in cultural change through locality visits and engagement initiatives was highlighted. Apprenticeship programmes are expanding in call handling, patient care, and Emergency Medical Technician roles, with consultation underway to embed staff feedback. Carl also shared news of a £1.2 billion Electronic Staff Record (ESR) contract to Infosys to deliver a new and enhanced workforce management solution for the NHS. The Future NHS Workforce Solution will succeed the ESR and continue to pay 1.9 million NHS employees, which is 5% of the UK workforce, over £55 billion in payroll each year. Consultation is live for the people development policy.
- 5.4 Committee members praised the Directors update. Hayley Hutchings commended the Operations Directorate for an inspiring volunteer conference featuring national speakers. Hannah Rowan congratulated the team, highlighted local culture initiatives, and welcomed the growing apprenticeship offer aligned with organisational goals. Sara Mills outlined the “day in the life” initiative, where Organisational Development staff shadow locality managers to share best practices and challenges. Lizzie O’Shea noted improved visibility, new communications and staff interest in more case studies which is linked to the Trust’s work on Speaking up Safely.
- 5.5 The Chair emphasised the value of triangulation and observing good practice on cultural progress and requested feedback on Speaking Up Safely month.

The Committee noted the Directors Update Report.

6. OPERATIONS REPORT Q2 2025/2026

- 6.1 Lee Brooks reported improved operations, including training senior Emergency Medical Dispatchers (EMDs) as mentors, appointing 10 Call Prioritisation Streaming System (CPSS) auditors, and increased Emergency Ambulance Practitioner (EAP) training uptake despite staffing pressures. Roster review and efforts to reduce overruns continue, with positive feedback from Ambulance Care roadshows. Senior management changes within Integrated Care have been finalised, adding a service improvement role. Quality and Support initiatives are ongoing. Staff feel prepared for phase two of the Clinical Model Transformation (CMT), with positive training feedback and support planned for go-live. Crew feedback showed improved overruns and mixed views on EAP training, prompting a review of course content. Recent visits and leadership events indicate growing staff confidence in operational changes.
- 6.2 Members recognised the success of the Volunteer Conference, the value of the Operations Directorate leadership event, and the strong teamwork within operations. The Chair highlighted the event’s strong focus on culture and commended Angie Lewis and Sara Mills and for their contributions, noting positive team dynamics within Lee’s senior team. The Chair shared observations from Wrexham Emergency Department, where staff worked to get crews home on time despite challenges, demonstrating teamwork and support. Emphasising the value

of direct observation to challenge assumptions, the Chair acknowledged managers efforts to balance staff experience with patient care.

The Committee noted and took assurance from the Operations Report Q2 2025/26.

7.1 STAFF STORY: ESSENTIAL SKILLS TUTORS

- 7.1.1 Carl Kneeshaw introduced the Essential Skills Tutors; Richard Lewis, Sara Morris and Yvonne Walker, emphasising the value of Staff Stories and welcoming the team to share their work. Jo Kelso outlined the Essential Skills programme, explaining that the Emergency Medical Technician (EMT) apprenticeship, launched in 2020, includes literacy, numeracy, and digital skills under a Welsh Government-funded scheme. Digital literacy has been mandatory for all EMTs for five years, and the team's formation now broadens participation, supports social mobility, and helps staff address skill gaps in line with the organisation's commitment to opportunity and the Well-being of Future Generations Act 2015.
- 7.1.2 Richard Lewis, Sara Morris and Yvonne Walker delivered their presentation and explained that the Essential Skills Team supports learners in achieving Level 2 qualifications in communication, numeracy, and digital literacy; which are equivalent to GCSEs. Working with the Ambulance Care Team, they develop induction and progression pathways, incorporating modules such as vehicle familiarisation and conflict resolution. The team also delivers Institute of Leadership and Management (ILM) Level 3 mentoring qualifications through the EAP programme; fostering confidence, resilience and peer support networks. Looking forward, initiatives include Digital Skills for Business for administrative staff, ILM Level 5 coaching and mentoring, and short courses in project management and business administration.
- 7.1.3 Committee members praised the Essential Skills Team for their positive impact on staff development and inclusion, emphasising accessible learning, highlighted recruitment barriers and supported peer mentoring. The Chair thanked them for sharing their lived experience with the committee.

The Committee noted the Staff Story and the work of the Essential Skills Tutors.

7.2 STAFF STORY UPDATE – QUALITY AND SUPPORT DAYS FOLLOW UP

- 7.2.1 Lee Brooks provided an update on the continuation of Quality and Support Days for Operations, noting that this approach may also be adopted by other Directorates, with Andy considering a similar model for clinical teams. The October event was particularly productive, generating 644 completed Microsoft forms that offered a wealth of information to inform ongoing actions and workforce engagement. Efforts are underway to improve coordination so that all departments participate in these days simultaneously.

- 7.2.2 Future Quality and Support Days will focus on key areas such as Overruns, Sexual Safety, Communication, CMT, Non-Emergency Patient Transport Services (NEPTS), Ambulance Care Performance Standards and Infection Prevention and Control (IPC). Overall, the initiative is viewed as valuable and will remain an ongoing part of the organisation's engagement and improvement efforts.

The Committee noted the Staff Story Update.

8. PEOPLE AND CULTURE METRICS UPDATE AND WORKFORCE SCORECARD

- 8.1 Carl Kneeshaw reported positive trends with the metrics in the People and Culture Plan. The People Network has grown to 732 members, demonstrating strong engagement with equality, diversity and inclusion. Disciplinary cases are stable at 41; with a focus on resolving issues compassionately. There are 12 active formal resolution requests. Staff turnover is decreasing, and a target for healthy turnover is being developed. Absence rates are 7.8%, slightly higher than the previous reporting period but lower than last year, with a seasonal increase expected. Training compliance is at 90%, above the Welsh Government's 85% target. PADR compliance is 75.35%, with an emphasis on meaningful conversations over just meeting targets. Carl is confident the organisation is fostering a positive culture and supporting staff wellbeing.
- 8.2 Bethan Evans welcomed the positive trends in turnover and sickness rates but raised concerns about low PADR compliance, stressing its importance for a dispersed, changing organisation. Bethan asked what new actions are planned, Angie Lewis provided assurance that improvements are underway, with a pilot to make the PADR process more accessible and meaningful and focusing on conversation quality. Andy Swinburn suggested including valuable staff touchpoints from paramedic ride-outs in the PADR process and compliance metrics. Andy, Carl and Angie agreed to review this, with Carl reiterating the need for meaningful conversations alongside audit and compliance.

The Committee noted and took assurance from the People and Culture Metrics Update and Workforce Scorecard.

8.1 MONTHLY INTEGRATED QUALITY AND PERFORMANCE REPORT

- 8.1.1 Hugh Bennett presented the MIQPR update, highlighting the upcoming major change to the clinical response model, with a go-live for new categories (orange, yellow, green) and an evaluation led by Edge Hill University in partnership with Swansea Bay University Health Board, including trade union representation. Hugh reported stable 999 performance but flagged that call volumes typically increase in winter, and while 111 performance is stable, abandonment rates remain above target, prompting a demand and capacity review and roster changes with strong staff and union engagement.

- 8.1.2 Hugh reported the successful launch of new clinical categories and a staff survey with over 400 responses. Hugh highlighted ongoing CMT workstreams focused on people metrics, winter planning and staff support. Improvements were noted in handover delays and overruns, boosting job satisfaction and reducing sickness, though lost hours may increase soon. Ambulance Care performance is stable, but cancellations and major re-rostering projects for 111 and NEPTS remain challenges. Hugh emphasised staff engagement and noted that, despite positive signs, the organisation faces a challenging period ahead.
- 8.1.2 Members noted positive trends but raised questions for improvement. The Chair suggested setting a clearer target for mental health absence rates and requested a dashboard review for metrics specific to this committee over and above the MIQPR, which Carl and Hugh will discuss with their respective teams. Overall, feedback focused on making metrics meaningful and ensuring targets and reporting align with organisational goals.

The Committee noted the August/September 2025 MIQPR and actions being taken and determined:

- 1. The report provided sufficient assurance;**
- 2. No further information, scrutiny or assurance was required other than that referred to above: and**

9. ANTI-RACIST WALES ACTION PLAN UPDATE, INCLUDING THE WORKFORCE RACE EQUALITY STANDARDS REPORT 2025

- 9.1 Kat Cobley presented the 2025 Workforce Race Equality Standards Report (WRES), which forms part of the Anti-Racist Wales Action Plan, noting improved workforce diversity, reduced disciplinary disparities and higher ethnicity declaration rates. Equal access to development for minority ethnic staff was highlighted, but challenges remain in board representation and appointment rates. Planned actions include expanding inclusive recruitment, improving ethnicity data, strengthening the Black Asian and Ethnic Minorities (BAEM) Network, and embedding anti-racist training. Progress is overseen by the Anti-Racist Wales Action Plan subgroup, with regular reporting and national recognition. Participants expressed strong support for ongoing improvements, emphasising the importance of staff engagement, representative leadership, and continued review of language and processes. The Chair acknowledged progress but noted the need for more work.
- 9.2 Members strongly supported the progress made, noting improved engagement. Estelle Hitchon emphasised the benefits of a representative workforce. Hayley Hutchings asked about learning from other NHS sectors, Kat Cobley explained that while active overseas recruitment is more feasible in health boards, the Trust is focusing on support networks and inclusive recruitment, recognising the need to support staff once recruited. Trish Mills and Colin Dennis both clarified board diversity as far as Non-Executive Director appointments is concerned is partly outside of the Trust's control, being Welsh Government appointments; but initiatives such as the Aspiring Board Members Programme are underway. Hannah

Rowan raised questions about disciplinary data and language and terminology use and Angie Lewis advised this will be reviewed and agreed to bring this back to a future meeting. The Chair concluded that while progress is clear, continued improvement is needed, and thanked staff and the committee for their commitment.

The Committee took assurance from the Anti-Racist Wales Action Plan Update and Workforce Race Equality Standards Report and findings for 2025.

10. PEOPLE AND CULTURE PLAN EXTENSION

- 10.1 A request to extend the People and Culture Plan 2023/26 until April 2027 was endorsed by the committee based on its continued relevance, alignment with strategic priorities, and timeframes to refresh the Trust's Long-Term Strategic Framework. There were no concerns from the committee about this approach, and the Trust Board is asked to approve the request for extension.

The Committee endorsed the proposal to extend the People and Culture plan until April 2027 and recommended this proposal to the Trust Board for approval.

11. ALL-WALES ANTI-SEXUAL HARASSMENT POLICY AND IMPLEMENTATION PLAN

- 11.1 Catherine Goodwin introduced the All-Wales Anti-Sexual Harassment Policy developed, in response to new legal requirements. The WAST Implementation Plan is considered a model for NHS Wales. The committee raised no objections or questions and adopted the All-Wales policy for implementation.

The Committee:

- 1. Adopted the All-Wales Anti-Sexual Harassment Policy for implementation across the Trust (as it has been approved at an All-Wales level): and**
- 2. Took assurance from the provision of the associated Policy Equality Impact Assessment and Policy Implementation Plan.**

12. WASPT HIGHLIGHT REPORT 23 SEPTEMBER 2025

- 12.1 Carl Kneeshaw reported no alerts for escalation and noted that UNISON is balloting for possible industrial action. A recent risk management workshop with trade union partners improved understanding and facilitated open discussion, especially on overruns. Partnership work on the industrial injuries process continues, with a report due soon. Collaborative efforts on concerns regarding overruns and Integrated Care were highlighted, emphasising staff support.
- 12.2 Damon Turner expressed appreciation for the considerable effort invested in addressing overruns and the review of the industrial injury process, highlighting the positive progress made and the value of the recent risk management session. Damon specifically requested that the work undertaken on the industrial injury process is noted as a positive development initiated by the Trade Unions.

The Committee noted the WASPT Highlight Report from 23 September 2025.

13. HEALTH SAFETY & VIOLENCE & AGGRESSION (V&A) BI-ANNUAL REPORT

- 13.1 Graham Stockford reported 1,086 violence and aggression incidents in six months, a decrease, but still significant. Most were verbal and low harm, with improved reporting from control room and NEPTS staff. Progress was made in compliance, training, and Control of Substances Harmful to Health (COSHH) assessments; all vehicle noise levels were below HSE limits. Partnership work with trade unions continues, and a risk tracker is being developed. The focus ahead is on dashboards, targets, and local accountability. Overall, the organisation is in a better position than six months ago, with further improvements expected.
- 13.2 Trish suggested reviewing which metrics are most relevant to the committee after the current review of the MIQPR work, proposing Graham's biannual report shift to a concise quarterly dashboard to avoid duplication. The committee agreed, emphasising alignment with the committee's remit. The committee will keep biannual reporting for now, with an action to revisit the overall metrics for this committee after the MIQPR review.

The Committee noted the content of the Health Safety & Violence & Aggression (V&A) Bi-annual Report

14. REVALIDATION AND REGISTRATION REPORT FOR NMC/HCPU

- 14.1 This paper was deferred.

15. 2025/26 QUALITY GOVERNANCE REVIEWS

- 15.1 Trish Mills presented the first part of the committee's Quality Governance Review (formerly effectiveness review) for 2025/26. The survey of members noted that the committee is valued for its inclusivity, active participation, and high-quality reporting, which foster a collaborative environment and effective assurance. There is a desire for the committee to focus more on strategic priorities and to measure the tangible impact of its work, ensuring that discussions address the most pressing and relevant issues for staff and the organisation. While the current membership and terms of reference remain broadly appropriate, amendments were agreed to include broader education and training, related partnerships and collaboration, and membership changes to reflect these updates.

The Committee:

- 1. Noted the wider board committee framework changes proposed; and**
- 2. Endorsed changes to the Terms of Reference.**

16. RISK MANAGEMENT AND BOARD ASSURANCE FRAMEWORK

16.1 The committee discussed four relevant risks, all of which were reviewed during the period and previously presented to the Trust Board in September. Members noted that the risks inform agenda setting and that discussions throughout the meeting aligned with the key areas of each risk:

- Risk 160 (high absence rates) reduced in score from 20 to 16 given the year-on-year reductions in sickness.
- Risk 201 (reputational harm) has been disaggregated into two risks, one related to relationships with stakeholders and another for poor patient experience affecting reputation. These are both scored at 16 with a target score of 12. Given the reach of these risks, it is recommended they are overseen by the board directly, rather than this committee. This was agreed.
- The risks related to Trade Union relationships (Risk 163) and staff health and wellbeing (Risk 558) remain static.

16.2 Members noted some action dates had shifted and sought assurance on progress. Directors confirmed that a deep dive into People and Culture risks will be undertaken in December to ensure they remain fit for purpose, with consideration of combining risks and refreshing actions.

The Committee noted the contents of the Risk Management and Board Assurance Framework Report, including the controls in place against the risks and the actions described to further mitigate the risks, and confirmed agreement for the reputational risks 201a and 201b to be overseen by the Trust Board in future reports.

17. AUDIT TRACKER 2025/26 Q2 REPORTING (July-September 2025)

17.1 Trish Mills reported strong progress on the Audit Tracker, with over 80% of actions closed this quarter. Some deadlines were revised due to dependencies on projects and external suppliers. Lee Brooks and Carl Kneeshaw noted updates were needed for the Resourcing Policy and Occupational Health and Wellbeing Internal audit recommendations. The committee accepted the revised deadlines and were satisfied that risks were being appropriately mitigated in the meantime.

The Committee took assurance from the monitoring of management actions to address recommendations in the Tracker and the rationale for the closure of actions.

18. INTERNAL AUDIT REPORT: ORGANISATIONAL CHANGE (Reasonable Assurance)

18.1 The committee received the Internal Audit Report on Organisational Change and noted the discussion held at the Audit, Risk and Assurance Committee on the 02 September. Carl Kneeshaw confirmed audit findings were accepted, and actions are progressing with realistic deadlines.

- 18.2 Data from post change reviews and staff surveys will be used to assess impact and drive improvement. Angie Lewis noted ongoing staff support.

The Committee took assurance from report and the discussion on this at the meeting of the Audit Risk and Assurance Committee on 2 September 2025.

19. POLICIES FOR APPROVAL

- 19.1 The following policies were approved and adopted:
- All-Wales Anti-Sexual Harassment Policy (*Item 11*)
 - Lone Working Policy
 - Carers Policy
 - All-Wales Flexible Working Policy

20. CYCLE OF BUSINESS MONITORING REPORT&COMMITTEE PRIORITIES 2025/26

- 20.1 Trish Mills clarified that the Monitoring Report incorrectly stated the Speaking Up Safely report was deferred, however the Speaking Up Safely Annual Report was received at the last meeting on 12 August 2025 therefore the regular update was taken out of cycle. The Monitoring Report will be updated accordingly.

The Committee noted the Cycle of Business Monitoring Report and Committee Priorities 2025/26 and acknowledged the correction relating to the Speaking Up Safety Report.

21. WASPT MINUTES: 24 JULY 2025

- 21.1 The committee received the WASPT Minutes from the meeting on 24 July 2025.

22. REFLECTIONS

- 22.1 Reflections on the meeting included an appreciation for the focus on culture and the respect shown within senior teams; as well as recognition of the efforts made to improve staff experience, a focus on training initiatives as heard through the Staff Story, and a demonstrable focus on improving the position with overruns and handover delays. The feedback from staff indicated a growing confidence in ongoing changes, and the importance of triangulating information from various sources was emphasised.

23. ANY OTHER BUSINESS

- 23.1 None declared.

24. DATE OF THE NEXT MEETING

- 24.1 The next meeting is scheduled for the 10 February 2026.

The meeting closed at 13:50