

People & Culture Committee

Cycle of Business

(1st April 2021 – 31st March 2022) (v3 for approval)

The People & Culture Committee should, on annual basis, receive a cycle of business which identifies the reports which will be regularly presented for consideration. The annual cycle is one of the key components in ensuring that the Committee is effectively carrying out its role.

The Cycle of Business covers the period 1st April 2021 to 31st March 2022.

The Cycle of Business has been developed to help plan the management of Committee matters and facilitate the management of agendas and committee business.

The principal role of the Committee is set out in the Standing Orders 1.0.1.

The Committee is an Independent Member committee of the Board and has no executive powers, other than those specifically delegated in the Terms of Reference.

The purpose of the Committee is to provide scrutiny on behalf of the Board on all people and culture related issues. The Committee provides a level of assurance to the Board that all appropriate actions are being taken to reduce risks in these areas.



People & Culture Committee Cycle of Business (1st April 2021 – 31st March 2022)

Strategic Objectives	Provide high quality, evidence based and accessible care	Work with Communities and partners to reduce inequality, promote well-being and prevent ill health	Ensure sustainability in all that we do, economically, environmentally and socially Co-create with staff and partners a learning and growing culture
Threats to the Strategic Objectives	 Failure to deliver a high quality, safe and effective service that improves population health Failure to provide timely health and wellbeing care & services Failure to deliver a service user and carer focussed service. 	 Failure to engage effectively with our communities to inform, develop and deliver an effective, safe and responsive service that meets the health needs of our communities Failure to engage, listen and act on issues / feedback that would help to reduce inequalities, promote wellbeing and prevent ill health within our communities. 	 Failure to make robust, informed decisions for our communities and execute them within a sound system of Governance Failure to deliver and maintain financial sustainability Failure to continually adapt and respond to a changing environment. Failure to adopt new technology and innovations to enable change and sustainability Failure to listen, learn and respond appropriately to the views of our staff and partners to enable continual improvement in our services and culture. Failure to engage, listen and act on feedback to shape services and culture. Failure to engage constructively with partners and have a mutual understanding of each other's issues. Failure to sustain an engaged and effective workforce.
Principal Risks	 If: there is a significant deterioration in standards of patient safety and care provided by the Health Board. Then: there could be an increase in incidents across the Health Board Resulting In: Potentially avoidable harm and poor clinical outcomes, reduction in trust and confidence in the service, and regulatory action and intervention. If: demand exceeds capacity Then: service quality, safety and performance could deteriorate. Resulting in: Potentially avoidable harm and poor clinical outcomes, reduction in public trust and confidence in the service. Regulatory action and intervention. 	Board's communities does not fully deliver the required outcomes Then: it may have failed to effectively understand the health needs of its communities and reflect them in its services. Resulting In: the inability to reduce inequalities, promote wellbeing and prevent ill health in its communities.	 If: the Health Board's financial strategy / objectives are not met Then: it will have failed to achieve its agreed financial plans Resulting In: Qualification of the accounts, potential regulatory action, adverse impact on longer term financial sustainability and reduced ability to invest in improvement and take associated financial risks. If: the Health Board does not embed its values and behaviours and develop an engaged and motivated workforce / collaboration with its partners Then: there is likely to be a deterioration in patient, staff and partner experience, wellbeing and morale. Resulting In: an adverse impact on patient care and the recruitment and retention of an engaged and effective workforce. Resulting In: the inability to deliver high quality, safe, effective and robust sustainable services for the future (WBFGA).

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Item of Business	Executive Lead	Reporting period	April 2021	May 2021	June 2021	July 2021	Aug 2021	Sep 2021	Oct 2021	Nov 2021	Dec 2021	Jan 2022	Feb 2022	Mar 2022
Minutes of the previous Board Meeting	Director of	Every Meeting	√			✓			✓			✓		
	Corporate													
	Governance		•											
Action Log	Director of	Every Meeting	✓			✓			✓			✓		
	Corporate													
	Governance													
People & Culture Committee Annual Report	Director of	Annually				✓								
	Corporate													
	Governance													
People & Culture Committee Annual Self-	Director of	Annually				✓								
Assessment	Corporate													
	Governance													
People & Culture Committee Terms of	Director of	Annually				✓								
Reference	Corporate													
	Governance													
People & Culture Committee Annual Cycle of	Director of	Annually	✓											
Business	Corporate													
	Governance													



Item of Business	Executive Lead	Reporting period	April 2021	May 2021	June 2021	July 2021	Aug 2021	Sep 2021	Oct 2021	Nov 2021	Dec 2021	Jan 2022	Feb 2022	Mar 2022
Policies for Approval	Director of People	As necessary	√			√			√			√		
Workforce Metrics	Director of People	Each Meeting	√			√			✓			√		
Medical Workforce	Director of People	Six Monthly				✓						√		
Medical Efficiency	Director of People	Six Monthly							✓					
Employment Relations	Director of People	As necessary	√			√			√			√		
Disclosure & Barring Service Checks	Director of People	Six Monthly				✓						✓		
Organisational Development : • Management Development & Leadership • Values & Behaviours • Statutory and Mandatory Training Compliance	Director of People	Six Monthly	√						√ ·					
Staff Survey	Director of People	Annually				√								
Employee Experience & Wellbeing	Director of People	Six Monthly				√						✓		
Equality & Diversity & Welsh Language	Director of People	Six Monthly				√						√		
Organisational Risk Register	Director of Corporate Governance	Each Meeting	√			√			✓			✓		
Internal & External Audit Reports	Director of People	As necessary following finalisation of report	√			√			√			√		
Just & Learning Culture	Director of People	As necessary							✓			√		