

Approved 16 July 2025

Minutes of the ICB People and Culture Committee
Held on Wednesday, 16 April 2025 at 1.00 pm to 3.30 pm
In the Lune Meeting Room, ICB Offices, County Hall, Preston, PR1 8XB

<u>Members</u>		
Jane O'Brien	Chair/ICB Non-Executive Member	LSC ICB
Roy Fisher	Non-Executive Member	LSC ICB
Debbie Eyitayo	Chief People Officer	LSC ICB
<u>Regular Participants</u>		
Stephen Sandford	Chief Allied Health Professional	LSC ICB
Andrea Anderson	Director of People and Place	LSC ICB
Ruth Keeler	Associate Director	LSC ICB
Angela Allen	Lancashire & South Cumbria Voluntary, Community, Faith and Social Enterprise (VCFSE)	VCFSE
Sam Doherty	Staff Side Representative	Unison NW
Joel Burchett	Local Authority Representative	Westmorland & Furness Council
<u>Attendees</u>		
Fiona Ball	Workforce Training & Education Transformation Lead	NHS E
Asim Patel	Chief Digital Officer	LSC ICB
Sarah Mattocks	Head of Governance	LSC ICB
Claire Moore	Head of Risk, Assurance and Delivery	LSC ICB
Garth Hodgkinson (for item 6 only)	BWD CVS	BWD CVS
Martin Hartley-Smith (for item 6 only)	Spring North	Spring North
Clare Carter-Jones (Observing)	Deputy Director – National Recovery Support Team	NHS England
Sandra Lishman (Minutes)	Committee and Governance Officer	LSC ICB

Item No	Item	Action
01 25/26	<p><u>Welcome, introductions and Chair's Remarks</u></p> <p>The Chair welcomed all to the meeting of the People and Culture Committee, including:-</p> <ul style="list-style-type: none"> - Roy Fisher as non-executive director - A Patel as the new Freedom to Speak Up lead - Clare Carter-Jones from the National Recovery Support Team, NHS England, attending via MS Teams to observe the meeting - Sam Doherty, Unison North-West, as the staff side representative going forward, in place of Becky Lumberg. <p>Members noted that Garth Hodgkinson and Martin Hartley-Smith from the voluntary sector would join the meeting for item 6, the volunteering for health programme.</p> <p>Introductions were made. It was explained that following a governance review recently carried out for all ICB committees, the terms of reference would be discussed at item 9 at this meeting. The remit of the People and Culture Committee included research and innovation and a focus on culture. Members were asked to be mindful</p>	

	<p>that this committee was an assurance committee to the ICB Board.</p> <p>The Chair continued that since the last meeting, national announcements had huge implications on the workforce, which would be picked up on the agenda.</p>	
02 25/26	<p><u>Apologies for Absence / Quoracy of meeting</u></p> <p>Apologies for absence had been received from Prof Sarah O'Brien, Chris Cutts, Joe Hannett, Claire Richardson, Aisha Choudhary, Prof Andy Knox and Cath Whalley. Going forward, J Burchett would represent local authorities at this meeting as a regular participant, in place of Cath Whalley.</p> <p>The People and Culture Sub-Committee had now been established and met for the first time on 10 April 2025, providing a forum for a diverse range of areas to report into this committee. The Chair reported that due to this, the ICB Chair had agreed that the role of nominated provider non-executive be removed from the People and Culture Committee terms of reference and quoracy reduced to a minimum of 3 members, which would make the meeting today quorate.</p>	
03 25/26	<p><u>Declarations of Interest</u></p> <p>(a) People Board Register of Interests - Noted.</p> <p>RESOLVED: That there were no declarations of interest relating to the items on the agenda. Members were asked that if at any point during the meeting a conflict arose, to declare at that time.</p>	
04 25/26	<p>(a) <u>Minutes of the meeting held on 29 January 2025 and matters arising</u></p> <p>RESOLVED: That the minutes of the meeting held on 29 January 2025 be approved as a correct record.</p> <p>(b) <u>Action Log</u></p> <p>Ref 3 Oversight and Assurance Dashboard – Superseded with the proposed new People Directorate Governance structure on today's agenda. Agreed to close.</p> <p>Ref 4 Workforce insights, planning and transformation update from subgroup – F Ball updated that the HRD group had fed back that the work on staff passports had been delayed and was currently in its testing phase. The initial roll out was to focus on junior doctors and this was starting imminently. This was aligned with the people programme for Lancashire and South Cumbria and the business case would be submitted in May 2025. The national digital staff passport programme had now been de-prioritised, however, there were other aspects were enabling movement to continue in this area for Lancashire and South Cumbria. Agreed to close.</p> <p>Ref 6 People and Culture Sub-Committee – D Eytayo reported that the People and Culture Sub-Committee met for the first time on 10 April 2025. Work had taken place with the governance team around refining the terms of reference and membership. Meetings were scheduled to take place bi-monthly. The People and Culture Health and Care Sub-Committee's first meeting is scheduled to take place on 24 April 2025, governance was currently being worked through. Both sub-committees would feed into this committee, as appropriate. The Chair acknowledged that previous discussion highlighted that the committee oversee these two broad areas of work - system wide work spanning across the voluntary sector, local authorities and the wider system, as well as internally within the ICB. Agreed to</p>	

	<p>close.</p> <p><u>Committee to committee actions</u></p> <p>Ref AC/51/24/25 – Review the rate of mandatory training compliance and how could this be increased – A Anderson confirmed that the Mandatory Training Policy, had been reviewed and agreed by the executive team, as part of a wider paper. Agreed to close.</p>	
05 25/26	<p><u>Risk Management Report</u></p> <p>The Chair reminded members that the risk held on the Board Assurance Framework (BAF) in relation to the business of this committee is to make Lancashire and South Cumbria an attractive and desirable option for existing and potential employees, this has the potential to impact on the achievement of the ICB's strategic objectives.</p> <p>C Moore presented the risk management report, updating activity undertaken during quarter 4 for risks aligned to the People and Culture Committee. It was highlighted that there were no risks held on the operational risk register for this committee, however, it was acknowledged that some risks crossed over committees. Since the last committee meeting, the risk on the BAF had been reviewed. The report set out where gaps in controls had been closed, controls, new actions and a review of these, plus a summary provided by the risk owner. A high level summary dashboard of other ICB strategic risks and operational risks was included within the report, for information.</p> <p>A Patel flagged that there had been some discussion around the impact of nursing placements in some of the providers and it was felt this could be due to not having the right number of nursing places. F Ball reported that this had also been seen for the advanced practice applications cohort, which had been highlighted to NHS England. R Keeler updated that the apprenticeship levy stood at approximately £18m and is externally recruited to, Concern was highlighted around the work being undertaken on the reform and whether this would impact the levy being spent. Usually current staff would be upskilled, however, there was pressure around whether current staff would have the appetite. Due to the requirement to reduce workforce numbers, some providers were struggling with the direction to appoint people on apprenticeships, proving a risk. It was suggested that the levy could be transferred to the voluntary, primary care sector or social care sector. D Eyitayo described that the People Plan alluded to not losing sight of the future; work would take place with the voluntary sector around the requirements in relation to the new 10-year plan.</p> <p>Members agreed that this was the strategic objective to bring in talent, retain staff, etc, to Lancashire and South Cumbria and it was confirmed that this fits with the local authority.</p> <p>RESOLVED: That the committee:-</p> <ul style="list-style-type: none"> - Note the contents of the report - Note the risk management activity undertaken during the Quarter 4 reporting period - Review the risk held on the BAF relating to the business of the People and Culture Committee and the actions taken to mitigate the risk - Note for information the high-level summary dashboard of all risks currently held on the BAF and ORR which meet the threshold for corporate oversight. 	

	G Hodgkinson and Martin Hartley-Smith joined the meeting	
06 25/26	<p><u>Volunteering for Health Programme – Spring North</u></p> <p>G Hodgkinson and M Hartley-Smith spoke to a presentation around the volunteering for health programme, a 3-year programme offering tailored support and aiming to develop a volunteering infrastructure. The proposal had been brought together by partners in Lancashire and South Cumbria, together with Spring North, in July 2024. The plan had now been approved, with just over 2 years to implement. It was explained to improve patient experience and outcomes, the programme looks at how volunteering can complement what is already being delivered, creating an enabling environment, recruitment and induction process. Currently, volunteer centres had different software and approaches, and this programme would combine those into one pathway. An action plan had been created, evidencing the approach and the aims within the action plan contribute to the outcomes. The programme looks to an improved governance structure, with volunteer partnerships, plus a system wide coordination group.</p> <p>An example of similar work was the Cancer Alliance health champions; Spring North had been working with health champions for a number of years, along with population health, etc, around volunteer champions in communities. Evidence was required that this worked and alongside of this was recruitment and real live programmes that were being delivered across the system. The programme would look at creating an ambassador/champion model across Lancashire and South Cumbria and a training programme for volunteer managers, with quality standards across the system.</p> <p>The programme aligns to the workforce development strategy and a conversation was required around how this could be embedded going forward, bringing the community element to the NHS and local authorities.</p> <p>A Allen added that Lancashire and South Cumbria had been awarded the programme funding due to the strong partnership between the hospitals, charity and sector.</p> <p>R Keeler, speaking as ICB lead on careers, education and patient participation, suggested a conversation in terms of careers education and added that the reasons why people volunteer need to be recognised and validated. It was felt that discussions could be progressed further through the new System People and Culture group. S Sandford showed interest in productivity gains in terms of medication and patients leaving hospital earlier, highlighting that this linked with the transformation agenda in the system.</p> <p>M Hartley-Smith continued that the programme was also around being able to be better connected and that conversions and connections would be picked up outside of this meeting.</p> <p>A Patel expressed that individual domains should be looked at in order to gain real benefits, as all areas had different models. Volunteering services could be embedded within services with people with lived experience.</p> <p>M Hartley-Smith acknowledged that there were good case studies in children and young people and diabetes, where champions had used the delivery models and these had worked well. Champion work should get the right infrastructure, which would enable a sustained model.</p> <p>In response to a member question, G Hodgkinson clarified that formal volunteering was when people were volunteering for an organisation, informal volunteers were considered as carers. To improve understanding, a wider survey of the sector was</p>	

	<p>planned to be undertaken and questions would be related to this area. Spring North would help create dashboards, holding information across the sector. Outside of this meeting, M Hartley-Smith and F Ball would discuss the dashboards and ensure metrics were understood.</p> <p>Stress tests and risk assessments would be rolled out around what the community could do and what the risks were. Impact reports had been developed showing return and investment and a framework for reporting had been developed, linked with commissioning teams across the sector. It was acknowledged that there were differences in quality standards of volunteering and staff members across the system, which would be looked at.</p> <p>J Burchett felt this to be a great opportunity from a social care perspective and if aligned, would have big impacts in terms of admission avoidance, etc.</p> <p>The Chair thanked M Hartley-Smith and G Hodgkinson for the presentation and discussion.</p> <p>RESOLVED: That the People and Culture Committee note the presentation.</p>	
07 25/26	<p><u>NHS England Government Announcement</u></p> <p>D Eytayo verbally reported on the government announcement requesting to reduce programme and running costs by 50%, moving the ICB from a national average of £32.19 to £18.96 per head of population. The ICB has shared known detail with staff via a series of briefing sessions. The ICB's plan of how the reduction would be made must be submitted by the end of May 2025, for delivery by the end of quarter 3.</p> <p>A strategic commissioning model has been worked on over the last few months, putting the ICB to be in a good position. Work would now be reviewed with PA Consulting through the lens of the 50% reduction request. Function sharing with organisations across the system had been discussed and an ICB working group was looking at a model. To meet the request, the ICB had looked at strategic commissioning and a Board level task and finish group had been set up, led by the Chair and members of the executive team. The task and finish group would oversee the reconfiguration of the organisation below Board level and the executive team would look at how to quickly mobilise and consider the needs of the workforce, developing a plan for the ICB going forward. To date, no detail had been received on a national redundancy scheme. Regular conversations were being held with staff and trade union colleagues. A high level plan has been drafted up to quarter 3; this makes a number of assumptions and would be reported to the ICB Board at a private meeting.</p> <p>Support for staff has been put in place with regular virtual drop-in sessions, a regular newsletter, and health, wellbeing and resilience support and coaching for managers had been stepped up. Outreach support for staff was being looked at, working with other ICBs in the North-West. Trade union meetings had also been arranged.</p> <p>The Chair reflected that plans were in place to manage this, particularly looking after the health and wellbeing of staff. Leadership and management forums had been set up for people to discuss and collect information, which informs the support offered to staff.</p> <p>D Eytayo reminded members that the ICB was in NOF4 and must continue with the improvement work. The organisation values had recently been launched and there was a commitment from the leadership team to ensure decision making aligned with culture, values and the behaviour standards.</p>	

	<p>The committee would be regularly updated around the plan and health, wellbeing and support to staff.</p> <p>RESOLVED: That the People and Culture Committee note the update on the government announcement to reduce programme and running costs.</p>	
08 25/26	<p><u>NHS Operational Planning 2025/26 – Workforce</u></p> <p>From the meeting report previously circulated advising the committee of the delivery achieved in 2024/25 and processes to support 2025/26 delivery, F Ball provided the following highlights:-</p> <ul style="list-style-type: none"> - Operational plans had not always been triangulated to workforce plans, however, improvement had been made year-on-year - The position for 2024/25 in the meeting report reflected acute providers, the mental health trust and ambulance trust. Data for the final month of the year would be reported to the committee at its next meeting - At month 11, the total workforce, bank and agency were above the planned position, and agency usage was below - Acute and mental health provider 2025/26 operational plans had been submitted to NHS England on 27 March 2025, subsequently the process of KLOE check and challenge with NHS England was taking place. There was opportunity to refine and resubmit plans by 30 April 2025, working towards the NHS England final deadline - Limited adjustments within the workforce were expected and members were asked to note that there may be slight movements in terms of the level of staff reduction. This was not expected to be substantive - A Workforce Transformation and Efficiencies Group was in the process of being set up, which would oversee the support and receipt of delivery - Oversight would contain weekly and bi-monthly monitoring processes, feed into the assurance processes and feed into this committee - There continued to be a difference between workforce and finance figures. Further work would be undertaken to ensure alignment with detailed narrative to explain differences - NHS England initial feedback intimated that they were assured the plans were credible, however, they had requested focus on delivery. The plans had not been selected for further conversations in check and challenge sessions. Accreditation in progress had been received for some of the controls in 2024/25 - 2025/26 planned reduction schemes must meet tests ensuring credibility, to ensure a level of assurance was required. There was now much tighter monitoring to ensure delivery - Oversight of the delivery of the 2025/26 NHS operational plans for workforce would be managed by the newly established Workforce Transformation and Efficiencies Group. In terms of governance, new structures would be captured to ensure there was triangulation into other ICB committees if necessary. <p>RESOLVED: That the People and Culture Committee note the report.</p>	

<p>09 25/26</p>	<p><u>Committee Terms of Reference (ToR) and Business Plan 2025/26</u></p> <p>S Mattocks reported that following a full review of ICB governance and looking at how responsibilities are assured through committees to the ICB Board, the ToR for the People and Culture Committee and proposed business plan for 2025/26 were presented to the committee. It was noted that the ToR had been approved by the ICB Board at its meeting held on 19 March 2025, also agreeing that the Chair had the ability to amend the document once presented to committees. Since the ToR had been approved, the ICB Chair had agreed the following amendments:-</p> <ul style="list-style-type: none"> - To remove the provider non-executive role from the ToR, as the sub-committee would capture diverse areas and this was an assurance committee where providers are represented - Due to there being one less member on the committee, quoracy would be reduced from 4 to 3 members - The ICB Director of OD and Education had been removed as a regular participant, replacing with the role of Associate Director of OD and Education. <p>The business plan would drive the business of the committee and had been directly mapped against the committee ToR. It was proposed that this committee meet quarterly, with alternate meetings being in person and via MS Teams.</p> <p>Members agreed that the Chief Digital Officer should be added as a regular participant as the committee is key for the Freedom to Speak Up report.</p> <p>R Keeler expressed that the values and behaviours reset would be discussed at today's meeting which would conclude this item on the business plan, recognising the fundamental work in terms of organisational change and embedding value; this had been a significant area of concern. R Keeler would meet with D Eytayo outside of the meeting to discuss this area further.</p> <p>The ToR and business plan would be updated as agreed.</p> <p>RESOLVED: That the People and Culture Committee:-</p> <ul style="list-style-type: none"> - Note the terms of reference approved by Board on 19 March 2025 and the subsequent amendments approved by the ICB Chair - Approve the proposed committee business plan 2025/26 subject to the discussed amendments - Note the proposal for the committee to alternate between a format of in person and online via MS Teams. 	<p>SM</p>
<p>10 25/26</p>	<p><u>12 Month People Plan</u></p> <p>D Eytayo reminded members that the ICB Board approved the Workforce Strategy in July 2024, since that time work had been undertaken around a 10-year health plan as well as a long-term workforce plan. The draft 12 month ICB People Plan had been circulated to members in advance of the meeting, focussing around 7 priority areas. A system plan was in the process of being developed. Members noted that the draft People Plan had been considered and endorsed at the April People and Culture Sub-Committee meeting.</p> <p>RESOLVED: That the People and Culture Committee approve the People Plan for 2025/26.</p>	
<p>11 25/26</p>	<p><u>Staff Survey Providers and Pulse Survey</u></p> <p>R Keeler presented the staff survey provider and the pulse survey results, asking</p>	

members to be mindful of the imminent staff changes within the system, which would have had significant on staff working organisations. The following points were highlighted:-

- Staff felt they were being supported, well-led and engaged with, being important in times of change
- Where there was specific data, Lancashire and South Cumbria showed an improvement for 5 out of 8 themes over a 3 year period. The remaining 3 themes were 'compassionate and inclusive', 'we have a voice' and 'staff engagement', which remained consistent
- There was no deterioration of themes, however, there were significant areas to focus on
- To be mindful as organisations move into significant reform nationally and across the system, causing strained relationships at work
- People were feeling discriminated against
- Deterioration was seen in the number of staff who thought their day at work passed quickly.

F Ball added that the responses add to insights, asking members to be mindful that we are in different times currently and this would require a different response than in previous years.

Members discussion included:-

- That in relation to the comments on unrealistic time pressures, staff were currently under a time management pressure and consideration needs to be made as to how this affected peoples work and job
- There was little difference between the median and the ICBs figures, however, there had been a lot of changes in the NHS over the last 12 months
- Financial experiences had been the all-consuming issue to date and this ultimately impacted workload
- It was suggested to review the position in 6 months
- Results showed that 47% felt service users was the ICB's top priority and 37% would be happy with the standard of care provided; this was positive compared to other ICBs, however, should be much higher
- There was confusion as relationships at work being strained was low, compared with the increase for the workplace helping with work-life balance.

In response to the points raised in discussion, R Keeler would consider these internally within the ICB. In relation to the specific point around 'staff recommending this to be a place to be cared for', it was recognised that sometimes communication was wrong. The ICB had kept staff informed around the financial challenges prior to the reform announcements and it was thought that some staff perhaps equated this to focus being on finances rather than patient care. Careful consideration would be made to reassure staff that the ICB's promise was to deliver quality care by delivering finances. Some staff had been impacted by constant changes and there may be a lack of clarity for staff in terms of how they function as a team and how their role faces the system.

Work was taking place at team and directorate level around what people were doing within their own areas of work, cross-checking with what the organisation was looking at. Work would continue to be valued and monitored to ensure it was fit for purpose. D Eytayo confirmed that the areas relating to service users and being happy with care provided were of concern for the executive team. The executive team were focused on ensuring that the clinical voice is heard, particularly around service transformation changes and ensuring that quality impact assessments are undertaken. The Chief Nurse and Medical Director are involved in helping to deliver the financial target.

	<p>S Sandford recognised that there would be a lot of nurses from the continuing healthcare team commenting on patient care and quality of care and consideration would be made to a deep dive within the directorate structures to bring out nuisance work. A Patel commented that the largest sector who had responded was nursing staff, highlighting that since the start of the year difficult decisions had been made. Nationally, the ICB was an outlier around financial spend, although nurses would be focused on quality and the legitimacy of getting a service. It was suggested to hold a listening event to understand reasons behind their thoughts.</p> <p>The Chair reflected that it was difficult in communications to get a balance to reduce finances whilst enhancing the quality of care.</p> <p>RESOLVED: That the People and Culture Committee note the staff survey results and be assured that actions from the internal staff surveys have been included in the ICB staff experience improvement plan, managed by the people directorate.</p>	
12 25/26	<p><u>Culture, Values and Behaviours Update – Framework Launch</u></p> <p>Slides had been circulated as part of the meeting paper introducing the values and behaviours framework of the Lancashire and South Cumbria ICB, with the key values compassion, integrity, respect and inclusion. R Keeler highlighted that the framework had been launched and focus was needed to embed this over the next few months, with the use of tool kits. Members were reminded that discussion was held at the last committee meeting around the values, defining what the ICB was working towards and this was laid out in the framework. Work would take place with all teams and directors to develop their team charters. To support people to develop their own reflection of behaviour, leadership style and how this is received and for people to manage their own resilience, a table was included in the slides around self-work and work across the organisation. R Keeler reflected that building culture with others was about relationships and team culture, looking at how behaviours underpin the way we work and at how we ensure we have integrity and respect within those. Next steps included to develop the 'I value...' campaign, supporting the ICB Board in this area with a focused session, and conversations would be held through appraisals and 1:1 sessions with staff.</p> <p>The committee welcomed this impressive, long-awaited piece of work from the team.</p> <p>A Patel raised the importance of how this work is viewed and how it could be taken to the organisation. An internal piece of work would need to be undertaken looking at how the ICB encourages colleagues to challenge when they find themselves in an interaction that is not being played out in the expected manner.</p> <p>J Burchett reported that Westmoreland Council were undertaking a similar process, embedding council values and developing a framework.</p> <p>Members were made aware that a national set of 'respect' videos had been developed around how to respond if someone confides and how do you hold up a mirror and ask 'is it me'. The videos would be included on the ICB intranet and the Business and Sustainability Group had asked for a toolkit to use these with teams.</p> <p>In response to member comments, R Keeler reported that work was underway to embed/take forward the model/framework and she would link with J Burchett to ensure there was consistency with the ICB and council approach. In relation to the toolkit, work had taken place with Andy Knox, ICB Medical Director, and the model being created would give staff support on being empathetic and checking if people</p>	

	<p>were alright or wish to talk, also providing support for people to be able to convey how they feel and to be self-aware both as a leader and member of the team.</p> <p>RESOLVED: That the committee note the update.</p>	
<p>13 25/26</p>	<p><u>Mandatory Training Audit</u></p> <p>A Anderson spoke to a previously circulated report highlighting that a Statutory and Mandatory Training Policy had now been endorsed by the Remuneration Committee. A wider paper had been presented to the executive team around the whole field of training. Recognising the wider system role of this committee, a suite of subject management experts were responsible for validating anyone who undertakes mandatory training elsewhere, along with other system wide work. A national memorandum of understanding had been produced, across all NHS Trusts and the ICB had now signed up for this, along with provider trusts; at this stage, although it would be helpful, there was uncertainty whether this could be used across the wider health and care system.</p> <p>It was confirmed that Oliver McGowan training, produced nationally through NHS England, had received funding. Work was taking place with provider trusts, etc, to roll out training. A system group meets regularly to ensure training is covered across the system.</p> <p>From an ICB perspective, compliance is reported to this committee and sub-committee, and is also highlighted as part of a wider dashboard to senior leaders. Staff and managers are able to have sight of their training compliance on ESR.</p> <p>S Mattocks reported that some months ago, the Quality Committee had referred an action to this committee around safeguarding mandatory training due to a reduction in compliance, commenting that this update showed a forward direction. It was confirmed that safeguarding levels 1 and 2 were reported as part of the organisational development dashboard.</p> <p>The Chair reflected on the positive improvements seen in this area.</p> <p>RESOLVED: That the committee note the content of this report and the progress on statutory and mandatory training for the ICB and wider partners in health and care.</p>	
<p>14 25/26</p>	<p><u>Strategic Training and Education Collaborative (STEC)</u></p> <p>R Keeler verbally updated that the STEC's main role is to develop a sustainable support for the workforce and organisational needs. The sub-committee last met on 10 April 2025 in workshop style, focussing on an implementation for the 5-year training plan. Fiona Ball led the workshop which helped people create key deliverables; on identifying the implementation plan, synergies between groups would be connected.</p> <p>RESOLVED: That the committee note the update on the Strategic Training and Education Collaborative.</p>	
<p>15 25/26</p>	<p><u>Freedom to Speak Up</u></p> <p>The committee were asked to note the report providing a quarterly update on themes and trends related to speaking up, and against progress made in this area since the committee's last update in January 2025. A Patel thanked Dr David Levy, who had now stepped down from his role at the ICB and Freedom to Speak Up executive.</p>	

	<p>A Patel continued that on listening to discussion at today's meeting around unprecedented change ahead, a culture where people can speak up and share ideas needs to be fostered. The meeting report highlighted constraint on resources given the 50% required reduction in running costs and it was recognised that people need to work together to find the right model for Freedom to Speak Up in the ICB. A presentation around the role of the service had been featured at a recent staff team briefing, and had been received well.</p> <p>Numbers reporting to Freedom to Speak Up had recently declined and it was thought this was largely due to more visibility of executives in listening rooms, regular team briefs, anonymous channels to raise issues and concerns, etc. There was triangulation around what was being raised through the anonymous channels and Freedom to Speak Up. S Mattocks commented that there were now separate streams of questions and answers available, providing an easy to use option for staff, which would be contributing to the reduction in numbers reporting to Freedom to Speak Up. An influx of reporting had been seen following the presentation at the staff briefing and some people had said they were not aware of the service prior to this. It was acknowledged that a number of people were coming forward anonymously, and it was therefore thought that people feel there is no safety to step forward to access the service.</p> <p>D Eytayo highlighted that the recent Pulse survey response rate was the highest from when the survey started, which in terms of staff engagement, this was positive. Recent months had seen over 500 people joining staff briefings. Last week, a virtual drop-in session was held with executives with over 270 people having joined. Feedback from these events showed that people were anxious and wished to have updates following the government announcements. In contrast to this, earlier this week D Eytayo attended a staff network meeting where staff network chairs reported that they had seen a drop in participation and attendance at staff meetings.</p> <p>Members felt that it was important to have a Freedom to Speak Up culture within the organisation and this should be aligned to a 'no blame' culture, for people to speak openly.</p> <p>RESOLVED: That the committee note the content of the meeting report and discussion held.</p>	
16 25/26	<p><u>Committee Escalation and Assurance Report to the Board</u></p> <p>Members noted the items which would be included on the committee escalation and assurance report to the Board.</p> <p>RESOLVED: That the People and Culture Committee note that a report will be taken to ICB Board.</p>	
17 25/26	<p><u>Items referred to other committees.</u></p> <p>RESOLVED: That there were no items to be referred to other committees.</p>	
18 25/26	<p><u>Any Other Business</u></p> <p>None.</p>	
19 25/26	<p><u>Items for the Risk Register</u></p> <p>RESOLVED: That there were no items identified for the risk register.</p>	

20 25/26	<p><u>Reflections from the Meeting</u></p> <p>The Chair reflected that the context of the meeting had been set looking at plans and reviewing work around culture and the agenda had included good coverage in this area. Discussion was held around values and the presentation was useful.</p> <p>J Burchett felt there were synergies from this meeting for local government and the social care context. The volunteering presentation showed real potential as community power was currently a large part of the local authority, which could be linked in. He also found the values discussions and feedback interesting as the local authority was going through a similar process.</p>	
21 25/26	<p><u>Date, Time, and Venue of Next Meeting</u></p> <p>16 July 2025, 1.00 pm – 3.30 pm, MS Teams</p>	