PEOPLE AND CULTURE COMMITTEE

CONFIRMED MINUTES OF THE MEETING HELD ON 09 DECEMBER 2025

LOCATION OR HELD VIA MICROSOFT TEAMS

MEMBERS		
Jennifer Owen Adams	JOA	Independent Member-Third Sector (Chair)
Ian Thomas	IT	Independent Member (Vice Chair)
Simon Wright	SW	Independent Member
Chris Walsh	CW	Independent Member-Local Authority
Cathie Poynton	CP	Independent Member-Trade Union
IN ATTENDANCE		
Helen Bushell	HB	Director of Corporate Governance and Board Secretary
Rhys Brown	RB	Head of Organisational Development
Katelyn Falvey	KF	Head of Workforce Transformation Planning & Resourcing
Stella Gwynne	SG	Assistant Director of Corporate Governance/Deputy Board Secretary
Pete Hopgood	PH	Deputy CEO & Director of Finance
Mark McIntyre	MM	Deputy Director of People and Culture
Claire Madsen	CM	Executive Director of Allied Health Professions, Health Sciences and Digital
Vicky Malcolmson	VM	Head of People and Business Partnering
Sarah Powell	SP	Assistant Director of People and Culture
Marielle Restall	MR	111 Team Manager - Mental Health
Debra Wood Lawson	DWL	Executive Director of People and Culture
Raychelle Lewis	RL	Business & Governance Officer
APOLOGIES FOR ABSENCE:		
Carl Cooper	CC	Board Chair
Paul Hooton	PH	Director of Nursing, Quality, Children and Family Health
Elaine Lorton	EL	Executive Director of Primary Care, Community & Mental Health
Hayley Thomas	HT	CEO Chief Executive

PRELIMINARY MATTERS

1. WELCOME AND APOLOGIES FOR ABSENCE (P&C/25/039)

The Chair welcomed everyone to the meeting. Apologies for absence were received as recorded above.

1.2 DECLARATIONS OF INTEREST (P&C/25/040)

No declarations of interests were received in addition to those already recorded on the register.

1.3 PATIENT STORY – Clinical Immersive Leadership Programme (CLIP) Programme (P&C/25/041)

The Committee received the story from MR on the development of the Single Point of Access (SPOA) for mental health in Powys Teaching Health Board. The 111 press 2 service for urgent mental health support launched in May 2023, supporting all age groups. Key changes included open access, a mental health triage scale, and the integration of well-being practitioners, all enhancing team confidence and service delivery. Following the launch of a new single point of access in September 2024, staff numbers doubled, and referral processes were streamlined, with all referrals handled proactively. The service's collective leadership and focus on continuous improvement were highlighted, and it has become a demonstration site for the Open Access model, receiving positive audit feedback. Further developments are planned, including face-to-face assessments, with a continued commitment to empathy and professionalism in handling calls.

The Committee **RECEIVED** the story.

MR left 10:24

2. CONSENT BUSINESS AGENDA (P&C/25/042)

No items were brought onto the main agenda from the consent agenda.

3.ITEMS FOR APPROVAL/DECISION/RATIFICATION

3.1 MINUTES OF PREVIOUS MEETING (P&C/25/043)

The minutes of the meeting held on 29 September 2025 were **CONFIRMED** as an accurate record.

3.2 COMMITTEE ACTION LOG (P&C/25/044)

An update was given of one outstanding action which was deemed completed. The Committee **RECEIVED** the Committee action Log.

4. ESCALATED ITEMS (P&C/25/045)

There were no escalated items on the agenda.

5. ITEMS FOR ASSURANCE

5.1 DIRECTOR OF PEOPLE AND CULTURE REPORT (P&C/25/046)

DWL reminded the Committee that the paper did not address elements on that day's agenda but instead covered other areas outside the current work plan. Key points highlighted ongoing efforts to improve staff retention, such as a pilot study on stay conversations, the launch of 'leave us' toolkits, and succession planning initiatives. It was noted that funding for a specific post supporting these activities would be withdrawn at

the end of the financial year, requiring local decisions to maintain momentum in retention work.

An update on the reverse mentoring programme was given, highlighting that it had undergone a rapid evaluation and was set to be rolled out to a second cohort. The National Health Service (NHS) staff survey had closed, with PTHB achieving a 34.2% response rate, exceeding both the South Wales average and the Board's previous year's response rate. The Committee were also informed of progress on Welsh language commitments, including the signing of the Hate Crime Charter and the implementation of a bilingual telephony service.

Workforce features, funded by external programmes, continued to progress, particularly in the area of Academy, Careers, Education Enterprise scheme (ACEEs) and transformation support across partners, pending further funding decisions. Clinical education saw increased student placements and collaboration with educational partners. A recent internal audit of management and leadership had resulted in substantial assurance, which was recognised as a significant achievement.

National updates included work on the Band 2 and Band 3 framework, with local implementation underway, and information on pay ballots, noting the absence of industrial action in Wales. The Committee were also briefed on the protected continuous professional development time linked to the recent pay award, with ongoing discussions to interpret and implement the national agreement locally before the financial year's end.

Committee members sought assurance by asking the following questions:
Will including paper ballots significantly increase the staff survey response rate, or is the impact minimal?

The indication that a significant change in the staff survey response rate was due to the inclusion of paper ballots and was not expected. Although considerable effort had been made to reach out to teams without easy computer access and encourage participation, it was ultimately each individual's responsibility to submit their ballot by post. As a result, the response rate, mentioned as 34.2%, was only anticipated to shift slightly, but not dramatically.

Has the increased investment in the staff survey resulted in a higher response rate compared to the previous year? Will these additional efforts yield better engagement, and are there particular areas where low response rates suggest the need for further exploration in the future?

The Committee were assured that efforts are ongoing both nationally and locally to make the staff survey accessible and maintain anonymity, especially for small teams. Regular communications encourage participation, with similar strategies planned for this year. The Workforce team aims to boost engagement, and survey returns by refining accessibility and communication, but outcomes depend on staff involvement.

Is it being monitoring how flexible PTHB are in implementing the flexible working policy, and is there data or statistics that reflect how well this is being done in this area as part of the organisational culture?

The Committee were given confirmation that data on flexible working is indeed being collected, primarily through the Electronic Staff Record (ESR) system. It was noted that the Workforce team can provide this data when requested, indicating ongoing monitoring of flexible working practices. It was also mentioned that the intention to consider how best to report on this information and to investigate any areas where applications for flexible working are regularly turned down.

It was suggested that, if necessary, support could be provided to managers to help them think differently about flexible working requests. While the data is being collected and monitored, there is a commitment to further review and potentially enhance reporting and support around flexible working to ensure organisational needs and staff flexibility are balanced.

The Committee:

- Took **ASSURANCE** against the delivery of those priorities NOTING the updates on relevant workforce areas nationally.
- **RECEIVED** the report as an update on priorities within the Workforce section of the Integrated Plan 2025/26 since the July 2025 that are not part of the committee's agenda and took **ASSURANCE** against delivery of those priorities.

5.2 WORKFORCE PERFORMANCE REPORT(P&C/25/028)

The Committee were provided with an update on several key aspects of workforce performance. The following key themes were highlighted:

- Workforce Age Profile: Ageing workforce with more staff nearing retirement, but projections show improved age distribution by 2030.
- Vacancy Rates: Significant reductions in nursing and clinical vacancies; administrative and clerical vacancies increased due to cost controls.
- Agency and Bank Staff Use: Agency staff use has dropped, with increased reliance on bank staff, supporting national reduction targets.
- Staff Retention: Lower turnover rates reported, credited to retention efforts, though sustainability is a concern if key funding ends.
- Sickness Absence: Long-term absences have declined, short-term absences risen due to seasonal illness, but overall absence rates are improving.
- Occupational Health Dashboard: New dashboard provides valuable data to support staff well-being and manage absences.

Committee members sought assurance by asking the following questions:
Should a caveat be included on page one, regarding the age profile, to acknowledge that despite positive trends and the influx of younger staff, the number of staff in the 66 to 70 age group is expected to rise due to the retirement age?

The Committee were informed of ongoing challenges with an ageing workforce, including many staff nearing retirement. Workforce planning now accounts for retirement trends

to guide recruitment. While more younger staff are joining, this presents challenges such as the loss of experience, underscoring the need for mentoring and succession planning.

Does the percentage figure of 30.6% for anxiety, stress and depression refer to long-term sickness, while the figure of 7.8% for 777 episodes refers to short-term sickness?

The Committee were informed that a significant proportion of sickness absence was due to long-term cases of stress, anxiety, and depression, a trend consistent with previous analyses and national patterns. It was noted that current ESR categorisation has limitations and improvements are needed.

Given that the group for benign and malignant tumours represents only 15%, could this data allow easy identification of who they are

The Committee was informed that the Estates and Ancillary group includes several hundred staff, not just Estates. It was acknowledged that small group data could risk identifying individuals, so a review was promised. The organisation remains committed to supporting staff health despite challenges in categorisation.

Has the methodology for reporting workforce figures been reviewed or changed in the past year, particularly regarding the monthly dashboard and unusual vacancy rates?

It was explained that fluctuations in the data were due to changes in staffing levels, such as new posts, Transfer of Undertakings Protection of Employment (TUPE) transfers, and vaccination service increases. The Committee was advised that headline figures could be misleading due to portfolio restructures, so further analysis is needed to interpret the data accurately.

Has any analysis been conducted to examine the relationship between vaccination rates in specific areas and the challenges faced in improving vaccination uptake among clinical staff?

The Committee heard that while no analysis has yet been done, it is feasible to investigate this by comparing organisational absence data with local vaccination rates in collaboration with public or occupational health colleagues.

Assurance was sought on whether efforts should also focus on encouraging older individuals to re-enter the workforce, given the number of over 55's who left during the pandemic and the difficulties they face returning?

The Committee were informed that the organisation aims for a balanced age mix, promoting an age-positive approach and retaining many older staff to support long-term workforce sustainability, rather than focusing on any single age group. It was emphasised about the need for a balanced age range in the workforce to prevent gaps in experience from simultaneous retirements, focusing on even age distribution for organisational resilience.

How does the organisation ensure that key skills and knowledge from older generations are retained and how can succession planning be incorporated into the timeline for smaller services to develop and potentially retain staff?

It was explained that the organisation's strategy emphasises both recruitment and retention, aiming to maintain key staff and skills. Ongoing efforts are addressing higher absence rates in estates, with supervisors investigating causes and seeking improvements. While estate vacancy rates fluctuate, there is no persistent recruitment issue, and progress will be reported in future updates.

Is there a need for additional support regarding the number of vacancies and amount of sickness in estates, and is anything currently being done to address this?

Historically, Estates have seen higher staff absence rates. The Committee were informed that the organisation is working with supervisors to address the causes and provide additional support, aiming to improve attendance. Vacancy rates fluctuate but there is no ongoing recruitment issue, and improvements should be seen in future workforce reports. It was noted that allowing staff, particularly recent graduates, to leave and gain experience elsewhere can be valuable, as they may return with improved skills.

Clarification was sought as to why the 12-month agency usage forecast is showing an increase, and whether this projection is based on financial modelling rather than an actual or expected downturn in performance?

The Committee were informed that the increase shown in the 12-month agency usage forecast is the result of a finance driven modelling exercise, which projects future trends based on data from the same period last year. However, it was noted that current performance is different from last year, making precise predictions challenging. The model airs on the side of caution, providing a conservative estimate rather than reflecting any actual or anticipated decline in performance. It was clarified that this is a modelling outcome, not an indication of a real or expected downturn in performance.

The Committee:

- **RECEIVED** the information provided in the update;
- Took **ASSURANCE** the organisation collects, analyses and monitors relevant People and Culture data

5.3 THEME 1 – STAFF HEALTH AND WELLBEING (P&C/25/029)

The Committee were advised of the main themes highlighted in the presentation and informed that the report had been updated to incorporate the latest available data.

- Staff Well-being Initiatives: Expansion of well-being roadshows to more sites, engaging 258 staff, and providing resources from internal and external presenters. Special emphasis on practical support, such as mindfulness sessions, menopause support, and resources for stress, anxiety, and burnout.
- Adoption of Best Practice and Training: Implementation of the All-Wales best practice guide, development of mentoring programmes, and training on meaningful conversations and appraisals to enhance staff support and development.

- Support for Working Carers: Increased recognition and support for staff with caring responsibilities, through induction references, online spaces, specialist courses, and the health passport scheme.
- Monitoring and Targeting Absence: Enhanced scrutiny of sickness absence data by business partners and directors, targeted interventions for long and short-term absences, and increased support for affected staff.
- Occupational Health Improvements: Efficiency gains via new systems, automation of health surveillance, electronic questionnaires, improved appointment booking, and pursuit of national accreditation.
- Staff Engagement and Survey Participation: Higher staff survey response rates, aided by diverse engagement methods and a one-off charitable incentive, though the direct impact of the incentive was uncertain.
- Practical Adjustments for Staff: Longer support sessions, tailored interventions for night shift workers, and increased uptake of self-help and online resources.

Committee members sought assurance by asking the following questions:
Clarification was sought on whether survey incentives had been used elsewhere, if they boosted responses, and whether they might affect the authenticity of feedback?

It was confirmed to the Committee that the Health Board had decided against using its own funds to offer financial incentives for staff survey participation, viewing the use of public money for this purpose as inappropriate. Instead, staff were encouraged to provide authentic feedback, with the £1,000 provided by Health Education and Improvement Wales (HEIW) matched by the union used as a charitable donation, not a direct incentive. While other organisations have spent more to increase response rates, the board prioritised highlighting the value of staff input, positioning the charity donation as a supplementary benefit. Ultimately, no additional matched funding was required, as response targets were not exceeded.

The Committee:
- **REVIEWED** the information provided in the update;
- took **ASSURANCE** of delivery against the plan.

5.4 WORKFORCE RACE EQUALITY STANDARD – ANALYSIS OF LOCAL PTHB WORKFORCE DATA (P&C/25/030)

The Committee were informed that national and local reports on the Workforce Race Equality Standard (WRES) had been received, enabling the organisation to investigate their workforce data for signs of systemic racism or areas requiring action to support recruitment and progression. They were updated on an in-depth analysis of the June 2024 WRES findings, which focused on the lack of ethnic minority representation on the board, limited progression to senior roles, and the likelihood of ethnic minority staff being appointed after shortlisting.

The review particularly examined progression to senior positions and shortlisting outcomes, as these were key issues in the latest WRES data. It was emphasised that these findings must be understood in the context of the health board's relatively low proportion of Black and Minority Ethnic (BME) staff, which mirrors the local

demographic. By cross-referencing WRES data with the 2024 staff survey responses, it was found that BME staff showed interest in career progression but felt less positive about equality of opportunity. However, the small sample size limited the reliability of these conclusions, highlighting the need for more robust data from future surveys.

The analysis highlighted disparities in staffing, notably within nursing, midwifery, clinical services, and admin roles. BME staff were mainly overrepresented in medical and dental posts but underrepresented at senior levels elsewhere. These gaps lessened in nursing wards, likely due to career paths and international recruitment, with BME staff generally newer and younger. Recruitment analysis faced limitations from voluntary ethnicity disclosure, and trends were shaped by both local and international hiring practices. The small number of BME staff meant percentage changes could be misleading, and while no systematic disadvantage was found, individual instances could not be ruled out.

Data limitations were acknowledged, especially in nursing, as ongoing international recruitment at Band 5 would likely continue to shape workforce demographics. The organisation had made progress in recording ethnicity data, reducing unknown entries from 13% to 7.1% over two years, and had taken steps to improve communication and best practice in recruitment. Participation in national leadership and mentoring programmes was promoted, and collaboration with partner organisations continued in response to WRES findings.

Looking forward, the organisation aims to introduce staff interviews and boost data collection to better understand and address fairness in recruitment and development. Annual reviews will track progress, while training and mentoring are encouraged. Recruitment in Wales, typically from local universities, has limited diversity; expanding recruitment to more diverse cities and reviewing intake data may help, but challenges remain for professions such as physiotherapy due to restricted applicant pools.

Committee members sought assurance by asking the following questions:
What support is in place for staff who may face additional challenges, such as those related to the English language scheme, when applying for more senior positions? And can we be assured that this support is appropriately divided and accessible?

The Committee were informed that recruitment policies were applied equally across staff groups. While early positive action is being considered, it was stressed that this must be evidence-based due to local demographic factors. Support is available through the equalities team, and further measures particularly for language barriers in senior post applications are under review. Recruitment processes have already incorporated support mechanisms and steps to enhance panel diversity.

What have been the consequences and impacts of the actions and initiatives listed in the report, particularly those aimed at promoting diversity and inclusion?

How has participation in the Black and Minority Ethnic (BME) staff network changed as a result of these initiatives, given that these actions often involve the same individuals?

The Committee were assured that measuring the impact of diversity and inclusion actions is challenging due to the early stage of many initiatives and the small number of participants involved. Current processes rely on annual reviews to assess progress. Participation in the staff network fluctuates, making it difficult to gauge changes or outcomes, although efforts are ongoing to encourage greater representation and support. At present, there is limited evidence of measurable impact, but there are plans to develop more targeted actions and explore collaboration with partner organisations in the future.

The Committee:

- RECEIVED the findings of the attached analysis and took ASSURANCE they will be incorporated into the Equality Team's 2025–26 work plan
- NOTED the analysis and sharing of findings have been shared with the Welsh Government Equality Team

5.5 THEME 3: WORKFORCE SUSTAINABILITY AND TRANSFORMATION (P&C/25/031)

The Committee were informed that KF had returned from secondment and will be with PTHB full time in the new year.

An update was given by KF highlighting key themes on Transformation and Sustainability:

International recruitment has boosted staff numbers, especially in community and mental health wards, with all new nurses passing their Objective Structured Clinical Skills Examination (OSCE) exams first time. More overseas recruitment is planned. Targeted events and better communication have increased bank staff use and reduced dependence on agency workers, supporting workforce resilience and financial sustainability. Tighter vacancy scrutiny and enhanced procedures have improved financial oversight, with urgent clinical roles exempt. New workforce models, including nurse associates, are expanding career pathways and standardising roles. Progress continues on job description templates and digital tracking, while establishment control now integrates professional, financial, and operational input for better long-term planning. Development programmes for aspiring nurses and allied health professionals, along with bespoke clinical psychology training, are building a sustainable workforce pipeline.

A further update was given by SP highlighting key themes on Transformation Skills and Development

- Organisational Development Support: The workforce team supported the Better Together programme by leading weekly leadership meetings, staff engagement events, and targeted communications for workforce futures.
- Change Management Training: Programme managers received training and coaching in change management and business process reengineering to aid strategic transformation.
- Step-by-Step Resources: Practical guides were developed to help staff and senior officers manage organisational change smoothly.

- ACEE's School Engagement: The ACEE's programme connected with a broad range of learners via school pilots and careers festivals, boosting future health and care pipelines.
- Increased Student Placement Opportunities: Placement capacity was expanded beyond targets using the CLIP model, with positive feedback from universities and regulators.
- Restorative Clinical Supervision: Reflective clinical supervision was introduced to support staff well-being, with ongoing efforts to increase uptake.

Committee members sought assurance by asking the following questions:
How can the organisation effectively link and quantify the financial benefits such as reduced agency spending and improved vacancy rates that should result from the development of the registrant pipeline, by projecting and incorporating these anticipated cost reductions into financial planning and forecasting?

It was highlighted that the process for quantifying financial benefits from developing the registrant pipeline involves setting clear savings targets for reducing agency and premium pay spend, with local teams responsible for embedding these into their plans. Progress is monitored monthly. While reducing agency reliance is ongoing, complete elimination is unlikely without broader service changes. The organisation also faces future risks such as increased service fragility due to patient needs and staff retirements, which will be monitored at all levels.

What qualification is required for a nurse associate role, is this qualification something that is offered internally, is it similar to the pathway for the aspiring nurse programme, and does this new role resemble the previous State Enrolled Nurse (SEN) role that was offered in the past?

It was explained that the nurse associate role, if approved, would be a newly registered position in Wales, requiring a Level 4 or Level 5 qualification (equivalent to a foundation degree). This differs from the current band 4 advanced practitioner roles. The qualification would be delivered by a university and serve as a possible pathway towards becoming a registered nurse, allowing individuals to either remain as a nurse associate or continue on to complete the full nursing degree.

Does the organisation have anything planned for the future that will focus on other staff areas, such as those currently employed through the bank? For example, will there be any initiatives or developments aimed at catering staff, estates, or similar roles?

Work is currently underway with Neath Port Talbot College (NPTC) to support staff undertaking Level 3 catering qualifications, and several staff members are also pursuing business administration qualifications via a separate pathway. Funding is available to enable staff progression and training.

The Committee:
- **REVIEWED** the information provided in the update;
- Took **ASSURANCE** of delivery against the plan.

5.6 COMMITTEE RISK REGISTER (P&C/25/32)

The Committee Risk Register, which was previously shared with the board in November 2025, was presented to the Committee members. It was noted that, depending on timing, the register may sometimes come to the Committee before the board or vice versa.

There remains one significant risk under the Committee's remit: the strategic risk relating to the inability to recruit and retain an appropriate workforce. Recent discussions and agenda items had already covered much of this topic, illustrating how risk management is embedded within Committee proceedings.

It was suggested that future presentations could more explicitly incorporate points related to workforce risk. Members were invited to raise any further questions or comments on the details or actions within the risk register, but it was acknowledged that most matters had already been addressed during the meeting.

The Committee:

- **RECEIVED** the corporate risks within the Committee's remit
- **DISCUSSED** any relevant issues and
- Took **ASSURANCE** that risks are being managed in line with the Risk Management Framework.

6. ITEMS FOR DISCUSSION (P&C/25/032)

There were no items for discussion.

7. CONSENT AGENDA

7.1 INTERNAL AUDIT REPORT (P&C/25/033)

No items
(For Assurance)

7.2 WORK PROGRAMME (P&C/25/034)

(For Information)

7.3 PTHB GLOSSARY (P&C/25/035)

Purpose: For Information

8. OTHER MATTERS

8.1 Any Other Urgent Business (P&C/25/036)

There was no urgent business.

8.2 ITEMS TO BE BROUGHT TO THE ATTENTION OF THE BOARD AND /OR OTHER COMMITTEES (P&C/25/037)

No items.

8.3 COMMITTEE REFLECTIONS (P&C/25/038)

The Committee provided the following reflections of the meeting:
Despite a full agenda, the Committee gave ample attention to all matters and questions, ensuring thorough consideration and recognition. A positive, focused atmosphere was noted, with clear and effective contributions from all members. Committee papers were concise and informative, supporting productive discussions. The meeting addressed both current and future issues, aligning well with the Better Together programme and strategic objectives, demonstrating a balanced and forward-looking approach.

8.4 DATE OF NEXT MEETING:

05 March 2026 via Microsoft Teams

Meeting closed at 12:54