



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Cwm Taf Morgannwg  
University Health Board

**People & Culture Committee**  
**Held on 11 May 2022 at 9:30 am**  
**as a Virtual Meeting via MS Teams**

**Present:**

Nicola Milligan	Independent Member (in the Chair)
Mel Jehu	Independent Member
Dilys Jouvenat	Independent Member

**In Attendance:**

Hywel Daniel	Executive Director for People
Helen Watkins	Deputy Director for People
Karen Wright	Assistant Director, Workforce & Organisational Development
Greg Dix	Executive Director of Nursing & Midwifery
Clare Wright	Strategic Lead for Wellbeing
Rebecca Watkins	Employee Wellbeing and Experience Lead
Sara Utle	Audit Wales (Observing)
Emma Samways	Internal Audit and Assurance Services
Paul Edmonds	Organisational Development Manager
Wendy Penrhyn-Jones	Head of Corporate Governance & Board Business
Kathrine Davies	Corporate Governance Manager (Secretariat)

**05.22.1 PRELIMINARY MATTERS**

**05.22.2 Welcome & Introductions**

The Chair welcomed everyone to the meeting including Paul Edmonds and Clare Wright who was deputising for Michelle Hurley-Tyers.

**05.22.3 Apologies for Absence**

Apologies for absence were received from Michelle Hurley-Tyers, Assistant Director of Employee Experience and Wellbeing, Georgina Galletly, Director of Corporate Governance/Board Secretary, Cally Hamblyn, Assistant Director of Governance and Risk and Lynda Thomas, Independent Member.

**05.22.4 Declarations of Interest**

No declarations of interest were received.

**05.22.5 CONSENT AGENDA**

The Chair explained that to ensure a focus on business critical activity and discussions CTMUHB was continuing to use the consent agenda process. This enabled questions on any of the items under the Consent Agenda to be invited in advance of the meeting which were then put to the relevant officer lead.

The Chair asked if anyone wished to comment further on the consent agenda items or move any of the items to the main agenda for discussion. There were no such requests.

## **ITEMS FOR APPROVAL**

### **05.22.6**

#### **Minutes of the People & Culture Committee held on 13 October 2021**

Resolution: The minutes were **RECEIVED** and **CONFIRMED** as an accurate record.

**Committee Ratification of Chairs Action – Pregnancy and Loss Policy** (approved under the urgent Chair's Action outside of the meeting for ratification following approval by the Workforce Policy Review Group).

Resolution: The Policy was **APPROVED**.

**Committee Ratification of Chairs Action – Flexible Working Policy** (approved under the urgent Chair's Action outside of the meeting for ratification following approval by the Workforce Policy Review Group).

Resolution: The Policy was **APPROVED**.

**Committee Ratification of Chairs Action – Industrial Injury Benefit Policy** (approved under the urgent Chair's Action outside of the meeting for ratification following approval by the Local Partnership Forum).

Resolution: The Policy was **APPROVED**.

**Committee Ratification of Chairs Action – Carers Leave Policy** (approved under the urgent Chair's Action outside of the meeting for ratification following approval by the Local Partnership Forum).

Resolution: The Policy was **APPROVED**.

#### **Committee Annual Cycle of Business 2022-23**

Resolution: The Annual Cycle of Business was **APPROVED**.

## **Committee Terms of Reference Annual Review**

The Chair advised that any suggested amendments to be notified by the 31st May 2022.

Resolution: The Committee **AGREED** to review the Terms of Reference providing any suggested amendments to the Chair by the 31st May 2022. If there are no suggested amendments the Committee is able to **NOTE** that the review has been undertaken and **ENDORSE APPROVAL** that the Terms of included at Appendix 1 are extant.

### **05.22.7**

#### **ITEMS FOR NOTING**

##### **Action Log**

Resolution: The Action Log was **NOTED**.

##### **Inter-Committee Referral - Quality & Safety Committee**

An update is provided on the actions taken to address these issues in Agenda Item 3.2.5 under Workforce Planning Issues.

Resolution: The Referral was **NOTED**.

#### **MAIN AGENDA**

##### **GOVERNANCE**

### **05.22.8**

##### **Organisational Risk Register**

W. Penrhyn-Jones presented the report, which provided the latest iteration of the Risk Register containing matters with a score of 15 or above which had been assigned to the Committee for scrutiny was **RECEIVED**.

M. Jehu referred to the risks and advised that the graph was quite small and difficult to read and it would be helpful if the priority risks would be flagged to the Committee to ensure that they were keeping a keen eye on all risks even if they were amber.

N. Milligan referred to risks 4106 and 1133 and requested further detail on the actions be provided outside of the meeting.

W. Penrhyn-Jones advised that she pick up the two queries with the Assistant Director of Governance and Risk outside of the meeting.

Resolution: The Committee reviewed the Risk Register and **NOTED** the report.

Action: Update on actions in relation to risks 4104 and 1133 to be provided outside of meeting.

## **INSPIRING PEOPLE**

### **05.22.9**

#### **Disclosure & Barring Service**

K. Wright presented the report that provided the Committee with an update on progress with the service.

N. Milligan advised that she was pleased to see that there was now a timescale in place for completion. She queried that where staff have had an offence prior to undertaking a DBS check was there support for managers to help support and signpost them to manage that situation. K. Wright advised that HR would advise, coach and support the manager through the process including a risk assessment.

D. Jouvenat queried what process there was if the forms were not returned. In response, K. Wright advised that it was on an automated system so if it was not completed a message would be sent back to the compliance team with a further reminder for the individual to respond and following three reminders individuals could be contacted direct.

G. Dix advised that staff caring for patients without a confirmed DBS had been raised as a concern at the Safeguarding Executive Board last week and suggested that it would be helpful for the Committee to receive a report on this to provide assurance.

M. Jehu commented that the Committee needed to have regular updates to ensure that there was a process resulting in ongoing improvements.

Resolution: The Committee **NOTED** the report and **NOTED** the action plan and timescale to roll-out the new process to improve DBS compliance rates. .

Action: To provide a further update to the Committee on DBS compliance.

**05.22.10**

**Employee Relations Report – Part 1 & Listening, Learning & Improvement – Part 2**

K. Wright presented the report which provided a formal update in respect of ongoing Employment Relation cases and trends within the Health Board. The period of reporting was for the period 1 October 2021 – 31 March 2022.

N. Milligan commented that it was pleasing to see that there had been a reduction in the numbers of staff who had been suspended.

G. Dix queried if the Committee were sighted on any reports from the Local Negotiating Committee (LNC) which would help them to have some perspective around any trends and themes. K. Wright advised that this information was not held by workforce but undertook to link in with D. Bennion, Deputy Director of Nursing to provide further detail to the Committee in the next report.

M. Jehu referred to the restorative just culture and assured the Committee that with regard to investigations, the restorative approach was working.

In responding, H. Daniel, advised that there were areas of complexity within the caseload and also with regard to tribunals and fraud, the team were currently looking at how to get through the caseloads as quickly as possible. He added that there had also been significant staff turnover over the last two years. H. Daniel said that it could not be assumed that culture shift would be achieved by a policy framework alone and work was ongoing with a view to resolving this rather than waiting for an all-Wales steer. Culture shift was being reviewed currently and an update would be brought back to the Committee within the next couple of months.

N. Milligan referred to the time span for investigations which could take six to twelve months which does little for employee experience and also impacted on the team the individual was part of. She suggested that the team should be looking at capacity. K. Wright advised that there were 12 cases where the

investigations took between three and six months. However, some cases were more complex if there was safeguarding and police involvement for instance.

H. Daniel, in response, advised that there were some basic things that could be done with regard to the appointment of investigation officers which should be days rather than weeks and the standard time should be to bring to conclusion within three months. He stated that wherever possible cases needed to be fast tracked to resolution and a target of three months should be the key performance indicator. H. Daniel acknowledged the importance of monitoring the length of time investigations took to conclude.

Resolution: The Committee **NOTED** the report.

Action: To link in with the Deputy Director of Nursing to provide LNC detail within the next report.

#### **05.22.11**

#### **Listening, Learning & Improvement Culture – Part 2**

K. Wright provided an update to the Committee on how the organisation was progressing work to embed the Listening, Learning and Improvement culture.

N. Milligan commented that she had been pleased to participate in the programme.

G. Dix advised that he had worked with the system before and queried whether there was alignment with the patient safety team as the incident framework was being refreshed and the health board have released a business plan for the next three years and he wanted to ensure that those connections were being made. K. Wright advised that this was not just about the disciplinary process but included other types of incidents including matters related to patient care and safety.

N. Milligan referred to Mersey Care and that they had trained Freedom to Speak-Up Guardians (FSUG). She queried that if the health board were going to model on Mersey Care would they also be establishing FSUG. K. Wright, in response advised that they had not yet scoped out the plan as yet but that they were committed to rolling-out this work and would ensure that the workforce resources would be available to add focus and value. This was confirmed to be a priority for the next twelve months.

H. Daniel added that Mersey Care were an NHS Trust of 30,000 staff and was more straightforward for them to do that. He advised that the organisation needs to think about how this could be achieved through culture change and a co-ordinated approach across all of the safety culture work and bring it all together at pace with the right people.

H. Daniel referred to freedom to speak up, and advised that a national piece of work had been commissioned by the Welsh Partnership Forum which would set their expectations of organisations to have a clear system for freedom to speak up with a common set of language and procedures. He advised that each organisation currently had different processes, however, the health board would be looking at this over the next couple of months as there was a notable gap in comparison to the NHS in England and this would be reported back to the Committee once it had been through the Executive Team.

Resolution: The Committee **NOTED** the report.

## **05.22.12**

### **Management Leadership & Development**

P. Edmonds provided a presentation to the Committee on the progress to date with the Management Leadership Programme.

N. Milligan commented that she was pleased that the leadership programme was in place to help, support and develop staff.

M. Jehu referred to the Inspire programme and expressed his concern at the lack of engagement from senior leaders within the organisation. He advised that if he could do anything to assist with the programme talking about leadership he would be happy to help. G. Dix, N. Milligan, and D. Jouvenat also offered their assistance to help talk about leadership.

N. Milligan sought clarity on the figures on slide 14 which shows that 566 staff had registered, however slide 11 appeared to show different figures and queried what they were classing as registered or was it for registering an interest. P. Edmonds advised that he would need to go back and review the figures outside of the meeting.

In response to a query raised by Mel Jehu, P. Edmonds advised that CTM was working with a partner organisation called Q5 to train programme facilitators.

H. Daniel confirmed that £200k had been received from Welsh Government as part of the Targeted Intervention funding with a further £200k for this to develop programmes. This funding required CTM to submit evidence of the return on investment gained as a result of the investment.

H. Daniel advised the Committee that P. Edmonds was about to leave the organisation for another post and he expressed his thanks for his work with the team and wished him well for the future.

Resolution: The Committee **NOTED** the presentation.

## **05.22.13**

### **Employee Experience & Wellbeing**

R. Watkins provided a presentation to the Committee on Employee Experience.

N. Milligan commented that this was just a brief insight into the enormous amount of work that the Wellbeing Team were undertaking and advised that she attended the recent roadshow at the Royal Glamorgan Hospital which had shown the level of engagement with the team.

G. Dix advised that in terms of making the team more visible it would be good if they spoke at one of the professional nurse forum meetings. He also referred to the importance of staff hydration and advised that the Royal College of Nursing (RCN) recently did a rest, refuel and hydrate campaign with lots of practical tips and offered his services to front that campaign as an Executive Sponsor.

D. Jouvenat reflected on how much had been achieved in terms of staff experience over the past three years. She advised that with regard to work on menopause, this was a priority for Unison as well and suggested that links be made to discuss this further.



H. Daniel thanked everyone for their comments and feedback. He also thanked K. Wright for leading on work around the pregnancy loss policy.

M. Jehu commented that it would be remiss of him if he did not wholeheartedly support the work that was going on. He added that CTM was a huge employer in the community and it was good to know that when staff return home from work that their family were assured that they were being looked after and cared for and it was positive that the health board had something tangible in place that was making a real difference for staff.

N. Milligan commented that it was good to see the positive feedback around the revised Personal Development Review (PDR) process and wondered whether this would improve the compliance rates. She added that with regard to the survey recently undertaken on the theme of recognition it would be good to have an idea when that would be published. It was noted that this would be reported once published.

Resolution: The Committee **NOTED** the presentation.

Action: Outcome of the survey on recognition to be received once published.

**05.22.14**

### **Employee Wellbeing Presentation**

C. Wright and R. Watkins provided a presentation on Employee Wellbeing.

N. Milligan thanked C. Wright and R. Watkins on an excellent presentation and commented that it emphasised how many initiatives had been supported by the team during what had been a very difficult year.

D. Jouvenat congratulated the team on the work they were undertaking and advised that on a recent walkabout many staff had commented how much they had benefited from wellbeing work. She referred to the slide that referenced partnership working and suggested that workforce colleagues may want to consider linking with the Citizens Advice Bureau.

G. Dix advised that the wellbeing offer to staff was extraordinary and staff were hugely complimentary about what was available and their ability to access it.

H. Daniel thanked C. Wright and the team for the work that they had undertaken since March 2020 which was expeditious with a good evidenced based model which was receiving excellent feedback, data and outcomes. He added that the specific comments in relation to the team were fantastic and he extended a welcome to Independent Board Members to spend some time with the team to see some of the work and meet the individuals within the team.

H. Daniel advised the Committee that the health board had recently undertaken a dietetics and speech and language therapy intake where individuals had expressed an interest in coming to work for CTM as a result of its wellbeing services.

Resolution: The Committee **NOTED** the updates and presentations.

**05.22.15**

### **Workforce Planning and Education Commissioning Programme**

H. Watkins presented the report on two areas of work to progress workforce planning across the health board. The Committee were also updated on the actions taken to improve Pathology workforce planning which had been received as an Committee Referral from the Quality and Safety Committee.

N. Milligan commented that it was good to see a model where you could actually see the current and future vacancies and showed that CTM were proactive with regard to recruitment. She advised that the Royal College of Nursing had recently published their nursing and recruitment report.

H. Daniel thanked H. Watkins and the team for leading on workforce planning and advised that CTM was also very grateful to Hywel Dda Health Board for sharing their model. He advised that there was further work ongoing to be done with regard to establishment control and numbers and over time reduce the reliance on overseas recruitment which was hugely expensive. He added that critical trends had received targeted intervention funding for some remedial actions such as temporary pay to substantive recruitment which was challenging from a budget perspective. He advised that there were real opportunities with advanced practice and extended

roles in terms of the unregistered workforce. The Committee noted that following completion of a maturity assessment an update would be received.

M. Jehu commented that the meeting today had showed the smart work that was being undertaken which was moving the health board to a place where they need to be and that all the presenters had been professional and passionate in their delivery and endorsed his support for the work.

N. Milligan thanked H Watkins for her presentation which had resulted in positive discussions.

**05.22.16** Resolution: The Committee **NOTED** the report.

### **Workforce Metrics Report**

H. Daniel presented the report which provided the Committee with the key workforce metrics for the period March to April 2022, with historic trends shown as appropriate.

N. Milligan referred to the return to work and in particular, the conditional and unconditional letters and queried what the barriers were in relation to causing delays in shortlisting and which was causing the health board to potentially lose candidates. H. Daniel, in response, advised that they had been having some challenging discussions with shared services in relation to TRAC recently and would pick up the point made outside of the meeting as an action.

Resolution: The Committee **NOTED** the report.

Action: To review the conditional and unconditional letters and the barriers causing delays in shortlisting.

**05.22.17** **OTHER MATTERS**

### **Committee Highlight Report to Board**

The Chair suggested that the highlight report be developed by the Governance Team and approved by herself and H. Daniel as the Executive lead for the Committee.

**05.22.18**

### **Committee Forward Work Plan 2021-22**

Members were asked that if they had any suggestions to be added to the forward work plan to relay to the Governance

**05.22.19** Team within the next 10 days, so that they could be logged and put forward for discussion at the next agenda planning session.

**05.22.20** **Any Other Urgent Business**  
No further items of business was identified.

**How did we do today?**

A discussion was held to evaluate the meeting. The following responses were provided:

**05.22.21** The Committee felt that the meeting had been really positive with excellent contributions.

**DATE AND TIME OF NEXT MEETING**

10 August 2022 at 9.30 am.

unconfirmed