

**CYFARFOD BWRDD IECHYD PRIFYSGOLN  
ANEURIN BEVAN/ANEURIN BEVAN UNIVERSITY  
HEALTH BOARD MEETING**

**MINUTES OF THE PEOPLE AND CULTURE  
COMMITTEE MEETING**

<b>DATE OF MEETING</b>	Thursday 22nd February 2024
<b>VENUE</b>	Microsoft Teams

<b>PRESENT</b>	Louise Wright- Independent Member, Committee Chair Paul Deneen- Independent Member Dafydd Vaughan- Independent Member Helen Sweetland- Independent Member
<b>IN ATTENDANCE</b>	Sarah Simmonds- Director of Workforce & Organisational Development (OD) Rani Dash- Director of Corporate Governance Kathryn Bourne - Strategic Lead Medical & Dental Workforce & Job Evaluation Michelle Jones - Head of Board Business Ann Bentley - Head of Strategic Resourcing Rhian Gard – Internal Audit Non Ellis- Equality Diversity and Inclusion Specialist Peter Brown- Assistant Director of Workforce and OD Julie Chapelle- Assistant Workforce Director Linda Coe – Head of Medical Education & Revalidation Services David Murphy – Audit Wales Cathy Brooks – Head of Workforce Planning Fern Cook – Governance Support Officer
<b>APOLOGIES</b>	Shelley Williams- Assistant Director of Workforce

<b>PCC 2202/1</b>	<b>Preliminary Matters</b>
<b>PCC 2202/1.1</b>	<b>Welcome and Introductions</b>  The Chair welcomed everyone to the meeting.
<b>PCC 2202/1.2</b>	<b>Apologies for Absence</b>  Apologies for absence were noted.
<b>PCC 2202/1.3</b>	<b>Declarations of Interest</b>  There were no declarations of interest raised to record.

<p><b>PCC 2202/1.4</b></p>	<p><b>Minutes of the previous meeting</b></p> <p>There was a request by Sarah Simmonds (SS), Director of Workforce &amp; OD, for the following amendments to be made to the minutes:</p> <ul style="list-style-type: none"> <li>• <b>Section PCC 1910/1.5</b>, PCC/1306/2.2 – A paper would come to a future meeting regarding finalising speciality doctors and clinical fellows’ framework.</li> <li>• <b>Section PCC 1910/3.3</b>, Sarah Simmonds (SS), Director of Workforce &amp; OD, advised that there was a priority an opportunity for us to share priority when we need to and if the referral was urgent the staff member could go to a different Health Board if they were able to travel. The Committee noted that the current waiting time was 12 weeks, and that work was ongoing to secure improvements to the timeframe. SS advised the Committee that if a staff member was waiting for an Occupational Health referral it would not prevent them from returning to work.</li> <li>• <b>Section PCC 1910/3.3</b>, Occupational Health Service – High levels of sickness and staff turnover were noted. It was noted that support from other Health Board sites had been sought along with exploring external commissioning arrangements to ensure that the waiting times are not increased and to enable those who are absent to return to work more quickly.</li> <li>• <b>Section PCC 1910/3.4</b>, Tupe Transfers were ongoing for Pharmacy services across Wales and potential for Primary Care services in Tredegar Health Centre.</li> <li>• <b>Section CC 1910/3.5</b>, There had been a reduction in the turnover of staff, and that the Health Board was returning at pre Covid-19 levels but acknowledged there was still room for improvement.</li> </ul> <p>The minutes of the meeting held on the 19<sup>th</sup> of October 2023 were agreed as a true and accurate record subject to the above amendments . <b>Acton: Fern Cook, Governance Support Officer</b></p>
<p><b>PCC 2202/1.5</b></p>	<p><b>Committee Action Log</b></p> <p>The Committee received the action log. The Committee was content with the progress made on the outstanding actions and noted the completed actions.</p>



	<p>There was a request for PCC 19/10/1.5 Speciality Doctors item to be removed due to a duplicate item being recorded. <b>Action: Fern Cook, Committee Secretary</b></p>
<b>PCC 2202/2</b>	<b>Items for Approval/Ratification/Decision</b>
	There were no items for this section.
<b>PCC 2202/3</b>	<b>Items for Discussion</b>
<b>PCC 2202/3.1</b>	<p><b>Committee Risk Report</b></p> <p>Rani Dash (RD), Director of Corporate Governance, provided the Committee with an overview of the report and noted that the risks were those contained within the Board's strategic risk register and relevant to the scope of this Committee.</p> <p>Louise Wright (LW), Chair, questioned the high turnover of Junior Doctors and asked how the Health Board compared to others. Sarah Simmonds (SS), Director of Workforce &amp; OD, advised that the performance was comparable with other Health Boards.</p> <p>LW also questioned why there was a delay in the provision of DBS for staff . SS advised that in 2018 it was found that not all DBS checks had been recorded on the ESR system and the review that had commenced was placed on hold due to system pressures. It was noted that the review had recommenced.</p> <p>Paul Deneen (PD), Independent Member, questioned whether the industrial action had been resolved. SS advised that further dates in March had been planned for strike action.</p> <p><b><i>The Committee received and reviewed the risk report and was ASSURED with the information provided.</i></b></p>
<b>PCC 2202/3.2</b>	<p><b>Assurance on Compliance with the Equality Act 2010, including Equality Impact Assessment</b></p> <p>Sarah Simmonds (SS), Director of Workforce &amp; OD, provided the Committee with an overview of the work being undertaken to progress the Equality, Diversity and Inclusion (EDI) work stream within the Health Board,</p>



providing assurance on compliance with the Equality Act 2010, including Equality Impact Assessment (EQIA).

The Committee was advised that recommendations made within this paper included the need to commit to a structured program of:

- embedding EQIA practice throughout the organisation,
- the planned next steps for implementation and
- provide a view on any specific priority areas for further action.

SS highlighted to the Committee that there was work to be done in ensuring the plan was effective. The Committee was advised that a Strategic Equality Performance report was scheduled to be presented to Board in March 2024.

Helen Sweetland (HS), Independent Member, questioned if there had been much engagement with the survey. Non Ellis (NE), Equality Diversity and Inclusion Specialist, advised that there had been some difficulties in securing a response from the public but, noted that the interaction with Stakeholders was good. The Committee noted that work was ongoing as to how feedback would be shared with those who participated in the survey.

Louise Wright (LW), Chair, commented that there was further work required to ensure consistent and comprehensive Equality Impact Assessments, which brought a risk of a potential for challenges in respect of the Health Board's policies and decisions. LW confirmed that she would raise this matter with the Board at its meeting in March 2024. **Action: Louise Wright, Chair.**

Sarah Simmond (SS) Director of Workforce & OD advised the Committee that a new post had been created within the workforce & OD team to support this important programme of work.

***The Committee NOTED the:***

- ***recommendations to enable a structured program of embedding EQIA practice throughout the organisation; and***
- ***the planned next steps for implementation.***

PCC 2202/3.3

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



*Cathy Brooks Joined the Meeting*

Sarah Simmonds (SS), Director of Workforce & OD, provided the Committee with an update on implementation of the Agile/Hybrid Programme.

The Committee noted that programme had been in place for 5 years and that updated plans had been approved by the Executive Committee. The Committee was informed as to how its members could become involved in this programme of work. The Committee was assured with the progress being made with the implementation of the agile framework, action being taken in respect of the associated challenges and noted that future targets to be set.

Dafydd Vaughan (DV), Independent Member, questioned if it would be possible to see and understand the agile plans for Ty Gwent and was informed that there was a Q&A session on Friday 1<sup>st</sup> March which Members were invited to attend.

***The Committee was assured with the information provided regarding the progress of the agile working framework and the next steps.***

*Cathy Brooks left the meeting*

**PCC 2202/3.4**

**Annual Assurance Report of Medical Revalidation**

*Linda Coe joined the meeting.*

James Calvert (JC), Medical Director, advised the Committee that revalidation was the GMC process by which all licensed doctors demonstrate every five years that they are up to date and fit to practise. Every licensed doctor who practises medicine in the UK must revalidate. As part of this, the Committee noted that doctors must undertake annual appraisals based on Good Medical Practice.

The Committee was assured that appraisal rates remain high across the Health Board and across the grades of doctor and that there was just one recommendation arising from the revalidation quality review. The Committee also noted that referral rates had reduced by 13%.

JC advised the Committee that the Health Board was hosting an All-Wales Conference for appraisal at the Grange University Hospital with 110 delegates attending.



The Committee sought assurance as to whether appraisals are completed within working hours and whether protected time is provided. JC advised that the Health Board has a clear emphasis on doctors' education, support, and progress via appraisal and Revalidation as part of the ongoing medical improvements and that staff have a day a week within working hours to focus on the improvements in medical services.

Linda Coe (LC), Head of Medical Education & Revalidation Services, advised the Committee of the difficulties presently being encountered in the recruitment of appraisers due to the pressure of the day job and advised that work was ongoing to address this.

***The Committee NOTED the annual report and was assured that the Health Board was maintaining a high level of assessment and revalidation.***

**PCC 2202/3.5**

**Annual Assurance Report of Job Planning including Medical E-Systems**

*Kathryn Bourne & Ann Bentley joined the meeting*

Julie Chapelle (JC), Assistant Workforce Director - Workforce Planning, Clinical Futures, provided an update on the achievement of actions to address the 2020 Audit recommendations on Consultant Job Planning and the progress made. The Committee heard that following the roll out of the first phase to Family and Therapies Division, the feedback had been positive and that this approach would be implemented across other Divisions.

Kathryn Bourne (KB), Strategic Lead Medical & Dental Workforce & Job Evaluation, advised the Committee that once implementation was complete, the system would be instrumental in better analysing data.

Helen Sweetland (HS), Independent Member, sought clarification as to who was responsible for submitting job plans. KB advised that the system allows for the consultant to start the job plan, with any changes being agreed in a face-to-face meeting.

***The Committee NOTED the progress made and received assurance that the work was progressing. The Committee requested to receive further updates on the implementation of the system.***



*Kathryn Bourne & Ann Bentley left the meeting*

**PCC 2202/3.6**

### **Workforce Performance Dashboard incorporating Key Performance Indicators**

Sarah Simmonds (SS), Director of Workforce & OD, provided the Committee with an update on the January 2024 performance dashboard, incorporating key workforce related performance indicators for information and assurance. The Committee noted that due to Occupational Health undergoing a system update, the Occupational Health data was unable to be provided in this report and that work was ongoing with the system provider to rectify system issues.

Paul Deneen (PD), Independent Member, questioned how these indicators compared to other Health Boards. SS advised she would share the data outside of the meeting via email. **Action: Sarah Simmonds, Director of Workforce & OD.**

***The Committee was content with the new indicators incorporated into the dashboard.***

***The Committee NOTED the content of the Workforce Performance Dashboard.***

**PCC 2202/3.7**

### **People Plan 2022/25, Quarterly Review**

Sarah Simmonds (SS), Director of Workforce & OD, provided a quarterly update on the Health Board's People Plan and achievements in the period October to December 2023. This followed a previous update provided to the Committee which outlined the achievements for the year 2022/2023. SS advised that the Plan has 3 objectives: -

- Staff Health & Wellbeing
- Employer of Choice
- Workforce Sustainability

SS advised the Committee that the objectives for 2024/25 would be mapped out against each quarter of the plan to ensure that there was a clear understanding of the key deliverables for the year. SS confirmed that this would come to a future Committee meeting. **Action Sarah Simmonds, Director of Workforce & OD**



Peter Brown (PB), Assistant Director of Workforce & OD, advised the Committee that the talent management framework had funding in place for a 6 months period to employ an officer to support this work. Louise Wright (LW), Chair requested a presentation to the Committee on the talent management framework once complete **Action: Sarah Simmonds, Director of Workforce & OD**

Helen Sweetland (HS), Independent Member, questioned if the Health Board had the finances to complete all the actions within the people plan. SS advised that progress had not stopped but adjustments to the delivery timescales had been made and assured the Committee that work was ongoing with external stakeholders to obtain grant funding wherever possible.

***The Committee received the report and was content with update provided in respect of the progress made in implementing the People Plan.***

#### **PCC 2202/3.8**

#### **Report from the Director of Workforce & OD, Including Employee Relations & Suspensions over 4 Months**

Sarah Simmonds (SS), Director of Workforce & OD, provided the Committee with an overview of a range of activities of the Workforce & OD (WOD) Team, key issues locally, regionally and in NHS Wales. In particular, the following points were highlighted to the Committee:

- Employee relation activity – There were 7 staff members currently suspended for longer than 4months.
- Positive progress had been made on flexible working.
- Tupe Transfers – It was noted that this would have an impact on the Health Boards head count.
- Pilot with RCN Wales, this would provide staff with access to nurse training.

Peter Brown (PB), Assistant Director of Workforce & OD, provided the Committee with an update on mandatory training. The Committee was advised that the Core Learning Committee had approved for counter fraud training to be included and also noted that performance of Health & Safety training required improvement.

PB advised the Committee that the team was undertaking work to understand how long it takes different job roles to



	<p>complete mandatory training and noted that the findings would be shared at a future Committee meeting. <b>Action Sarah Simmonds, Director of Workforce &amp; OD.</b></p> <p>Dafydd Vaughan (DV), Independent Member, sought clarification as to the length of time required for the training to be completed and whether this had been higher or lower than expected. PB advised that the data demonstrated that it was a lot higher than expected but acknowledged that further work would be done through the induction process.</p> <p><b><i>The Committee NOTED the report and was assured with the information provided.</i></b></p>
<p><b>PCC 2202/3.9</b></p>	<p><b>Committee Self-Assessment Results</b></p> <p>Rani Dash (RD), Director of Corporate Governance, provided an overview of outcomes of the Committees self-assessment for this year, and noted that the results would be presented to a future Board meeting.</p> <p>Louise Wright (LW), Chair, thanked everyone that took part in completing the assessment.</p> <p><b><i>The Committee:</i></b></p> <p><b><i>NOTED the performance information contained within the report and AGREED to include the proposed improvement actions within the Committee Forward Plan for 2024/25 or the wider Board Business Improvement Plan.</i></b></p>
<p><b>PCC 2202/3.10</b></p>	<p><b>HEIW Report</b></p> <p>James Calvert (JC), Medical Director, advised the Committee that Education in the Medicine Division was placed in enhanced monitoring by HEIW in 2022. During September and October 2023, Health Education &amp; Improvement Wales (HEIW) undertook visits to the Medicine Division at the Grange University Hospital and Royal Gwent Hospital (28th September 2023) and Nevill Hall Hospital and Ysbyty Ystrad Fawr (26th October 2023). The Committee noted that the latest Health Board response was provided to HEIW on 28th November 2023 and that that a new process had been established which</p>



included a working Group to ensure staff members were following the process for any transfer of patients.

Sarah Simmonds (SS), Director of Workforce & OD, advised the Committee that HEIW had requested a copy of the Health Board's new processes to adopt across other Health Boards as good practice.

JC advised the Committee that there had been a request to HEIW for the Health Board to be moved from the enhanced monitoring status and a response was awaited.

Linda Coe(LC), Head of Medical Education & Revalidation Services, advised that HEIW had concerns with new staff members being put on call on their own without support. It was advised that work was being undertaken to ensure this did not occur. The Committee requested a further update on this at a future meeting. **Action: James Calvert, Medical Director**

***The Committee NOTED the Report and the progress made.***

***Received assurance that the Health Board was to improve its provision of training and development for its medical trainees and trainers.***

**PCC 2202/3.11**

### **Audit Wales, Workforce Planning Report**

*David Murphy joined the meeting*

David Murphy (DM), Audit Wales, provided the Committee with an update on the recommendations and organisational response to the Audit Wales review of workforce planning arrangements and the seven recommendations raised within the audit report.

The Committee noted that the following 7 recommendations had been made:-

1. The Health Board should update its 5 and 10-year planning process, including clinical futures plans and workforce projections to ensure that they appropriately support the implementation of financially sustainable service models. (High priority)
2. The Health Board does not have an agreed funded establishment that covers all its services. The Health Board should determine its funded workforce establishment for 2024-25 and then introduce arrangements to update this annually. (High priority)



3. The Health Board should review their central workforce planning capacity and capability to ensure it is sufficient to support their longer term strategic and operational workforce planning requirements. (High priority)
4. The Health Board should develop and implement a programme of workforce planning training and once in place create an evaluation framework to measure the success of its training programme. (High priority)
5. Once the Health Board has revised its sustainable Clinical Futures models, it needs to ensure there is a workforce programme to support the necessary redesign and service transformation. (High priority)
6. The Health Board should clearly structure its People Plan updates to better describe the impact that delivery is having. (High priority)
7. The Health Board should look to use benchmarking to inform plans for workforce redesign and service transformation ensuring similar system conditions, demographics and population characteristics make their comparisons valid. (Medium priority)

Sarah Simmonds (SS), Director of Workforce & OD, advised the Committee that work was ongoing in addressing the recommendations and noted that support from HEIW on some of the recommendation would be required.

Helen Sweetland (HS), Independent Member, questioned if other Health Boards had been audited in the same area. DM confirmed that this was the case and advised that an overarching report on themes from all Health Boards would be provided.

***The Committee NOTED the audit report and recommendations and agreed to receive further updates of progress against each of the recommendations at the next committee meeting.***

*David Murphy left the meeting*

**PCC 2202/3.12**

**Committee Annual Report**

Michelle Jones (MJ), Head of Board Business, provided the Committee with an overview of the Committee annual report for 2023/24.



	<b><i>The Committee AGREED the annual report for the Committee.</i></b>
<b>PCC 2202/4</b>	<b>Items for Information</b> No items for information.
<b>PCC 2202/5.</b>	<b>Other Matters</b>
<b>PCC 2202/5.1</b>	<b>Items to be Brought to the Attention of the Board and Other Committees</b>  The Committee agreed the following areas would be brought to the attention of Board in March 2024 <ul style="list-style-type: none"> <li>• Equality Assessment</li> <li>• Suspension activity of over 4months</li> <li>• Tupe Staff transfers in pharmacy services.</li> </ul>
<b>PCC 2202/5.2</b>	<b>Any other Urgent Business</b>  There was no other urgent business.
<b>PCC 2202/5.3</b>	<b>Date of the next meeting.</b> Tuesday 18 <sup>th</sup> June 2024.

