Unconfirmed Minutes of the Public Health Wales
People and Organisational Development Committee Meeting
16 April 2026 at 10:00, in 3.2 CQ2 and via Microsoft Teams

Present:		
Clare Jenkins	(CJ)	Acting Committee Chair, Non-Executive Director and Vice Chair of the Board
Tamsin Ramasut	(TR)	Committee Chair and Non-Executive Director (Equality and Diversity)
Kate Young	(KY)	Non-Executive Director (Third Sector)
In Attendance:		
Rachel Attwood	(RA)	Deputy Director of People and Organisational Development
Michelle Battlemuch	(MB)	Assistant Director of Operations, Health Protection and Screening Services
Claire Birchall	(CB)	Executive Director of Nursing, Quality and Integrated Governance
Liz Blayney	(LB)	Deputy Board Secretary and Deputy Head of Board Business Unit
Barbara Busby	(BB)	Strategic Advisor (for item 2)
Lucy Day	(LD)	Business Manager
Karen Fitzgibbon	(KF)	Head of People and OD Operations
Azelle Gerry	(AG)	Lead Nurse Workforce, Education and Professional Standards (for item 9)
Emily Mayers	(EM)	Strategic Workforce Planning Manager (for item 2)
Kelly McFadyen	(KM)	Learning and Development Manager (for item 2)
Joe O'Brien	(JOB)	Systems Manager (for item 7)
Stuart Silcox	(SS)	Assistant Director of Integrated Governance
Vivienne Thorngate	(VT)	People & OD Partner (for item 12)
Brett Wrightbrook	(BW)	Wellbeing and Engagement Manager (for item 3)
Apologies		
Pippa Britton	(PB)	Chair of the Board
Tracey Cooper	(TC)	Chief Executive
Liz Heath	(LH)	Staff side representative
Neil Lewis	(NL)	Director of People and Organisational Development
Emma Thomas	(ET)	Staff side representative
Paul Veysey	(PV)	Board Secretary and Head of Board Business Unit
Secretariat		
Ffion Lloyd	(FL)	Board Support Officer
The meeting commenced at 10:00		

PODC 1/2026.04.16	Welcome and Apologies for Absence

CJ opened the meeting and welcomed all present, noting that the meeting was held electronically and in person at CQ2.

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 July 2026.

The apologies for absence received were **noted.**

PODC 1.1/2026.04.16	Declarations of Interest

There were no declarations of interest in addition to those already declared on the Declarations of Interest Register.

PODC 1.2/ 2026.04.16	Minutes, Action Log and Matters Arising of meeting (20 January 2026)

The Committee **approved** the minutes of the meeting of 20 January 2026.

The Committee **approved** the closure of completed items on the action Log.

In Focus / Deep Dive

PODC 2/ 2026.04.16	POD IMTP commitments for 2026-27

KF presented a deep dive into the People and OD objectives in the Integrated Medium Term Plan (IMTP). KF explained that the focus of the presentation was on the key milestones for year one (2026–27), and was intended to provide assurance on delivery and implementation planning.

KF outlined the year one milestones:

People Manager Fundamentals

- KM advised that by the end of Quarter 2 a foundational management development programme would be developed and delivery commenced. KM highlighted evidence from cultural work and the 2025 Staff Survey that demonstrated inconsistency in people management practices across the organisation. The programme aimed to improve confidence, consistency and capability in people management, and therefore improve employee experience, culture and organisational performance.
- The existing learning provision (the Developing People Managers Programme) was being reviewed, consolidated and repackaged, alongside new learning materials to address identified gaps.
- A project working group had been established, with work underway on engagement, communications and evaluation frameworks. Delivery options being explored included in person and on demand models. KM confirmed alignment with the forthcoming National Leadership and Management Framework, and a longer term people manager pathway linked to induction and leadership development.

Future Workforce Solution

- KF advised that preparatory work was underway to ensure organisational readiness for implementation of the new NHS Workforce Information System (and an update on this will be received later in the meeting).

Integrated Planning

- EM highlighted that by Quarter 3, a fully integrated planning approach would be established to strengthen alignment across workforce, finance, governance and organisational planning.
- While integration had improved in recent years, EM noted that further developments were required, such as refinement of planning timelines, enhanced tools, and improved long term workforce forecasting. EM highlighted the need to better articulate workforce implications of strategic priorities and to build leadership capability in workforce planning.
- Facilitated workshops were being explored to support strategic thinking.
- Outputs from integrated planning would inform the development of a sustainable, future focused skills strategy, which would include leadership, digital capability, change management and climate related skills.

Learning and Development to Address Core Skills

- KM highlighted learning from the COVID-19 enhanced response which demonstrated gaps in organisational preparedness, role clarity and training.
- KM outlined three core elements of the proposed approach:
    - Defining core emergency response skills required for all staff
    - The development of a transparent and equitable mobilisation model, supported by appropriate workforce information
    - The establishment of a sustainable learning infrastructure aligned to emergency preparedness standards

Integrated Engagement and Culture Plan Refresh

- BB highlighted that the refresh of the Integrated Engagement Plan would be completed by Quarter 4, and would use insights from the 2025 Staff Survey and Culture Pulse Survey.
- Key areas of focus for this work would include embedding a clearer cultural narrative, the development of a culture and engagement dashboard, and the improvement of psychological safety and resilience.

CJ thanked the presenters, and invited questions from the committee:

- KY welcomed the work, particularly the focus on psychological safety, and emphasised the importance of manager feedback and appraisals. She expressed interest in future feedback from staff networks and cultural advocates on how the planned interventions were perceived.
- TR echoed concerns regarding psychological safety and the effectiveness of two way communication across organisational hierarchies, and highlighted the importance of addressing this within the culture programme.
    - BB acknowledged the challenges raised and noted that feedback from cultural advocates had reinforced similar concerns. She advised that these issues had now

been clearly identified and named, providing a basis for addressing them through the planned programme of work.

- KF noted that existing executive Q&A sessions such as Time with Tracey provided opportunities for staff to raise concerns directly with senior leaders but acknowledged there may be a gap in raising issues at middle management level, and advised that this would require further consideration.

- CJ queried the scope of integrated planning and whether it sufficiently addressed specialist and clinical skills. EM confirmed that the workforce planning toolkit considered both foundational and specialist skills, and supported directorates in identifying skills gaps and actions.
- CJ questioned whether the People Manager Fundamentals programme would include access to qualifications. KM advised that accreditation was not currently included but could be explored in future phases.
- TR raised issues around long term workforce pipelines and pathways for early career professionals. BB acknowledged the challenge and noted that further work was planned on job families and career pathways to support a more strategic approach.

The Committee took **assurance** on the planning for the implementation of the key People and OD deliverables within the IMTP for 2026/27.

PODC 3/ 2026.04.16	**Culture and Engagement, Including the 2025 Staff Survey Results**

KF introduced the deep dive update on culture and engagement, with a particular focus on the 2025 Staff Survey results.

BW presented an overview of staff survey response rates, engagement indicators and key trends. He advised that the Public Health Wales (PHW) response rate for 2025 was 50.9%, which represented a decrease from the previous year, although PHW continued to perform more positively than the Trust benchmark groups across the engagement index and the ten survey themes.

BW outlined that the overall engagement index remained broadly stable year on year, and noted that only the theme of patient safety had shown a consistent improvement since 2023, while staff engagement and the ability to speak up about concerns had continued to decline over the same period.

BW highlighted the lowest scoring themes in the survey as morale, staff engagement and healthy working environments. The highest scoring themes were a compassionate and inclusive culture, flexible working, and working together. He advised that sub theme analysis showed improvements in teamworking, inclusion and recognising contributions, however there was a continued decline in development opportunities and work pressure.

BW then highlighted key areas from the results:

- Employee voice and speaking up results suggested declining confidence that concerns would be addressed , alongside reduced psychological safety, despite continued positive scores relating to incident reporting and patient safety.

- Burnout remained a significant concern, with a substantial proportion of staff experiencing exhaustion, unrealistic time pressures and presenteeism, alongside limited perceptions of adequate staffing.
- There were declining perceptions of access to career opportunities and learning, despite positive appraisal outcomes.
- Line manager effectiveness remained generally positive, although some small declines were seen in managers' perceived capacity to listen and take effective action.
- There were small improvements noted in bullying and harassment, although a number of colleagues continued to report negative experiences.

BW outlined the next steps, including sharing results at directorate level, refreshing the integrated engagement action plan as part of the IMTP commitments, and planning for improvements ahead of the 2026 Staff Survey.

CJ thanked BW for the update, and invited questions from the Committee:

- TR queried whether qualitative work was planned to help understand the survey findings in greater depth, and noted apparent contradictions in the data, particularly around positive relationships with managers alongside reduced confidence in speaking up. TR also highlighted the seriousness of burnout indicators and asked whether further insight would be sought through conversation and engagement rather than quantitative data alone.
    - BW responded that some qualitative engagement was already taking place at local and directorate level, although he acknowledged that further work may be required to strengthen this. He noted the use of additional data sources and broader organisational listening mechanisms to triangulate findings.
    - BB added that directorates would be encouraged to explore their results in more detail with staff. She advised that emerging data suggested burnout was more strongly associated with workload, capacity and resources rather than poor management, and confirmed that both burnout and psychological safety would be key priorities within the refreshed integrated engagement and culture plan.
- KY reflected on the high levels of presenteeism highlighted in the data and suggested this might represent a useful area for deeper exploration, as it may provide insight into why staff feel compelled to attend work despite ill health or exhaustion.
- LB noted the apparent contrast between increased use of formal Speaking Up Safely mechanisms and declining confidence in speaking up overall, and expressed interest in understanding whether staff felt less able to raise more informal, day to day concerns. LB suggested further work to explore this.
- MB echoed concerns regarding speaking up and informal feedback routes. She also reflected on the lower survey response rates in infection services, and noted that the absence of targeted support for staff without regular access to IT systems may have had an impact.
- BB advised that work was underway to develop a culture and engagement dashboard to better triangulate workforce indicators, which would include survey data, absence,

grievances and other organisational metrics, and to better demonstrate the relationship between culture and organisational outcomes.

- CJ reflected on whether declining willingness to speak up related to fear or to a perception that raising concerns did not lead to change. She linked burnout indicators to job design, workload and capacity pressures rather than interpersonal behaviours, and highlighted the relevance of integrated planning and workforce design in addressing these challenges. BB agreed that job design and service change need to be considered, and acknowledged the challenge of delivering development interventions when capacity is limited.

The Committee took **assurance** on the National Staff Survey 2025 results and the key themes identified within the findings.

Managing Risk

PODC 4/ 2026.04.16	**Strategic Risk Register (Risk 2)**

SS provided an update on the management position of Strategic Risk 2, and noted that the paper reflected the position as of 1 February 2026.

SS advised that risk management arrangements continued to mature and highlighted recent developments in this area, such as the approval of the Risk Management Maturity Plan by the Audit and Corporate Governance Committee, which superseded the previous Risk Management Development Plan, and the commencement of a rolling programme of strategic risk deep dives with Executive colleagues.

SS further advised that Executive consideration had recently been given to the inclusion of a new strategic risk relating to financial sustainability. Following discussion, it was agreed that financial sustainability would be managed as a corporate risk, given its relevance across all strategic risks. Stuart confirmed that this decision would result in a minor amendment to the wording of Strategic Risk 2, which would be reported back to the Committee in due course.

KF noted that the mitigating actions for Strategic Risk 2 aligned closely with the People and Organisational Development (OD) work discussed earlier on the agenda, including IMTP commitments, workforce planning, culture and engagement activity. KF advised that updates to IMTP deliverables would be reflected in future iterations of the Strategic Risk Register, and confirmed that a deep dive into Strategic Risk 2 was scheduled for consideration by Leadership Team.

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

PODC 5/ 2026.04.16	**Corporate Risk Register**

SS provided an update on the Corporate Risk register, which had been reviewed by the Leadership Team (LT) on 19 February 2026.

SS noted that the paper reflected the position as of February 2026, and highlighted the intention to strengthen scrutiny of the register through a programme of Leadership Team deep dives with risk owners and handlers.

SS advised that the paper stated that no new risks had been added, but clarified that one new corporate risk had been escalated during the reporting period:

- Risk 2143 had been added following the decision by UK Health Security Agency (UKHSA) to withdraw out of hours Environmental Public Health support. SS confirmed that this risk was being managed at Business Executive Team (BET) level, with continued oversight through Leadership Team arrangements.

SS then provided updates on risks of interest to the Committee:

- Risk 1533 (Health Impact Assessment (HIA)) – BET had approved guidance on Health Impact Assessments, representing an initial mitigating action against this risk. SS confirmed that further work was underway to update the service description to better understand demand and capacity pressures.
- Risk 1541 (Disclosure and Barring Service (DBS)) - this risk was expected to be closed imminently, subject to completion of a small number of outstanding actions. CJ noted that the risk had also been discussed at a recent Safeguarding meeting and welcomed confirmation that it was nearing closure.
- Risk 2076 (Equality Impact Assessment (EIA) Compliance) –a baseline assessment of EIA compliance had been completed across all Directorates, and would inform the development of an action plan to address identified gaps in compliance.

CJ thanked SS for the update.

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

Partnerships and Engagement	
PODC 6/ 2026.04.16	**Local Partnership Forum Annual Report**

KF provided an overview of the Partnership Working Annual Report, which covered partnership working activity and arrangements for the period 1 April 2025 to 31 March 2026, and covered the activity of both the Local Partnership Forum and the Joint Medical and Dental Negotiating Committee.

KF noted that the report summarised the frequency of meetings with Trade Unions and professional association colleagues, and the range of matters progressed through partnership arrangements, such as engagement on People Strategy, organisational change activity and policy review and development.

KF highlighted the development of an updated Facilities Time Agreement, and noted this as a significant milestone as no such agreement had been in place for some time. She further noted that a series of joint workshops had been held involving Trade Union colleagues, People and OD and Health Protection and Screening Services Directorate colleagues, focusing on ways of working and improving partnership working relationships.

CJ thanked KF for the update, and invited questions from the Committee:

- CJ queried whether the British Medical Association (BMA) negotiated on behalf of the British Dental Association (BDA), or whether there were no dental representatives within Public Health Wales. KF responded that although there were currently no recognised BDA representatives sitting on the Committee, a joint recognition agreement had recently been proposed. KF agreed to seek an update and provide clarification.

Action: KF

- CB emphasised the importance of maintaining effective representation and released time for staff undertaking this work, and asked how the organisation encouraged and supported internal colleagues to take up representative roles. KF advised that People and (OD) worked with full time officers from professional bodies, such as Unite, UNISON and the Royal College of Nursing (RCN), to encourage local workplace representation. It was noted that the workplace RCN representative and the full time officer from RCN had both recently retired, which presented a gap, but confirmed that securing local representation remained a priority.

CJ praised the report and welcomed the progress made in partnership working and the improvement in trade union relations over the reporting period. She expressed support for further strengthening representation, including recognition arrangements with the BDA.

The Committee took **assurance** on the work of the Joint Medical and Dental Negotiating Committee and the Local Partnership Forum.

Workforce and Workforce Planning	
PODC 7/ 2026.04.16	**ESR Transformation Implementation**

KF introduced the item which related to national ESR Transformation arrangements and the preparatory work underway to ensure Public Health Wales's readiness for transition to the Future Workforce Solution (FWS).

JOB advised that FWS, which would be referred to as the "People Portal", would replace the current Electronic Staff Record (ESR) system and represented a major workforce transformation programme rather than a system upgrade. The programme was a national, 15-year initiative led by the NHS Business Services Authority, with Infosys as the supplier, and coordinated in Wales by Welsh Government and NHS Wales Shared Services Partnership. FWS is intended to modernise workforce services across HR, payroll, learning, recruitment and workforce planning, and to provide a single trusted workforce record with improved analytics, integration and user focused design.

JOB outlined that early adopters would go live during 2026/27 and that the 'wave allocation' for Public Health Wales was expected to be confirmed in autumn 2026; an update would be provided to the Committee once this had taken place. He advised that NHS Wales organisations were expected to transition by 2028 to avoid prolonged dual running of systems.

JOB outlined the early preparatory work underway and confirmed that a programme brief would be considered by the Change Board in April, which would enable the formal establishment of

governance and oversight arrangements. He advised that further national readiness assessments and surveys were expected later in the year, and that learning from early adopters would inform implementation planning.

CJ thanked JOB for the update, and invited questions from the Committee.

- TR welcomed the replacement of ESR but queried the scale of the transformation and associated organisational risk, and noted the potential impact if the implementation was not successfully managed. SS agreed that the programme presented a significant organisational risk, and emphasised the importance of clear governance, robust risk management and adequate resourcing. He noted that the risks should be clearly captured and monitored through appropriate programme and corporate risk arrangements. JOB acknowledged the scale of the challenge and advised that early preparatory work and early establishment of governance arrangements was intended to mitigate risk. He confirmed that risk management would be embedded within the programme approach.
- KY highlighted the importance of engagement, communication and consultation alongside technical implementation, and emphasised the need to ensure equality of voice and to involve staff networks early.
- CB asked whether the programme would be overseen through the Change Board. JOB confirmed that this would be the case following approval of the programme brief. A working group will be set up as a pre-cursor to a change programme.
- CB also emphasised the opportunity to improve mandatory training arrangements through the new system, referencing positive experiences in other NHS organisations. JOB confirmed that learning and mandatory training functionality was being considered through national design workshops.
- SS queried whether the new system would integrate with Oracle financial systems. JOB advised that while the Future Workforce Solution would be built on an Oracle Fusion platform, the workforce and finance systems would remain separate initiatives, although improved integration was anticipated.
- TR queried whether the programme sat within the Organisation's wider digital transformation agenda. KF advised that while the programme was recognised as a major digital transformation, it would be governed through the Change Board with Digital colleagues actively involved as part of the working group and eventual change programme.
- PB sought assurance that the system would accommodate varying user groups and access requirements, such as Board members and contractors. JOB confirmed that this issue had been raised at a national level and would be considered through system design.
- MB shared reflections from her involvement in system design work, and noted the importance of managing expectations regarding which features would ultimately be delivered. She also queried the extent to which wave allocation could be influenced and reflected on the balance between early adoption benefits and organisational capacity constraints. JOB confirmed that wave allocation was expected to be nationally determined with limited flexibility, and acknowledged the need to consider alignment with broader organisational change capacity.

The Committee took **assurance** on the preparatory work underway to support organisational readiness for the Future Workforce Solution.

Governance and Accountability	
PODC 8/2026.04.16	**Bi-Annual Corporate Policies Update**
LB introduced the Bi-Annual Corporate Policies report which provided an overview of the current status of Corporate Policies within the Committee's remit. LB noted that at the time of reporting 14 policies were out of date, which represented approximately 31% of the total policies. 10 of these out of date policies were All-Wales policies and therefore extant. She advised that detailed updates were provided in the accompanying paper, which outlined the status of each policy and the actions underway to progress review and approval. LB also highlighted that four policies were currently in development and expected to be brought to the July Committee meeting for approval. She explained that in some cases progress had been dependent on consultation and feedback through the Local Partnership Forum. LB confirmed that all of the out of review date policies were assessed as low risk, and that appropriate interim controls remained in place while these policies were being updated. The Committee took **assurance** on the prioritisation and progress being made to review policies, procedures and other written control documents within the remit of the Committee.	
PODC 9/2026.04.16	**Policies for Approval**
The Regulated Healthcare Professionals Policy and Procedure was presented to the Committee for approval. AG advised that this policy was required for organisations employing regulated healthcare professionals, to ensure appropriate professional registration and fitness to practise arrangements were in place to protect the public and service users. AG explained that the policy review focused on a small number of updates, and that these updates included strengthening references to digitalisation and information governance, and clarifying arrangements for dual registration. She confirmed that the policy continued to provide assurance that staff who were required to hold professional registration for their role did so appropriately. CB advised that the policy had been reviewed and considered through Executive level governance arrangements, and confirmed that she and medical colleagues were content with the revisions made. The Committee **approved** the Regulated Healthcare Professionals Policy and procedure.	
PODC 10/2026.04.16	**Ratification of Chairs Action**
LB advised that a Chair's Actions had been taken since the last meeting to approve two All Wales policies to enable their timely implementation within required timescales. The two policies approved via Chair's Action were: • All-Wales Improving Performance at Work Policy • All-Wales Disciplinary Policy LB explained that both policies were subject to tight deadlines for implementation (1 April 2026) and that, due to timing of consultation and approval processes, it had not been possible to bring	

them to Committee for approval in advance. The policies had therefore been progressed through the appropriate internal governance routes, including consultation and Leadership Team consideration, before being approved via Chair's Action to avoid delay to implementation and ensure organisational compliance. The Committee: • **Noted** the occasion where a Chairs Action was taken; • **Ratified** the approval of the adoption of the All-Wales Improving Performance at Work Policy and the All-Wales Disciplinary Policy. • Took **assurance** that the action was taken in accordance with Section 8 of the Standing Orders.

For Information	
PODC 14/2026.04.16	**Items to Note**
PODC 14.1/2026.04.16	**Performance and Insights Report - Workforce Extract**
The Committee **noted** the Insight report workforce extract for information.	
PODC 14.2/ 2026.04.16	**Audit Recommendations Tracker Update**
The Committee **noted** the extract from the Audit Recommendation Tracker report that was presented to the Audit Committee in March 2026. LB confirmed that there were no significant issues requiring escalation.	
PODC 14.4/ 2026.04.16	**Committee Workplan**
LB presented the Committee Work Plan, and advised that there were no significant changes since the previous version was circulated. She highlighted one update related to Welsh language reporting, and explained that two planned reports (the "More Than Words" report and the Welsh Language Annual Report) would be merged into a single combined report due to alignment of timescales. LB advised that this change was intended to streamline reporting, and would not reduce the level of assurance provided.	
PODC 12/ 2026.04.16	**NHS Performance and Improvement Business Bi-Annual Assurance Report**
VT presented the NHS Performance and Improvement Bi-Annual Assurance Report and outlined its purpose to provide assurance to the Committee on People governance requirements for Equality, Diversity and Inclusion (EDI) and Welsh language, as specified in the assurance schedule. VT highlighted key points from the report: • EDI considerations were embedded across organisational processes and informed by workforce data, with actions in place to address identified disclosure gaps. • Welsh language compliance remained high overall. • No raising concerns cases had been reported within the last six months. • Workforce planning activity continued to support future operating models through engagement.	

CJ sought clarification on whether the absence of raising concerns cases should be viewed as positive assurance or whether there was a risk that issues were not being raised. VT confirmed that the report did not indicate an absence of grievances overall, but rather that concerns raised had been managed appropriately through established processes. She advised that there was no evidence to indicate systemic issues with raising or handling concerns.

CJ thanked VT for the update.

The Committee took **assurance** that effective arrangements were in place for related processes for the period 1 September 2025 – 31 March 2026:

Equality, Diversity and Inclusion

- Took **assurance** that there were effective arrangements in place to ensure compliance with Equality, Diversity and Inclusion requirements

Welsh Language

- Took **assurance** that there were effective arrangements in place to ensure compliance with Welsh Language requirements.
- Took **assurance** that any areas of non-compliance were being appropriately managed.

For the period 1 April 2025 – 31 March 2026:

Raising Concerns Process

- Took **assurance** that there were effective arrangements in place to ensure compliance with the raising concerns process.

Workforce planning

- Took **assurance** that there were effective arrangements in place to ensure workforce planning was undertaken correctly and accurately.

Grievances (Formal requests for resolution)

- Took **assurance** that there were effective arrangements in place to ensure that grievances were undertaken correctly and accurately.

PODC 16/2026.04.16	**Closing Administration**

CJ thanked everyone for their contributions and closed the meeting.

The Committee was asked to e-mail feedback on the meeting to the Board Business Unit.

Date of next Committee meeting: 16 July 2026

The meeting closed at 12:50