

**Confirmed Minutes of the Public Health Wales
People and Organisational Development Committee Meeting
16 July 2025 at 12:30, in 3.3 CQ2 and via Microsoft Teams**

Present:		
Kate Young	(KY)	Committee Chair and Non-Executive Director (Third Sector)
Pippa Britton	(PB)	Chair
Clare Jenkins	(CJ)	Non-Executive Director and Vice Chair of the Board
Tamsin Ramasut	(TR)	Non-Executive Director (Equality and Diversity)
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.
Karen Fitzgibbon	(KF)	Head of People and OD Operations (for item 3)
Danielle Gething	(DG)	Head of Risk Management (for items 4 and 5)
Liz Heath	(LH)	Staff side representative
Sian Jones	(SJ)	Welsh Language Manager (for item 7)
Neil Lewis	(NL)	Director of People and Organisational Development
Joe O'Brien	(JOB)	Systems Manager (for item 3)
Paul Veysey	(PV)	Board Secretary and Head of Board Business Unit
Brett Wrightbrook	(BW)	Wellbeing and Engagement Manager (for item 2)
Apologies		
Tracey Cooper	(TC)	Chief Executive
Lucy Day	(LD)	Business Manager
Stuart Silcox	(SS)	Assistant Director of Integrated Governance
Secretariat		
Ffion Lloyd	(FL)	Board Support Officer
The meeting commenced at 12:30		

PODC 1/2025.07.16	Welcome and Apologies for Absence
<p>KY 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 14 October 2025.</p> <p>The apologies for absence received were noted.</p>	
PODC 1.1/2025.07.16	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/ 2025.07.16	Minutes, Action Log and Matters Arising of meeting (09 July 2024)
<p>The Committee approved the minutes of the meeting of 29 April 2025.</p> <p>The Committee approved the changes to the Action Log.</p>	
In Focus / Deep Dive	
PODC 2/ 2025.07.16	Culture and Engagement (Including the 2024 Staff Survey Results)
<p>RA and BW presented a deep dive into culture and staff engagement activity within Public Health Wales between August 2024 and July 2025, as well as insights into the results of the 2024 staff survey.</p> <p>RA highlighted the culture and staff engagement work undertaken within Public Health Wales:</p> <ul style="list-style-type: none"> • Culture workshops carried out at the 2025 Staff Conferences to highlight the impact everybody can have on culture. • Work on the Integrated Action Plan, which had been approved by the Business Executive Team in November 2024. <ul style="list-style-type: none"> ○ The plan focused on three key areas identified for improvement: <ul style="list-style-type: none"> ▪ Culture and Leadership ▪ Health and Wellbeing ▪ Professional Growth and Improvement ○ The Plan would contribute to the mitigation of the new Strategic Risk 2 around organisational health. ○ Each of the six sub-theme leads had developed a strategic outcome statement which set out the aims of each theme. The statements were used to identify actions that would enable the progress of the action plan to be tracked. • A Culture Pulse survey was currently open, to reassess current culture in priority areas. The closure date for the survey had been extended due to a low response rate. 	

- The development of a strategic approach to employee engagement, which included identified actions to track progress. The first report on this was due in September 2025 and would include the results of the Culture Pulse survey.
- The development of additional cultural advocates through the advocates programme and workshops, with 46 advocates across all Directorates. A Cultural Advocates Community of Practice was due to be launched to maximise support.
- The development of the cultural narrative following feedback from the Business Executive Team. It would receive further review after the pulse survey results had been received. This work would be incorporated into recruitment communications work, and would lead into an Integrated Medium Term Plan (IMTP) commitment for 2026.
- The identified next steps for this work, which included the launch of the 2025 staff survey in September 2025, and progress on the IMTP commitment to develop an employee experience roadmap.

BW highlighted key insights from the staff survey results:

- An increase in engagement work across the organisation, such as additional site visits, attendance at Directorate meetings, and engagement with staff networks.
- The 2024 staff survey had a response rate of 60.5%, which was an increase across all areas of the organisation, and the overall engagement index was 74.4%.
- Areas that had been directly compared with the 2023 survey results. Answers to questions around burnout and Learning and Development showed improvement, but scores had reduced around feeling able to speak up about issues.
- The identified key areas of learning, such as the need for clear reporting of results and the development of a staff survey Standard Operating Procedure.
- The identified risks of carrying out an annual staff survey, which included survey fatigue, staff perception of inaction due to survey timescales, and the capacity required to conduct the survey.

The Committee discussed the following:

- Whether other areas been considered for in-person engagement alongside laboratory visits. BW noted that additional laboratory sites would be considered within the current capacity. He noted that the current work was on a focused approach for Health Protection and Screening to improve response rates in this area in particular.
- Whether more information was available on the identified areas for improvement from the survey results and Integrated Action Plan. RA agreed to provide a link to a breakdown of the survey results that could provide greater detail. NL noted that work would be undertaken with Executive Directors and People Business Partners to identify further areas for improvement at organisational and Directorate levels.
- How to best address the risk of survey fatigue for future staff surveys. The Committee discussed a proposal from Communications around the development of a briefing pack to share throughout the organisation, which would inform staff on the work and actions taken to address concerns raised from previous surveys. NL also noted the intention to continue to work with staff networks and Trade Unions to ensure progress was fed back to staff.

KY thanked all staff involved for their continued work in the development and progression of culture and engagement within Public Health Wales.

The Committee took assurance that progress continues with Culture and Engagement Activity, and how we create and sustain the conditions in which we are all able to offer more of our capability and potential.

**PODC 3/
2025.07.16**

Sickness Absence (including data quality improvements)

KF and JOB presented an overview of sickness absence data, including mental ill health-related absence and uncategorised absence, for the period 1 June 2024 to 31 May 2025, in response to a request from the Board.

NL noted that this item was brought to the Committee following a Board request to explore sickness absence related to mental health issues, including stress and anxiety.

It was confirmed that the October Committee meeting will include a more detailed presentation and in-depth discussion, informed by the findings of an Internal Audit which is currently underway.

KF and JOB highlighted key points for discussion:

Overall Sickness Absence:

- 1 June 2024 to 31 May 2025: For the 12-month period ending 31 May 2025, sickness absence was 4.73% FTE. This is above the Welsh Government target of 3.25%, but below the NHS Wales average of 6.2%.
- May 2025 monthly rate: 4.14% FTE.

Mental Health Absence (S10 – Stress, Anxiety, Depression):

- 780 days lost in May 2025 alone.
- Accounted for 40% of total sickness absence over the 12-month period.
- 61.22% of S10 absences lacked a Level 2 reason.
- 4.35% of S10 absences were recorded as work-related; 79.49% left this field blank.

Uncategorised Absence (S98 and S99):

- Combined total of 3,505.82 FTE days lost, representing 10.25% of all sickness absence.
- May obscure trends or systemic issues, limiting the organisation's ability to respond effectively to workforce wellbeing needs.

KF and JOB noted ongoing work to improve data quality, including manager engagement, ESR system limitations, and psychological safety concerns affecting disclosure.

KF and JOB highlighted efforts to support long-term sickness cases and improve data completeness.

The Committee discussed the following:

- Whether there were mechanisms in place to support the recording of staff sickness where a manager was not the point of contact. KF agreed to take this to confirm out of meeting.
- Whether short and long-term sickness cases were recorded differently within the unknown category. JOB confirmed that this would be picked up as part of the ongoing work and internal audit.
- Whether conversations had been had with Trade Unions on their insights into sickness absence. LH noted that Trade Unions had been consulted on this issue, and that it would be discussed as part of the agenda of the next Staff Side Committee. LH also noted potential issues with staff being experiencing difficulties accessing a subsequent phased return to work after the first instance, which could result in a lack of supportive arrangement for that individual.
- What interventions were in place to address areas of high stress/sickness levels. KF agreed to take this question away and share examples as part of the full report.
- Whether any analysis been undertaken on whether the 'unknown' reason code was used by staff who had been given proxy access. JOB agreed to review this, and noted that an ESR transformation programme was underway, with a replacement system in progress which would aim to provide a more user-friendly experience for managers and staff.
- What actions were being explored/undertaken to address the concern of staff burnout. KF highlighted that the Burnout Support Hub group had been set up for staff support and information, and that this area would be addressed as part of the full report.

The Committee acknowledged the importance of continued focus on data quality and mental health-related absence.

The Committee will receive a further, more detailed presentation and discussion at the October meeting informed by Internal Audit findings and further analysis, and would address the queries and areas identified for further review.

Action: NL

KY thanked KF and JOB for the update, and the Committee took **assurance** on the management of sickness absence rates and trends for the period 1 June 2024 to 31 May 2025.

Managing Risk

**PODC 4/
 2025.07.16**

Strategic Risk Register (Risk 2)

DG provided an update on the management position of Strategic Risk 2.

CB noted Strategic Risk 2 was the new draft risk within the remit of the People and Organisational Development Committee, and thanked RA and DG for their work in its development. This new risk would be submitted to the Board for approval in July 2025.



Strategic Risk 2 covered the risk that the organisation could experience poor organisational health, which listed five factors that may result in a poor organisational culture that may affect capability and capacity to perform and deliver.

DG noted that the wording of this risk had been discussed at strategic Business Executive Team meetings, and at Board Development sessions throughout 2025. This was given final approval in April 2025, and a strategic risk transition plan was in place to ensure appropriate governance across the transition phase until the risk was presented to the Board at the 31 July meeting.

DG highlighted that the revised Strategic Risk template had been presented to the Quality, Safety and Improvement Committee and the Knowledge, Research and Information Committee, and had been well received across the organisation.

NL noted that following further discussions with the Executive Team, some updates and changes were expected before submission of the final paper to Board

The Committee noted a change in wording within the risk around organisational culture, and questioned whether People and Organisational Development and the Business Executive Team had a clear vision of ideal organisational culture. NL commented that there was clarity on the actions and areas of focus alongside the work on culture and the Long Term Strategy, and that this point would be reflected on throughout this work.

KY thanked DG for the update.

The Committee **considered** the Strategic Risk and took **assurance** on the management of Strategic Risks within the organisation, within the remit of the Committee.

**PODC 5/
2025.07.16**

Corporate Risk Register

SS provided an update on the Corporate Risk register and highlighted key points from the report:

- 11 risks currently on the register, with two within the remit of this Committee.
- Risk 1541 (risk of harm to service users and employees due to absence of regular disclosure and barring) – The management for this risk included the draft of a Disclosure and Barring Service (DBS) Policy in partnership with Trade Unions that would be issued for consultation. Additional information on the DBS update service requirements would be added to the existing Safeguarding Policy.
- Risk 1596 (lack of capacity/resources to deliver long-term plan) – This risk was expected to be closed following completion of the current actions and a deep dive discussion at the 3 July Leadership Team meeting. RA noted that changes in causal factors and the re-articulation of the previous related strategic risk in the new strategic risk 2, it was felt that this encompassed capacity to deliver the strategic priorities.

KY gave thanks, and praised the format and clarity of the risk reports.

The Committee took **assurance** on the management of Corporate Risks within the organisation, within the remit of the Committee.

Equalities and Diversity	
PODC 6/ 2025.07.16	Strategic Equalities Plan Priorities - Progress Update
<p>RA provided an update on the progress made to date towards the Strategic Equality Priorities since the publication of the Strategic Priority Plan in 2024. RA noted that this would soon include and support the forthcoming Disabled People’s Rights Plan.</p> <p>RA highlighted key points from the report:</p> <ul style="list-style-type: none"> • The publication of the Public Health Wales Carer’s policy. • The re-launch of the Men’s Network. • Public Health Wales was ranked 31st in the LGBTQ+ Inclusive Employers Index produced by Stonewall. This was an increase from 64th in 2022. • The launch of a Neuro-Diversity Subgroup as part of the Porffor Network. • Public Health Wales had achieved Living Wage Employer accreditation. <p>KY thanked RA for the update, and thanked all staff involved for their contributions.</p> <p>The Committee discussed the following points:</p> <ul style="list-style-type: none"> • Whether a complaint system was in place to identify problems and action them. CB noted that complaints were recorded on Datix under sub-categorisations that would allow for issues to be identified to Directorate or department level. Thematic issues could then be brought to the relevant Directorate / Committee, or discussed as part of the Quarterly Integrated Quality Governance Report presented to the Quality, Safety and Improvement Committee. • Whether the Living Wage accreditation ensured that subcontracted staff were also paid minimum living wage. RA agreed to take this question out of meeting and confirm that this was part of the accreditation requirements. • LH noted the intention of the Staff Side Network to collate data from Trade Union representatives on cases affected by equality factors. RA noted Public Health Wales’s work to collect equality data, and that collaboration on this data would allow for identification on areas for improvement. • Whether any work had been undertaken on job progression routes to understand the barriers for people from specific groups. RA noted the support available through the Staff Networks, such as the launch of a mentoring scheme by the Women’s Network. This also included the increase of representation in leadership and management training, and work with organisations such as the Ethnic Minorities and Youth Support Team (EYST) to reach specific communities. RA also confirmed that work with communities involved ensuring that information and opportunities were accessible to people from those communities as part of the plan’s objectives. <p>NL praised work of networks in relation to supporting Equalities and Diversity within Public Health Wales, and their positive influence on the direction of policy within the development process.</p> <p>The Committee took assurance on progress made with the Strategic Equality Plan 2024-2028 objectives.</p>	

PODC 7/ 2025.07.16	Welsh Language Annual Report (2024-25)
<p>RA provided an overview of the 2024-25 Welsh Language Annual Progress Report, which looked to monitor Public Health Wales’s progress with complying with the Welsh Language Standards, celebrate successes and identify targets. This report was published annually on the Public Health Wales website with the Welsh Language Commissioner informed.</p> <p>RA noted the work of the Welsh Language Network, which included an in-person St David’s Day celebration at the Capital Quarter 2 site.</p> <p>RA highlighted key points from the report:</p> <ul style="list-style-type: none"> • Improvements to the Welsh Translation process within Public Health Wales, which included the creation of a centralised translation portal for all translation requests. This had improved access to, and the quality of, Welsh translations and reduced costs. • Capacity and capability continued to be a challenge, however learning opportunities were available for staff to gain necessary skills as part of workforce planning activity. • SJ noted that the report highlighted the work across Public Health Wales to both meet legislation and to embed the use of Welsh within the organisation. <p>NL thanked SJ and the Welsh Language Team for their successes in relation to the use of the Welsh Language within Public Health Wales, and the Committee echoed this praising the teams work to drive forward improvements.</p> <p>The Committee approved Public Health Wales’s Welsh Language Standards Annual Report 2024-2025.</p>	
Partnerships and Engagement	
PODC 8/2025.07.16	Trade Union Partnership Working Forums - Update
<p>NL provided an update on the progress made with Trade Union partnership working for the period 1 April 2025 to 30 June 2025.</p> <p>NL highlighted the significant and positive work undertaken by the Joint Medical and Dental Negotiating Committee and the Local Partnership Forum. NL noted that a key next step would be to produce a paper which would provide a reviewed and updated Local Partnership Forum Terms of Reference for approval which was due to be submitted to Board for approval in July 2025..</p> <p>KY thanked NL for the update, and the Committee took assurance on the Trade Union Partnership Working arrangements for this period outlined within the report.</p>	
Workforce and Workforce Planning	
PODC 9/2025.07.16	Annual Registration Audit 2024-25

CB provided an overview of the Annual Registration Audit report for 2024-25, which provided assurance that all registrants across Public Health Wales were appropriately registered with the relevant body.

CB highlighted that whilst each regulatory body had a different approach to the provision of assurance in this space, the report showed 100% assurance that all staff were appropriately registered for their fitness to practise in their chosen profession with Public Health Wales.

MB noted that methodology improvements identified in the 2023-24 report had been carried forward into this report.

KY thanked CB/MB for the update, and the Committee took **assurance** that all regulated healthcare professionals in PHW have appropriate and up-to-date registration with their Regulatory Bodies during 2024/25.

For Information

**PODC
10/2025.07.16**

Items to Note

**PODC 10.1/
2025.07.16**

Performance and Insights Report - Workforce Extract

The Committee **noted** the Insight report workforce extract for information.

**PODC 10.2/
2025.07.16**

Audit Action Log Progress Update

The Audit Action Log papers were noted for information.

**PODC 10.3/
2025.07.16**

Committee Workplan

The workplan was noted for information.

**PODC
12/2025.07.16**

Closing Administration

KY thanked the members of the Committee for their input and contributions to the work of the Committee throughout her tenure as Chair, and welcomed TR as Committee Chair going forward. NL thanked KY for her support and collaboration as Chair with him and his team.

KY 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: 14 October 2025.

The meeting closed at 14:55