

**Confirmed Minutes of the People and Culture Committee
Held On 16 May 2023
Via MS Teams**

Chair:		
Sara Moseley	SM	Independent Member for Third Sector/Committee Chair
Present:		
Akmal Hanuk	AH	Independent Member for Community
Ceri Phillips	CP	Vice Chair of the UHB
Rhian Thomas	RT	Independent Member for Capital & Estates
Mike Jones	MJ	Independent Member for Trade Union
Susan Elsmore	SE	Independent Member for Local Authority
In Attendance:		
Rachel Gidman	RG	Executive Director of People & Culture
James Quance	JQ	Interim Director of Corporate Governance
Fiona Kinghorn	FK	Executive Director of Public Health
Lianne Morse	LM	Deputy Director of People & Culture
David Thomas	DT	Director of Digital and Health Intelligence
Mitchell Jones	MJ	Head of Equity and Inclusion
Adam Wright	AW	Head of Service Planning
Richard Skone	RS	Deputy Executive Medical Director
Emma Cooke	EC	Deputy Director of Therapies & Health Science
Rebecca Aylward	RA	Deputy Executive Nurse Director
Robert Warren	RW	Head of Health and Safety
Observers:		
Secretariat		
Sarah Mohamed	SM	Corporate Governance Officer
Apologies:		
Paul Bostock	PB	Chief Operating Officer
Fiona Jenkins	FJ	Executive Director of Therapies

Item No	Agenda Item	Action
P&C 16/05/001	<p>Welcome & Introductions to include:</p> <p>The Committee Chair (CC) welcomed everyone to the meeting.</p> <p><u>Workforce Context</u></p> <p>The Executive Director of People and Culture presented the Workforce Context Paper and highlighted the following:</p> <ul style="list-style-type: none"> • Workforce had never been a higher priority for the health and social care system. A high-quality, skilled, compassionate, educated workforce had to be the key focus. • The newly formed People and Culture Committee would help to strengthen that focus and monitor, deliver and provide assurance to the Board. 	

- Ensuring wellbeing of staff was really important. Senior leaders should give hope to staff in order to build better resilience going forward.
- The ambition was to become a diverse, equitable and inclusive organisation.
- The Health Board currently employed in the region of 16,500 people. That equated to approximately 14,500 full time employees. The workforce had grown exponentially over the last 5 years to meet the increasing demand, but there were still staffing shortages.
- The EDPC had recently attended a workforce planning event which displayed the Office of National Statistics (ONS) data in Wales. That had evidenced that there was an aging population but the workforce was not aligned to that. The presentation would be brought to this Committee at a later date.
- The population was also rising in Cardiff and the Vale and it was difficult to fill vacancies due to competition from other sectors, such as hospitality and retail. The Health Board's unique selling point and branding should be used to help tackle that.
- The cost of living had impacted staff hugely. There were increased requests from staff to work longer shifts. Feedback from exit questionnaires had shown that people wanted to work closer to home to avoid travelling costs. There was a huge need to support staff.
- A lot of work was being carried out in relation to the Welsh language and embracing the culture in Wales.

EDPC

The Independent Member for Local Authority (IMLA) stated that the majority of the Cardiff and Value population were under 50 years old. Although there was a keen focus on older people and their needs, there should also be a balance across the populations.

The CC stated that it would be useful to understand the difference between the People and Culture Plan and workforce plan in the context of Cardiff and the Vale and nationally.

The EDPC responded that workforce planning was very important and the team was looking at trajectories. The EDPC would bring a paper detailing workforce planning which covered the national aspect.

EDPC

The Independent Member for Trade Unions (IMTU) queried whether the People and Culture team was properly financed and had the right resources in place.

The EDPC responded that the team was considering what work was required from the People and Culture team and whether it was resourced properly. The outcome of that would be reported to the Management Executive meeting.

The Committee resolved to:

	a) The terms of reference of the Committee, and its role in the workforce context described in this report, were considered.	
P&C 16/05/002	Apologies for Absence Apologies for absence were noted.	
P&C 16/05/003	Declarations of Interest No Declarations of Interest were noted.	
P&C 16/05/004	Chair's Action There were no Chair's Action.	
	Item for Approval	
P&C 16/05/005	<p>Committee Terms of Reference 2023/24 and Committee Work Plan 2023/34</p> <p>The Interim Director of Corporate Governance (IDCG) presented the Committee Terms of Reference 2023/24 and Committee Work Plan 2023/34 and highlighted the following:</p> <ul style="list-style-type: none"> • The discussion emphasised that potentially the Committee's remit was very wide. That could be a challenge for the workplan. • There have been discussions between the senior leaders about the terms of reference to address key risks and to focus on workforce and planning. • The IDCG had also looked at similar Committees at other Health Boards. <p>The Executive Director of Public Health (EDPH) advised that the Committee would review the Equality Safety Framework in part, together with the Quality, Safety and Experience Committee.</p> <p>It was scheduled to go to the Strategic Leadership Board in June and then to a Board Development Session. The Committee would be the best place to "own it" because of the clear overlap with equality.</p> <p>The EDPH also added that the links for statutory requirement should also include the Socio-Economic Duty. The EDPH also added that it was previously agreed that she would be on the Committee, although she was not noted as an attendee in the Terms of Reference.</p> <p>The Director of Digital and Health Intelligence (DDHI) advised that the challenges within digital and data should be reflected in the Terms of Reference. He was also asked to be a member of the Committee but was not listed in the draft Terms of Reference.</p>	

	<p>The EDPC responded that the Equity Equality Safety Framework was complex and would be better suited to the Quality, Experience and Safety Committee. The EDPC added that they would need to be strict about the Workforce Programme because everything linked in with people.</p> <p>The Independent Member for Community (IMC) advised that whistleblowing was important and should be added to the Terms of Reference.</p> <p>The Deputy Executive Medical Director (DEMD) stated that culture could also be looked at from the quality, safety and clinical incidents aspect. When the culture was good, patient safety was also better.</p> <p>The DEMD added that they could request recurrent or significant themes from the Quality, Experience and Safety Committee rather than reviewing all incidents that may have a 'people aspect'.</p> <p>The IDCG advised that there were seven points in the “Culture and Values” section and the specifics discussed would translate into particular items in the workplan, rather than the Terms of Reference themselves.</p> <p>The IDCG added that he was looking to understand whether the Terms of Reference were broadly fit for purpose.</p> <p>The EDPC responded that they would need to include a point about Organisational Development (OD).</p> <p>It was agreed that the Terms of Reference would be brought to the next meeting before approved.</p> <p>The Committee resolved to:</p> <ol style="list-style-type: none"> a) The Terms of Reference and work plan 2023/24 for the P&C Committee were reviewed. b) The Terms of Reference and work plan 2023/24 for the P&C Committee would be reviewed again, before recommending the Committee’s Terms of Reference to the Board for approval. 	IDCG
	Items for Review & Assurance	
<p>P&C 16/05/006</p>	<p>Key Workforce Performance Indicators</p> <p>The Deputy Director of People & Culture (DDPC) presented the Key Workforce Performance Indicators and highlighted the following:</p> <ul style="list-style-type: none"> • The Key Workforce Performance Indicators (KPIs) were starting to show an improvement in the workforce position. 	

- The KPIs had been worsening since the start of the pandemic. They were now moving back to pre-pandemic levels.
- Operational pressures were still challenging.
- The turnover rates had reduced month on month since November last year. The data had improved from April onwards. The aim was to get back to a 10% turnover rate in the next 12 months.
- The People and Culture teams were working closely with Clinical Boards and were discussing areas that were challenging to manage.
- Statutory and mandatory training had also improved. The April position had shown that the Health Board was up to 79% which was better than pre-pandemic levels.
- The Value-Based Appraisals (VBA) had met the target set by the Executive team of 60%. The next step would be to reach 85% by the end of June.

The IMLA queried what feedback had been received from managers regarding the VBA process and how well was it received by staff.

The DDPC responded they had moved away from compliance and the VBA process was more about having meaningful conversations. Her team had received feedback that the paperwork was lengthy and therefore the People and Culture team had streamlined it and had put extra guidance in place. There were also feedback from managers regarding the lack of capacity to sit down and complete the VBA.

The IMTU stated that it was pleasing to see that the sickness figures had gone down. He queried the total number of staff on long term sickness and what difficulties were being experienced in getting those staff back into the workplace.

The DDPC responded that she did not have this data to hand and she would provide it at the next meeting.

The DDPC added that the most important point was to support staff on long term sickness and help them make the right decision for them. Overall, the People and Culture team took a compassionate approach. Occupational health reviews were sometimes difficult to complete. There had been investment for Counsellors recently and that had really helped.

The IMCE stated that the exit questionnaire rate was very low and queried if there was a way to make exit questionnaires mandatory. She also queried the reasons why 42% felt there was a lack of career progression.

The DDPC responded that the People and Culture team was looking at why current systems were not working and how to promote the need for staff to complete the exit questionnaires. The

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	<p>DDPC added that in terms of lack progression, it was seen in Band 5 nurses who often felt that they did not have Band 6 opportunities.</p> <p>The EDPC responded that the exit questionnaires were not working. Her team had also begun to do starter questionnaires and had written to the Children and Women's Clinical Board and Emergency Unit. There were common themes about career progression. The team was currently looking at personas and career pathways.</p> <p>The Deputy Executive Nurse Director (DEND) advised that career progression to allow staff to move from Band 5 to Band 6 was very important. The ongoing development of Band 4 staff would give the opportunity to resize Band 5 and Band 6 jobs in Ward establishments.</p> <p>The DEND added that it was great to see the improvement in trajectories. There was a lot of hope present in the teams. International Nurses' Day and Midwife's Day had shown that team spirit had been significant. It was noted that 228 students opted to work for the Health Board which was the highest number for a long time.</p> <p>The DEMD stated that exit questionnaires did not give much feedback because staff were worried that it may affect future appointments.</p> <p>The Deputy Director of Therapies & Health Science (DDTHS) suggested a text reminder for the questionnaires would be useful.</p> <p>The Committee resolved that:</p> <p>a) The contents of the report were noted and discussed.</p>	
<p>P&C 16/05/007</p>	<p>Health & Safety Chairs Report</p> <p>The Head of Health and Safety (HHS) presented the Health & Safety Chairs Report.</p> <p>The EDPC advised that the people safety element needed to be discussed at the Committee.</p> <p>The CC responded that the Health and Safety team would need to draw out the most important health and safety areas.</p> <p>The IDCG responded that it could form part of the risk discussion later in the meeting.</p> <p>It was agreed that there should be an action to consider how to highlight risks which related to people.</p> <p>The Committee resolved to:</p>	<p>EDPC</p>

	a) The contents of this Report were noted.	
P&C 16/05/008	<p>Board Assurance Framework</p> <p>The IDCG presented the Board Assurance Framework and highlighted the following:</p> <ul style="list-style-type: none"> • There were three risks that would be looked at in more detail in the Committee. • The Committee should be given enough time to look at each of the risks in future deep dives. <p>The CC queried the pausing of international recruitment and industrial action.</p> <p>The EDPC responded that the Health Board had proposed that it would go out for a second cohort of the internationally educated nurses. That would have cost £2.5m. Following discussions, it was decided to remodel that to include an Assistant Practitioners role at a Band 4. There would be hotspots where the Health Board might need to recruit internationally.</p> <p>The DEND added that this was important because it gave a progression route for the Healthcare Support Workers too. The hope from the Nurse teams also came from the fact that they could see the Health Board were investing and looking at other models of care.</p> <p>The DDPC advised that there had been a meeting between Welsh Government and the Trade Unions in May 2023. Unison had accepted the pay deal, which was pleasing because it was one of the biggest unions for Cardiff and Vale. RCN had rejected the pay offer. There were three possible dates for upcoming strikes which included two dates in June and one in July. The RCN strike was the biggest concern for the Health Board.</p> <p>The Committee resolved that:</p> <ul style="list-style-type: none"> a) The attached risks in relation to Workforce, Sustainable Culture Change and Staff Wellbeing were reviewed. b) The approach to reporting of BAF risks to the Committee on a rolling basis as proposed were agreed. 	
	Items for Approval / Ratification	
P&C 16/05/009	<p>Clinical Consultation Plan – Welsh Language</p> <p>The Head of Equity and Inclusion (HEI) presented the Clinical Consultation Plan – Welsh Language and highlighted the following:</p>	

	<ul style="list-style-type: none"> • The Clinical Consultation Plan looked at how to improve the offer of Welsh Language services in clinical consultations. • As part of the Welsh Language Standards, the Health Board was required to promote and facilitate the use of the Welsh language, particularly in public services, ensuring that Welsh was treated no less favourably than English. • The Welsh language was important in Wales because it allowed patients to communicate in their first language. • There were 94,200 Welsh speakers in Cardiff and 30,000 Welsh speakers in the Vale. • The Plan would go to Senior Leadership Board on Thursday and then to Board at the end of May. <p>The CC stated that it would be valuable to understand the areas to focus on recruitment for the Welsh language.</p> <p>The EDPC advised that metrics should be added around what was the baseline and ambition.</p> <p>The IMCE expressed concern that there may not be sufficient resources and support to enact the Plan fully. She requested that the item be put on the Board agenda for discussion.</p> <p>The IMCE also added that 1/5 of the population were Welsh speakers. As the Children and Young People Champion for the Board, she would welcome the opportunity to support children and young people with regards to the promotion of the Welsh language.</p> <p>The Committee resolved to:</p> <ul style="list-style-type: none"> a) Recommend that the Board approved the Clinical Consultation Plan – Welsh Language 2023-2028. 	EDPC
<p>P&C 16/05/010</p>	<p>Anti-racist Action Plan</p> <p>The HEI presented the Anti-racist Action Plan and highlighted the following:</p> <ul style="list-style-type: none"> • The Anti-racist Wales Action Plan was published in June 2022 outlining the vision to create an Anti-racist Wales by 2030. • Included in the plan were specific actions for 'Health' which were set out under five headings: <ul style="list-style-type: none"> – Goal 1: Leadership & Accountability – Goal 2: Workforce – Goal 3: Data – Goal 4: Access to Services – Goal 5: Tackling Health Inequalities • As an action, the Health Board was required to develop an organisational Anti-Racist Action Plan. 	

	<ul style="list-style-type: none"> • The Health Board's Action Plan would align closely with the all Wales version and would set out how the Health Board would build an anti-racist organisation. • In line with advice from experts in race equality, including Professor Uzo Iwobi and Race Equality First, the Health Board had co-designed a draft version of its action plan (Appendix 1) alongside colleagues from the One Voice Staff Network and Trade Union partners. • The Equity & Inclusion Senior Manager and Assistant Director of OD, Wellbeing and Culture had presented the approach to the Welsh Government's steering group which was responsible for the delivery of health actions under the Anti-racist Wales Action Plan. That steering group had been pleased with Health Board's proactive approach. <p>The CC queried how the staff forums contribution to the Anti-racist Action Plan could be recognised. It would also be useful to hear from them.</p> <p>The HEI responded that the staff forum group had been integral to developing the Plan. The recognition for their time and resources was built into the Plan. Access to senior leaders within the Health Board had also been encouraged.</p> <p>The DEND advised that it was important to listen to staff. She had recently completed a course on anti-racism. There were a huge number of staff who required coaching around experiences of racism and who were not brave enough to have their stories heard. There was a lot of work to do and it required taking the time to listen to them.</p> <p>The Committee resolved to:</p> <p>a) Recommended the Cardiff and Vale UHB Anti-racist action plan to the Board for approval.</p>	
Items for Information & Noting		
P&C 16/05/011	<p>Corporate Risk Register</p> <p>The Corporate Risk Register was presented.</p> <p>The Committee resolved that:</p> <p>a) The Corporate Risk Register risk entries linked to the People and Culture Committee and the Risk Management development work which was progressing with Clinical Boards and Corporate Directorates, were noted.</p>	
Any Other Business		
Private Agenda Items		

P&C 16/05/012	<i>i) Suspension/ Exclusion Report (exempt from publication due to the confidential nature of the report)</i> <i>ii) Fire Prosecution Update – Verbal (except from publication due to confidential nature of legal case)</i>	
Review & Final Closure		
P&C 16/05/013	Items to be deferred to Board/Committees	
	Date & time of the next meeting: Tuesday 11 July 2023 at 9am via MS Teams	