

**Unconfirmed Minutes of the Public Health Wales
People and Organisational Development Committee Meeting
20 January 2025 at 10:00, in 3.2 CQ2 and via Microsoft Teams**

Present:		
Tamsin Ramasut	(TR)	Committee Chair and Non-Executive Director (Equality and Diversity)
Kate Young	(KY)	Non-Executive Director (Third Sector)
Clare Jenkins	(CJ)	Non-Executive Director and Vice Chair of the Board
In Attendance:		
Jenny Ansell	(JA)	People and Organisational Development Operations Service Manager (for item 2)
Rachel Attwood	(RA)	Deputy Director of People and Organisational Development
Michelle Battlemuch	(MB)	Assistant Director of Operations, Health Protection and Screening Services
Peta Beynon	(PB)	Culture and Employee Experience Manager (for item 8)
Liz Blayney	(LB)	Deputy Board Secretary and Deputy Head of Board Business Unit
Matthew Browne	(MBr)	Leadership and Organisational Development Manager (for item 5)
Lucy Day	(LD)	Business Manager
Karen Fitzgibbon	(KF)	Head of People and OD Operations
Ffion Grundy	(FG)	Equality, Diversity and Inclusion Manager (for item 6 and 7)
Neil Lewis	(NL)	Director of People and Organisational Development
Nicholas Meyler	(NM)	Workforce Systems and Analytics Lead (for item 2)
Joe O'Brien	(JOB)	Systems Manager (for item 2)
Stuart Silcox	(SS)	Assistant Director of Integrated Governance
Emma Thomas	(ET)	Staff side representative
Paul Veysey	(PV)	Board Secretary and Head of Board Business Unit
Hannah Wells	(HW)	Project Manager (for item 5)
Abigail Wilcox	(AW)	Senior Leadership & OD Practitioner (for item 5)
Apologies		
Claire Birchall	(CB)	Executive Director of Nursing, Quality and Integrated Governance
Pippa Britton	(PB)	Chair of the Board
Tracey Cooper	(TC)	Chief Executive
Liz Heath	(LH)	Staff side representative
Secretariat		
Ffion Lloyd	(FL)	Board Support Officer
The meeting commenced at 10:00		

PODC 1/2026.01.20	Welcome and Apologies for Absence
<p>TR opened the meeting and welcomed all present, noting that the meeting was held electronically and in person at CQ2.</p> <p>The Committee noted that the meeting was being recorded to support with accuracy of the minutes, and that the recording would be deleted once the minutes had been agreed at the next meeting on 16 April 2026.</p> <p>The apologies for absence received were noted.</p>	
PODC 1.1/2026.01.20	Declarations of Interest
<p>There were no declarations of interest in addition to those already declared on the Declarations of Interest Register.</p>	
PODC 1.2/2026.01.20	Minutes, Action Log and Matters Arising of meeting (16 July 2024)
<p>The Committee approved the minutes of the meeting of 14 October 2025.</p> <p>The Committee approved the Action Log.</p>	
In Focus / Deep Dive	
PODC 2/2026.01.20	Sickness Absence
<p>KF presented a deep dive into sickness absence within Public Health Wales following discussions at the Board meeting in May 2025, and previous updates at the July and October Committee meetings. The deep dive aimed to provide a detailed update, and included data quality improvements and audit outcomes.</p> <p>NM presented detailed sickness absence data for Public Health Wales, and noted key points:</p> <ul style="list-style-type: none"> • The organisation was above its 3.25% target but below the NHS Wales average of 6%. • Analysis of long-term vs. short-term absence, with long-term absence (mainly due to stress and anxiety) being the predominant issue. • Stress and anxiety were listed as the top cause for absence, followed by “other known causes not elsewhere classified.” The highest stress/anxiety-related absence was recorded from staff within the 36–45 age range. • Directorate-level data showed a variation in sickness rates across departments. • Unknown or uncategorised absence reasons accounted for nearly 10% of all absence recordings. <p>JA discussed identified actions to improve data quality and support:</p> <ul style="list-style-type: none"> • Targeted reporting and direct engagement with managers to improve accuracy of absence recording, as well as follow-up emails and updated return-to-work forms. • Ongoing reminders and support from People and OD advisors, especially for stress-related absences. 	

- Regular delivery of All Wales Managing Attendance at Work training, with every long-term absence case supported by a People and OD advisor.
- Continued development of e-learning modules, targeted support for high-absence areas, and collaboration with trade unions.
- Ongoing efforts to improve use of optional data fields, monitor trends, and enhance communication about available support.
- JOB suggested future reporting could separate frontline and non-frontline data for more meaningful analysis.
- RA highlighted the importance of accurate data and awareness of societal trends such as an ageing workforce and long-term health conditions.

TR thanked JA and NM for the presentation and invited questions from the Committee.

The Committee discussed:

- Whether the Deep Dive revealed any surprises or new areas for focus, particularly regarding unknown or uncategorised absence reasons. JA responded that there were no major surprises, but noted that engagement with managers and trade union colleagues had helped clarify why absence reasons were sometimes not recorded, such as difficulty finding the correct code or multiple reasons for absence. This had informed improvements in manager support and return-to-work conversations.
 - NL noted that the main reasons for absence had remained consistent, and the Deep Dive provided assurance that most "no reason recorded" cases were not due to staff feeling unsafe to report. He emphasised the existing systems to gain further information, such as the Staff Networks and the Speaking Up Safely framework.
- That the continued exploration of level 2 absence reasons should be encouraged, and stressed the importance of maintaining a supportive culture and ongoing collaboration with staff networks and trade unions.
- The continued need to foster a safe and open organisational environment, and supported the use of benchmarking data to help with context, as well as further exploration of absence trends by role type.

TR thanked KF for the presentation.

The Committee took **assurance** on sickness absence rates and trends for the period 1 December 2024 to 30 November 2025.

Managing Risk

**PODC 3/
2026.01.20**

Strategic Risk Register (Risk 2)

SS provided an update on the management position of Strategic Risk 2, with a focus on capacity for risk change management, particularly within the digital and data space.

The risk score remained unchanged at 9, and the risk appetite remained at "willing" within tolerance levels. SS noted an updated version of the risk had been approved by the Business Executive Team, and would show steady progress on mitigating actions. NL referenced the ongoing work and detailed conversations at recent Leadership

Meetings, with the risk level remaining at its current level, with the appendix documentation providing assurance of current actions underway.

RA noted that a Deep Dive into the risk at Leadership Team had been suggested given its wide-ranging nature and impact across the organisation, and emphasised the need to review the risk score and positioning in the context of organisational health. SS confirmed that a Deep Dive into Strategic Risk 2 had been scheduled for a future leadership team meeting.

TR thanked SS for the update

The Committee took **assurance** on the management of Strategic Risk within the Organisation.

**PODC 4/
 2026.01.20**

Corporate Risk Register

SS provided an update on the Corporate Risk register as reviewed at by the Leadership Team (LT) on 20 November 2025.

SS noted that LT had recently undertaken deep dives into Corporate Risk scores, action plans, controls, and mitigations, with efforts to improve reporting and links to the Strategic Risk Register. SS confirmed ongoing work to sharpen action plans and narratives, with updated risks to be presented at the January board meeting and future committee meetings.

SS provided updates on the Committee's questions raised at the previous Committee meeting on the Corporate Risk Register:

- **Health Impact Assessment (HIA) Risk:** SS addressed questions from the previous meeting about capacity to meet HIA support requests. SS reported that the HIA Guide had been approved and would be published shortly, with regulations then shortly coming into effect. SS acknowledged ongoing uncertainty about the volume and type of support requests that would be received, and committed to the continued monitoring and reporting of this risk.
 - TR questioned how the organisation would address any capacity shortfall, and asked whether the issue was budgetary or related to workforce availability. SS clarified that the main challenge was the current lack of clarity on the expected demand, and that the organisation was working with Welsh Government to define responsibilities and avoid being overwhelmed.
 - The Committee suggested developing a service description to clarify what help was available, which would assist in assessing potential demand and provide assurance to the Committee. SS agreed this was part of ongoing discussions.
- **Disclosure and Barring Service (DBS) Risk:** SS highlighted that the DBS checking process had been implemented and anticipated this risk would be closed at the next LT review. CJ, referencing her safeguarding role, confirmed the DBS work had been implemented well, which had included positive union engagement, and supported its removal from the register.

TR thanked SS for the update.

The Committee took **assurance** on the management of corporate risks within the remit of the Committee.

Strategy Delivery

**PODC 5/
2026.01.20**

IMTP Commitment Update

MBr provided a presentation on the IMTP milestone to develop and establish a systemic programme of work to increase leadership and management skills, capacity, and confidence through formal learning.

MBr explained the aim was to create a systematised approach to leadership and management development, with a move from isolated interventions to an interconnected pathway that supports confident and capable leaders aligned with the organisational strategy. The work emphasised the need to address underlying causes rather than just visible effects.

The programme was structured using agile methodology, with six “epics” (large bodies of work) guiding the approach. MBr focused on progress in the following areas:

- **Epic 1:** To establish a clear and compelling leadership offer, aligned with the National Leadership and Management Framework and organisational behaviours. MBr noted that Public Health Wales’s own framework, developed with Skills for Health, has influenced the national framework.
- **Epic 2:** To embed leadership expectations, behaviours, and competencies across the employee lifecycle, with 39 touchpoints identified for integration.
- **Epic 3:** A shift from a training model to continuous development, with a leadership and management hub offering tools such as 360 development, team development, cultural advocates, community practice, new manager induction, leadership forum, and bite-size learning.
- **Epic 4:** Deepening leadership impact through senior leadership and cultural well-being, with links to the broader people strategy and ongoing culture work.

MBr identified risks to the delivery of the programme, such as the timeline for the national framework, challenges with evaluation due to limited feedback, and financial constraints on essential development.

MBr raised some key areas for Committee input and discussion:

- The introduction of a leadership impact summary statement in future policies and procedures to deliver the message on leadership within Public Health Wales.
- The aim to encourage protected time for staff to commit to learning and development opportunities.

The Committee:

- Welcomed the focus on evaluation, and highlighted the need to build evaluation into leadership programmes from the start, and suggesting collaboration with

the evaluation team. MBr confirmed that HW was leading on evaluation within the team.

- Stressed the importance of leveraging internal expertise and recognising the challenge of measuring behavioural change.
- KY endorsed the idea of leadership impact statements in policies and papers (with reference to a recent audit experience), and the value of consistent cultural reminders in organisational processes.
- Raised the importance of integrating leadership and management competencies into recruitment, to ensure alignment across the employee lifecycle. MBr confirmed that leadership competencies are being embedded in branding, job descriptions, and assessment materials, and identified this as a key area for organisational investment.
- Suggested extending leadership development and induction training to Board members, to ensure leadership culture is modelled at all levels.

NL thanked MBR, AW and HW for their work, and emphasised the need to demonstrate the impact of leadership development on behaviours, people, and culture. NL noted the shift from transactional to more meaningful measures, the importance of accountability, and the need for consistent positive experiences across the organisation.

TR thanked MBr for the presentation and update.

The Committee took **assurance** on the progress towards the IMTP deliverable.

**PODC 6/
2026.01.20**

Annual Equalities Report

RA presented the Annual Equality Report 2024/25 for Committee approval, which covered the period between April 2024 to March 2025.

RA noted that the report was structured against Strategic Equality Plan (SEP) objectives, and integrated workforce diversity data and staff network feedback. RA highlighted improvements in structure and focus in response to previous committee feedback. RA also acknowledged the significant work of FG on the report and the Gender Pay Gap Report.

The Committee:

- Welcomed the improved structure and coherence, and noted that the report was clearer and more focused. TR requested further emphasis on measuring impact and outcomes, and highlighted the need to unpack recruitment data, especially regarding disparities in ethnicity figures.
- KY echoed the need for clearer demonstration of impact, and suggested the use of case studies to demonstrate action based on feedback. She noted the report's alignment with other organisational work and the importance of connecting narrative to impact.
- Asked about the rationale for the combined workforce and service provision approach, and raised concerns that service provision may appear secondary. RA noted the statutory requirement to report on both internal and external equality objectives, and explained the integration had been made for clarity.



- LB confirmed that the remit for workforce equality sits with the Committee, while broader equality issues were Board-level matters, and suggested a possible Board Development session to review reporting arrangements.

Action: LB

- RA and FG discussed the structure and mechanisms for feedback within the Staff Networks, which included the role of executive sponsors and recent work to support network chairs with emotional labour and reporting routes.
- Suggested learning from external community organisations to support network members, and emphasised the value of case studies to demonstrate impact and recognise contributions.

TR thanked RA for the update.

The Committee agreed to **approve** the Annual Equality and Workforce Report 2024-25.

Equalities and Diversity

**PODC 7/
2026.01.20**

Gender Pay Gap Annual Report

RA presented the annual Gender Pay Gap Report 2024-25 that covered data up to 31 March 2025, and noted the report was published in line with Welsh Government regulations.

RA highlighted key points from the report:

- Both mean and median gender pay gaps have narrowed (mean: 14.5% to 13.6%; median: 17% to 15.5%), which showed a return to a downward trend after a recent increase.
- Most pay bands showed minimal or zero gap, but higher pay bands—particularly medical and dental roles, which were predominantly male – affected the overall figures.
- Ethnicity and disability pay gaps were reported, with the ethnicity gap shifting from positive to negative due to increased representation in lower pay bands.

CJ welcomed the report, and praised the detailed breakdown by grade and the explanation of the medical/dental effect. She also praised the improvement in the gender pay gap and the quality of the external analysis.

TR noted the positive direction for the gender pay gap, but highlighted the need to address the slight negative trend in ethnicity and disability pay gaps, which were often linked to seniority and recruitment banding.

TR thanked RA for the update on the report.

The Committee agreed to **approve** the Gender Pay Gap Report 2024-25.

Workforce and Workforce Planning

PODC 8/2026.01.20

Culture Action Plan - Pulse Survey Results

PB presented the results of the Culture Pulse Survey, which was developed with Human Synergistics and focused on two cultural styles: humanistic-encouraging (the desired style) and avoidance (the previous primary style).

PB noted that the survey ran for six weeks in summer 2025, and had achieved a 39.5% response rate. This was double the response rate of the previous year and indicated increased engagement.

PB highlighted key points from the report:

- Key findings showed that cultural indicators remained broadly static overall, but there were early signs of progress, which included improved role clarity, more time spent with staff, and fewer expectations to escalate decisions.
- There was a slight worsening in shifting responsibility and blame, which suggested a minor decline in perceived safety.
- Directorate-level results varied, with leaders viewing culture more positively than other groups, and people managers reporting higher avoidance scores.
- The next steps were outlined, which included revisiting high-level cultural priorities, focusing on psychological safety, supporting line managers, refreshing the appraisal system, and developing a dashboard to triangulate culture and engagement data.
- Directorate results would be published for transparency, and action plans would be updated after the next staff survey.

NL highlighted the importance of measuring impact and triangulating data, noting that significant progress since 2023 and the need to focus on fewer, more impactful actions.

CJ welcomed the positive engagement and the overlap between culture and leadership work, and stressed the importance of evaluation. She pointed out that senior leaders were most likely to view culture positively, and suggested a need for greater insight into other staff experiences.

KY observed that increased engagement shows people care about culture, but noted that middle managers often feel less empowered and emphasised the importance of psychological safety and learning from mistakes.

TR asked about the possibility to integrate the Pulse Survey with the Staff Survey and about career progression pathways for technical versus managerial roles. PB explained the surveys must remain separate due to the pulse survey using copyrighted questions and NHS requirements for the Staff Survey, but action plans did integrate both together in order to identify principal themes. NL and MB confirmed that non-managerial progression routes did exist, especially in technical and scientific roles, but were not always formally mapped.

TR thanked PB for the presentation.

The Committee took **assurance** that Public Health Wales will be using the results of its Culture Pulse Survey 2025 in building a stronger, more inclusive and constructive culture.

PODC 9/2026.01.20	Committee Annual Report 2024/25
<p>LB presented the Committee’s Annual Report for 2025/26, which provided assurance to the Board by summarising the Committee’s work over the year. The report would follow a combined format with one section per Committee, with aimed to streamline reporting. Sections in red indicated items considered at the current meeting, and would be updated post-meeting for final sign-off by the Chair.</p> <p>The Committee:</p> <ul style="list-style-type: none"> • Approved the draft Committee Annual Report for 2025/26 summarising the key areas of business activity undertaken for this Committee. • Noted that the draft report will be updated to reflect the Committee’s meeting in January 2026 and agree for the final version to be agreed with the Chair of the Committee prior to submission to Board; • Recommended the report (subject to the amendments agreed with the Chair) to the Board to provide assurance that the Committee is fit for purpose and operating effectively in fulfilling its terms of reference. 	
PODC 10/2026.01.20	Policies for Approval
<p>The following policies and procedures were presented to the Committee for approval:</p> <ul style="list-style-type: none"> • Adverse Weather Policy • Annual Leave & Bank Holiday Policy • Welsh Language Policy • Time Off in Lieu Procedure <p>LD also highlighted that new versions of the All Wales Disciplinary Policy and Capability Policy would require approval and launch by 1 April, the Committee noted this and noted the approval would be sought either via Chairs action or through an additional Committee meeting depending on the numbers of policies requiring approval.</p> <p>The Committee agreed to approve the:</p> <ul style="list-style-type: none"> • Adverse Weather Policy • Annual Leave and Bank Holiday Policy • Welsh Language Policy. • Time Off in Lieu (TOIL) Procedure 	
Governance and Accountability	
For Information	
PODC 14/2026.01.20	Items to Note
PODC 14.1/2026.01.20	Performance and Insights Report - Workforce Extract
<p>The Committee noted the Insight report workforce extract for information.</p>	
PODC 14.2/2026.01.20	Audit Recommendations Tracker Update
<p>The Committee noted the extract from the Audit Recommendation Tracker report that was presented to the Audit Committee in December 2025.</p>	
PODC 14.3/2026.01.20	Trade Union Partnership Working Forums - Update



The Committee noted the update provided.	
PODC 14.4/ 2026.01.20	Committee Workplan
LB advised that the work plan for the next year was in development, with a workshop scheduled in February for committee members to contribute. The formal work plan would be circulated before the next meeting.	
PODC 16/2026.01.20	Closing Administration
TR thanked everyone for their contributions and closed the public section of the meeting.	
The Committee was asked to e-mail feedback on the meeting to the Board Business Unit.	
Date of next Committee meeting: 16 April 2026	
The meeting closed at 12:50	

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