

<b>DATE OF MEETING</b>	Tuesday 18th June 2024, 1.30pm
<b>VENUE</b>	Microsoft Teams

<b>PRESENT</b>	Louise Wright, Independent Member, Committee Chair
	Paul Deneen, Independent Member
	Helen Sweetland, Independent Member
	Penny Jones, Independent Member
<b>IN ATTENDANCE</b>	Sarah Simmonds, Director of Workforce & Organisational Development
	Julie Chappelle, Assistant Director of Workforce & Organisational Development
	Geraint Scott, Head of Welsh Language Unit
	Non-Ellis, Equality Diversity & Inclusion Specialist
	Hannah Williams, Head of Organisational Development
	James Calvert, Medical Director
	Shelley Williams, Assistant Director of Workforce & Organisational Development
	Peter Brown, Assistant Director of Workforce & Organisational Development
	Lucy Windsor, Head of Corporate Risk & Assurance
	Sara Utley, Audit Wales
	Rhian Gard, Audit Wales
	Michelle Jones, Head of Board Business
	Thomas Jaynes, Governance Support Officer
	Megan Frampton, Governance Support Officer
<b>APOLOGIES</b>	Rani Dash, Director of Corporate Governance

<b>PCC/1806/1.1</b>	<b>PRELIMINARY MATTERS</b>
	<p><b>Welcome and Introductions</b></p> <p>The Chair welcomed everyone to the meeting.</p>

PCC/1806/1.2	<p><b>Apologies for Absence</b></p> <p>Apologies for absence were noted.</p>
PCC/1806/1.3	<p><b>Declarations of Interest</b></p> <p>There were no declarations of interest raised to record.</p>
PCC/1806/1.4	<p><b>Draft Minutes of the meeting held on 22<sup>nd</sup> February 2024.</b></p> <p>The minutes of the meeting held on the 22<sup>nd</sup> of February 2024 were agreed as a true and accurate record.</p>
PCC/1806/1.5	<p><b>Committee Action Log</b></p> <p>The Committee received the action log and was content with the progress made in relation to completed actions and against any outstanding actions, as set out within the paper.</p>
<b>ITEMS FOR APPROVAL/RATIFICATION/DECISION</b>	
PCC/1806/2.1	<p><b>Committee Annual Programme of Business</b></p> <p>Michelle Jones(MJ), Head of Board Business, presented the Forward Work Programme (FWP) 2024/25 to the Committee. The Committee was advised that the FWP was developed with regard to recommendations from the Committee Self-Assessment 2023/24 and to enable the Committee to: -</p> <ul style="list-style-type: none"> <li>• Fulfil its Terms of Reference;</li> <li>• Seek assurance and provide scrutiny on behalf of the Board, in relation to those items identified within the Committees terms of reference, and,</li> <li>• Seek assurance that governance, risk, and assurance arrangements are in place and working well.</li> </ul> <p>The Committee <b>RECIEVED</b> and <b>APPROVED</b> the proposed Committee work plan and <b>NOTED</b> that it would be brought forward to each future Committee meeting for oversight.</p>
<b>ITEMS FOR DISCUSSION</b>	
PCC/1806/3.1	<p><b>Committee Risk Report</b></p>



Lucy Windsor (LW), Head of Corporate Risk and Assurance, provided the Committee with an overview of the Committee Risk Register containing high-level risks with sub-risks, for which the Committee had delegated responsibility from the Board.

LW advised that since the last report to the Committee, the Board had approved changes to the Strategic Risk Register, including a reduction in the risk score and level for one of the sub-risks (SRR001- There is a risk that the Health Board would be unable to deliver and maintain high-quality quality safe and sustainable services that meet the changing needs of the population) overseen by the Committee.

The Committee **NOTED** the following:

- delegated strategic risks;
- delegated corporate risk;
- Work being undertaken to identify and manage all risks that could impact the Health Board's delivery of its People Plan.

## PCC/1806/3.2

### **Progress Update on the Delivery of Welsh Government's Race Equality Action Plan for Wales**

Sarah Simmonds (SS), Director of Workforce & Organisational Development, with support from Non-Ellis (NE), Equality Diversity & Inclusion Specialist, presented an update on the delivery of Welsh Government's Race Equality Action Plan for Wales to the Committee.

NE advised that the report also provided an update on progress made in addressing the Welsh Government's Anti-Racist Wales Action Plan (ARWAP).

The Committee considered the actions which had progressed and noted that attendance at Race Equality Advisory Groups had decreased and sought confirmation as to the selection process for membership. The Committee was advised that the process was that of self-selection.

In response to a question, NE provided an overview of the mechanisms in place for recording racist related incidents and acknowledged the need for ongoing development and awareness to empower staff and ensure psychological safety when reporting incidents.

The Committee **NOTED** the report.



**PCC/1806/3.3**

**Assurance Report on the Development and Delivery of the Agile Working Framework**

Sarah Simmonds (SS), Director of Workforce & Organisational Development, with the support of Julie Chappelle (JC), Assistant Director of Workforce & Organisational Development, presented a report on the development and delivery of the agile working framework. The Committee noted that there were limitations to the capacity and capability for some services and individuals in utilising agile working.

SS noted that the move to agile working was enabled, in part, through the support of IT. In response to a question, the Committee was informed that the Estates Strategy was key in informing the implementation of the agile agenda which would also ensure that reasonable adjustments were made to accommodate those with protected characteristics.

Paul Deneen (PD), Independent Member, sought confirmation as to how the savings from the agile working framework would be quantified, and it was agreed that the savings would be reported to the Committee as part of future agile working updates scheduled within the Committee's forward workplan.

The Committee **NOTED** the action plan.

**PCC/1806/3.4**

**Workforce Performance Dashboard incorporating Key Performance Indicators**

Sarah Simmonds (SS), Director of Workforce & Organisational Development, with the support of Shelley Williams (SW), Assistant Director of Workforce & Organisational Development, presented the Workforce Performance Dashboard to the Committee.

SS outlined that the report detailed the position as at April 2024, and also provided an update in relation to Employee Relations Activity for the period February 2024 to April 2024. SS noted that sickness rates remained high at 6%. Staff turnover had returned to pre-COVID levels and there was an increase in the number of staff in post, with a shift in roles filled from administration roles to nursing, medical and additional clinical services.



	<p>Louise Wright (LW), Chair, noted that there had been an increase in recruitment into clinical posts with recruitment to administrative posts being subjected to a scrutiny process. LW queried whether this would have an impact on recruitment statistics and was advised that this may result in a change but noted that the vacancy scrutiny process had been helpful in ensuring recruitment to essential posts.</p> <p>The Committee <b>NOTED</b> the report.</p>
<p><b>PCC/1806/3.5</b></p>	<p><b>People Plan 2022/25, Annual Review</b></p> <p>Sarah Simmonds (SS), Director of Workforce &amp; Organisational Development, with support from Peter Brown(PB), Assistant Director of Workforce &amp; Organisational Development, Shelley Williams(SW), Assistant Director of Workforce &amp; Organisational Development and Julie Chappelle (JC), Assistant Director of Workforce &amp; Organisational Development, presented the report to the Committee.</p> <p>The Committee noted the progress made over the last 12-months against the key strategic objectives of the Plan. The Committee received assurance that all data with regards to 'Speaking Up Safely' as outlined under the Health and Wellbeing objective, would be captured through the VIVUP application, and that staff would be provided with alternative methods for raising concerns. The Committee was also advised of the intention to re-launch the People Plan for a further three years in July 2025.</p> <p>The Committee <b>NOTED</b> the update.</p>
<p><b>PCC/1806/3.6</b></p>	<p><b>Report from the Director of Workforce &amp; OD, including Employee Relations &amp; Suspensions</b></p> <p>Sarah Simmonds (SS), Director of Workforce &amp; Organisational Development, provided an overview of the work of the Workforce &amp; Organisational Development Team, at a local, regional and national level. The Committee noted that the report covered the period since the last Committee meeting, 22 February 2024.</p> <p>The Committee noted progress made on issues such as; Employee relations activity, NHS Wales Staff Survey, Medical E-Systems, Staff Recognition Framework and the arrangements for the production of an annual staff survey and the need to support an increased response rate. The Committee was informed that there</p>



were 11 employees suspended, with one employee suspended for over 12 months, eight for over six months and two for less than three months.

Paul Deneen (PD), Independent Member, raised concern that the response rate to the staff survey was low at 18%. The concern was noted with plans being putting in place to support improved response rates in future.

The Committee **NOTED** the report for information.

**PCC/1806/3.7**

### **Talent and Succession Planning Progress Update**

Sarah Simmonds (SS), Director of Workforce & Organisational Development, with the support of Hannah Williams (HW), Head of Organisational Development, presented the progress update.

The Committee noted that the Talent Management and Succession Planning (TMSP) Framework which detailed the Health Board's approach to the attraction, identification, development and transition of current and future talent with the aim of securing workforce sustainability through employing individuals with the right skills and experience to meet current and future organisational changes. The Committee was assured that any major service changes would be integrated as part of usual service process and requested that an update on the progress of the talent management and succession planning be provided to the Committee annually.

#### **Action:**

- Head of Board Business to update the Committee's Forward Work plan to include an annual update on talent management and succession planning.

The Committee **NOTED** the Talent Management and Succession Planning Framework and plans for implementation.

**PCC/1806/3.8**

### **Assurance Report on Compliance with Welsh Language Requirements**

Geraint Scott (GS), Head of Welsh Language Unit, provided the Committee with an overview of the Health Board's compliance in meeting its statutory Welsh language duties, and provided an overview of the support provided to staff who were delivering services and for those wishing to improve their language skills.



GS highlighted the work undertaken to ensure compliance with the Welsh Language Standards, and the statutory obligation to produce a 5-year plan for increasing clinical consultations through the medium of Welsh from November 2024.

The Committee was informed that a final report on the Health Board's progress against the More than Just Words targets would be submitted to Welsh Government by the end of June 2024, with the Health Board's Annual Welsh Language report being submitted to Board in September 2024.

GS highlighted to the Committee that further guidance from Welsh Government regarding elements of the 'More Than Just Words' documentation was awaited, and the Committee requested that an update be brought to a future meeting.

### **Action**

- Head of Board Business to update the Committee's Forward Workplan to include a report following receipt of guidance from Welsh Government in respect of More than Just Words.

The Committee was informed that the Health Board was being investigated by the Welsh Language Commissioner's Office, for non-compliance with Standards 9 and 10, which focuses upon the provision of switch board services through the Welsh medium and noted that the Health Board had until 3<sup>rd</sup> July 2024 to reply. The Committee noted the work ongoing to address this which included the recruitment of Welsh speakers to fully comply with Standard 10 and noted that despite several attempts to recruit Welsh Speakers to the Switchboard service the Health Board would not be able to achieve compliance.

GS informed the Committee of the outcome of a Welsh Language Tribunal hearing into a local authority which found that the organisation had failed to include sufficient information in consideration documents about the possible effect upon the Welsh Language. GS advised that following this ruling the Health Board was assessing its approach when completing EQIA's as well as public consultations and research and development. The Committee noted that the information was scheduled to be submitted to the Welsh Language Commissioners Office by the end of June 2024.

The Committee **NOTED** the report.



**PCC/1806/3.9**

**Update on the Training Programme and Compliance of Reporting Associated with the Electronic Blood Management System**

James Calvert (JC), Medical Director, informed the Committee that the Patient Quality, Safety and Outcomes Committee had referred training performance on blood tracking to this Committee. JC provided an overview of the arrangements that were in place to manage the storage and usage of blood products through the Electronic Blood Management System, and the compliance with the Health and Care Standard 2.8 Blood Management.

JC assured the Committee that the traceability compliance of the Health Board's blood products had increased from 98% during the pandemic to 99.4% and that to ensure 100% compliance a dedicated Transfusion Traceability officer, responsible for blood compliance and staff training had been recruited.

The Committee **NOTED** the report and was assured that the tracing would achieve 100% compliance.

**PCC/1806/3.10**

**Annual Assurance Report on Medical Revalidation**

James Calvert (JC), Medical Director, provided the Committee with an overview of the revalidation process managed by the GMC and advised that all doctors must undertake annual appraisals.

JC advised that the Health Board was designated as the authorised body for this process and the Committee was assured that appraisal rates remained high across the Health Board and across the grades of doctors. The Committee noted that the appraisal and revalidation processes were integrated into medical education and as a result an educational perspective on appraisal with learning, wellbeing and support had been maintained with doctors continuing to embrace the concept.

JC provided an overview of the performance in respect of appraisal and noted that 91% of secondary care doctors in a substantive post had received an appraisal in 2023, with 94% of primary care doctors completing an appraisal within the same timeframe. The Committee was apprised of the circumstances which may result in a deferment of appraisal.



	<p>JC advised that on 16<sup>th</sup> January 2023 the Health Board was assessed by the Revalidation Support Unit. This visit assessed the quality of medical appraisal and revalidation processes within the Health Board on behalf of the Chief Medical Officer. The Committee was provided with an overview of this visit and noted that the report from this visit identified four recommendations, but acknowledged that robust systems were in place.</p> <p>The Committee was also advised that Professor Helen Sweetland (HS), Independent Member, had been appointed to the role of Lay Representative and now attended meetings of the Revalidation Review Group.</p> <p>The Committee <b>RECIEVED</b> the report.</p>
	<p><b>OTHER MATTERS</b></p>
<p><b>PCC/1806/4.1</b></p>	<p><b>Items to be Brought to the Attention of the Board and Other Committees</b></p> <p>The Committee requested that the following items be escalated to The Board:</p> <ul style="list-style-type: none"> <li>• The increased risk of non-compliance with Welsh Language Standards, including an update on the Welsh Language Commissioner’s investigation.</li> <li>• The need for increased resources for the Equality, Diversity and Inclusion agenda.</li> <li>• Suspensions over four months (one over 12 months and eight over six months).</li> </ul>
<p><b>PCC/1806/4.2</b></p>	<p><b>Any Other Urgent Business</b></p> <p>There was no urgent business raised for discussion.</p>
<p><b>PCC/1806/4.3</b></p>	<p><b>Committee Reflections</b></p> <p>The Chair requested that the Committee email any reflections from today’s meeting to her.</p>
<p><b>PCC/1806/4.4</b></p>	<p><b>Date of the Next Meeting:</b></p> <ul style="list-style-type: none"> <li>• Tuesday 15<sup>th</sup> October 2024.</li> </ul>

