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Bwrdd Iechyd
Addysgu Powys
Powys Teaching
Health Board

PEOPLE AND CULTURE COMMITTEE

CONFIRMED MINUTES OF THE MEETING HELD ON **05 MARCH 2026** LOCATION OR HELD VIA MICROSOFT TEAMS

MEMBERS		
Ian Thomas	IT	Independent Member (Vice Chair)
Cathie Poynton	CP	Independent Member-Trade Union
Simon Wright	SW	Independent Member
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
Elaine Lorton	EL	Executive Director of Primary Care, Community & Mental Health
Pete Hoppood	PH	Deputy CEO & Director of Finance
Vicky Malcomson	VM	Head of People Business Partnering and EDI
Mark McIntyre	MM	Deputy Director of People and Culture
Vicky Malcolmson	VM	Head of People and Business Partnering
Sarah Powell	SP	Assistant Director of People and Culture
Hayley Thomas	HT	Chief Executive Officer
Julia Williams	JW	Workforce Retention Lead
Debra Wood Lawson	DWL	Executive Director People, Culture and Transformation
Raychelle Lewis	RL	Business & Governance Officer
APOLOGIES FOR ABSENCE:		
Rhiannon Beaumont-Wood	RBW	Independent Member Vice Chair
Jennifer Owen-Adams	JOA	Independent Member-Third Sector (Chair)
Stella Gwynne	SG	Assistant Director of Corporate Governance/Deputy Board Secretary
Paul Hooton	PH	Executive Director of Nursing, Quality, Women & Family Health
Claire Madsen	CM	Executive Director of Allied Health Professions, Health Sciences and Digital
Chris Walsh	CW	Independent Member-Local Authority

Kate Wright	KW	Director of Medical Services
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1. PRELIMINARY MATTERS
1.1 WELCOME AND APOLOGIES FOR ABSENCE (P&C/25/058)
The Chair welcomed everyone to the meeting. Apologies for absence were received as recorded above.
1.2 DECLARATIONS OF INTEREST (P&C/25/059)
No declarations of interests were received in addition to those already recorded on the register.
2 CONSENT AGENDA BUSINESS (P&C/25/060)
The Chair asked Members if they wished to bring forward any items from the Consent agenda to the main agenda.
No items were requested for inclusion in the main agenda.
3 ITEMS FOR APPROVAL / RATIFICATION
3.1 MINUTES OF THE PREVIOUS MEETING (P&C/25/061)
The minutes of the meeting held on 09 December 2025 were CONFIRMED as an accurate record.
3.2 COMMITTEE ACTION LOG (P&C/25/062)
The Committee RECEIVED the Action Log
<i>PH joined 10:03</i> <i>HT joined 10:03</i>
4 ESCALATED ITEMS (P&C/25/063)
There were no escalated items on the agenda.
5 ITEMS FOR ASSURANCE
5.1 DIRECTOR OF PEOPLE AND CULTURE REPORT (P&C/25/064)
DWL presented the report to the Committee and drew attention to the following matters:
<ul style="list-style-type: none"> • Tighter vacancy scrutiny leading to a 26% drop in advertised posts and better financial control and noted reduced off-contract agency use, particularly in community wards, thanks to increased staff bank uptake. • Health and Wellbeing showed improvements in referrals, waiting times, and counselling access, with strong corporate induction attendance (97%). • Risks were highlighted due to the end of Regional Integration Fund (RIF) support, affecting 63–68 staff, with exit planning ongoing. • Clinical education activity grew, manual handling training improved, and university partnerships strengthened. • National pay reviews for Bands 2 and 3 were completed, but concerns remain overpay differentials and awaited contract reform. • A new leadership framework, adapted from NHS England, is being introduced, and discussions continue about the 52 hours of required CPD. • Regional collaboration advanced with a joint work plan across three Health Boards.
Independent Members asked the following questions for assurance:

What steps are being taken to maintain contact with students who have completed placements in Powys and encourage them to return for permanent roles?

DWL reported that positive student feedback, strong support during placements, and good relationships with universities have significantly encouraged students to consider permanent roles in Powys. Improvements in clinical vacancies have been attributed to word-of-mouth among students, with local staff support enhancing placement experiences. Although challenges remain with international recruitment, the increase in placement numbers indicates progress. Current initiatives are seen as crucial for future workforce recruitment and retention.

Clarity was sought on the ongoing costs for Band two and three, and if these are included in the budget planning?

DWL confirmed that the Welsh Government has covered all backdated costs related to band 2 and 3 funding. Shared services have provided a reconciliation of future costs, estimated at approximately £700,000. This figure has now been incorporated into the financial plan as a known, recurring expense. It was noted that while the longstanding issue regarding band 2 and 3 staff has now been resolved, there remains a risk as other staff groups are drawing comparisons and may raise similar concerns. For example, there are ongoing disputes among health visitors in Cwm Taff over band 6 and band 7 positions, as well as issues emerging in other professional areas. It was noted that resolving the band 2 and 3 issue may lead to additional challenges.

HT updated the committee on several workforce matters, emphasising the balance between national negotiations and local responsibilities within Powys. Members were assured that the Chief Executive (CEO) Management Team is regularly briefed on national workforce issues. One key topic highlighted was the ongoing debate regarding the inclusion of statutory and mandatory training within the 52-hour protected CPT time for registrants an issue currently subject to negotiation between partners and NHS employers. It was also suggested that the Committee consider Horizon Scanning to identify emerging challenges, given the complex financial environment and issues such as the Band 2-3 matter, which exemplifies broader difficulties. It was proposed that a more comprehensive appraisal of potential upcoming workforce issues from other Health Boards would be beneficial for future committee discussions.

Action: Executive Director of People and Culture and Transformation (Horizon Scanning)

The Committee:

- took **ASSURANCE** against the delivery of those priorities and the updates provided on any workforce areas identified nationally.

- **RECEIVED** the report as an update on priorities within the Workforce section of the Integrated Plan 2025/26 since December 2025, which were not part of the Committee's agenda.
- took **ASSURANCE** against delivery of those priorities.

5.2 WORKFORCE PERFORMANCE REPORT (P&C/25/065)

MM presented the report to the Committee and drew attention to the following matters:

- Workforce growth and productivity improvements as per Ministry of Advisory Group (MAG) guidance.
- Preliminary data showed staff increases over four to five years, except for a recent drop in Administrative and clerical roles.
- Nursing and midwifery recruitment was strong.
- New reporting distinguishes actual versus budgeted staff numbers and highlights an ageing workforce profile, with further details to follow.
- Agency staff numbers have reduced, progressing towards a 30% reduction target.
- Core training compliance is still below target, but improvement plans are underway. Separate compliance and performance data for the hosted healthcare research body were shown, revealing no major concerns.

Independent Members asked the following questions for assurance:

Absence rates are unusually high in some areas. Do we know why, and what actions are being taken?

MM confirmed that Powys Teaching Health Board (PTHB) closely tracks both long-term and short-term staff absences. Anyone absent for four weeks, or more is monitored through a corporate tracker, enabling individual conversations with line managers. Short-term absences are reported to business partners, who also actively support line managers. Key efforts are focused on ensuring consistent application of the attendance policy, especially when absence triggers are met. Targeted interventions are in place for cases of excessive absence, which could ultimately lead to employment decisions if regular attendance cannot be maintained. Recent months have seen a notable reduction in long-term absenteeism due to such targeted actions. However, short-term absences, affected by seasonal factors, have offset some of these gains. The demographic profile of the workforce, particularly the higher proportion of older staff, contributes to elevated absence rates in certain areas, as older employees are more susceptible to serious illness.

HT highlighted the importance of benchmarking sickness absence and noted that a review is underway. Attention was also drawn to the need for targeted support in teams or services with higher levels of absence. It was questioned how quickly an assessment can be completed to enable such targeted support and raises the issue of whether further measures are needed to ensure that managers are equipped with the right skills and experience to handle attendance management sensitively and compassionately, despite existing training and toolkits.

MM explained that the assessment to identify areas most in need of targeted support has already begun, with plans to finalise and implement a programme by the end of the next month. This approach will focus resources on specific teams rather than applying a blanket strategy, using organisational intelligence and data to inform decisions. Additionally, he highlighted ongoing national discussions to review the attendance policy, noting concerns over the policy's current level of discretion which allows for varied interpretations. A working group has been established to revise the policy, aiming for greater robustness and consistency in its application.

How are variations and interpretations in the application of attendance management policy being handled, so that neither the organisation nor individuals are put at risk, and so that judgements applied are fair and consistent?

EL highlighted the operational perspective on managing attendance and sickness absence within the organisation. It was emphasised about the positive collaboration between operational teams and people and culture teams, particularly in dealing with complex cases and areas of concern, such as mental health wards. This partnership has led to increased confidence and more targeted support for teams experiencing high levels of sickness, although she notes that there is still room for improvement and further work is needed.

DWL added that the organisation faces a challenging context, especially with the need for financial savings and recovery, which may create discomfort among staff. It was stressed that the tools and support provided represent a universal offer, and while efforts are made to target hotspots and difficult individual cases, it is not possible to address every situation. This challenge may intensify if funding is reduced and staff numbers decrease.

How should the Committee address the challenges and risks associated with an ageing workforce, and what actions may be needed to mitigate these risks?

MM confirmed that PTHB incorporates projections of average retirement ages by occupational group and service area into its workforce planning. This enables the development of talent pipelines to address anticipated retirements. These projections are just one aspect of broader future workforce planning, and there is the potential to share more detailed workforce planning data at a future meeting.

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 2 – GREAT PLACE TO WORK INCLUDING WORKFORCE RETENTION AND STAFF SURVEY (P&C/25/066)

DWL introduced the Great Place to Work agenda, stating that, given the topic's breadth, the presentation was split into two parts. Due to the staff survey results recently becoming available, the Committee would be provided with an early overview, with a more detailed update to be scheduled for the next Board development meeting. The revised presentation, containing the new data, would be circulated after the meeting for members' reference.

EL left 10:52

RB summarised the latest staff survey results, highlighting a 34.7% response rate with lower clinician participation. Overall, scores were stable and PTHB performed above the health board average, nearly matching the top-scoring organisation. While morale and healthy working environment scores needed improvement, morale had started to rise. PTHB led in staff engagement among health boards in Wales, with strong results in line management, compassion, and wellbeing, and very low reports of bullying or abuse. Ongoing concerns included burnout and lower positivity, with declines in career development and learning. Planned actions include enhanced communications, greater staff access to survey data, targeted support for high-risk areas, and continued leadership and management development to address speaking up and advocacy issues.

HT highlighted the value of the staff survey's increased response rate in revealing organisational strengths and areas for improvement. Key concerns included burnout, morale, and the need for better wellbeing support and confidence in speaking up. Targeted actions were recommended for high-impact areas, especially given financial pressures, with clear plans needed to show staff their feedback is being acted on.

JW presented an overview of the workforce retention journey at PTHB over the past two years. It was explained that the programme, launched in February 2023, initially focused on nurse retention but was quickly broadened to include all staff. Key actions included:

- Site visits
- Questionnaires
- Data analysis

This would identify priorities, leading to the development of a comprehensive improvement plan and the establishment of task and finish groups. Notable initiatives highlighted included the stay conversation pilot, a redesigned leavers toolkit and questionnaire, wellbeing conversation guides, improved onboarding, and the Belong Stay Thrive campaign. It was reported that turnover had declined since the programme's introduction, with more staff indicating a desire to remain at PTHB, and it was emphasised the collective effort involved while noting uncertainty about future funding for that role. The Committee were informed that CLIP and some of the retention work had been designed locally and adopted nationally

The Committee:

- **REVIEWED** the information provided in the update
- took **ASSURANCE** of delivery against the plan.

5.4 THEME 4 – WELSH LANGUAGE, EQUALITY, DIVERSITY AND INCLUSION (P&C/25/067)

VM provided an annual update on the strategic equality plan, highlighting progress across several objectives:

- Strengthening community-based services
- Improving clinical resilience
- Advancing public health initiatives like vaccination catch-up and breastfeeding support.

Accessibility standards have been extended to primary care, and PTHB is now a disability confident employer, aiming for disability leader status next year. Multi-faith worship spaces and chaplaincy provisions are being developed. The Board has adopted a zero-tolerance policy on harassment, launched anti-racism actions, and delivered training on cognitive bias. Welsh language compliance is improving, with upgraded translation software and increased staff participation in Welsh learning. Priorities for next year include reviewing religious provision, conducting qualitative research with Black and Minority Ethnic (BME) staff, growing the BME network, achieving disability leader status, and adapting to anticipated changes in equality standards and guidance.

Independent Members asked the following questions for assurance:

How will financial constraints affect reviews of religious provision, achieving disability leader status, and Bar Human Rights Committee (BHRC) progress?

HT left 11:43

VM explained that it's currently challenging to determine the potential impact of the BHRC guidance, as the specifics are not yet clear. Some measures may be straightforward and inexpensive, while others could require more extensive action. Regarding disability leader status, it was felt the organisation is already well positioned to achieve it.

DWL explained about the complexity of Equality, Diversity and Inclusion work, especially regarding race. It was noted that the Welsh Race Equality Standard required substantial local effort to challenge assumptions based purely on data. It was emphasised the need for a balanced and proportionate approach, considering the organisation's size, estate, and resources. It was stressed about the importance of making appropriate adjustments to ensure the workforce comprising individuals from diverse backgrounds feels welcomed and included.

The Committee:

- **REVIEWED** the information provided in the update
- took **ASSURANCE** of delivery against the plan.

5.5 REVIEW OF TERMS OF REFERENCE (P&C/25/068)

HB gave an update on the Committee's Terms of Reference which underwent a thorough review 12 months ago, resulting in considerable updates and improvements to governance and operational methods across several committees. The current review proposes only minor administrative changes, such as job title updates. Feedback was welcomed, and it was suggested that any further adjustments be managed by the chair and director.

Independent Members asked the following questions for assurance:
It was requested that the Director of People and Culture job title transformation, and inclusion of a member of the Committee to be added as an attendee.

HB confirmed that these points were noted and would be updated on the Terms of Reference.

ACTION: Director of Corporate Governance/Board Secretary

The Committee:

- **ENDORSED** the proposed amendments to the Terms of Reference
- **IDENTIFIED** any further potential amendments
- **AGREED** that the Chair of the Committee and Director of Corporate Governance will finalise the revised Terms of Reference for presentation to the Board in May 2026 for approval.

5.6 COMMITTEE GOVERNANCE ACTION PLAN (P&C/25/069)

HB updated the Committee on effectiveness reviews, noting that two years ago these had resumed, with last year's questionnaire and discussion leading to a cross-Committee action plan. For this Committee, the key actions regular review of routine items and allowing time for deeper discussion were completed. Clarity on the Committee's role in the Better Together and Transformation programmes was now reflected in the Terms of Reference. Future reviews will be every two years by survey, with annual Board-wide discussions to monitor effectiveness.

Independent Members asked the following questions for assurance:
Will the new approach to Board discussions require consideration of how all the Committees impact each other, and is this interconnected focus part of the plan?

HB confirmed that the Committee will place greater emphasis on exploring how different Committees influence one another, including interdependencies and domino effects, both during Board discussions and through the Chairs Forum, which is designed to examine these connections from multiple perspectives

The Committee:

- **RECEIVED** the Committee wide and P&C specific Continuous Development Plan 2025-26
- took **ASSURANCE** that the implementation of continuous development actions has been monitored throughout the year as a key principle of good Corporate Governance

5.7 COMMITTEE RISK REGISTER (P&C/25/070)

HB gave an update on the current status of the Committee risk register, focusing on Strategic Risk 006 regarding recruitment and retention of an appropriate workforce.

It was noted that the risk score remains unchanged since it was last reviewed at the January 2026 Board, and the Risk Register is updated every two months. It was confirmed that this risk had been regularly discussed within the Committee, and it would soon be reviewed again as part of the annual planning process, with a comprehensive review of all strategic risks planned for the next financial year. It was highlighted that this particular risk now includes an assessment of the level of assurance, which is currently rated as high, reflecting confidence in the controls in place. Most actions related to the risk are either complete or progressing as scheduled.

DWL highlighted that ongoing recruitment and retention challenges are not unique to PTHB but are particularly pronounced due to a smaller workforce.

HB suggested a review of the risk descriptor, noting that the focus may shift between recruitment and retention, and this should be considered in future assessments.

ACTION: Director of People and Culture and Transformation

Independent Members asked the following questions for assurance:
Could the Committee consider broadening the current risk descriptor, which is very clinically focused, to provide a fuller picture that also includes non-clinical staff, due to workforce risks outside the clinical area?

DWL noted the request and gave assurance that future reports will aim for greater balance in this aspect

ACTION: Director of People and Culture and Transformation

The Committee:

- **RECEIVE** the corporate risks within the committee's remit
- **DISCUSS** any relevant issues and
- Take **ASSURANCE** that risks are being managed in line with the Risk Management Framework.

6 ITEMS FOR DISCUSSION

There are no items for inclusion within this section

7 CONSENT AGENDA

The reports below were taken under the Consent Agenda and recommendations supported:

- **FOR ASSURANCE:** 7.1 Staff Development Programme Final Internal Audit
- **FOR INFORMATION:** 7.2 Work Programme
- **FOR INFORMATION:** 7.3 PTHB Glossary

8 OTHER MATTERS

8.1 ANY OTHER BUSINESS (P&C/25/071)

No other business was raised.

7.2 COMMITTEE REFLECTIONS (P&C/25/072)

The following feedback was noted:

- It was highlighted about the excellent presentations and the increasing quality of assurance provided by the People and Culture Team. The information shared was noted as clear, robust, and well-presented, contributing to meaningful committee discussions.
- Openness to Challenge and Feedback: The team's willingness to accept challenge and constructive feedback was recognised as outstanding, especially given the difficult HR environment. This openness has promoted growth within the committee.
- Reports and data were described as well-utilised and effectively presented, helping the committee take necessary assurance and fostering strong discussion.
- The overrunning at the beginning of the meeting was linked to the inclusion of staff survey results, which contributed to extended discussions but were considered valuable.
- There was some disappointment expressed regarding lower attendance from independent members and executives, but overall, the session was seen as productive and positive

7.3 DATE OF NEXT MEETING (P&C/25/073)

Date of the next meeting: 11 June 2026 at 10:00 via Microsoft Teams

Meeting closed at 12:16