

Betsi Cadwaladr University Health Board (BCUHB)
CONFIRMED Minutes of the Local Partnership Forum
held on 3 February 2026
via Teams

Present	
Name	Title
Jan Tomlinson	Unison, Chair
Jason Brannan	Deputy Director of People's Services
Dyfed Edwards	BCUHB Chair
Debbie Eytayo	Executive Director of Workforce & Organisational Development
Kay Hannigan	Associate Director People Services (Central)
Jacqueline Hughes	Society of Radiographers
Michelle Hughes-Davenport	Associate Director People Services (West)
Catherine Jones	RCN Steward/H&S Representative
Michelle Jones	Head of Financial Reporting
Nan Jones	Hotel Services
David Maslen-Jones	Assistant Director of Occupational Health, Safety and Security
Vivienne Nelson	Unison
Billy Nichols	Independent Member
Andrea Orme	Associate Director For People – Pan BCU
Michelle Parsonage	Unite Union
George Roberts	Associate Director of People Services (West)
Helen Roberts	Facilities
Katie Sargent	Head of Employee Engagement and Experience
Paolo Tardivel	Interim Executive Director of Transformation and Strategic Planning
Richard Tanswell	Unison
Rebecca Testa	Head of Organisational Development (Central)
Nia Thomas	Head Of Organisational Development (West)
Rebecca Turner	Public Health Wales
Sharon Cawdell	Unison
Angela Wood	Executive Director of Nursing & Midwifery
Toni Wood	Royal College of Midwives
Meeting support	
Harriet Abbott	Minute Taker

PRELIMINARY MATTERS

L26.1 Welcome and Apologies

The Chair welcomed Debbie Eytayo to the meeting as the new Executive Director of Workforce & OD.

Apologies were received from: Russell Caldicott (Michelle Jones to deputise), Alison Kemp,

Eleri Roberts, Ffion Johnstone, Geoffrey Armstrong, Julia Clayton, Richard Tanswell, Tehmeena Ajmal, Alison Tardivel, Andrea Hughes, Denise Roberts, Helen Stevens-Jones and Stuart Keen

L26.2 Declarations of Interest

None to note.

L26.3 Unconfirmed Minutes of the Meeting held on 10 December 2025

Some minor grammatical errors were noted. These will be shared for correction outside of the meeting on email, and the previous minutes amended as required.

It was agreed that subject to the required amendments, the minutes of the meeting held on 10 December 2025 were a true and accurate record.

L26.4 Matters Arising & Action Log

Members received the action log and noted progress against the actions.

- **Action L25.63.1:** further update to be received at today's meeting. This topic will be input in the performance report for People's Services going forward and will be included as a standing item onwards from the next report. Action confirmed to close.
- **Action L25.65.1:** invite has been shared with BCU. The next meeting is scheduled for 18 March 2026 and BCU plan to attend. Action confirmed to close.
- **Action L25.64.1:** GR advised good uptake of flu vaccine seen across staff. BCU in the top quartile for Welsh Health Boards on uptake. Action confirmed to close.

The Chair requested trade unions partners to advise of any required updates or queries to be taken to the All-Wales Partnership meeting.

The following additional action was agreed:

- **Action L26.4.1:** All Wales Partnership Minutes to be added as standing item on future agendas for information.

It was resolved that the Forum:

- **AGREED** to close the actions that were proposed for closure.

L26.5 Staff Story – Sickness Absence

Katie Sargent, Head of Employee Engagement and Experience, presented this item. The forum received an update on sickness absence, hearing a story from a staff member on their experience. The presentation highlighted the following:

- The importance of compassionate management, as well as the value of supportive teams.
- The impact of appropriate adjustments and understanding.
- How it is important to recognise that staff may be struggling with unseen challenges, and how people can be supported.

- It was advised that statistics on sickness absence within the paper are from the 2024 staff survey. This is due to the results from the staff survey having not yet been received. The results were expected at the end of January, however have been delayed due to data validation, and are now expected 23 February 2026.

In discussing the item, the Forum:

- Emphasised the importance of showing kindness and compassion, and how they are essential values in supporting staff.
- Noted the positive application of policies and support mechanisms, and how they can work effectively when applied well, utilising methods such as reasonable adjustments, as well as managerial and occupational health support.
- Noted the reinforced need for the organisation to stay informed around emerging or lesser-known conditions, to ensure that those who are supporting staff have up to date knowledge and information.
- Expressed thanks and appreciation to the staff member for sharing their experience.

[Michelle Parsonage and Susan Williams joined the meeting].

The Forum noted the report.

LEAD ITEMS FOR THE MEETING

L26.6 Sickness Absence – Verbal Update

Jason Brannan, Deputy Director of People, provided a verbal update and highlighted the following findings from key data provided in December 2025. This showed:

- rising trend over previous 12 months - higher than previous year.
- Direct sickness costs around £4.6m. This figure does not include any bank or agency costs to cover roles.
- Return to work interviews recorded on ESR is around 33% (compliance gap) – this must improve as must the need to better support staff.
- Target is to keep sickness below 6%
- Estates, followed by Additional Clinical Services, have the highest sickness rates. Different pressures do impact on sickness rates, the ability to work from home etc.
- Monthly absence is above average (4.2%) and BCU is significantly above this with a mixture of long- and short-term absence.
- Main reason for Long Term Sickness is noted as stress, anxiety, depression. This clearly has impact across the organisation.
- November's People Committee, through its deep dive paper looking into the management of sickness, identified the need for more several areas to be embedded across IHCs. To guarantee consistency, ensure policy compliance with all new processes coming into play and therefore all new policies must be accompanied by Management reasoning.
 - To ensure ownership and accountability, managers may look to Peoples Services for support. Agreed with Chief Operations Officer to input Directors of Operations and People and Culture and Occupational Health, to hold meeting to review hot spot areas. Each IHC will focus on 5 hot spots and

given additional support to move forward. Line managers, through quarterly reporting, must be accountable for completing the process.

- The health and wellbeing of staff must be supported. It was acknowledged that when other Health Boards had looked and population health data and compared across their area, some key factors had been shown which helped identify areas of need. Is this linked to area deprivation etc? BCU will be completing this piece of work also.
- Good sickness pay scheme. Minister had said sickness absence needs be below 6% and is expecting agency spend to reduce by 30%. The Health Board is accountable for this.

Discussion:

- Susan Williams and Catherine Jones requested clear reporting of work-related stress (via ESR sub-codes) to support targeted action and alleviate member concerns.
- Jacqueline Hughes stressed balanced policy use (discretion and support) and avoiding “over-hard” enforcement; Jason Brannan confirmed the deviation-logging process.
- Sharon Duffy raised instances of managers not contacting staff and HR leading meetings; People Services will reinforce manager accountability and coaching.
- Dyfed Edwards emphasised equity, relationships and context (role differences, individual circumstances) over “black-and-white” rules.
- Billy Nichols called for more counselling/psychology capacity; Jason Brannan confirmed recruitment of two additional psychologists.
- Cath Jones felt that the data on work related stress was incorrect and requested to have this data presented at these meetings. Members concerned that data is too general and highlighted the financial impacts of redeployment. Jason Brannan advised Members that it had been identified through deep dive that many use the two codes incorrectly. Managers need to ensure they use both codes as work related stress will come under general bracket, but second part allows this to be more specific.
- Jason Brannan advised members that there is an expectation that if staff are fit and well enough to carry out duties if practices can be adjusted to keep them in work. The processes coming in place, when there is deviation from policy, asking managers to have a discussion with HR representative to ensure reasons are recorded. This recording of variations in certain areas will help ensure consistency across the organisation.
- Billy Nichols referred to reasons for sickness. With anxiety, stress and depression being the main reasons, the organisation must be mindful of ministerial priorities to get sickness rates down. More resource should be put into counselling and psychology services to get staff back to work quicker. Jason Brannan confirmed that the organisation was in the process of recruiting to 2 additional psychology post within Occupational Health to provide extra support.

[Debra Payne joined the meeting].

- Jan Tomlinson highlighted social deprivation, its impact when people bring it into the workplace and asked how can we help more.

- Billy Nichols felt that members' expectations needed to be carefully managed. Staff encouraged by trade union representative to be as honest and transparent all the way through the process.
- Jason Brannan confirmed that the new All-Wales Managing Attendance Policy is due to come into effect in the next few months. Referenced engaging with partners to ensure the policy can be applied consistently and review the hotspot areas. Aim is to review 5 hotspots every 3 months. Feedback will be reported to People Committee and at LPF if requested. Looking from the population health aspect as well – with the increasing retirement age, the workforce's age is also increasing. Important to be aware on how this can impact and emphasised consistent application, and showing kindness and compassion.

ACTION:

L26.6.1 Jason Brannan to speak with People's team to ensure managers are taking correct approach with managing attendance

L26.7 Peoples Services and OD Directorate Overview Report

George Roberts, Associate Director of People (West) presented this item.

Highlights:

- 1,530 staff off sick in December 2025. Looking at data, a large number require support.
- Casework - 34 live disciplinary cases, 57 resolution cases who HR and trade union colleagues are supporting. Going through culture change, and new values and behaviours, so a slight increase to be expected.
- Task and finish Group being set up looking at employee harm within this process and how best to improve it, as well as the impact on WOD and TU partners.
- Staff survey results expected 23rd Feb. 17.4% completion rate. Target was 5% increase, came in at 24.9%. Good that people are sharing feedback, and the HB moving forward.

Discussion:

- Work currently underway, with assistance from the trade unions, to understand what training is core and what is profession specific.

[Nicola Roberts joined the meeting].

- Jason Brannan referenced the new PADR process, currently being piloted in certain areas, which measures performance, as well as values and behaviours. More conversations to be had with staff side when looking to roll out fully. More pilots happening in Q4.

L26.8 Items from Trade Union Partners – Verbal Update

Jan Tomlinson requested a meeting with Debbie Eytayo to discuss Foundations for the Future

ACTION:

L26.8.1 Jan Tomlinson to meet with Debbie Eytayo to discuss Foundations for the Future

L26.9 Foundations for the Future – Verbal Update

George Roberts, Associate Director of People (West) provided her update.

Highlights:

- Paper went to Board in January and will look to circulate to the group for an update.
- Socialised some of 8C and above structures to ensure accuracy. Consultation has not started on this yet. Had feedback on presentation or structure, and how those look within teams. Has been valuable.
- Putting together consultation document, looking to start March 2026. Communications and engagement plan being developed.
- 8C and above is phase 1. Phase 2 is below 8b. GR meeting with execs individually to review relevant structure to ensure accuracy.
- Referenced 87 engagement meetings held with staff to understand accurate picture.
- Clinical service plan – Execs discussing what this will look like, who is to be involved, a 10-year strategy and what this will look like.
- Culture change programme, staff experience and engagement, implementation of the Workforce plan and framework to report to People and Culture Committee to ensure robust Workforce planning.
- A great deal of work taking place regarding the scheme of reservation and delegation. Decision making framework and risk framework being developed.
- Emphasised pre consultation to ensure accuracy ahead of this.

Discussion:

- Billy Nichols requested that consultations are wider and for a longer period, to ensure staff are being listened to. George Roberts confirmed that consultations are going to need to be longer than usual and that there needs to be a realistic timeframe.

L26.10 Finance Report

Michelle Jones, Head of Financial Reporting, presented her report.

Highlights:

- Measures used by Welsh Government –
 - Payment to suppliers, achieving 98.5% (above target).
 - Capital spend - projecting to fully spend.
 - Achieved £45m saving to date (47% non recurrent).
- Struggling on key target of achieving break even. December position was £40K surplus.



- Several items have come out since original plan
 - A short fall on National Insurance and increase in inflationary tariff – a total of £6.7m
 - Local pressures, equating £18.6m - these are offset by saving. £17.3m overspend to date.
- Key target is to achieve a balanced position. Forecasting £17.4m overspend on end of year and not expected to meet target. Measures being explored to try to counteract, without impacting on clinical care.

Discussion:

- a small number of jobs being advertised as well as staff shortages were noted
- substantive posts are better to fill and there is not a freeze on clinical staff.
- Aim to reduce agency use by 30% this year.

[Paolo Tardivel joined the meeting]

- Angela Wood confirmed that
 - she is mapping new students into available Band 5 jobs and that vacancies will be sorted once finalised through FFTF.
 - Conversations were taking place to ensure agency use is appropriate.
 - Since Nov 25, any agency requests are reviewed and signed off by her, to identify if it is possible to mobilise staff in different ways.
 - Can give assurance that if a request comes through, rosters are reviewed.
 - She has complete oversight. There are no delays due to this process, just gives more scrutiny and ensuring appropriate staff in place.
 - Agency use increased over Dec due to sickness rates. 225 new students starting with BCU in Sept, this is being mapped to ensure positions available.

L26.11 Corporate Planning Update

Paolo Tardivel, Interim Executive Director of Transformation and Strategic Planning, provided his update.

Highlights:

- Paper went to Board last week
- Gave update on approach and IMTP 26-29. Looking at what is required ahead of submission in March
- Looking at engaging earlier and ensuring targets are more focussed, realistic and deliverable.
- IMTP now informed by the strategic intent statements.
- Health Board remains in Level 5 Escalation and intends to demonstrate progress against all points of framework.
- Financial landscape remains challenging. 1.1% provide to cover pressures.
- Improvements made –
 - broader engagement, more continuous planning to include realistic timescales and risks to delivery.
 - Ensure more unified planning space.
 - More delegated responsibility to Executive budget holders.

- Plotted delivery plan against de-escalation framework targets
- Election in May - potential for new government with new priorities. Current government made clear now IMTP to be approved before election.
- Need to take realistic view to meet requirements.
- Before end of March, finalise service plans and refining trajectories. Board and Committee meetings through February and March, ahead of Board in March and submission to WG on 31st will help with scrutinising and finalising this.

[Paolo Tardivel left the meeting].

FOR INFORMATION

L26.12 Minutes of the People & Culture Committee Meeting

The Minutes of the Committee were **Noted**.

L26.13 Quality Report

The Quality Report was **Noted**.

L26.14 Chief Executive Report to the Board

The Chief Executive's Report was **Noted**

ANNUAL REPORTS FOR INFORMATION

L26.15 Ombudsman

This item was covered *within the Quality Report*

Noted

CLOSING BUSINESS

Any Other Business

Jackie Hugtes offered to share with her trade union partners the recent intranet questionnaire regarding mens' health projects, to encourage involvement in developing mens' inclusive offering

Action:

L26.15.1 Jackie Hughes to share questionnaire with colleagues to encourage involvement.

L26.16 Agree Items for Referral to Board / Other Committees

There were none.

L26.17 Agree Items for Chairs Assurance Report to the Board

Alert Board:

- Sickness absence data provided showed an upward trend over the last 12 months, with only a 30% compliance of Return to Work. Estates and MHLD have the highest sickness levels.
- Mandatory training concerns, including the impact on clinical time, were raised.

- Stress and anxiety remain major sickness drivers.

Assure Board:

- Members received a Staff Story regarding sickness absence and adjustments made and support offered and welcomed seeing the policy working effectively.
- Foundations for the Future – culture change, workforce planning framework and governance framework progressing.

Advise Board:

- Work underway to improve compliance of Return to Work on ESR.
- Staff survey completion rate rose to 24.9%
- Update provided on the approach to the IMTP 2026-2029.
- Upcoming May election may bring new priorities; current government requires IMTP approval before the election.
- Before end of March: service plans to be finalised, trajectories refined, and scrutiny through Board and Committee meetings ahead of submission to Welsh Government on 31 March.

L26.18 Review Risks Highlighted in the meeting for referral to the Risk Management Group

There were none.

L26.19 Review Meeting Effectiveness

It was agreed that this was a good, interactive meeting with everyone having the opportunity to speak.

L26.20 Date of next meeting

5 May 2026