



Pwyllgor Pobl, Datblygu Sefydliadol a Diwylliant/ People, Organisational Development and Culture Committee

DYDDIAD Y CYFARFOD: DATE OF MEETING:	18 August 2026
TEITL YR ADRODDIAD: TITLE OF REPORT:	Organisational Development Cultural Progression Report 2025-26
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Lisa Gostling – Deputy Chief Executive / Executive Director of Workforce & Organisation Development
SWYDDOG ADRODD: REPORTING OFFICER:	Corinna Lloyd-Jones – Interim Assistant Director of Organisational Development

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/ For Assurance

ADRODDIAD SCAA SBAR REPORT

Sefyllfa / Situation

This report provides an update on our cultural progression work since the previous report in [May 2025](#). It highlights the contribution of our Organisational Development (OD) team to the Workforce and OD (WOD) Planning Objectives for 2025-26, most notably the following actions:

1.3 Create a positive workforce culture: Improve the experience of staff and patients by ensuring happiness at work and excellent customer service.

2.1 Provide compassionate experiences: Enhance the operational efficiency and workplace culture of the Health Board by implementing comprehensive support strategies for staff, fostering compassionate communication and reinforcing our commitment to inclusive values. This will include people practices, values refresh, compassionate visible leadership, acting upon Staff Survey results.

Over the past year, our OD Team has continued to support the Health Board's cultural progression journey through a range of improvement programmes and activities as outlined in this report.

Cefndir / Background

The Health Board has continued its cultural progression journey during a period of significant organisational challenge, including financial constraints, operational pressures, workforce shortages and increasing service demand. Throughout 2025-26, our OD Team has maintained a focus on key cultural enablers, including leadership development, staff engagement, psychological safety, healthy working relationships, recognition and retention.

This work has also supported the organisation's wider improvement agenda following Welsh Government escalation in January 2024. Recognising our enabling role within the Leadership and Governance domain, we remained focused on strengthening leadership capacity and

capability across the organisation, contributing to de-escalation first to Enhanced Monitoring in March 2025 and subsequently to Routine Monitoring in December 2025.

The report reflects a year of continued investment in cultural progression while recognising the ongoing pressures experienced by staff and leaders across the Health Board. It also looks ahead to the next phase of our journey, setting out our priorities accelerate progress, address persistent cultural challenges and support the delivery of sustainable organisational improvement.

Asesiad / Assessment

The report demonstrates meaningful progress across key cultural enablers. Leadership development programmes, coaching, retention initiatives and local culture improvement interventions continue to show positive impact, while staff report strong team relationships, supportive line management and a high level of commitment to patient care. Turnover rates have improved for Nursing, Midwifery and Allied Health Professionals/Health Care Sciences (AHP/HCS) staff groups, and flexible working arrangements continue to be viewed positively.

However, the Health Board's NHS Wales Staff Survey findings highlight ongoing challenges relating to staff engagement, involvement in decision-making, workload pressures, burnout and confidence that organisational concerns will result in visible action. Whilst the overall trajectory remains positive, sustained focus is needed to strengthen organisational trust, increase staff involvement and embed cultural improvements at scale. These findings have informed a clear set of priorities for 2026-27 aimed at accelerating cultural progression and improving workforce experience.

Argymhelliad / Recommendation

The Committee is requested to:

- **TAKE ASSURANCE** of our cultural progression during 2025-26 whilst recognising there is still work to do and with the potential to be accelerated, and;
- **ENDORSE** our future direction of travel.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Cyfeirnod Cylch Gorchwyl y Pwyllgor: Committee ToR Reference:	2.1.3 The organisation's ability to create and manage strong, high performance, organisational culture arrangements.
Cyfeirnod Cofrestr Risg Datix, Teitl a Sgôr Risg Cyfredol: Datix Risk Register Reference and Score:	Reference 2305/score 20.
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply
Galluogwyr Ansawdd: Enablers of Quality:	6. All Apply

Quality and Engagement Act (sharepoint.com)	
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Nodau Cynllunio 2026/27 Planning Goals 2026/27	1. Healthy, Thriving Teams 2. Customer Service Excellence 5. People First, Digital Always 6. Safe, Timely, High Quality Care 7. Future Orientated
Hypergyswllt i Amcanion Llesiant HDdUHB 2026 Hyperlink to HDdUHB Well-being Objectives 2026	3. Create people-centred employment and development opportunities that support workforce transformation, reflect the changing needs of 4. Create an inclusive culture where every voice matters, individual needs are considered and staff well-being is promoted and supported 5. Foster a learning culture by sharing knowledge and applying new ways of working that enhance local and global well-being
Model Cymdeithasol ar gyfer Iechyd a Llesiant: (wedi'i gwblhau ar gyfer newid strategol a/neu newidiadau sylweddol i wasanaethau) A Social Model for Health and Wellbeing: (<i>complete for strategic change and/or significant service changes</i>)	3. Involvement with individuals and communities will take place to understand their needs and support the co-production of solutions. 5. A more preventative approach, including earlier identification and intervention, will be taken to support people to maintain and improve their health and wellbeing. 6. A culture of testing and learning will be encouraged, enabled, supported and celebrated.
Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Included within the body of the report.
Rhestr Termau: Glossary of Terms:	Included within the body of the report.

Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y cyfarfod hwn: Parties / Committees consulted prior to this meeting:	N/A
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Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	None arising for this paper.
Ansawdd / Gofal Claf: Quality / Patient Care:	None arising for this paper.
Gweithlu: Workforce:	None arising for this paper.
Tegwch Iechyd: Health Equity:	None arising for this paper.
Risg: Risk:	None arising for this paper.
Cyfreithiol: Legal:	None arising for this paper.
Enw Da: Reputational:	None arising for this paper.
Gyfrinachedd: Privacy:	None arising for this paper.
Cydraddoldeb: Equality:	None arising for this paper.



GIG
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Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Hywel Dda University Health Board

Organisational Development
Cultural Progression Report

April 2025 - March 2026

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About this report

This report provides an update on our cultural progression work since the previous report in May 2025. It highlights the contribution of our Organisational Development (OD) team to the Workforce and OD (WOD) Planning Objectives for 2025-26, most notably the following actions:

1.3

Create a positive workforce culture: Improve the experience of staff and patients by ensuring happiness at work and excellent customer service.

2.1

Provide compassionate experiences: Enhance the operational efficiency and workplace culture of the Health Board by implementing comprehensive support strategies for staff, fostering compassionate communication and reinforcing our commitment to inclusive values. This will include people practices, values refresh, compassionate visible leadership, acting upon Staff Survey results.

Over the past year, our OD team has continued to support the Health Board's cultural progression journey through a range of improvement programmes and activities aligned to our WOD Planning Objectives. While considerable progress has been made, we remain mindful of the significant challenges facing the organisation.

The Health Board continues to navigate complex financial, operational and workforce pressures alongside maintaining a focus on patient safety and quality of care. At a time of ongoing change and increased scrutiny, additional demands are being placed on our leaders and staff. Together, these challenges continue to create a heavy burden on our workforce and pose a risk to morale and wellbeing.

Despite these unprecedented challenges, we hope this report demonstrates that our continued commitment to a shared vision, together with consistent and informed action, is helping to build a healthier and happier working culture in Hywel Dda.

Introduction

This report provides an update on the work of our OD team in support of the 2025-26 WOD Planning Objectives. It also highlights progress made in areas linked to the Health Board's improvement journey following its escalation by Welsh Government to Targeted Intervention (Level 4) in January 2024.

The escalation introduced an additional and complex layer of challenge to our cultural progression. However, recognising our enabling role within the Leadership and Governance domain, we remained focused on strengthening leadership capacity and capability across the organisation. For that domain, our commitment contributed to the Health Board's gradual de-escalation; first to Enhanced Monitoring (Level 3) in March 2025 and subsequently to Routine Monitoring (Level 1) in December 2025, reflecting the positive progress achieved.

We would also like to recognise the contribution of colleagues across our WOD Directorate whose collaborative work continues to support the Health Board's cultural ambitions. Equally important are the positive and trusted relationships we have with our Trade Union colleagues. Through open and constructive partnership working, we gain valuable insight into staff experience and the challenges facing teams, helping us respond in a more informed and supportive way.

We also acknowledge the considerable demands placed on our leaders during a period of significant change. Despite ongoing pressures and uncertainty, our leaders across the Health Board continue to support their teams with dedication, compassion and resilience, playing a vital role in sustaining progress.

Most importantly, we remain encouraged by the commitment of our leaders and staff to our shared ambition of creating a healthier and happier working environment across Hywel Dda. Our experience continues to demonstrate that positive workplace cultures are fundamental to staff wellbeing, engagement and the delivery of high-quality patient care. Despite the challenges facing the NHS, colleagues continue to embrace opportunities to learn, improve and work together to shape a better future for our organisation.

Our culture at a glance

The 2025 NHS Wales Staff Survey findings, shared with the People Organisational Development and Culture Committee (PODCC) in May 2026, offer a compelling picture of our culture in Hywel Dda. It remains an organisation with strong, compassionate teams and committed staff, but one where increasing operational pressure and a lack of involvement in decision-making are negatively affecting staff engagement. Whilst nine of the ten survey themes scored above the NHS Wales Health Board benchmark, the organisation faces significant risks around engagement, burnout, staffing pressures and confidence in organisational change.

What is going well?

Strong team culture and compassion

Effective line management

Flexible working

Commitment to patients and service delivery



The most significant strength across the organisation is the [quality of relationships within teams](#). Staff report high levels of trust, support, and compassion towards both colleagues and patients. Teamworking remains the highest-scoring theme, with over 80% of respondents enjoying working with their teams and feeling able to ask colleagues for support. This strength is consistent across many services and acts as a critical buffer against operational pressures.



[Immediate managers continue to be viewed positively](#), with staff reporting that managers listen, provide support, encourage development and recognise wellbeing needs. The Line Management sub-theme scored 69.9%, above the NHS Wales benchmark, reinforcing the role of local leadership as a protective factor. Staff perceptions of their immediate managers are considerably stronger than perceptions of the wider organisation.



[Flexible working continues to improve year-on-year](#) and remains one of Hywel Dda's strongest comparative advantages. Satisfaction with flexible working opportunities has increased consistently over the last three years, with staff also reporting high levels of trust, autonomy and clarity regarding their responsibilities. These findings suggest a workforce that feels empowered in its day-to-day practice.



Despite significant pressures, [staff remain highly committed](#). Nearly eight in ten respondents report being willing to go the extra mile when required, while levels of enthusiasm for work remain above the NHS Wales benchmark. These results demonstrate a workforce with a strong sense of professional commitment and dedication to patient care.

Key risks and challenges

Staff engagement

Staff feel excluded from decisions

Burnout concerns

Confidence in organisational response

Staffing pressures



The most significant organisational concern is the [decline in staff engagement](#). The Staff Engagement Index has fallen to 70.7%, marginally below the NHS Wales average, with all three contributing components showing deterioration. This does not reflect a workforce that cares less about its work, but rather a decreasing connection with the organisation itself.



Only 44.2% of [respondents feel involved in decisions affecting their work](#). This is the lowest-scoring engagement question, has declined for three consecutive years, and appears consistently across multiple feedback mechanisms. The survey suggests staff are willing to contribute and improve services, but increasingly feel that change is done to them rather than with them.



The workforce continues to absorb significant personal cost to sustain services. [Presenteeism, work-related stress, exhaustion and unpaid overtime remain widespread](#). The survey evidence suggests burnout is a consequence of workload, moral compromise, capacity pressures and staffing challenges rather than an individual wellbeing issue.



While staff generally feel safe speaking up within teams, [confidence that the organisation will act on concerns remains low](#). Less than 40% believe concerns raised will be addressed and fewer than half receive feedback following incident reporting. The issue appears to be less about raising concerns and more about visible organisational action and feedback.



Only 35% of [respondents believe there are enough staff to do their job properly](#). Although slightly above the NHS Wales benchmark, staffing adequacy remains one of the weakest areas of performance and continues to drive workload pressures and burnout risk.

Leadership development

Supporting leaders at every stage of their career is fundamental to creating a resilient and sustainable organisation. From attracting and appointing talented individuals into leadership roles, through structured development programmes, coaching and networking opportunities, we are committed to building a pipeline of compassionate, capable and resilient leaders who can deliver high quality services for our communities.

Our leadership development offer is not only designed to strengthen individual capability, but also to foster the conditions for healthier and happier workplace cultures. Evidence consistently demonstrates that compassionate, visible and inclusive leadership has a significant impact on staff wellbeing, engagement and positive working relationships.

Talent Acquisition & Succession Planning – Building Leadership Capacity

The journey begins with attracting and appointing high-calibre leaders. Since the introduction of our enhanced Senior Leader Recruitment Process in July 2024, psychometric assessments have been embedded alongside traditional selection methods for Band 8c–9 appointments. This evidence-based approach strengthens assessment of leadership potential, organisational fit and development needs, ensuring that recruitment is both robust and supportive.

From April 2025 to March 2026, 20 senior leadership appointments were made, bringing the total number of appointments through this process to 47 since its introduction. Importantly, the process not only supports effective recruitment, but also the successful transition of leaders into roles through tailored development plans that identify strengths and development opportunities from the outset.

Feedback from candidates consistently highlights the fairness, professionalism and supportive nature of the process:

“

I have applied to Hywel Dda twice now, because I feel like the process is so robust and fair.”

“

You were so kind and welcoming across both days and made the whole experience feel much more human.”

47

total appointments
since the process
launched in July
2024

20

senior leadership
appointments
made

Clinical Care Group (CCG) Leadership Development Programme

The CCG Leadership Development Programme was introduced to support senior leaders through the transition associated with the Operations Directorate restructure. The programme aims to strengthen the collective leadership capability of the newly established CCG triumvirates, creating the conditions for more effective system leadership, improved collaboration and sustainable service improvement across the Health Board.

Since its launch in July 2025, progress has been made across both the Team Effectiveness and Vanguard elements of the programme, providing a strong foundation for leadership development within the triumvirates.

The aim of the Vanguard element of the programme (completed in May 2026) is to help leaders better understand their systems, challenge assumptions and identify opportunities for improvement for staff, patients and the organisation.

The Team Effectiveness element of the programme has progressed across CCG leadership teams, helping leaders develop greater clarity of purpose, strengthen working relationships and improve how decisions are made collectively. Although this has not yet concluded, emerging evidence highlights increased psychological safety, more effective use of leadership reflection time and stronger collaboration across organisational boundaries, enabling teams to address shared challenges more effectively.

Once completed, an evaluation of the initial phase will be undertaken to assess impact, capture learning and inform the next stage of the programme. As the programme continues into 2026, the focus will shift from development to sustainability, embedding learning into day-to-day leadership practice, supporting peer learning and ensuring improvements in team effectiveness translate into lasting benefits for staff, patients and Hywel Dda.

LEAP (Leadership Engagement with Awesome People)

Once appointed, leaders are supported through a range of development opportunities, with LEAP continuing to play a flagship role within our leadership offer.

During 2025/26, four cohorts were delivered to 65 leaders at Bands 7–8c. Since its launch in 2023, 159 leaders have completed the programme, with a further 18 participants due to complete the Winter 2025 cohort.

A key component of LEAP's success is the dedicated Leadership Navigator role. Each participant is matched with a personal Navigator who provides individual coaching, challenge and support throughout the programme. Regular reflective conversations help delegates embed their learning, maintain focus on development goals and apply new insights directly to their leadership practice. This personalised approach strengthens engagement, accountability and sustained behaviour change, helping to ensure that learning translates into meaningful impact within teams and services.

LEAP continues to be underpinned by a robust evaluation process, with a focus on both individual and organisational impact. Feedback gathered through formal evaluation and participant stories consistently demonstrates the positive and often transformational difference the programme makes to leaders' confidence, self-awareness and effectiveness.

As one delegate reflected:

“
I came onto the programme expecting leadership tools and techniques. I left knowing more about myself.”

Another described the programme's contribution to compassionate leadership across the Health Board:

“
Before LEAP, I wasn't even sure I should be a leader. I saw many of my own character traits such as empathy and friendliness as weaknesses. LEAP has taught me that these are signs of a compassionate leader and that I can role model values which align with our Health Board values. I see LEAP as a fundamental part of how we achieve our goals as a Health Board. Each person who attends LEAP is a seed of change, planting deep roots and lessons of LEAP in every department. Growing a network of compassionate and self-aware leadership we should be proud of.”

65

leaders attended
LEAP across 4
cohorts

159

leaders have
completed LEAP
since launch in 2023

The two case studies below demonstrate the breadth and consistency of LEAP's impact across different leadership roles, illustrating how the programme enables leaders to translate personal insight and reflection into sustained behavioural change, improved team and service outcomes, and a commitment to listening, collaboration and strategic thinking.

Assistant General Manager's reflection on the LEAP programme

LEAP provided a transformative experience for this leader at a pivotal point in her career. Having joined the programme expecting it to be "something useful" to fit around an already demanding role, she instead found a much-needed opportunity to pause during a period marked by self-doubt, reduced confidence and questioning her place and impact as a leader.

Through reflection, challenge and the support of her LEAP cohort, she was able to reconnect with her values, regain confidence and develop a deeper understanding of herself and her leadership.

LEAP helped her recognise that leadership is not about carrying every challenge alone or having all the answers, but about listening, learning and working collectively with others. Through shared experiences and honest conversations, she discovered reassurance in knowing that others faced similar doubts and challenges. While the pressures of leadership remain, she emerged more grounded, self-aware and compassionate towards herself, with a renewed sense of purpose and belonging. Most importantly, LEAP reinforced that leadership growth comes through openness to learning, reflection and connection with others, and that "you're still learning, you're still growing, and you're not doing it on your own."

“

It wasn't about learning something completely new - it was about having the space to stop. To think. To reflect. To be honest with myself."

Consultant Clinician's reflection on the LEAP Programme

Through LEAP, this leader developed a deeper understanding of himself, his leadership style and the role of relationships in achieving meaningful change. Learning from the programme reinforced the importance of shared values, coaching conversations, strategic reflection and self-awareness.

Reflecting on his experience, he highlighted the value of creating space for "deep work beyond day-to-day delivery", recognising that protected time for reflection is often needed to generate meaningful insight and change. He has applied these principles through more intentional communication, empowerment of colleagues, relationship-building, seeking feedback and demonstrating empathy and kindness in daily leadership practice.

These behavioural shifts have enhanced his ability to collaborate across professional groups, drive service improvement and lead quality and safety initiatives.

As LEAP continues to evolve, it is helping to build a connected network of compassionate, reflective and resilient leaders who are equipped to lead positive change and foster cultures where people can thrive.

New Medical Leaders Programme – Supporting Clinical Leaders

Recognising that leadership development is equally important for our clinical workforce, the New Medical Leaders Programme (formerly New Consultant Development Programme) continues to provide newly appointed Consultants, GPs and Clinical Specialists with dedicated support during the transition into leadership roles.

The fourth cohort commenced in March 2025 with 12 participants, bringing the total number of delegates to 59 since the programme began.

Through nine development days, participants gain a deeper understanding of the Health Board, develop cross-organisational networks and build capability in areas including inclusive leadership, coach approach, team effectiveness and human factors.

Feedback continues to demonstrate the programme's value in helping clinicians understand their broader leadership responsibilities:

“

Having now completed the programme, I have realised that my role and responsibilities involve much more than my clinical duties.”

“

This programme is highly recommended to all those clinicians new in post. I have learnt so much about the expectations of leadership and how the Health Board operates.”

12

participants in the
current cohort

59

leaders since the
programme began in
2021/22

External Leadership Programmes

Alongside internal programmes, we continue to work in partnership with external providers to broaden leadership development opportunities for staff across the organisation. During 2025-26, two delegates attended CLIMB and five delegates attended Academi Wales Summer School. These opportunities complement our internal offer and enable leaders to build networks and learning relationships beyond the organisation.

Coaching

Coaching remains a cornerstone of our development offer, providing colleagues with dedicated time and space to reflect, build confidence and navigate challenges.

Our highlights for 2025-26 include:



Our partnership with the Regional Coaching Network has continued to strengthen. The network now comprises 88 members across health and social care organisations and delivers a programme of continuing professional development to enhance coaching practice across the region. This collaborative approach was recognised when the Regional Coaching Network was shortlisted for the Working in Partnership Award at the West Wales Health and Social Care Awards and received a Certificate of Excellence.

The impact of coaching is reflected in the experiences of participants. One regional coachee described the transformative effect coaching had on their confidence:

“My motivation and confidence have always been there, but hiding, and it has now been brought out of the shadows. There is a position coming up in one of our new offices which I am going to apply for. I believe that I can do the role. I have really benefitted from having these coaching sessions, a heartfelt thank you.”

The growth of a coaching culture within Hywel Dda remains a significant achievement. Through the Coach Approach Programme, 693 leaders have now participated in coach approach development, helping to embed reflective practice, empowering conversations and collaborative leadership across the organisation.

Participants consistently describe improved confidence, resilience and leadership effectiveness:

“

I would recommend anyone struggling with a change in role or a difficult team to consider coaching. I have learned how to communicate clearly with my team and as a result I have a more resilient relationship with my team. My coach helped me put strategies in place to achieve goals and to recognise those successes, thus building confidence in myself.”

“

I use the coach approach daily in my work, with my team through one-to-ones and through engagement with other service leads.”

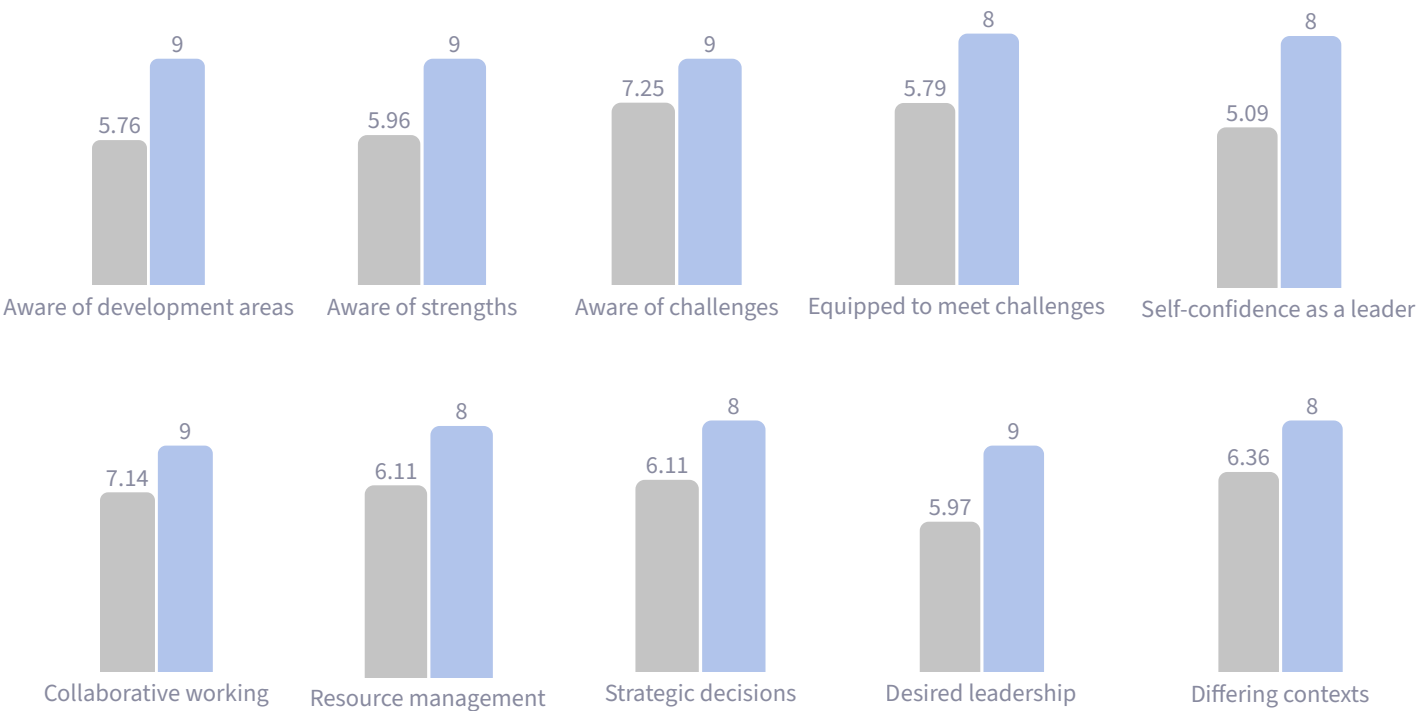
“

I just wanted to extend my sincere thanks for delivering such an engaging and insightful two-day Coaching Approach training. The practical tools and approaches you shared have really resonated with me, and I can clearly see how I can integrate them into both my practice.”

What changed?

To understand the tangible impact of the LEAP programme, participants are surveyed both prior to commencing the programme and upon completion. The data below represents the self-assessed progression of leaders across six cohorts who participated in the programme between cohorts ‘Autumn 2025’ and ‘Winter 2025’.

Leadership capabilities show strong progression across all key metrics



LEAP programme evaluation shows significant improvements across all measured attributes, with key takeaways:

Self-awareness and confidence improved together. The three self-awareness measures (aware of development areas, strengths, and challenges) all moved from mid-range scores of 5.76 to 7.25 up to 9. Alongside this, self-confidence as a leader rose from the lowest pre-programme score (5.09) to 8. This suggests that greater self-awareness helped our leaders develop confidence, reflecting LEAP's emphasis on reflection and personal development.

Leadership capability improved alongside self-awareness. Collaborative working, strategic decision making, resource management, and understanding of leadership culture all improved significantly (from 5.97 to 7.14 pre-programme, reaching 8 to 9 post-programme). These findings suggest that leaders with greater self-awareness are better equipped to lead others effectively.



Self-assessed average percentage increases across Autumn, Spring, Summer and Winter 2025 LEAP cohorts, combining pre and post-programme survey data.

Participant reflections, Summer 2025 cohort



Summer 2025 cohort described how they felt before and after completing LEAP in their own words

What we learned

Our leadership development programmes are delivering meaningful impact at an individual level, with evidence of increased confidence, self-awareness and capability among participants. The talent acquisition process is working well, with positive feedback from both successful and unsuccessful candidates reinforcing trust in the process. Coaching continues to reach more staff and the regional partnership adds significant value.

However, NHS Staff Survey data highlights that leadership consistency remains variable across the organisation. While immediate managers are viewed positively, with the Line Management sub-theme scoring 69.9% (above the NHS Wales benchmark), staff continue to report that senior leaders are insufficiently visible, disconnected from frontline services and not always responsive to concerns.

Staff engagement and experience

Engagement

We measure staff engagement in three ways: the monthly Staff Voice Survey, our local People Culture Surveys, and the annual NHS Wales Staff Survey.

All three give a consistent engagement result of around 71-72%, which gives us confidence in the picture they paint:

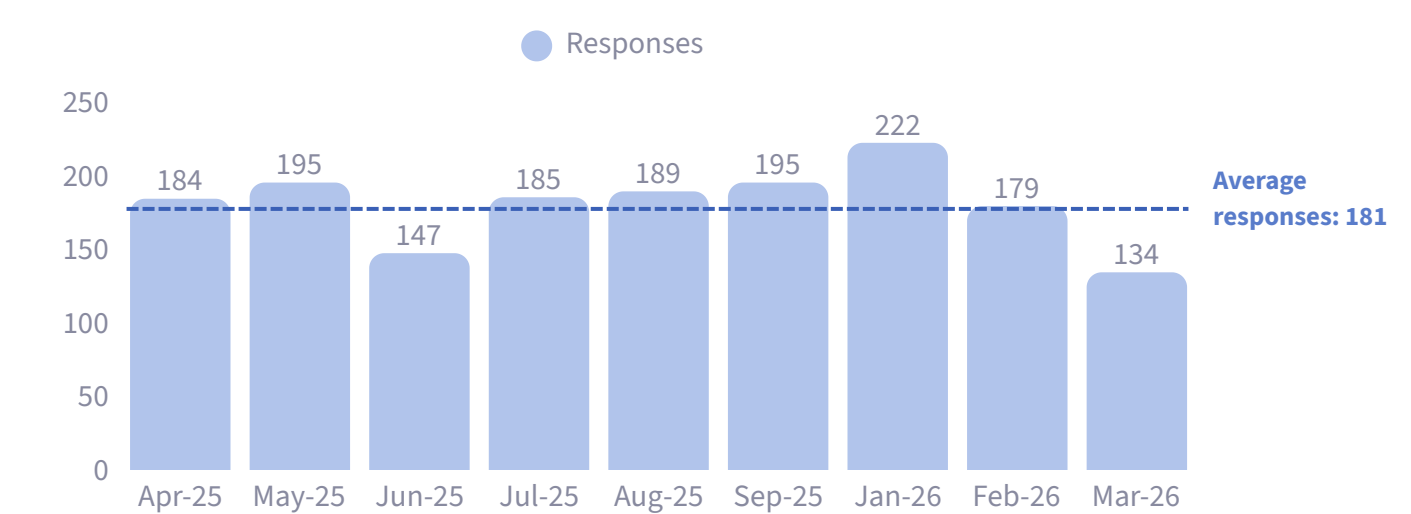
	2023-24	2024-25	2025-26
Monthly Staff Voice	73%	72%	72%
People Culture Survey	n/a	72%	71%
NHS Wales Staff Survey (Hywel Dda results)	71%	71%	70.7%

People Culture Surveys were not in place for the period of 2023-24.

The Staff Voice Survey

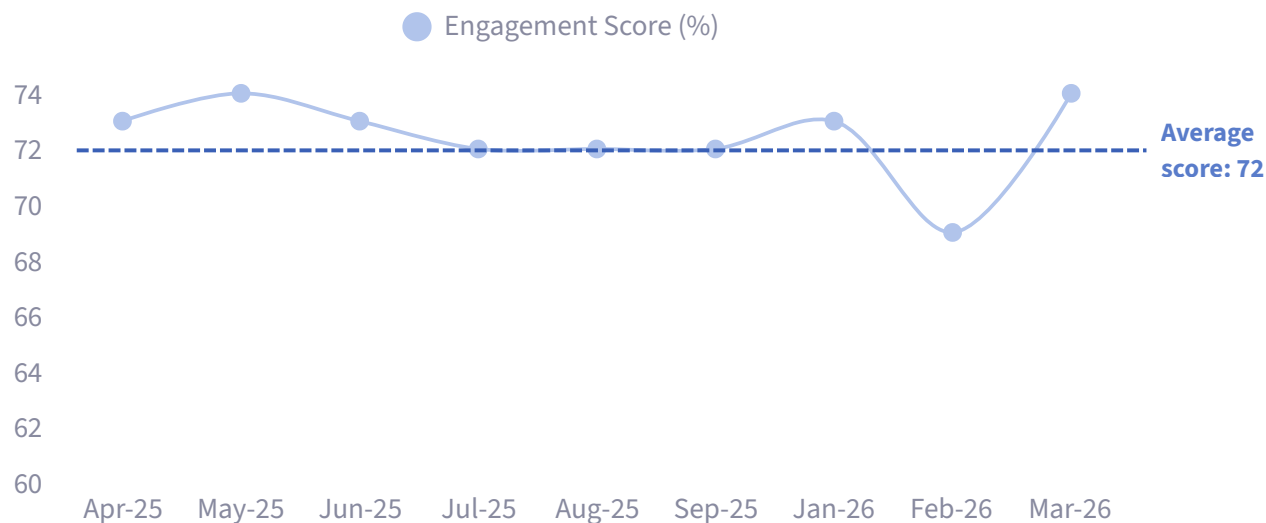
The Staff Voice Survey is sent to approximately 1,000 unique staff each month via email. This year, 1,630 staff completed the survey across the 9 months that it was open, with an average engagement score of 72% (3.6 out of 5). The Staff Voice Survey is paused during October, November, and December to allow for completion of the national NHS Wales Staff Survey. The following charts show the levels of responses and engagement scores by month.

Staff Voice Survey 2025-26: Responses by month



Response volumes stayed broadly stable across the year, with January recording the highest participation at 222. The dip to 134 in March may reflect end-of-year pressures rather than reduced willingness to engage.

Staff Voice Survey 2025-26: Engagement score by month



Engagement scores held steady at 72% across the nine active months, with only a brief dip to 69% in February 2026 before recovering to 74% in March.

NHS Wales Staff Survey

The 2025 NHS Wales Staff Survey shows our Staff Engagement Index has fallen to 70.7%, marginally below the NHS Wales average, with all three contributing components (involvement, motivation and advocacy) showing deterioration. Together, these findings indicate a weakening sense of connection between our staff and the organisation.

Engagement questions

The two questions staff score highest across all three surveys are "I am happy to go the extra mile at work" and "I am enthusiastic about my job." These are encouraging signs of motivation and commitment. However, staff involvement in decision-making "I am involved in deciding on changes that affect my work", consistently scores lowest, and is a key focus for the year ahead.

Responses to Staff Engagement questions compared across Staff Voice, People Culture Survey and NHS Staff Survey 25-26

	Monthly Staff Voice	People Culture Survey	National Staff Survey
I am happy to go the extra mile at work when required	85%	84%	79%
I am enthusiastic about my job	75%	70%	65%
I am proud to tell people I work for my organisation	60%	62%	57%
I am able to make improvements in my area of work	55%	62%	59%
I would recommend my organisation as a place to work	54%	52%	56%
I look forward to going to work	57%	49%	50%
I am involved in deciding on the changes that affect my work	47%	47%	44%

Experience

Organisation Development Relationship Managers (ODRMs)

Our ODRMs continue to provide proactive and responsive support to local teams, helping to create healthier and happier workplace cultures. Each CCG and directorate across the Health Board has a designated ODRM who works in partnership with leaders and their teams to understand what matters most to staff and what makes the greatest difference to their experience at work.

An essential element of this role is the ability to influence and nurture relationships as a catalyst for positive change. By compassionately listening to and understanding staff feedback, our ODRMs help ensure that organisational aspirations are aligned with the needs and expectations of our workforce. This strengthens engagement by fostering a sense of value and belonging, enabling teams to perform at their best.

This is particularly important given Staff Survey findings which indicate a weakening sense of connection between staff and the organisation. Through fostering trust, encouraging meaningful involvement and creating opportunities for staff voices to inform improvement, ODRMs play a protective role in mitigating the impact of declining engagement.

This contribution is reflected in the consistently positive feedback received, highlighting the ODRM team's ability to build trust and provide people-centred support which powerfully reconnects staff with the Health Board at a personal level. As two colleagues reflected:

“

Over the past year it has felt like you and your team were the only ones who were just interested in us as human beings, and not numbers on a page, and you have made me feel a little more positive in my future career here, when earlier on this year all I could really envisage was leaving at the earliest opportunity, and that is the honest truth.”

“

Thank you - you've saved me from walking away from something I love doing. Without your teams input I don't think we would have a team. I deal with the worst type of conversations with my patients daily, but the relationship breakdown and incivility was becoming unbearable and causing sleepless nights, not my patients but my work colleagues. Things are so much better now and I am back to myself and we feel like a team again.

People Culture Surveys

As part of the exploration phase, our ODRMs use a bespoke culture survey alongside semi-structured conversations with staff to gain deeper insight into local workplace cultures. This enables the identification of emerging issues within teams and services which inform co-created people culture plans owned by local leadership teams, with guidance and support from their ODRMs.

People Culture Surveys have been completed with 93 teams (1,789 staff) and culture conversations held with over 1,223 staff up to March 2026. To date, 31 teams have been re-surveyed, allowing measurement of cultural change over time and evaluation of the impact of targeted interventions. This data is also triangulated with the NHS Wales Staff Survey to identify emerging trends and inform ongoing OD support.

Examples of positive cultural movement include:

	People and Culture	Engagement	Retention
Endoscopy, WGH (Feb 2024 to Sep 2025)	3.9 to 4.4 (+12.8%)	3.8 to 4.3 (+13.2%)	3.5 to 3.9 (+11.4%)
Radiology, GGH (Jan 2023 to Jan 2025)	3.3 to 3.6 (+9.1%)	3.2 to 3.3 (+3.1%)	2.9 to 3.3 (+13.8%)

Figures show the percentage point increase between first and follow-up People Culture Survey. Scores are measured across seven cultural themes grouped into three areas.

What we learned

We continue to capture and utilise both qualitative and quantitative staff experience data to inform, measure and improve our workforce initiatives. By bringing together multiple sources of workforce intelligence, we use data and feedback to monitor trends, support evidence-based decision making and better inform our cultural progression. However, while significant progress has been made, there is further opportunity to move beyond the collection and triangulation of workforce metrics towards generating predictive insight.

Psychological safety, voice and trust

Where we started

In our 2024-25 Staff Survey findings, 74% of staff agreed Hywel Dda encourages reporting of errors, near misses and incidents, and 76% felt secure speaking up about unethical behaviour. However, only 55% felt safe raising general concerns, 3% below the NHS Wales average. The core challenge was not encouraging staff to speak up, but demonstrating that doing so leads to visible action and improvement.

What we did

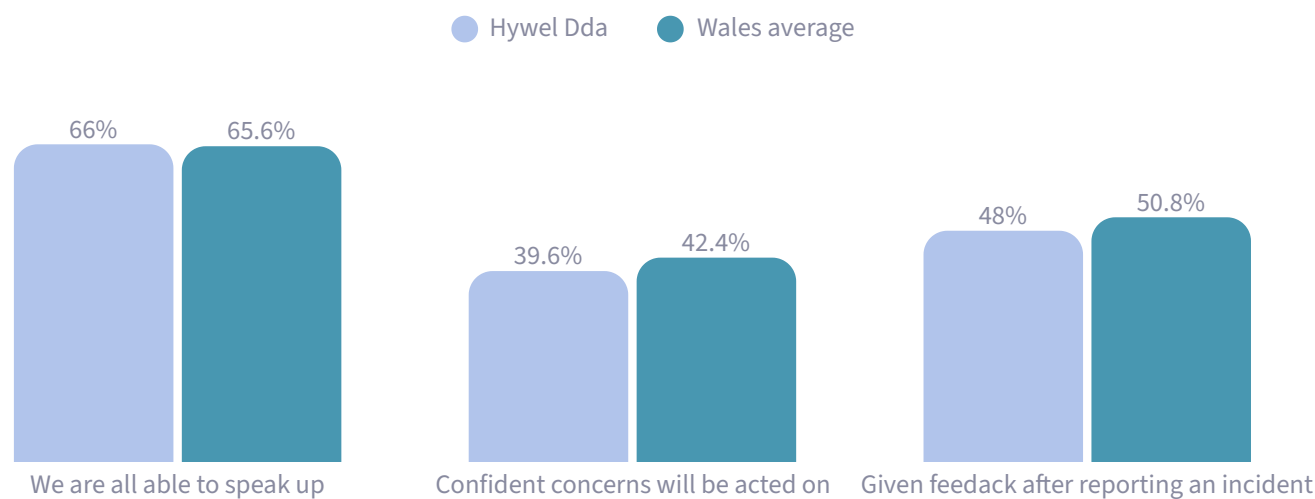
The Speak Up and Make Meaningful Change (SUMMC) approach continues to provide confidential routes for staff to raise concerns, supported by trained designated responders and Freedom to Speak Up Guardians working within a restorative framework. During 2025-26, this work continued to be embedded across the organisation.

A detailed six-monthly Speak Up report will be presented to the PODCC in August 2026, covering full progression data, activity levels and outcomes. This section is therefore a summary overview, with the August paper providing the complete picture.

What changed

The 2025 NHS Wales Staff Survey ranked "We are all able to speak up" as Hywel Dda's third highest scoring theme. However, fewer than 40% of staff believe their concerns will be listened to and acted upon, and fewer than half receive feedback after reporting an incident. The gap between willingness to speak up and confidence in organisational response remains the critical issue.

Staff feel safer speaking up than they trust action will follow



What we learned

Three systemic challenges underpin the gap between raising concerns and seeing change: culture and leadership, psychological safety, and organisational action. Recurring themes in concerns raised include bullying, harassment, workforce wellbeing, and patient safety. While the SUMMC framework has strengthened confidence in the mechanisms available to staff, confidence in the process still depends on concerns being addressed effectively and resulting in visible action.

The findings suggest that the challenge remains centred on strengthening confidence that concerns will be responded to fairly, acted upon appropriately, and accompanied by timely feedback. Organisational trust is reinforced when staff can see clear evidence that their voices are heard, valued, and lead to tangible improvements. While encouraging staff to speak up remains important, sustaining confidence in the Health Board's response to concerns continues to be our more enduring challenge.

“

I recently used the Speak Up process to raise concerns about practice within the service, and I cannot overstate what a difference it made. Before this, I hadn't realised that such a supportive route even existed within the NHS. Discovering it felt reassuring in itself—because when you've tried every other avenue and nothing changes, knowing there is still a place to turn is incredibly important.”

“

Many colleagues suggested that it is difficult to raise concerns and remain in post, but I hope this serves as an example of how speaking up can lead to positive change when people are willing to listen.

The Speak Up programme is, in my view, invaluable. It plays a vital role in keeping staff within the organisation and in promoting safer, more transparent practice. Most importantly, it ensures that staff voices are not only heard, but taken seriously in shaping decisions that affect both colleagues and the people we care for.”

Healthy working relationships

Where we started

NHS Wales' approach to healthier working relationships focuses on resolving workplace conflict at the earliest opportunity through informal resolution rather than formal processes. We have continued to embrace this approach to strengthen working relationships and promote a culture of openness and respect to support better outcomes for both staff and patients.

What we did

To build capability in conflict resolution at source, conflict resolution sessions are delivered through LEAP and the New Consultant Programme, and are also available to service areas on request.

We have also continued to provide proactive and responsive support to teams. A key element of this work is encouraging constructive interactions between colleagues. During the past year, we have facilitated more than 110 conversations between individuals and continue to support teams to strengthen understanding, encourage open dialogue and, where possible, resolve concerns informally before they escalate into formal processes.

What changed

Demand for restorative support has increased significantly. During the past year, we have observed a noticeable increase in conflict within teams, rather than solely between individuals, which is requiring additional conflict resolution support, particularly for reintegration and team building following formal processes. We are also seeing increasing levels of incivility and a growing reluctance to engage in constructive dialogue to resolve differences. Together, these trends highlight the importance of early intervention and ongoing support to maintain healthy and effective working relationships.

In response, we continue to prioritise restorative approaches that promote understanding, constructive dialogue and, where possible, forgiveness, over harmful confrontation and recourse to formal processes. While this approach aligns with our values and cultural progression work, it currently demands significant time and resources to implement effectively. Our small network of trained facilitators and mediators is under considerable pressure, with demand for support regularly outstripping available capacity. This highlights the importance of building leaders' capability and confidence to address conflict early, reducing reliance on specialist intervention and supporting the wider embedding of restorative approaches across the Health Board.

What we learned

Workplace conflict carries significant personal, cultural and organisational consequences when left unresolved. Our experience continues to demonstrate that early restorative intervention is more likely to achieve sustainable outcomes, preserve relationships and reduce escalation into formal processes. However, many leaders still lack the confidence and capability to intervene early when conflict arises. Strengthening these skills remains a key priority, enabling them to resolve issues constructively and create healthier working relationships across teams.

Recognition and appreciation

Where we started

In the previous reporting period, 89 colleagues received a Chair's Commendation Award, 229 received Long Service Awards, and one Hywel's Applause ceremony was held. We have continued to deliver our established Recognition and Appreciation Programme, providing visible and meaningful opportunities to recognise the contribution, commitment and achievements of colleagues across the organisation.

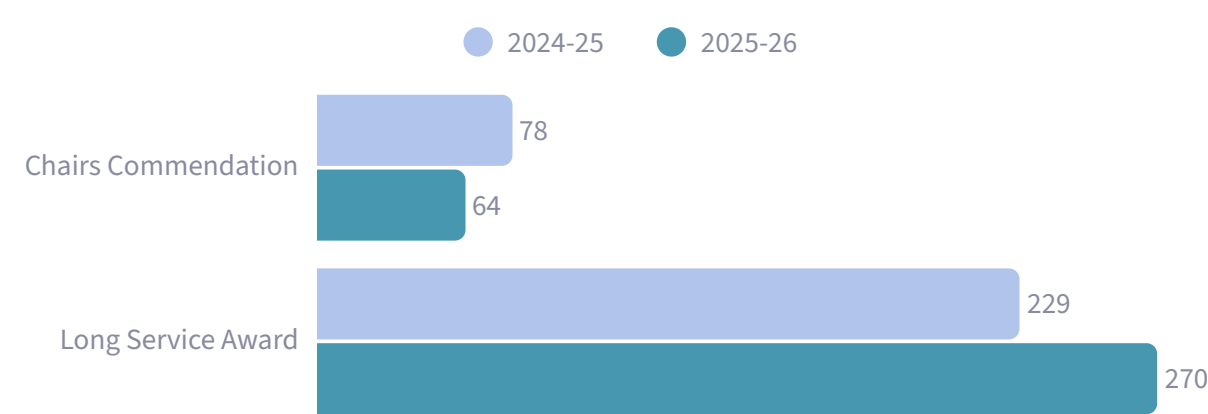
What we did

We developed and secured a successful Charitable Funds bid to enhance our 2026-27 Staff Recognition and Appreciation Programme. This investment will support equitable and meaningful year-round appreciation that reinforces organisational values, staff morale, engagement and, ultimately, patient care.

What changed

During 2025-26, 64 colleagues received a Chair's Commendation Award compared with 89 in the previous year, representing a 28% reduction. However, 270 colleagues received Long Service Awards compared with 229 the previous year, representing a 17.9% increase. In addition, 33 colleagues received a Hywel's Applause Award during 2025. Preparatory work is underway ahead of the 2026 submission cycle, with the formal submission window expected to open during September/October 2026.

Long Service recognition grew, but fewer colleagues were nominated for Chair's Commendations



These trends point to a growing appetite for everyday recognition alongside formal award programmes, and are shaping our plans for 2027 onwards.

What we learned

The reduction in Chair's Commendation Awards highlighted the importance of understanding how recognition is experienced across the organisation and whether existing approaches continue to meet the needs and expectations of the workforce. Insight gathered through recognition events, engagement activity and staff feedback suggested that whilst formal recognition remains valued, there is a growing desire for more visible, consistent and everyday forms of appreciation alongside traditional award schemes.

Whilst established recognition programmes continue to have value, maintaining the status quo alone is unlikely to meet the increasingly diverse expectations of the workforce. The decline in Chair's Commendation Awards, alongside feedback indicating a desire for more personalised and everyday forms of appreciation, reinforces the need to evolve our offer.

“

The Chair's Commendation Awards was inspiring, moving and deeply meaningful. It offered everyone a rare moment to be able to pause and recognise the dedication that often goes unseen in the busyness of everyday work. The atmosphere was uplifting with everyone celebrating, laughing and even crying together with pride, creating a real sense of unity and shared purpose.”

“

This isn't just a 'nice gesture' it has practical impact on how a person is seen. As a manager it provides me with a Health Board wide platform to showcase the excellent work my team and others are doing and give them recognition outside of our directorate for a job well done. This fosters a culture of positivity and motivation amongst the team

“

As a recipient of the award, I felt privileged that someone had taken the time to nominate me and that they felt the work I was doing was worthy of being recognised. I feel it demonstrates to my colleagues that the Health Boards values are embedded in my practice and something I pride myself in doing. I feel it contributes to my self-perception and has given me some reassurance that I am making a difference to people, that I am credible and ready for career progression.”

Performance management

Performance management continues to be a key organisational priority, with regular and meaningful performance conversations central to how we develop our staff, support wellbeing and maintain accountability across the Health Board. In 2025-26 we continued to build on our strong foundations, with a focus on reaching more staff, addressing barriers to compliance, and ensuring reviews drive genuine development rather than box-ticking.

Where we started

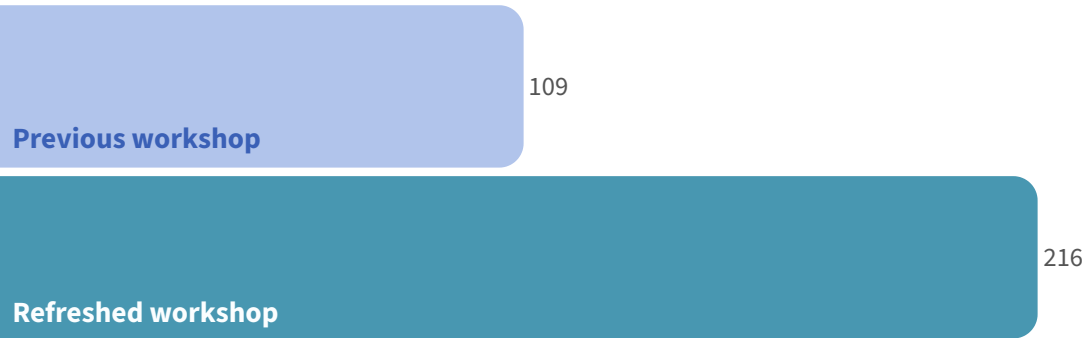
We entered 2025-26 having achieved 84.2% PADR compliance in December 2024 (prior year baseline which was the best in Wales at that point), with staff satisfaction at 87.6% in the 2024 NHS Wales Staff Survey. Our refreshed Inspiring Meaningful Performance Management Workshop, relaunched at the start of 2024-25, had already demonstrated strong early results. The challenge for 2025-26 was to sustain momentum, close the gap to the 85% target, and extend reach to underrepresented staffing groups.

What we did

At the start of 2025-26, we refreshed and relaunched the Inspiring Meaningful Performance Management Workshop to help managers have more productive and honest conversations with their teams, with a focus on performance management as a development tool rather than a compliance exercise.

During 2025-26, the refreshed workshop attracted 216 attendees across 21 sessions, a 67% increase on the previous year. Since its launch, the workshop has reached 257 colleagues in total (69% full-time, 27% part-time, 4% unknown).

Attendance grew by 67% following the workshop refresh



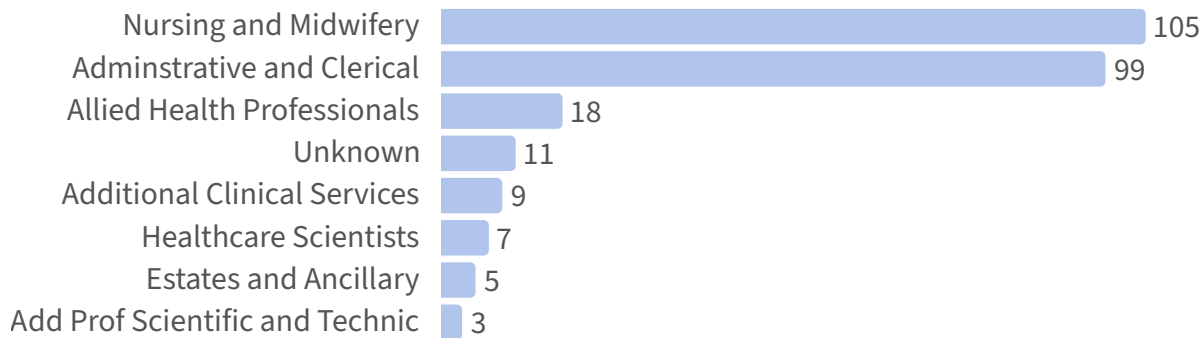
Data spans before and after OCP implementation. Directorate alignments may vary across the dataset.

Attendance in the workshop is particularly strong among nursing and midwifery staff and administrative and clerical staff, who represent 40.8% and 38.5% of attendees respectively.

Women and Children, Operations Management, and Planned and Specialist Care recorded the highest levels of attendance, accounting for 15%, 14%, and 8.5% of all attendees respectively.

Glangwili Hospital had the highest site representation, accounting for 27% of all participants.

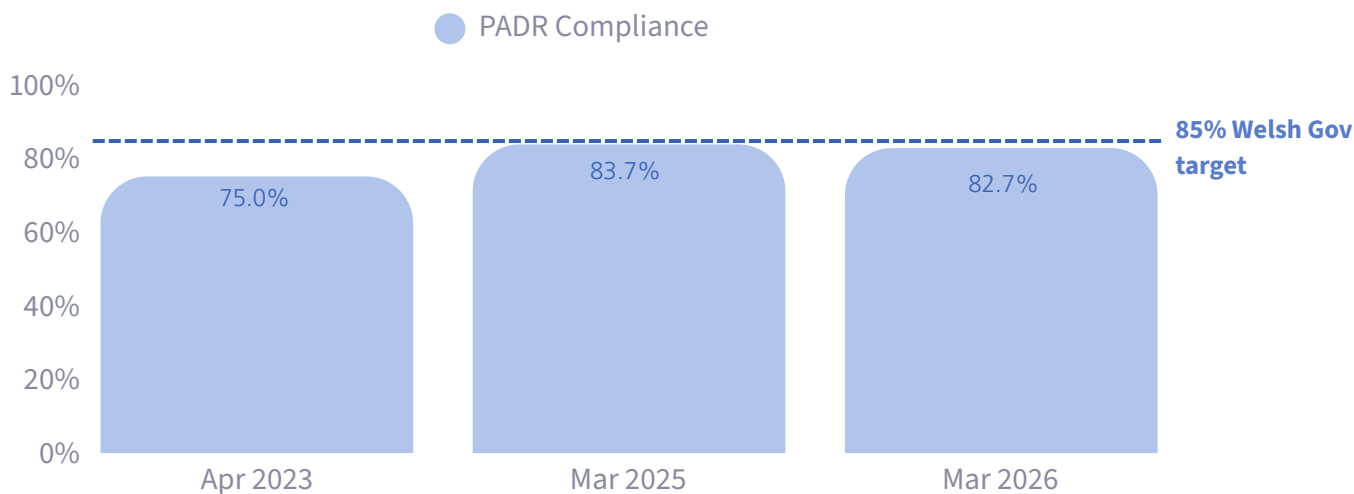
Nursing, Midwifery and Administrative staff make up eight in ten workshop attendees



What changed?

In March 2026, the Health Board’s PADR compliance was 82.7%, a 1% decline from the previous year of 83.7% (March 2025). Targeted support is underway, including direct contact with staff in low-compliance areas and engagement with line managers to address barriers.

PADR compliance improved significantly but has dipped below its peak



These figures reflect ESR records updated by line managers and does not capture the quality or frequency of conversations.

What we learned

The 2024 NHS Wales Staff Survey showed 87.6% of staff were satisfied with their performance review, up 3.6% from 84% in 2023 and 1.6% above the NHS Wales average.

87.6%

(2024 satisfaction score)

+3.6%

(increase from 2023)

+1.6%

(above NHS Wales average)

We cannot directly link improvements in performance or PADR compliance to any single programme. However, there are encouraging signs that our Performance Management Programme is building confidence and engagement with the process across the Health Board. Attendees to the performance management workshop consistently report increased confidence in holding meaningful and honest conversations, and a greater understanding of performance management as a development tool.

Ongoing targeted support has identified three main barriers to compliance: technical difficulties with ESR recording, misunderstandings about the purpose of performance reviews, and service pressures making it difficult to prioritise conversations. Workshop attendance is concentrated in nursing, midwifery and administrative staff groups. Allied Health Professionals, Additional Clinical Services and Estates and Ancillary staff remain underrepresented and will be a focus for outreach in the year ahead. The correlation between workshop attendance and compliance (88% of attendees compliant) gives us confidence that accessible and practical development support makes a difference.

Retention and workforce stability

Our Nursing, Medical and Allied Health Professionals (AHP) and Health Sciences (HCS) Retention Groups continue to offer opportunities for staff to share unique experiences to identify and implement new ways of working across the Health Board.

Where we started

In 2024-25, the Health Board achieved its best-ever registered nursing turnover rate, becoming the best performing NHS organisation in Wales. For 2025-26, retention targets were set across the groups: Nursing (0.5% reduction), Medical (1% reduction), and AHP/HCS (1% reduction). Medical turnover remained a concern and was identified as a priority area for the year ahead.

What we did

Retention activity continued at organisational, service and team level. Our Nursing, Medical and AHP/HCS Retention Groups met regularly, using ESR data alongside local intelligence to monitor workforce trends, identify risks and inform improvement opportunities. Areas showing strong progress were also explored to identify what is working well and how it can be replicated elsewhere. Focused improvement work continued in four areas: conflict management, flexible working, workforce wellbeing, and leadership capability.

What changed

Rolling 12-month turnover figures to April 2026 showed:

Staff Group	April 2025	April 2026	Change
Nursing and Midwifery	5.29%	4.08%	-1.21%
Medical	11.78%	12.55%	+0.77%
AHP and HCS	8.31%	7.08%	-1.23%

Nursing and Midwifery

The Health Board has proudly maintained its position as the best performing NHS organisation in Wales for registered nursing turnover since 2024. Welsh Government acknowledged this progress at our Public Accountability Meeting in December 2025. Ongoing monitoring continues to ensure this does not create future talent pipeline pressures, with targeted recruitment and retention strategies in place for high-demand areas.

Medical and Dental

Medical turnover remains a key focus, including ongoing collaboration with our Health Board Medical Workforce Planning Steering Group to ensure an integrated approach across programmes. Data analytics identified high turnover among Specialty Doctors, enabling targeted action to better understand the factors influencing retention and develop appropriate support.

AHP and Health Sciences

Positive progress has been made across AHP and Health Sciences. While both staff groups have seen a reduction in turnover, we continue to work with leaders to understand the similarities and differences in experiences across professions, identify emerging trends, and develop targeted support tailored to each area.

Flexible working as a retention enabler

The Health Board's workforce is increasingly multi-generational, with different expectations around flexibility, wellbeing and career development. Starting in 2024-25, we led a Task and Finish Group for 15 months, embedding flexible working principles into all professional retention groups. Staff Survey results and staff feedback show consistent improvements in perceptions of flexible working over three years. Learning from this work continues to be embedded in leadership development programmes and informs how turnover trends are reviewed.



2025 NHS Wales Staff : Flexible working principles are successfully creating a supportive culture in our rural and regional workforce.

In a rural and geographically dispersed organisation, these findings are particularly significant. They indicate that where flexible working arrangements exist, they are supporting staff to remain in post and balance professional and personal responsibilities. This strength has direct implications for staff retention, wellbeing, and workforce sustainability and represents an area where the organisation has made tangible progress.

What we learned

Our Retention Group priorities remain strategically relevant and continue to shape delivery of our Retention Plan. Retention interventions need to be tailored by staff group and service area as a single organisational approach is not sufficient. Nationally, HEIW is currently evaluating data from the NHS Wales Retention Community of Practice (funded until March 2026), with the findings expected to inform future workforce planning and the ongoing development of retention interventions.

Looking ahead to 2026-27

Whilst this report reflects the progress made during 2025-26, it has also helped shape our priorities for the year ahead. Drawing on the learning and challenges highlighted throughout the report, the following areas will be the focus for our OD work during 2026-27.

Strengthen workforce intelligence and impact evaluation

We will develop and implement an OD-wide dashboard that brings together our data into a single integrated view. Connecting our datasets will help us to move beyond reporting activity and participation towards demonstrating measurable impact and organisational value. This will enable us to:

- Develop a more connected understanding of workforce culture and experience.
- Strengthen the evaluation of OD interventions and their impact on staff, teams and services to support evidence-based decision making and resource prioritisation.
- Identify emerging risks and opportunities earlier by using trend analysis to generate predictive insights.
- Enhance future OD reporting through clearer demonstration of outcomes and return on investment.

This will involve working closely with our Digital Directorate to ensure alignment with the Health Board's Digital Strategic Plan, particularly the Turning Data into Insight priority. Where appropriate, it will also support the integration of OD metrics within the Health Board's Power Business intelligence (BI) dashboard, enabling greater self-service access to workforce intelligence for leaders.

Faculty of OD

As part of our ongoing commitment to workforce sustainability, organisational effectiveness and the development of a positive workforce culture, pending Board approval, the Health Board will explore the feasibility of establishing two complementary Faculties: a Faculty of Education and a Faculty of OD. Together, they would represent a strategic shift in how capability is developed and deployed across the organisation, recognising the interdependence of workforce, organisational and patient outcomes. Rather than introducing additional programmes or initiatives, the Faculties would align these priorities within a single transformation approach.

The establishment of a Faculty of OD is particularly important in the context of the challenges highlighted throughout this report. It would provide a strategic mechanism for bringing together currently dispersed expertise, interventions and resources into a coherent and coordinated approach, ensuring OD activity is better aligned to the Health Board's most pressing cultural and organisational priorities.

By creating a stronger connection between leadership development, workforce experience, organisational effectiveness and improvement activity, the Faculty would help move us from delivering individual interventions towards achieving greater whole-system impact. This would support greater organisational impact by scaling effective practice, strengthening evaluation and aligning workforce investment with cultural and organisational outcomes.

Digital leadership development

Working in partnership with our Digital Directorate, we will develop a framework for building the capability, confidence and behaviours needed for leaders to effectively lead people, services and change in an increasingly digital environment. This will include creating practical resources and targeted development opportunities to support leaders in using digital solutions to improve staff experience, engagement, service delivery and organisational performance. Through a people-first, digital-always approach, we will help leaders embrace the opportunities offered by digital transformation whilst maintaining a strong focus on compassionate, inclusive and visible leadership.

Staff engagement and experience

Our 2025 NHS Wales Staff Survey findings report, shared with the PODCC in May 2026, noted our commitment to undertaking an organisation-wide review of how change is currently designed, communicated and implemented, with a specific focus on staff experience and involvement. The learning will be used to agree clear principles for how staff involvement will be built into change at all levels of the organisation and aligned with our digital leadership development priorities.

Psychological safety, voice and trust

We will move beyond encouraging staff to speak up towards demonstrating that speaking up leads to visible change, with planned actions including:

- strengthening leadership accountability for responding to concerns.
- implementing Active Bystander training.
- improving psychological safety in identified priority areas.
- developing clearer feedback loops so staff can see how their views influence decisions and improvements.

Success will be measured not only by staff willingness to speak up, but also through increased confidence that concerns are heard and acted upon.

Healthy working relationships

We will review our approach to healthy working relationships to inform a refreshed programme supported by realistic and sustainable resourcing. This will include seeking to strengthen alignment between informal and formal processes, ensuring staff and managers are supported to pursue early resolution wherever appropriate, reducing escalation and fostering a culture of constructive dialogue, understanding and accountability.

Recognition and appreciation

We will undertake a Discover Phase to gather staff insights and better understand what recognition and appreciation mean to colleagues across Hywel Dda, ensuring our refreshed programme is shaped by staff experiences and priorities rather than assumptions. Our Charitable Funding will support the continuation of existing programmes while enabling the testing and evaluation of new approaches to everyday recognition and appreciation, helping us develop a more meaningful and sustainable future offer.

Performance management

We will develop a refreshed PADR approach informed by a Wales-wide review of performance management, with new templates aligned to the emerging national Leadership and Management Framework and profession-specific appendices. We will also continue targeted support for lower-compliance areas and expand workshop reach to underrepresented staffing groups. Micro-learning opportunities will be developed to strengthen performance management capability across the Health Board.



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board