



**PWYLLGOR DIWYLLIANT, POBL A DATBLYGU SEFYDLIADOL
PEOPLE, ORGANISATIONAL DEVELOPMENT & CULTURE COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	17 February 2026
TEITL YR ADRODDIAD: TITLE OF REPORT:	Safeguarding Training Compliance
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Sharon Daniel, Executive Director of Nursing, Quality and Patient Experience
SWYDDOG ADRODD: REPORTING OFFICER:	Charlotte Westacott, Head of Safeguarding

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

Safeguarding training compliance across Hywel Dda University Health Board (HDdUHB) continues to vary across levels. While Level 1 and 2 e-learning modules remain compliant, Level 3 Child/Adult safeguarding training and violence against women, domestic abuse and sexual violence (VAWDASV) training remains below the organisational compliance threshold of 85%.

Cefndir / Background

Level 1 safeguarding training applies to all Health Board employees, and Level 2 applies to staff who have contact with service users and their families, both delivered through e-learning with demonstrated compliance. HDdUHB remains aligned with [National Training Standards](#) and the Intercollegiate Document (ICD) requirements.

Level 3 safeguarding training is mandatory and defined by the Intercollegiate Documents [Intercollegiate document \(2025\) Safeguarding children and young people & children and young people in care](#) and [Adult Safeguarding: Roles and Competencies for Health Care Staff](#). These documents establish Level 3 as the minimum competency requirement for registered staff in key safeguarding roles.

In response to COVID-19 restrictions and to improve accessibility, the Safeguarding Team transitioned Level 3 Safeguarding training to Microsoft Teams, enabling wider reach across dispersed sites. Teams training has continued as the main format for delivery although courses are delivered face to face in some circumstances. In 2021/22, 2,925 staff completed Adult Safeguarding training, achieving 50% compliance. By Q3 2025, strengthened safeguarding structures and improved role mapping identified 3,466 staff requiring Level 3 training, with compliance rising to 64%.

For Level 3 Children's Safeguarding, the cohort increased from 1,678 staff in 2021 (63% compliance) to 2,293 staff by Q3 2025/26, with compliance improving to 65%.

VAWDASV training compliance rose from 57% in Q3 2023 (3,743 staff requiring training) to 60% in Q3 2025/26, with 6,295 staff now requiring the training.

Despite significant growth in the workforce requiring Level 3 and VAWDASV training, overall compliance has continued to improve, with increasing organisational engagement in mandatory safeguarding responsibilities. However, compliance figures have yet to achieve 85%

Asesiad / Assessment

Service Delivery Groups are increasingly identifying specific departmental areas where safeguarding training compliance remains low and are developing targeted improvement plans to address these gaps. This shift toward strengthened service ownership represents an important step in achieving sustainable, long-term improvements in safeguarding training compliance.

Although current Level 3 safeguarding compliance rates remain below the 85% organisational threshold, this should not be interpreted as diminishing engagement or declining performance. Instead, it reflects a positive trajectory and evidences a maturing safeguarding culture across the organisation. Over recent years, the number of staff correctly identified as requiring Level 3 Adult and Children's Safeguarding training has increased significantly due to improved role mapping, clearer definition of safeguarding responsibilities, and enhanced organisational understanding of ICD-aligned training requirements.

As the eligible staff cohort has expanded, compliance percentages have naturally recalibrated. Despite this, more staff than ever before are actively completing Level 3 training, demonstrating ongoing organisational commitment and increased training uptake rather than deterioration in performance.

To support improvement, work is underway to develop a joint adult and child Level 3 training package aligned to the ICD to improve accessibility, consistency, and compliance trajectory.

The Corporate Safeguarding Team continues to deliver sufficient training capacity to enable all staff requiring Level 3 Safeguarding training to meet the 85% compliance target. Where Service Delivery Groups remain below the threshold, they are required to record the associated risks on their Service Group Risk Registers and escalate concerns through Clinical Care Groups (CCGs) and the Strategic Safeguarding Steering Group (SSSG) in line with existing governance arrangements.

Progress, risks, and compliance trajectories will continue to be scrutinised through QSEC as part of biannual safeguarding reporting, ensuring ongoing organisational oversight, accountability, and assurance.

Additionally, the Safeguarding Service remains responsive to organisational learning needs and delivers bespoke training reflecting case review findings and service specific priorities.

Argymhelliad / Recommendation

The Committee is asked to **RECEIVE ASSURANCE** that the HDdUHB improvement plan aims to address the deficit in Level 3 safeguarding training compliance.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.1.4 That there are appropriate arrangements to ensure education and commissioning meets future workforce needs. 3.1.4 Ensure the Health Board is meeting its responsibilities with regard to statutory and mandatory training.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	N/A
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	1. Safe 3. Effective 6. Person-Centred
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	1. Leadership 2. Culture and valuing people 4. Learning, improvement and research
Amcanion Strategol y BIP: UHB Strategic Objectives:	3. Great care 4. Positive futures
Amcanion Cynllunio Planning Objectives	Not Applicable
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS 4. Improve Population Health through prevention and early intervention, supporting people to live happy and healthy lives

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	National safeguarding training, learning and development standards
Rhestr Termau: Glossary of Terms:	Included within the body of the report.
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Diwylliant, Pobl a Datblygu Sefydliadol: Parties / Committees consulted prior to People, Organisational Development & Culture Committee:	CCG Assistant Directors of Nursing, Assistant Director of Quality Therapies and Health Sciences

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	No
Ansawdd / Gofal Claf: Quality / Patient Care:	NA
Gweithlu: Workforce:	NA
Risg: Risk:	NA
Cyfreithiol: Legal:	NA
Enw Da: Reputational:	NA
Gyfrinachedd: Privacy:	NA
Cydraddoldeb: Equality:	NA