



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

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	19 August 2025
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Speak Up – Make Meaningful Change update on progress
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Lisa Gostling – Deputy Chief Executive/ Executive Director of Workforce and Organisation Development
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Robert Blake – Head of Culture / Workforce Experience Christine Davies – Assistant Director of Organisation Development Louise O'Connor – Assistant Director Legal and Patient Support

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Er Sicrwydd/For Assurance

**ADRODDIAD SCAA  
SBAR REPORT**

**Sefyllfa / Situation**

NHS Wales introduced its Speak Up agenda to promote a culture of openness, safety, and continuous learning. The aim is to empower staff at all levels to raise concerns confidently—whether it's about patient care, workforce wellbeing, or systemic issues—without fear of reprisal. By ensuring staff voices are heard, the agenda strengthens public trust, supports professional accountability, and helps prevent future failures in care. It's a proactive step toward creating a more compassionate, responsive health service for everyone in Wales.

This report provides an update on the continued implementation and advancement of the Speak Up, Make Meaningful Change (SUMMC) agenda, as initially introduced in the committee briefing dated 14 June 2023. It constitutes the first in a series of bi-annual reports, as requested by the Committee, to provide assurance and insight into the extent to which the Speak Up agenda is being embedded across the organisation.

The contents of this report will also be formally submitted for review by the Quality, Safety and Experience Assurance Committee at its forthcoming meeting. The SUMMC agenda continues to be implemented across Hywel Dda University Health Board (HDdUHB). All actions in both the self-assessment and development action plan and speak up audit action plan on the Audit Management and Tracking (AMaT) system are completed with the submission of this first paper.

**Cefndir / Background**

Following the launch of the national Speak Up toolkit, HDdUHB refined its local approach to embedding a culture of psychological safety and openness. This evolved into the SUMMC agenda, officially launched in October 2024.

SUMMC is an informal process designed to support the raising of both clinical and non-clinical concerns, including errors, near misses, and mistakes. It has been introduced to create a

psychologically safe environment in which staff feel encouraged to report issues without the immediate need to engage formal processes such as Datix or the Respect and Resolution Policy. Whilst SUMMC complements these established procedures, it does not replace them. Where concerns raised through the agenda are deemed too serious to be addressed informally, they will be appropriately escalated into the relevant formal channels.

In support of the initiative, the organisation implemented key platforms including the Work In Confidence (WIC) system and the Speak Up Safely Champions (SUSC) programme. A dedicated [SharePoint site \(internal access only\)](#) was created, hosting a range of resources including an introductory video, guidance materials, and a process map. These assets enable staff to make informed decisions about how to raise concerns — whether anonymously or face to face — through various safe mechanisms.

To align with counterparts in England and across parts of Wales, HDdUHB rebranded Speak Up Champions as Speak Up Guardians (SUG), empowering them to respond to concerns through both direct and anonymous channels. Guardians received training on the WIC platform to further support this role, particularly in relation to clinical issues.

An additional mechanism, the Voices Network, was established to escalate high-level concerns to a group of senior leaders. Operating within defined timescales, this network ensures shared ownership of risk and timely resolution.

This cultural shift moves away from the traditional “All-Wales” narrative and instead positions speaking up as a normalised part of organisational life. The intention is to reduce stigma around error, promote continuous learning, and demonstrate visibly that appropriate actions are taken when concerns are raised.

### Asesiad / Assessment

HDdUHB remains committed to the ongoing implementation and deep-rooted integration of the SUMMC agenda across the organisation. As one of the earliest adopters of the WIC platform, the Health Board pioneered the use of confidential mechanisms to support speaking up and has subsequently seen increasing uptake and meaningful outcomes from staff engagement through this channel.

While a growing number of health organisations across Wales have since adopted similar approaches, HDdUHB continues to lead in terms of volume of concerns raised. The WIC platform has slowly become a credible and trusted route for staff to raise issues, enabling timely and effective action and reinforcing the organisation’s commitment to responsiveness and safety.

The historical memory of the organisation does provide barriers in embedding the new agenda. Some staff are still very cynical due to past experiences of speaking up and them not being positive or resulting in actions.

The National Staff Survey 2024 outlined progress made, it is encouraging to find that:

- ✓ **75 %** agreed or strongly agreed that the organisation encourages staff to report errors, near misses or incidents. **+4.6 %** on 2023 survey
- ✓ **76.2 %** felt secure to speak up around unethical behaviours. Aligning to the 2023 result and in line with all Wales result.
- ✓ **51.2%** felt that the organisation treats staff involved in error, near miss or incident fairly, a huge increase from 2023 by **+12.8 %**
- ✓ When errors, near misses or incidents are reports, my organisation takes appropriate action, so they don’t not happen again rose from **50.4 %** in 2023 to **57.7 %** in 2024.

The survey findings also indicate that further efforts are required to fully embed a culture of speaking up across the organisation -

- **55.7 %** felt safe to speak up around anything that concerned them. Which was **+ 4%** against the 2023 result but still **-2.8%** on all Wales average.

Question	Year	Positive responses (%)	Positive responses (%) - NHS	Negative responses (%)
<b>We are all able to speak up</b>				
14a) I always know what my work responsibilities are.	2023	79.8%	81.2%	10.9%
	2024	81.5%	81.6%	9.2%
14b) I am trusted to do my job.	2023	85.7%	87.5%	6.1%
	2024	86.6%	86.9%	6.0%
14c) There are frequent opportunities for me to show initiative in my role.	2023	68.2%	72.6%	14.6%
	2024	71.9%	72.5%	12.4%
14d) I have a choice in deciding how to do my work.	2023	66.0%	67.2%	15.0%
	2024	71.7%	71.8%	12.3%
14i) I would feel secure raising concerns about unsafe clinical practice.	2023	72.1%	73.4%	9.8%
	2024	73.9%	74.5%	9.7%
14j) I would feel secure raising concerns about unethical behaviour.	2023	76.0%	76.7%	11.4%
	2024	76.2%	75.7%	11.6%
14k) I am confident my organisation would address my concern.	2023	50.4%	51.3%	20.5%
	2024	53.7%	53.5%	20.7%
17d) I feel safe to speak up about anything that concerns me in this organisation.	2023	51.7%	55.8%	20.8%
	2024	55.7%	58.5%	19.9%
17e) If I spoke up about something that concerned me, I am confident my organisation would address my concern.	2023	36.7%	40.1%	25.6%
	2024	41.2%	43.6%	25.6%
23d) I am involved in deciding on changes introduced that affect my work/area/team/department.	2023	52.6%	54.2%	27.7%
	2024	47.5%	47.9%	28.3%

The Patient Safety theme also showed signs of encouragement where -

- ✓ There was a **12.2%** swing in staff feeling the organisation treated staff involved in an error, near miss or incident fairly.
- ✓ **7.1%** increase in staff feeling that the organisation took appropriate actions when errors, near misses or incidents are reported.
- ✓ **9.8%** more staff felt that they were given feedback about changes made in response to errors, near misses and incidents.

#### Patient safety

13b) My organisation treats staff who are involved in an error, near miss or incident, fairly.	2023	38.1%	43.7%	13.6%
	2024	50.3%	51.8%	14.4%
13c) My organisation encourages us to report errors, near misses or incidents.	2023	69.7%	73.5%	9.3%
	2024	74.2%	76.1%	10.5%
13d) When errors, near misses or incidents are reported, my organisation takes action to ensure that they do not happen again.	2023	50.0%	52.6%	12.2%
	2024	57.1%	57.2%	15.1%
13e) We are given feedback about changes made in response to reported errors, near misses and incidents.	2023	36.1%	42.7%	23.0%
	2024	45.9%	48.4%	25.2%

While these findings are highly encouraging, it remains concerning that a significant proportion of survey respondents still reported feeling adversely affected by the patient safety-related questions. This highlights the need for continued focus on fostering a psychologically safe environment where staff feel confident to speak up.

A report published by the National Guardian's Office, [Listening to the Silence \(July, 2024\)](#), highlighted that, despite Freedom to Speak Up Guardians handling a record number of cases, there has been little progress in improving the culture of speaking up within the NHS, as evidenced by findings from the NHS Staff Survey in England.

The report draws attention to a persistent disconnect between staff raising concerns and the subsequent actions taken by organisations. It also underscores the continued perception of unfair treatment following the act of speaking up, particularly in relation to errors, near misses, or incidents. Notably, the report reveals a decline in the confidence of medical professionals to raise concerns about clinical safety.

As Dr Jayne Chidgey-Clark, National Guardian for the NHS, poignantly stated:  
***"We ask people to speak up, and yet, when they do, often nothing changes."***

HDdUHB remains committed to dispelling the myths and negative perceptions surrounding the agenda. This process requires time and patience, as there has been limited communication available to develop suitable case studies, largely due to staff members' preference to maintain anonymity. Nonetheless, the continued efforts and growing awareness signal a promising shift towards greater openness and understanding, laying the groundwork for meaningful progress.

### **Speak Up Make Meaningful Change statistics**

Since the launch of SUMMC's new organisational identity in October 2024, the period from January to June 2025 has seen the creation of **39** new user accounts, with **34** successfully activated on the WIC platform. This uptake indicates that colleagues are increasingly engaging with the system, supported by ongoing workshops and development sessions designed to enhance familiarity and confidence in its use.

The platform now hosts **22 active responders**, enabling timely and effective responses to concerns raised, reflecting a growing commitment to collaborative communication and continuous improvement

The categories on the system keep broadening out and now include –

- Benefits, Rewards and Recognition
- Breach of Confidentiality
- Bullying and Harassment
- Clinical Concerns - (to which only Speak Up Guardians can reply to)
- Discrimination
- Diversity and Inclusion Matters
- Leadership and Management
- Other
- Patient Safety – (to which only Speak Up Guardians can reply to)
- Resources to do my Job
- Sexual Safety
- Support around Finances
- Thinking of leaving
- Unpaid Carer's Concerns
- Values/Behaviours
- Wellbeing

## Anonymous concerns

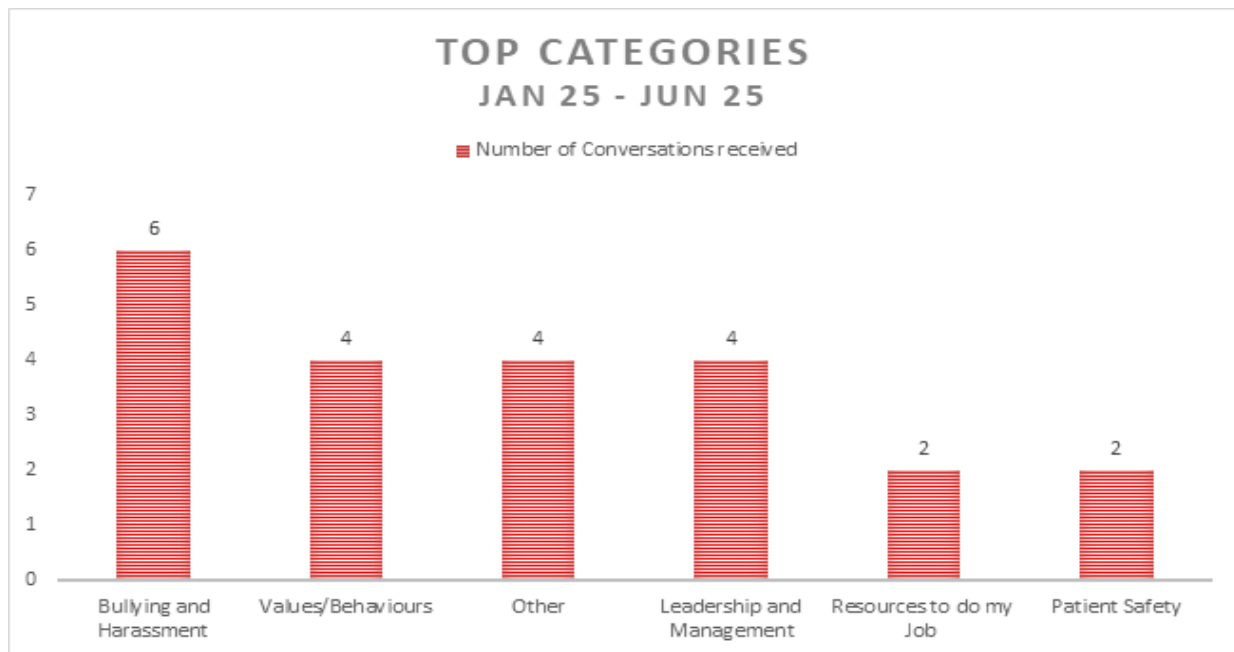
During the period of the last 6 months, the system has seen:

Concerns raised	Closed	Open	Average time to first respond	Average time to close
27	22	5	2 days	30 days

The average time taken to close conversations has been influenced by a small number of extended cases, which required longer resolution periods due to their sensitive nature and the range of options explored in collaboration with the individuals who raised the concerns.

Currently, open conversations relate to the following areas:

- Bullying and Harassment
- Breach of Confidentiality
- Values and Behaviours
- Patient Safety
- Clinical Concerns
- Other



The statistics show that the most popular day to start a conversation is a **Friday** with the most popular hour to start a conversation being **1pm**.

### **The Direction of Travel**

The period has seen an increase of **42%** in concerns raised, this totalling **27** conversations.

The average time to first respond has reduced from **4** days to **2** days with a huge decrease in the average time to close to only **30** days from **43** days.

Time period	Concerns raised	Closed	Open	Average time to first respond	Average time to close
January 25 - June 25	27 (+42%)	22 (+16%)	5	2 days	30 days
July 24 - December 24	19 (+90%)	19 (+90%)	0	4 days	43 days
January 24 - June 24	10	10	0	1 day	56 days

### Category breakdown

The largest increase in concerns being raised is within the Bullying and Harassment category and Benefits, Rewards and Recognition, conversely Values/Behaviours and Discrimination have both reduced over the last 6 months.

The inclusion of Patient Safety and Clinical Concerns as categories, in which only the SUG can only be accessed to respond, has seen just a small number of concerns raised. The majority were appropriately signposted to be raised as DATIX issues as the Guardians did not feel that an informal process could be utilised to resolve the issue. The other has been escalated up to the Director of Nursing to gain a suitable response to the concern raised.

Concern Category	Jan 24 - Jun 24	Jul 24 – Dec 24	Jan 25 – Jul 25	Difference
Bullying and Harassment	1	4	6	+2
Leadership and Management	4	3	4	+1
Other	4	4	4	
Benefits, Rewards and Recognition	0	1	1	
Resources to do my Job	0	1	2	+1
Discrimination	1	2	0	-1
Patient Safety	0	0	2	+2
Thinking of leaving	0	0	1	-1
Values/Behaviours	0	4	4	
Clinical Concerns	0	0	1	+1
Support around Finances	0	0	1	+1
Wellbeing	0	0	1	+1
	<b>10</b>	<b>19</b>	<b>27</b>	<b>+8 (42%)</b>

Responders utilise the system to foster confidence and trust with colleagues who raise concerns. In certain instances, it may be necessary for the colleague to disclose their identity for appropriate actions to be taken. This process can require a considerable amount of time and may not always be feasible, particularly in cases where psychological safety is compromised.

## The Voices Network

The Voices Network comprises a multi-disciplinary group of senior leaders, representing the domains of Workforce, Medicine, Allied Health Professionals, Patient Safety, and Nursing. This group serves as the designated first point of escalation for any concerns that cannot be resolved at initial contact.

A clearly defined escalation protocol ensures accountability and timeliness. Any concern escalated to the Network must be actioned within 30 calendar days. Should resolution not be achieved within this timeframe, the matter is escalated to the relevant Director, who is also subject to the same 30-day resolution expectation. If unresolved at Director level, the concern will be referred onward to the Chief Executive and Chair for final consideration and action. The Network has been utilised on a limited number of occasions, each yielding highly effective outcomes. The clearly defined **30-day** response timeframe has played a crucial role in ensuring that colleagues seeking action or resolution feel acknowledged. This structured approach supports a timely and appropriate organisational response, reinforcing our commitment to accountability and responsiveness.

## Interpretation of Current Data

Analysis of trends since the launch of the SUMMC agenda indicates a sustained increase in the volume of concerns being raised via the WIC platform. The majority of these have been resolved informally at the point of contact, which may suggest several possible underlying factors:

- Residual Mistrust Across the Organisation: Staff survey results from 2024 suggest a lingering mistrust around the process of speaking up. This may reflect historical experiences or cultural norms that inhibit open disclosure.
- Limited Recognition of SUMMC Identity: Despite ongoing internal communications efforts, it appears that awareness and understanding of the SUMMC agenda and its associated processes are not yet fully embedded across the workforce.

Insights from the agenda indicate a steady increase in the number of concerns being raised through the Speak Up initiative. Many of these concerns are relatively straightforward in nature, particularly those related to workforce issues. These are being effectively addressed through signposting to appropriate resources, offering options, providing coaching, and collaborating with other Workforce and Organisational Development (WOD) teams to facilitate suitable actions or resolutions. Organisation Development (OD) teams have consistently promoted the importance of speaking up through various interventions and development programmes. These efforts have played a key role in educating staff about the mechanisms available to raise concerns related to workforce issues

Uptake of the mechanisms provided within the agenda to raise clinical concerns has been slower. Despite this, a small number of clinical issues have been reported and all have been successfully resolved using the Voices Network, demonstrating the system's potential when utilised. Clinical teams are now encouraged to reflect on how they actively support and reinforce the message of speaking up, particularly in relation to clinical matters. It is essential to address and reduce the fear that staff may experience when raising concerns, and to dispel any misconceptions about potential negative consequences for those who speak out. Furthermore, clinical teams should evaluate how they establish and maintain effective feedback loops that clearly demonstrate the actions taken in response to concerns raised. Normalising

these conversations and visibly acting on feedback are critical steps in fostering a culture of openness, trust, and continuous improvement.

These findings indicate a need for continued cultural development and targeted educational interventions. Further strengthening visibility of the SUMMC identity—alongside amplifying positive staff experiences—will be critical to fostering trust and advancing psychological safety.

## **Evolving the agenda**

### **1. Learning event**

A dedicated learning event for all Responders, SUG, and members of the Voices Network was held on 16 July. This workshop brought together all individuals involved in Speak Up mechanisms to reflect on current practices and support continuous improvement in the implementation and management of the agenda.

The event focused on the positive aspects of the SUMMC agenda, particularly the growing recognition and implementation of its mechanisms across the organisation. However, attendees engaged in discussions exploring potential reasons why staff may feel unsafe when raising concerns, and what underlying factors contribute to the low levels of psychological safety within the organisation. It is anticipated that the Culture/Workforce Experience team will facilitate these workshops on a biannual basis to promote continuous learning and sustained improvement.

Some of the areas the discussion concentrated on were:

#### ***Leadership***

It was collectively acknowledged that HDdUHB may have a leadership team that lacks maturity around building psychological safety. Many leaders have not had sufficient exposure to effective role modelling that encourages and supports speaking up safely—whether to colleagues, peers, or senior leaders. The group emphasised the importance of normalising conversations that involve constructive challenge, recognising that such dialogue should be embedded within the organisation's culture. Attendees were reminded of the "***Art of the Honest Conversation***" e-learning module, which is included within the organisation's performance management guidance, as a valuable resource to support this cultural shift.

Furthermore, it was agreed that role modelling the ability to speak up must begin with Executive colleagues. The need to visibly demonstrate openness to appropriate questioning, constructive challenge, and feedback should be driven from the top, forming a key part of the leadership agenda.

#### ***Mind the Gap***

The group also reflected on evolving workforce expectations, particularly across generational lines. Emerging generations of staff increasingly expect their voices to be heard and valued within the workplace. In contrast, previous generations, such as Generation X and early Millennials, were often managed under a traditional command-and-control leadership model. This approach has, in many cases, led to a culture of silence, where individuals may feel that speaking up is discouraged or even detrimental. As a result, some staff have become disengaged or hesitant to raise concerns, fearing negative consequences or reputational damage.

The group proposed several initiatives aimed at fostering psychological safety within the organisation:

- **Development of a Standardised Meeting Narrative:** A draft script for use in virtual meetings that reinforces the organisation's core values of respect, openness, and transparency. This narrative is intended to encourage positive challenge and inclusive dialogue.
- **Establishment of a Leadership Peer Network:** A support network for leaders to build confidence in their decision-making capabilities, particularly during times when their leadership is questioned or challenged.
- **Collaborative Measurement Framework:** A joint initiative between the Patient Safety and Organisational Development teams to develop a set of metrics that can identify and assess correlations between patient safety concerns and workforce-related issues.
- **Speak-Up Support Toolkit:** A resource designed to provide colleagues with accessible and appropriate language to use in situations where they feel the need to speak up but may lack confidence in how to express their concerns effectively. The toolkit will look to include suggested narratives and phrasing to help navigate honest conversations with clarity and respect with a long term outcome of normalising these.
- **Speak Up Guardians:** the SUG programme requires targeted development, including a formalised role design and enhanced recruitment efforts across all counties, particularly Pembrokeshire and Ceredigion, where representation remains limited.
- **Storytelling:** The OD team will further enhance the robust communication strategy, with increased focus on storytelling as a mechanism to foster cultural change. Real-life staff narratives illustrating how speaking up has resulted in tangible improvements will be shared to demystify the process, dispel misconceptions, and build trust in the agenda.

## 2. The People Experience Framework

The People Experience Framework has been designed by the Patient Experience (PA) Team. The Framework will be utilised to evaluate the current state of staff and patient experience through a values-based lens. This framework will be distributed to all Care Groups to support a self-assessment process, enabling the establishment of a baseline dataset. This will form part of the new quality and governance business working arrangement within the new care groups.

## 3. Listening and Learning Sub-Committee

The Listening and Learning Sub-Committee has been established to support organisational learning through the creation of effective feedback loops from both clinical and non-clinical incidents. Rob Blake has recently joined the committee as an attendee; however, the formal connection between SUMMC and the Sub-Committee has yet to be fully defined.

To address this, the Sub-Committee will review this paper and its contents and will formally incorporate "Speaking Up" as a standing agenda item. The format through which the Sub-Committee receives feedback, whether in the form of reports, case studies, or other mechanisms, will be discussed and agreed upon to ensure consistency and impact.

There is also a recognised need to develop a comprehensive dashboard that provides an overview of this data, alongside other relevant metrics, to support the ongoing enhancement of both patient and staff experience. The Culture and Workforce Experience (CWE) team will collaborate with the PA team to explore opportunities for co-developing a dashboard that effectively captures and presents relevant data. This joint effort aims to identify innovative approaches to visualising and utilising data to enhance both patient and staff experience. A key challenge in this endeavour remains the fragmentation of data across multiple software platforms, each housing distinct data fields. The complexity of extracting and consolidating this

information into a single, comprehensive data source will require careful consideration and technical alignment.

## Conclusion

The importance of fostering a culture of speaking up and establishing psychological safety is well-evidenced in healthcare literature. HDdUHB has made significant progress in meeting national expectations for organisations seeking to embed such frameworks. The Health Board is now considered an exemplar site across Wales, with many colleagues and external partners seeking insights into its successful approach.

This agenda is being advanced within the context of a “perfect storm”, shaped by the weight of historical organisational memory, a diverse generational workforce, and the relentless pressures of a high-demand system. While incremental progress is being made, these gains are often undermined by recurring incidents that set the agenda back. This is not solely the responsibility of Organisational Development, Workforce, or Clinical teams, it is a collective organisational imperative. The consequences of inaction are well documented, with clear evidence of the detrimental impact on staff wellbeing, patient safety, and the overall quality of care.

Speaking Up is increasingly gaining momentum across NHS Wales, with HDdUHB recognised as an exemplar in this area due to the governance structure and framework it has implemented. However, all indications suggest that embedding this practice into the organisational culture will be a gradual and complex process, for which no definitive best practice currently exists.

The organisation remains committed to advancing this agenda, acknowledging that progress may be uneven and that setbacks are an inherent part of transformational change. To navigate these challenges effectively, HDdUHB must continue to reflect, review, and evolve its approach, ensuring that the environment remains safe, inclusive, and conducive to staff flourishing.

## Argymhelliad / Recommendation

The Committee is asked to

- **NOTE** the update provided within this report regarding speak up
- **TAKE ASSURANCE** from the progress outlined.

The organisation acknowledges that further work is required to ensure the consistent and sustainable embedding of a Speak Up culture across all operational areas.

Hywel Dda University Health Board remains firmly committed to this agenda, recognising the significant benefits it brings to the workforce, patients, and wider organisational culture.

### Amcanion: (rhaid cwblhau)

### Objectives: (must be completed),

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.1.6 Ensure robust mechanisms are in place to deliver effective staff engagement in accordance with the Health Board’s values and behaviour framework.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol:	N/A

Datix Risk Register Reference and Score:	
Parthau Ansawdd: Domains of Quality <a href="#">Quality and Engagement Act (sharepoint.com)</a>	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: <a href="#">Quality and Engagement Act (sharepoint.com)</a>	6. All Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	1 Workforce Stabilisation 2 Financial recovery and route map
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022</a>	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS 5. Offer a diverse range of employment opportunities which support people to fulfill their potential

<b>Gwybodaeth Ychwanegol: Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	<a href="#">‘Speaking Up’ for patient safety and staff well-being: a qualitative study   BMJ Open Quality</a>  <a href="#">2024-NSS-2023-report.pdf</a>
Rhestr Termiau: Glossary of Terms:	Hywel Dda University Health Board (HDd UHB) Speak Up, Make Meaningful Change (SUMMC) Work In Confidence (WIC) system Speak Up Safely Champions (SUSC) programme Speak Up Guardians (SUG) Workforce and Organisational Development (WOD) Organisation Development (OD)
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Diwylliant, Pobl a Datblygu Sefydliadol: Parties / Committees consulted prior to People, Organisational Development & Culture Committee:	Listening and Learning Sub-Committee

<b>Effaith: (rhaid cwblhau) Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	N/A

<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	N/A
<b>Gweithlu: Workforce:</b>	N/A
<b>Risg: Risk:</b>	N/A
<b>Cyfreithiol: Legal:</b>	N/A
<b>Enw Da: Reputational:</b>	N/A
<b>Gyfrinachedd: Privacy:</b>	N/A
<b>Cydraddoldeb: Equality:</b>	N/A