

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

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	20 August 2024
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	National Staff Survey 2023 analysis and future progression
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Lisa Gostling (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)

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

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

Er Gwybodaeth/For Information

**ADRODDIAD SCAA  
SBAR REPORT**

**Sefyllfa / Situation**

This report contains an overview and analysis of the 2023 national staff survey managed through Health Improvement Education Wales (HEIW). This has seen a change in the process and methodology of the national survey. The report shares the analysis for Hywel Dda University Health Board (HDdUHB) from the October 2023 results and outlines the narrative around the process and future actions. The Committee is kindly asked to consider the findings and endorse support in building compliance across the organisation.

The national staff survey findings, response rate and engagement score now form part of the organisation's escalation framework set out by Welsh Government. There is now a deeper scrutiny around compliance and engagement metrics for HDdUHB.

**Cefndir / Background**

HEIW took a decision to incorporate the English leadership model for the staff survey in Wales. The model which has been annually run for over 20 years in England sees a return to a more in-depth quantitative 140 + question set, equating to 25-30 minutes for staff to complete.

One of the primary reasons for HEIW to follow the model for the national survey is previously relatively low compliance in Wales, whereas England regularly reports compliance around 50%. It is envisaged that following this model will boost compliance rates to a comparable level.

The 2023 survey has provided some organisational challenges across Wales and within the Health Board –

**Organisational hierarchies** have been a continuing issue, due to inconsistencies throughout NHS Wales. All organisations have different structures and as such trying to combine them to one size fits all has been difficult.

**Communication strategies** has been a major challenge with a lack of survey identity, appropriate communication mechanisms ensuring messages are received by all staff groups

and a lack of messaging that demonstrates what actions have resulted from staff completing the survey. The narrative of confidentiality has been a major concern through all reiterations of the survey, with staff not feeling safe in completing the questionnaire, hindering engagement.

**Software** is another concern in terms of the platform utilised for reporting of data and specifically enabling the more in-depth analysis.

## Asesiad / Assessment

### Current position

HDdUHB continues to actively listen and learn from staff voices and experiences. The organisation has developed and implemented a diverse range of robust local surveillance mechanisms that have underpinned workforce strategies over the last 3 years.

These local initiatives include –

- ✓ Two separate **Discovery Reports**, one concentrating on staff pandemic learning and the other on staff retention.
- ✓ **Board Outcome Survey (BOS)** – monthly temperature check aligning to national staff engagement score. This provides intelligence in staff group experience to inform research papers. We also own the raw data for this survey, which allows great scrutiny of the data and the ability to ask specific questions not found in any other survey.

This BOS has averaged a **15%** response rate over the last 18 months.

The survey also incorporates staff engagement questions to align it to the national survey. Over the last 18 months, the engagement index has averaged **73%**, on par with all Wales national 2023 score.

- ✓ **Work In Confidence** – an anonymous concerns raising platform where staff can voice an issue in confidence, which has seen over 90 issues raised through it.
- ✓ **Nursing Wellbeing survey** – second wellbeing nursing survey that provided in depth insights following COVID.
- ✓ **Culture Survey** – a bespoke survey aligned to the seven elements of the people culture framework that provides quantitative scores on micro team culture, engagement and retention.
- ✓ **Evolving exit interviews** – which have resulted in a shift from an average rate of 13% completion to 35% over the last 12 months.
- ✓ **Staff Wellbeing Needs Survey** – run for the first time in October 2022 and designed to assess awareness and needs of staff in relation to mental health at work

### National survey 2023 context

The 2023 national staff survey was a series of last minute decisions and actions which did not allow for a robust and proactive approach to gain staff engagement. HDdUHB has an experienced staff survey lead, who has managed the previous three national surveys, this being the most difficult from his perspective. The approach taken by HEIW lent itself very well to small organisations that are situated on one or two sites. There were many challenges raised

in some of the survey process, especially from Health Boards, but all organisations took part in the survey programme, despite these issues being unresolved.

The Culture and Workforce Experience Team were also holding a vacancy (OD Communications Officer) at the time. This role would have provided dedicated resource to manage this agenda. The Communications Team had to factor this work into a long list of work priorities, financial pressures piece, ongoing Reinforced Autoclaved Aerated Concrete (RAAC) comms, and building winter vaccinations/winter pressures work, which restricted their ability to support daily narrative.

### **Compliance rates**

HDdUHB experienced the lowest response rate at 12.0%. 6.1% lower than the next lowest health board rate which was Aneurin Bevan with 18.1%. The organisations with the highest compliance rates were HEIW – 75.2%, Digital Health Care Wales (DHCW) – 60.5% and Public Health Wales (PHW) – 54.4%

<i>Health Board Response rates</i>	
<i>Hywel Dda</i>	12.0%
<i>Aneurin Bevan</i>	18.1%
<i>Cwm Taff Morgannwg</i>	18.1%
<i>Swansea Bay</i>	18.8%
<i>Betsi Cadwaladr</i>	20.2%
<i>Cardiff &amp; Vale</i>	21.4%
<b><i>Average Response Rate</i></b>	<b>18.1%</b>

All Wales Staff Survey 2023 – Responses per Occupational Group  
 Total Responses = 1402 (12%)

Question	Question Response	Number of Response	Non	
			Clinical	Clinical
Q19 What is your occupational group?	Allied Health Professionals / Healthcare Scientists / Scientific and Technical	248	248	
	Ambulance (operational)	*		
	Commissioning	*		
	Digital	42		42
	General Management	186		186
	Medical and Dental	72	72	
	Nursing or Healthcare Assistants	171	171	
	Public Health	35	35	
	Registered Nurses and Midwives	323	323	
	Wider Healthcare Team	315		315
		<b>1392</b>	<b>849</b>	<b>543</b>

The occupational group structure makes it extremely difficult to drive down into whose voices were heard. All the issues cited earlier would have played a part in this result. It is recognised that this was the same for all NHS Wales health boards and bodies, however there are some considerations which may have hindered HDdUHB in gaining a higher compliance rate.

**Hypothesis one** is that HDdUHB may be at a disadvantage due to the widening scope of local intelligence methods being used. No other NHS Wales organisation accesses such a wealth of staff data, which may have worked against HDdUHB on a national survey platform. The workforce is drained, and the threat of survey fatigue is one that needs to be carefully considered for this survey result.

**Hypothesis two** is the return to an expanded quantitative question set does not support staff engagement, where staff have such restrictions on their time. It required a minimum time input from each respondent of 25+ minutes to complete, which seems dissonant with the pressures faced as a Health Board. For instance, some front-line nursing staff report they do not even have time to take a comfort break or have a drink when on shift.

Naturally the organisation is extremely disappointed at the compliance achieved for this survey and is determined to learn from this experience.

## **Reporting**

The initial survey results were released to the organisation in February 2024. These results were the overview for Hywel Dda and for NHS Wales. These results have been published for the organisation to review and are available on a dedicated [SharePoint page](#).

## **Engagement score**

The All-Wales engagement score includes all NHS organisations that took part in the survey.

The average engagement score in table 1 demonstrates the score for health boards only.

<b>Overall Engagement Score</b>		
	<b>2020</b>	<b>2023</b>
<b>All Wales</b>	75%	73%
<b>Swansea Bay</b>	75%	73%
<b>Cardiff &amp; Vale</b>	74%	73%
<b>Hywel Dda</b>	76%	72%
<b>Aneurin Bevan</b>	76%	72%
<b>Betsi Cadwaladr</b>	73%	72%
<b>Cwm Taff Morgannwg</b>	71%	71%
<b>Average Engagement Score for HB's</b>	<b>74%</b>	<b>72%</b>

Table 1

The engagement score achieved by HDdUHB is the same as the average engagement for other health boards.

The deep dive analysis of the survey data has been fraught with issues. HEIW experienced some difficulties with the software company, and they have needed to develop their own dashboard for presenting data. The quality of the data has been under constant review and there have been major restrictions in how organisations can manipulate and analyse the findings.

The dashboard will not allow any cross referencing across sites or staffing groups. The demographic questions cannot be reported on, so there is no option to analyse data for EDI purposes. The internal resource required for this analysis has been intensive, with many hours needed to make sense of the data and provide some narrative to what it is telling us.

## Survey results

The organisation has reviewed the top level data and its pleasing to note that HDdUHB is not an outlier across any of the data fields.

The top five areas that must continue and build from:

1. People here are compassionate in the way they behave towards patients/service users **+3 %** positively responded than all Wales score.
2. In the last 12 months, have you had an appraisal, PADR, annual review or development review? **+3 %** said yes than all Wales score.
3. The last time you experienced harassment or bullying at work, did you or a colleague report it? **+2%** more staff said yes in the organisation than all Wales score.
4. People here take effective action to help patients/service users in distress? **+2%** more staff said yes in the organisation than all Wales score.
5. I look forward to going to work, **+2%** more staff said yes in the organisation than all Wales score.

The areas of concern that the organisation needs to concentrate on were –

1. Less than half - 46% ( **7% less** than All Wales) feel there are opportunities to develop their career.
2. In terms of development 51% (**5% less** than All Wales figures) feel supported to reach their potential.
3. **5% less** (54%) feel they have a good work/life balance compared to All Wales (59%) and less than that (51%) feel the organisation is committed to helping people achieve a work/life balance.
4. 65% have shown signs of presenteeism and come to work when unwell (**5% more** than All Wales)
5. 75% have never experienced harassment or bullying from managers/team leaders – **5% less** than the All Wales figure.

A high level overview of key staff survey findings is attached in **Appendix 1** with comparable results to previous surveys where possible. The inability to drill vertically and horizontally into the organisational and NHS Wales data, does not allow us to establish if the concerns are just for HDdUHB or systematic across NHS Wales.

## Ongoing workstreams and future actions

**Appendix 2** outlines many Workforce and Organisation Development work streams already being implemented and looking to improve many of the areas highlighted through the findings. Given the results outlined, the cultural progression work must continue, and wider actions taken because of areas noted in the survey results.

### **Some future actions:**

- The re-establishment of the Health and Wellbeing Steering group to evaluate survey findings and develop wider frameworks for greater support for staff wellbeing.
- The establishment of a dedicated bullying and harassment task and finish group to evaluate the results and develop framework.
- The Health Board's established Black, Asian and Minority Ethnic (BAME) bullying, and harassment group will also consider these results for future strategic actions.
- Survey results for medical and nursing staff have been drilled down and will be shared with Nursing and Medical Retention groups so that definitive actions for improvement can be determined
- The team will also be attempting to extract the survey results for responses by Allied Health Professionals in preparation of an Allied Health Retention Group being established this autumn
- Further analysis will be ongoing to drill down wherever possible, within the constraints of the HEIW dashboard, to any identifiable hot spot areas of workforce issues.
- An Understanding Misogyny Task and Finish Group has recently been established, with an initial exploration focus on analysing data and intelligence to identify patterns and emerging themes, whilst also researching best practice in other NHS organisations, including the Welsh Ambulance Service's pioneering work in relation to Understanding Sexual Safety in the Workplace.
- The Committee has already seen the details for the new Speak Up identity and agenda. This work will support staff reaching out around any inappropriate behaviours experienced. There will also be more work undertaken to educate staff around what constitutes bullying, harassment, and discrimination.

### **Learning from experience and striving to improve**

HDdUHB has prided itself in the progression of providing its workforce with a voice and understanding and acting on staff experience. The progression of local initiatives has provided a continuous stream of intelligence.

The organisation recognises the opportunity that the national staff survey provides, in gaining an organisational viewpoint and benchmarking against the rest of NHS Wales. The survey should also provide opportunities in discovering hot spots of excellence or concern within directorates and teams, that local initiatives may not identify.

The 2023 national survey was difficult to administer and manage due to several issues. There is plenty of learning from an organisational viewpoint and from HEIW who are running the survey as an annual event. The organisation is continually learning from the experiences and the following actions will be taken in preparation for the next survey, proposed to run in October 2024.

### **Organisational actions –**

1. A robust communication strategy that is developed by the OD Communications Officer and supported by the Communications Team. This will include proactive messaging

around the dates the survey is live, action taken because of feedback from the last survey and why it is important to complete, aligning with messages of confidentiality. HDdUHB will not wait for communications to be supplied; the organisation will build their own narrative to engage staff completing the survey.

This communication strategy will outline the various ways in which staff can complete the survey, at work and at home. Messages will be replayed through the HAPI app and the utilisation of the newly activated Viva Engage will request that staff complete the survey to ensure their voices are heard.

2. The consideration of staff having time is a serious concern. A key message of staff having 30 minutes within their working shift to complete the survey should be disseminated to leaders and across the whole organisation. The organisation needs a higher compliance to ensure greater validity and possible balance to the findings. A narrative of providing staff with time within work to complete the survey would be a major step in supporting the overall compliance rate.
3. All acute sites visited twice through October by OD teams and other sites at least once to engage with staff with key messages and drive compliance rates. These site visits will be proactively communicated to the workforce to encourage engagement from the start.
4. Modifying internal staff intelligence mechanisms as the threat of survey fatigue is very evident with the wide range of embedded local initiatives. Albeit these surveillance mechanisms provide very different staff experience data through diverse questions. To reduce the risk of survey fatigue, we will decrease the frequency of the Board Outcomes survey to twice per annum, effectively running a pulse survey for half of our workforce each time.
5. A narrative that shows the many actions and work being completed to demonstrate to the workforce that the organisation is listening. The OD Communications Officer is planning to align survey responses to key pieces of work, starting with the new Speak Up identity in September. We listen – Our actions communications will continue to draw configuration to survey responses.
6. The cultural actions for such a broad and complex survey should not be underestimated. **Appendix 3** provides an overview of future planned actions to progress the issues highlighted by the survey data. This will be monitored twice annually by the Partnership forum.

There has been a “lessons learnt” meeting with HEIW in which all organisations defined many limitations with the dashboard and an inability to analyse the data successfully. As a result the following action has been agreed.

#### **HEIW actions -**

The challenges within the reporting mechanisms of the survey are being addressed by HEIW. They have requested specialists with Power BI training to be part of a task and finish group set up to ensure that progress is made from lessons learnt from the first dashboard.

HDdUHB have already requested that the Business Intelligence Lead attends to support, develop and influence a more effective dashboard for future analysis.

## Argymhelliad / Recommendation

The Committee is asked to:

- **NOTE** the results of the survey and
- **TAKE ASSURANCE** from the actions in place in conjunction with staff side representatives in raising compliance. It is also noted the various WOD workstreams that are in place to support the cultural progression of the organisation. The annual staff survey will provide an organisational overview to measure the work.

<b>Amcanion: (rhaid cwblhau)</b> <b>Objectives: (must be completed)</b>	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.7 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: Datix Risk Register Reference and Score:	n/a
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>	1. Leadership 2. Culture and valuing people 3. Data to knowledge 4. Learning, improvement and research
Amcanion Strategol y BIP: UHB Strategic Objectives:	1. Putting people at the heart of everything we do 2. Working together to be the best we can be 3. Striving to deliver and develop excellent services 6. Sustainable use of resources
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

## **Gwybodaeth Ychwanegol:** **Further Information:**

Ar sail tystiolaeth: Evidence Base:	n/a
Rhestr Termiau:	n/a

Glossary of Terms:	
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Diwylliant, Pobl a Datblygu Sefydliadol: Parties / Committees consulted prior to People, Organisational Development & Culture Committee:	n/a

<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

## Appendix 1 - NHS ALL Wales Survey Results 2023

### Hywel Dda University Health Board (HdUHB) Comparison

This report details the high-level findings of the 2023 NHS Wales Staff Survey. The comparison has been made to All Wales result, no comparisons can be made to other health boards. There were 1402 Hywel Dd (HD) respondents, giving a response rate of 12.0%.

Response Rates	
Hywel Dda	12.0%
Aneurin Bevan	18.1%
Cwm Taff Morgannwg	18.1%
Swansea Bay	18.8%
Betsi Cadwaladr	20.2%
Cardiff & Vale	21.4%
<b>Average Response Rate for HBs</b>	<b>18.1%</b>

All Wales Staff Survey 2023 – Responses per Occupational Group

Total Responses = 1402 (12%)

Question	Question Response	Number of Response		
			Clinical	Non Clinical
Q19 What is your occupational group?	Allied Health Professionals / Healthcare Scientists / Scientific and Technical	248	248	
	Ambulance (operational)	*		
	Commissioning	*		
	Digital	42		42
	General Management	186		186
	Medical and Dental	72	72	
	Nursing or Healthcare Assistants	171	171	
	Public Health	35	35	
	Registered Nurses and Midwives	323	323	
	Wider Healthcare Team	315		315
	<b>1392</b>	<b>849</b>	<b>543</b>	

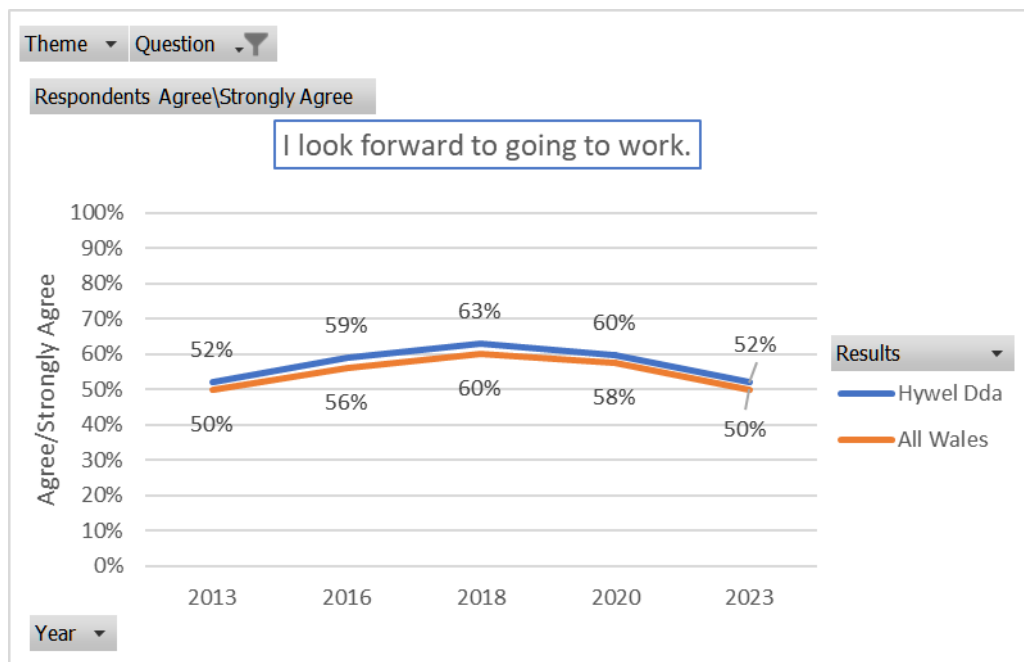
The All-Wales engagement score includes all NHS organisations that took part in the survey. The average engagement score is for Health Boards only.

The engagement score for HD is the same as the average engagement for other Health Boards.

Engagement Score		
	2020	2023
All Wales	75%	73%
Swansea Bay	75%	73%
Cardiff & Vale	74%	73%
Hywel Dda	76%	72%
Aneurin Bevan	76%	72%
Betsi Cadwaladr	73%	72%
Cwm Taff Morgannwg	71%	71%
<b>Average Engagement Score</b>	<b>74%</b>	<b>72%</b>

The All-Wales NHS survey asked 145 questions about staff experience based around several themes.

Areas where HDdUHB Scored <b>above</b> All Wales Average Score		
	HD Score	All Wales Score
<b>Morale:</b>	<b>Often/Always</b>	<b>Often/Always</b>
I have adequate supplies, material & equipment to do my work	63%	61%
<b>Staff Engagement:</b>	<b>Agree/Strongly Agree</b>	<b>Agree/Strongly Agree</b>
I look forward to going to work	52%	50%



<b>We are compassionate &amp; inclusive:</b>	<b>Agree/Strongly Agree</b>	<b>Agree/Strongly Agree</b>
	HD Score	All Wales Score
People here are compassionate in the way they behave towards patients/service users	84%	81%
People here take effective action to help patients/service users in distress	83%	81%

<b>We nurture healthy working environments:</b>		
	<b>HD Score</b>	<b>All Wales Score</b>
The last time you experienced harassment or bullying at work, did you or a colleague report it?	Yes - 24%	Yes -22%
The all Wales average for staff who never experienced bullying and harassment was 77 % The average for HDdUHB who never experienced bullying and harassment was 74%		
The last time you experienced physical violence at work, did you or a colleague report it?	Yes - 15%	Yes - 13%
The all Wales average for staff who never experienced physical violence was 97 % The average for HDdUHB who never experienced physical violence was 96 %		
<b>We are continuously learning and improving:</b>		
	<b>Yes ( definitely or to some extent)</b>	
	<b>HD Score</b>	<b>All Wales Score</b>
In the last 12 months, have you had an appraisal , PADR, annual review or development review?	83%	80%

**Summary of findings for those scores above the All Wales result:**

The greatest difference (**+3%**) between HDdUHB and All Wales results were:

“People here are compassionate in the way they behave towards patients/service users” &

“In the last 12 months, have you had an appraisal , PADR, annual review or development review?”

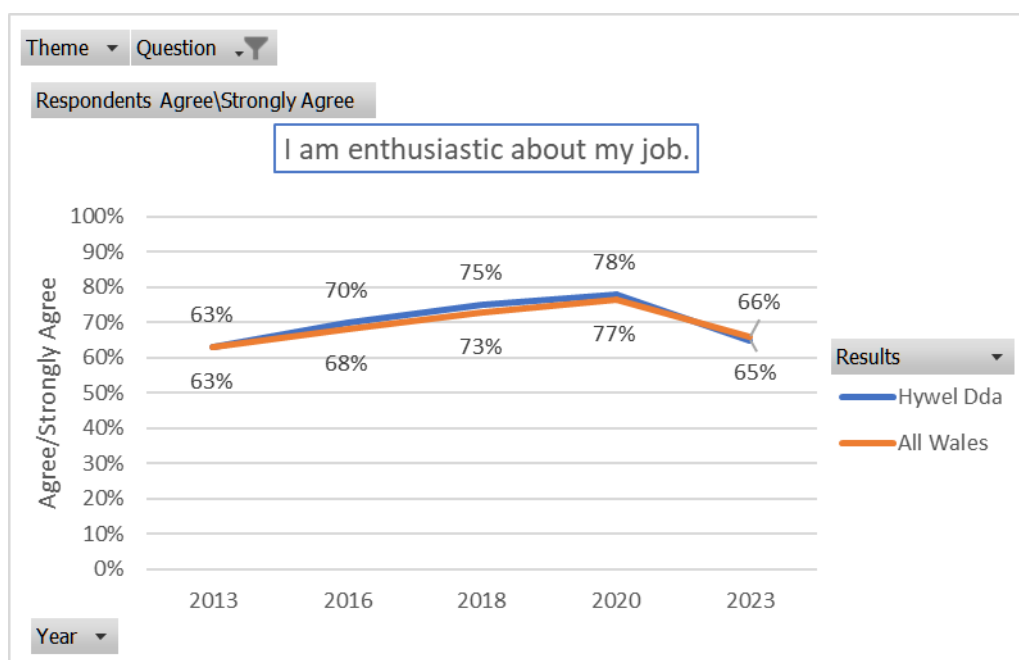
(**+2%**) between HDdUHB and All Wales result for :

“People here take effective action to help patients/service users in distress”

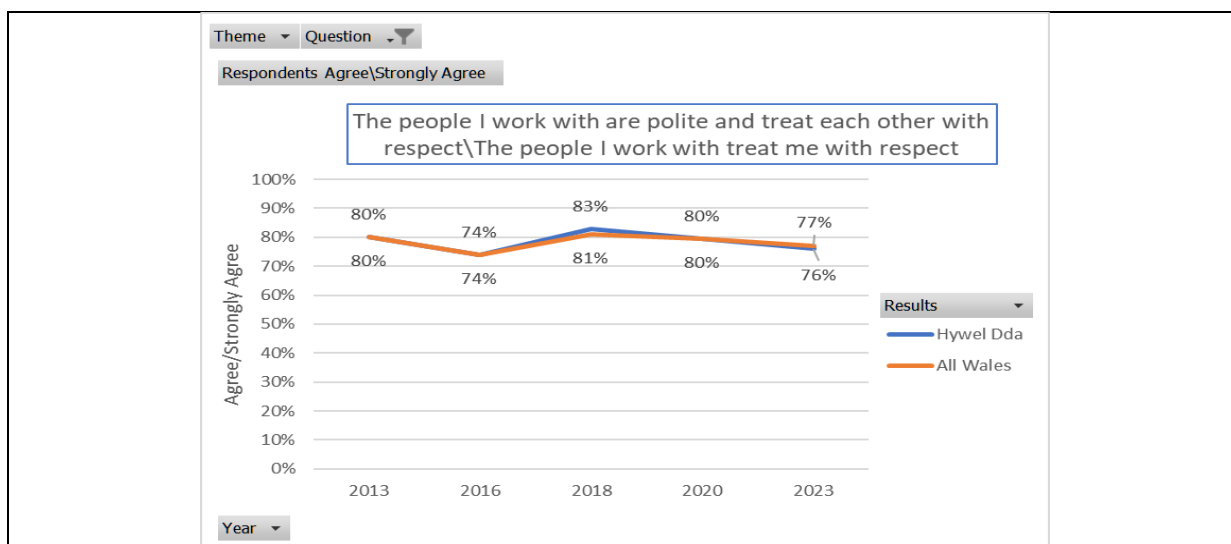
“I look forward to going to work” &

“I have adequate supplies, material & equipment to do my work”

Areas where HDdUHB Scores are the Same or Similar to All Wales Scores		
	HD Score	All Wales Score
<b>Morale:</b>	<b>Rarely or Never</b>	<b>Rarely or Never</b>
I have unrealistic time pressures	29%	28%
	<b>Agree/Strongly Agree</b>	<b>Agree/Strongly Agree</b>
I am considering a change of career	6%	6%
I would want to move to a job, outside the NHS	3%	3%
	<b>Often/Always</b>	<b>Often/Always</b>
I can meet all conflicting demands on my time at work	51%	52%
There are enough staff at this organisation for me to do my job properly	35%	34%
<b>Patient Safety</b>	<b>No</b>	<b>No</b>
In the last month have you seen any errors, near misses, or incidents that could have hurt staff and/ or patients/service users?	64%	64%
<b>Staff Engagement:</b>	<b>Often/Always</b>	<b>Often/Always</b>
I am enthusiastic about my job	65%	66%



<b>We are compassionate &amp; inclusive:</b>	<b>Agree/Strongly Agree</b>	<b>Agree/Strongly Agree</b>
Care of patients/service users is my organisation's top priority	67%	68%
I'd feel able to speak up in my team if I noticed poor or incorrect practice	74%	75%
People here are compassionate towards colleagues when they face problems	76%	76%
People here give good support to colleagues who are distressed	77%	78%
I think my organisation respects individual differences ( e.g., cultures, working styles, backgrounds, ideas)	64%	65%
	<b>HD Score</b>	<b>All Wales Score</b>
	<b>Yes</b>	<b>Yes</b>
In the last 12 months have you personally experienced discrimination at work from colleagues?	7%	6%
In the last 12 months have you personally experienced discrimination at work from patients/service users, their relatives, or other members of the public?	7%	7%
In the last 12 months have you sought a progression opportunity in your workplace.	37%	36%
	<b>Agree/Strongly Agree</b>	<b>Agree/Strongly Agree</b>
The people I work with are polite and treat each other with respect	76%	77%



The people I work with are understanding and kind to one another	75%	76%
<b>We recognise everyone's contribution:</b>	<b>Agree/Strongly Agree</b>	<b>Agree/Strongly Agree</b>
	<b>HD Score</b>	<b>All Wales Score</b>
The people I work with show appreciation to one another	72%	72%
<b>We are able to speak up:</b>		
I always know what my work responsibilities are	80%	81%
I am trusted to do my job	86%	87%
I have a choice in deciding how to do my work	66%	67%
I would feel secure raising concerns about unethical behaviour	76%	77%
I would feel secure raising concerns about unsafe clinical practice	72%	73%
<b>We are stronger together:</b>	<b>Agree/Strongly Agree</b>	<b>Agree/Strongly Agree</b>
I feel able to ask other team members of this team for help when I need it	83%	84%
I feel able to speak up in my team if I noticed poor or incorrect practice	74%	75%
The team I work in has a set of shared objectives	76%	76%

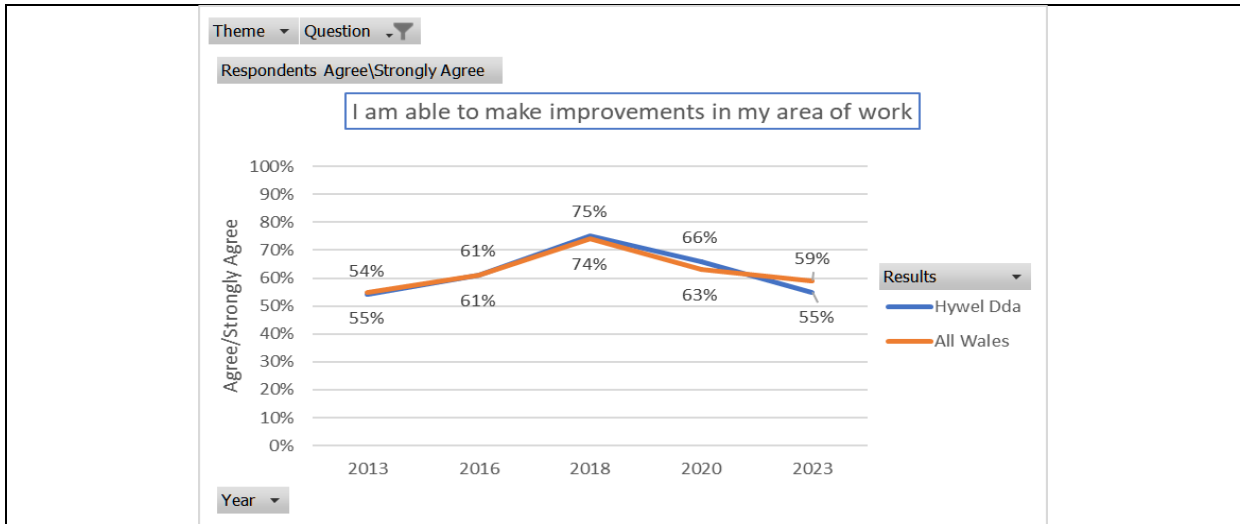
	<b>HD Score</b>	<b>AW Score</b>
<b>We champion flexible working:</b>	<b>Agree/Strongly Agree</b>	<b>Agree/Strongly Agree</b>
I am satisfied with the opportunity for flexible working patterns	60%	61%
I can approach my immediate manager (line manager) to talk openly about flexible working	68%	69%
<b>We nurture healthy working environments:</b>	<b>Always/Often</b>	<b>Always/Often</b>
How often, if at all do you feel burnt out because of your work?	36%	36%
How often, if at all ,do you <b>not have</b> enough energy for family and friends during leisure time?	31%	31%
How often, if at all does your work frustrate you?	46%	45%
	<b>Agree/Strongly Agree</b>	<b>Agree/Strongly Agree</b>
The organisation takes positive action on health & wellbeing	48%	49%
	<b>Yes, I or a colleague reported it</b>	<b>Yes, I or a colleague reported it</b>
The last time you experienced abuse at work ( work from patients/service users, their relatives, or other members of the public) did you or a colleague report it?	18%	17%

	<b>HD Score</b>	<b>AW Score</b>
	<b>Never</b>	<b>Never</b>
In the last 12 months how many times have you personally experienced abuse at work from patients/service users, their relatives, or other members of the public?	83%	84%
In the last 12 months how many times have you personally experienced physical violence at work from managers/team leaders?	99%	99%
In the last 12 months how many times have you personally experienced physical violence at work from other colleagues?	99%	99%
In the last 12 months how many times have you been the target of unwanted behaviour of a sexual nature in the workplace? This may include offensive or inappropriate sexualised conversation (including jokes) touching or assault from patients/service users / relatives or other members of the public	89%	90%
In the last 12 months how many times have you been the target of unwanted behaviour of a sexual nature in the workplace? This may include offensive or inappropriate sexualised conversation (including jokes) touching or assault from staff members	95%	94%
	<b>HD Score</b>	<b>AW Score</b>
<b>We are continuously learning and improving:</b>	<b>Yes ( definitely or to some extent)</b>	
It ( PADR etc) helped me agree clear objectives for my work	64%	64%
It ( PADR etc) left me feeling that my work is valued by my organisation	60%	59%

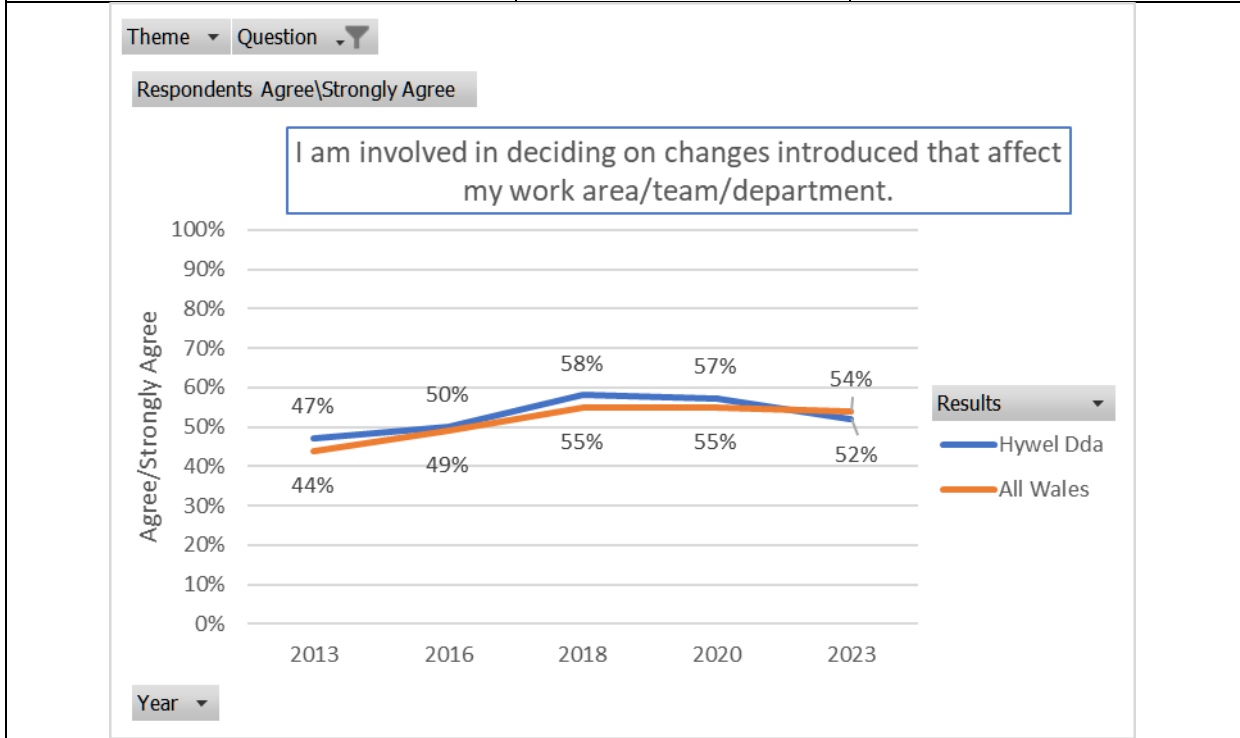
### **Summary of findings for those scores on par with All Wales:**

- 51% of people could meet all conflicting demands on my time in work, & 35% feel there are “enough staff at this organisation for me to do my job properly”.
- 74% of people feel they would be able to speak up in their team if they noticed poor or incorrect practice, but their faith in being treated fairly as a result dips to 38% when asked if “My organisation treats staff who are involved in an error, near miss or incident, fairly”.
- 60% and 68% were satisfied with flexible working opportunities and happy to discuss it with their LM respectively.
- Over a third of respondents felt burnt out because of work (36%)
- Less than half agreed the organisation takes positive action on health & wellbeing (48%)
- Very few people were likely to report abuse at work if it was from a member of the public, patient or service user (18%)

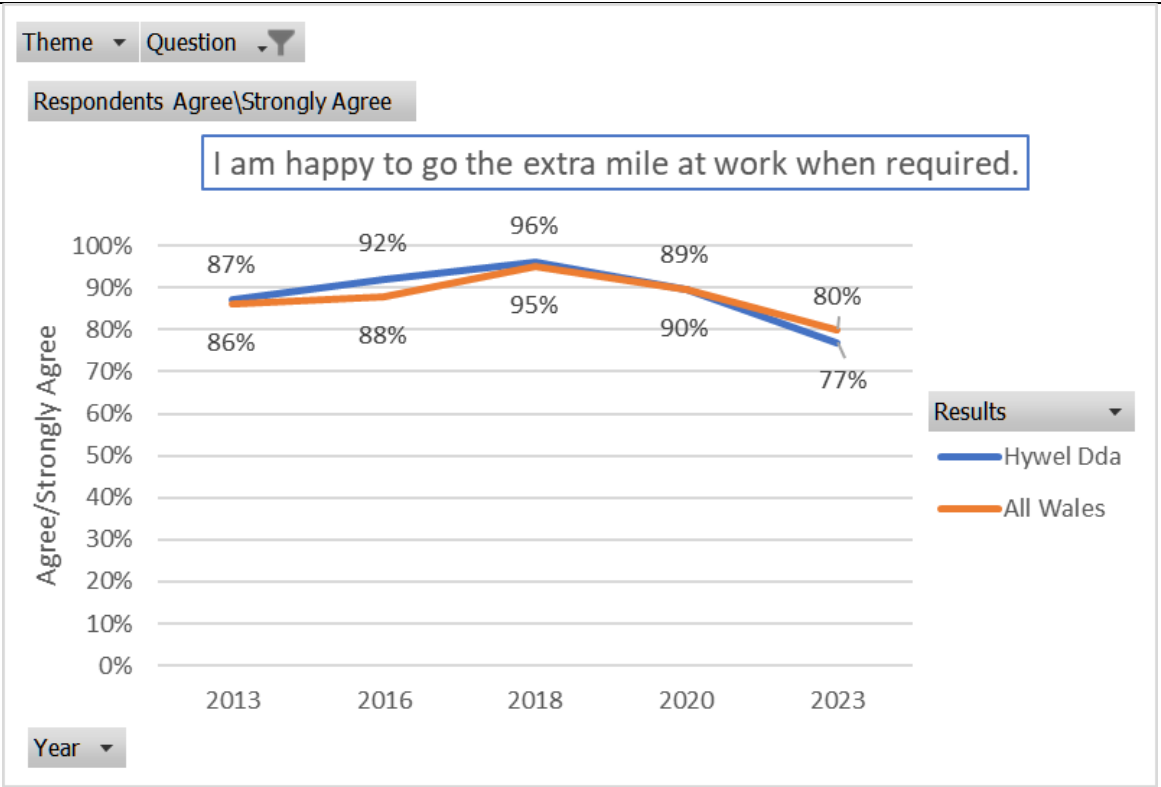
<b>Areas where HDdUHB Scored below All Wales Average Score</b>		
	<b>HD Score</b>	<b>All Wales Score</b>
<b>Morale:</b>	<b>Agree/Strongly Agree</b>	<b>Agree/Strongly Agree</b>
I am satisfied in my current role and intend to remain in it for the foreseeable future	54%	57%
I am <b>not</b> considering leaving my current job	49%	52%
I often <b>think</b> about leaving this organisation	31%	28%
I will probably look for another job at a new organisation in the next 12 months	23%	20%
I would want to move to a job but outside healthcare	7%	5%
	<b>HD Score</b>	<b>All Wales Score</b>
<b>Patient Safety:</b>	<b>Agree/Strongly Agree</b>	<b>Agree/Strongly Agree</b>
My organisation encourages us to report errors, near misses or incidents	70%	74%
My organisation treats staff who are involved in an error, near miss or incident, fairly	38%	45%
We are given feedback about changes made in response to reported errors, near misses and incidents	36%	44%
When errors, near misses or incidents are reported, my organisation takes action to ensure that they do not happen again.	51%	54%
<b>Staff Engagement:</b>	<b>Agree/Strongly Agree</b>	<b>Agree/Strongly Agree</b>
I am able to make improvements in my area of work	55%	59%



	Agree/Strongly Agree	Agree/Strongly Agree
I am involved in deciding on changes introduced that affect my work area/team/department	52%	54%



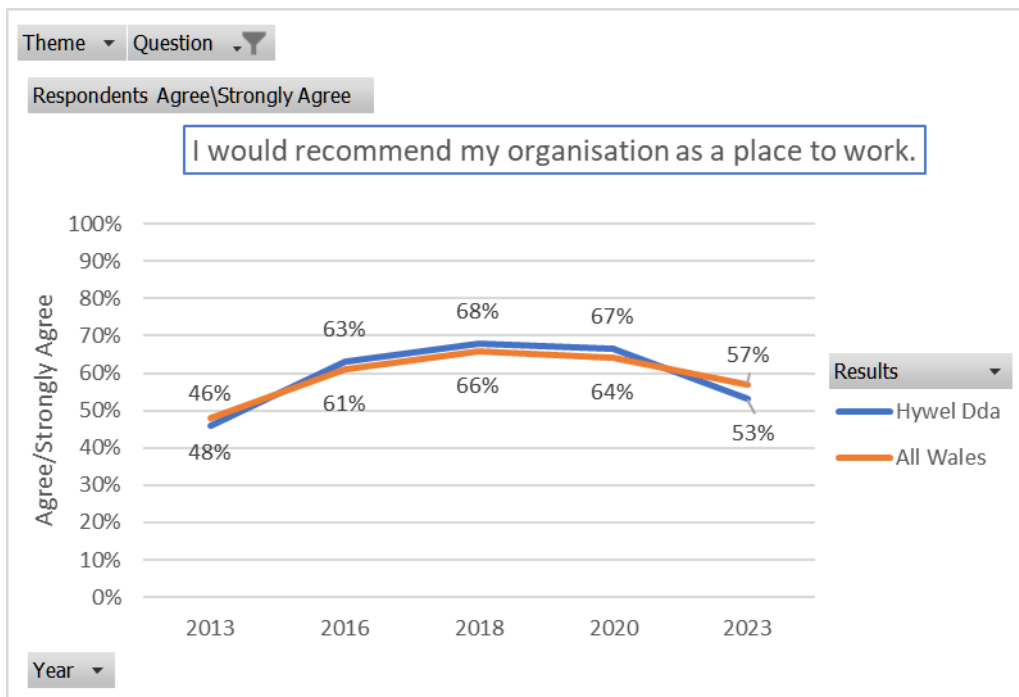
	Agree/Strongly Agree	Agree/Strongly Agree
I am happy to go the extra mile at work when required	77%	80%



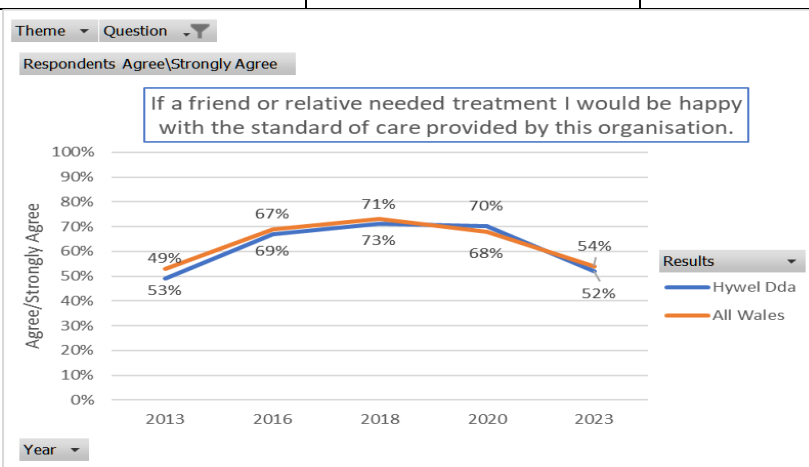
	Agree/Strongly Agree	Agree/Strongly Agree
I am proud to tell people I work for my organisation	59%	61%



	Agree/Strongly Agree	Agree/Strongly Agree
I would recommend my organisation as a place to work	53%	57%

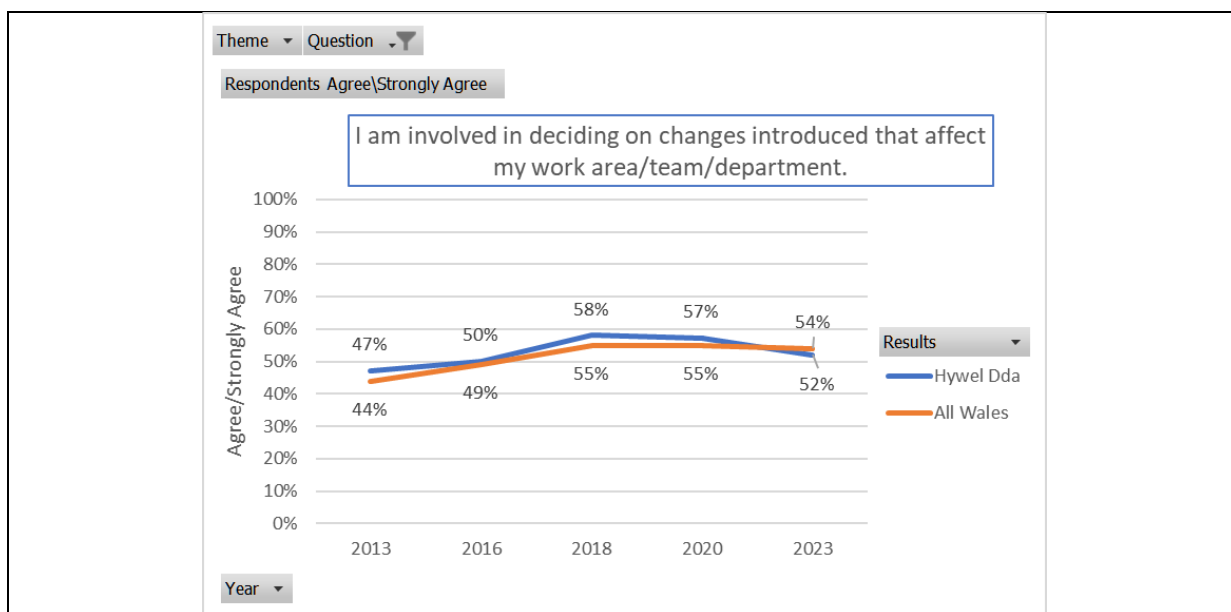


	HD Score	All Wales Score
<b>We are compassionate &amp; inclusive:</b>	<b>Agree/Strongly Agree</b>	<b>Agree/Strongly Agree</b>
I feel safe to speak up about anything that concerns me in this organisation	52%	57%
If a friend or relative needed treatment I would be happy with the standard of care provided by this organisation	52%	54%

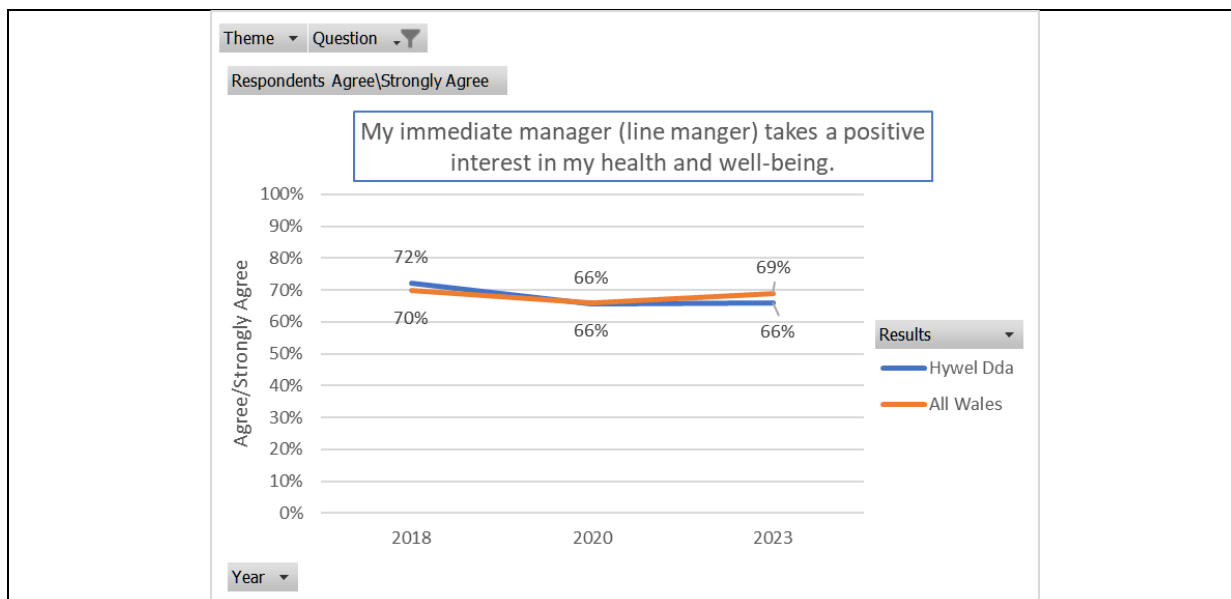


	Agree/Strongly Agree	Agree/Strongly Agree
My organisation acts on concerns raised by patients/service users	62%	64%

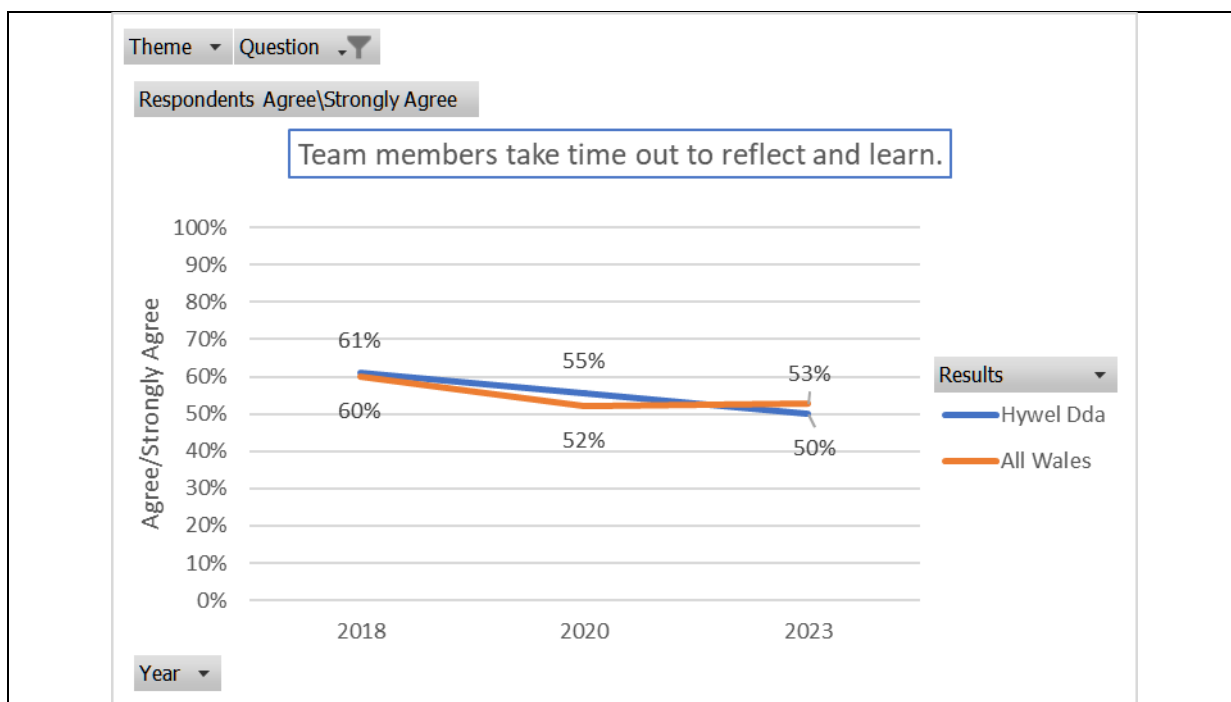
My immediate manager ( line manager) is interested in listening to me when I describe challenges I face	68%	71%
My immediate manager ( line manager) takes effective action to help me with any problems I face	64%	67%
My immediate manager ( line manager) works together with me to come to an understanding of problems	64%	68%
	<b>Yes</b>	<b>Yes</b>
Does your organisation act fairly with regard to career progression/promotion, regardless of age, disability, ethnic background, gender, gender identity, religion or sexual orientation?	45%	47%
In the coming 12 months would you consider applying for a progression opportunity in your workplace?	43%	44%
In the last 12 months have you personally experienced discrimination at work from a manager/team leader?	8%	6%
	<b>Agree/Strongly Agree</b>	<b>Agree/Strongly Agree</b>
I feel valued by my team	66%	68%
<b>We recognise everyone's contribution:</b>	<b>Agree/Strongly Agree</b>	<b>Agree/Strongly Agree</b>
I get recognition for good work	56%	58%
My immediate manager (line manager) values my work	68%	72%
The organisation values my work	45%	50%
	<b>HD Score</b>	<b>All Wales Score</b>
<b>We are all able to speak up:</b>	<b>Agree/Strongly Agree</b>	<b>Agree/Strongly Agree</b>
I am involved in deciding on changes introduced that affect my work area/team/department	52%	54%



There are frequent opportunities for me to show initiative in my role	68%	73%
I am confident my organisation would address my concern	51%	53%
I feel safe to speak up about anything that concerns me in this organisation	52%	57%
If I spoke up about something that concerned me, I am confident my organisation would address my concern	36%	42%
	<b>HD Score</b>	<b>All Wales Score</b>
<b>We are stronger together:</b>	<b>Agree/Strongly Agree</b>	<b>Agree/Strongly Agree</b>
My immediate (line manager) asks for my opinion before making decisions that affect my work	54%	59%
My immediate (line manager) encourages me at work	68%	71%
My immediate (line manager) gives me clear feedback on my work	61%	64%
My immediate (line manager) is interested in listening to me when I describe challenges I face	68%	71%
My immediate (line manager) recognises the importance of staff emotional wellbeing	67%	71%
My immediate (line manager) takes a positive interest in my health and wellbeing	66%	69%

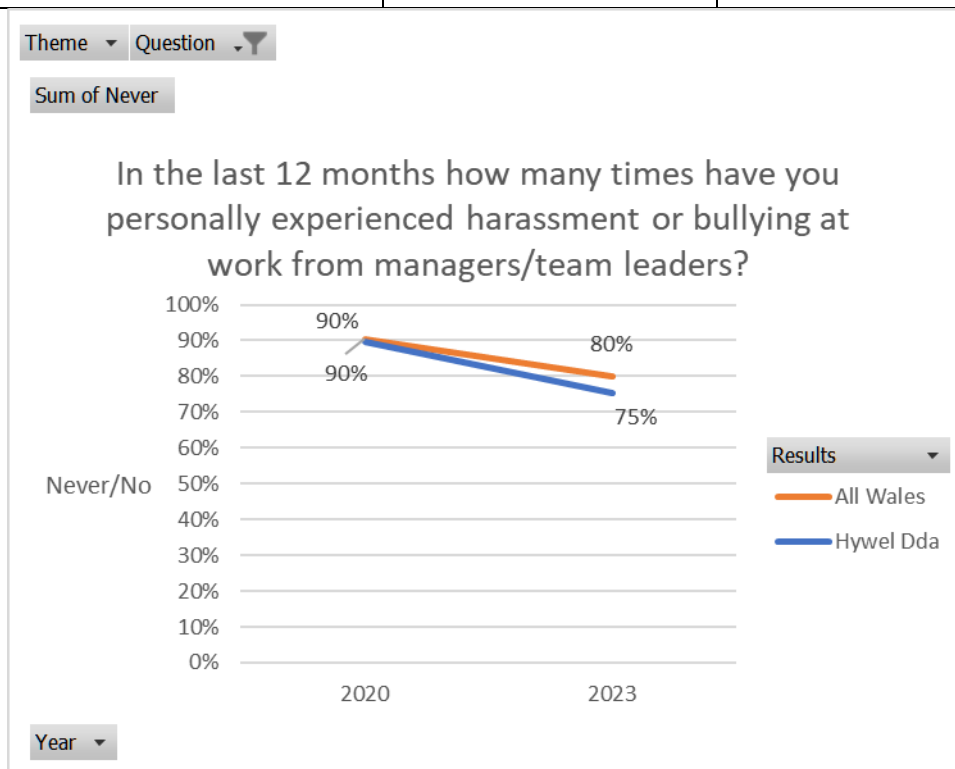


My immediate (line manager) takes effective action to help me with any problems I face	64%	67%
My immediate (line manager) values my work	68%	72%
My immediate (line manager) works together with me to come to an understanding of problems	64%	68%
	<b>HD Score</b>	<b>All Wales Score</b>
<b>We are stronger together:</b>	<b>Agree/Strongly Agree</b>	<b>Agree/Strongly Agree</b>
I enjoy working with the colleagues in my team	80%	82%
I feel valued by my team	66%	68%
Team members are able to communicate closely with each other to achieve the team's objectives	68%	71%
Team members take time out to reflect and learn	50%	53%



Team members trust each other	65%	68%
Team members understand each other's roles	69%	72%
Team members work well with other teams	70%	72%
<b>We champion flexible working:</b>	<b>Agree/Strongly Agree</b>	<b>Agree/Strongly Agree</b>
I achieve a good balance between my work life and my home life	54%	59%
My organisation is committed to helping me balance my work and home life	51%	54%
<b>We nurture healthy working environments:</b>	<b>Always/Often</b>	<b>Always/Often</b>
How often, if at all, are you exhausted at the thought of another day/shift at work?	36%	33%
How often, if it all, do you feel worn out at the end of your working day/shift?	48%	45%
How often, if it all, do you find your work emotionally exhausting?	44%	41%

	HD Score	All Wales Score
	Yes	Yes
During the last 12 months have you felt unwell as a result of work-related stress?	45%	41%
In the last 12 months, have you experience MSK problems as a result of work activities?	29%	25%
In the last three months have you ever come to work despite not feeling well enough to perform your duties?	65%	60%
Have you felt pressure from your manager to come to work?	14%	12%
	Never	Never
In the last 12 months how many times have you personally experienced harassment or bullying at work from managers/team leaders?	75%	80%

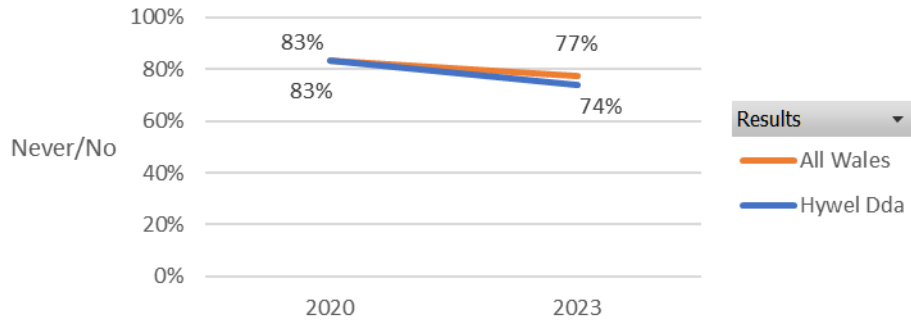


	Never	Never
In the last 12 months how many times have you personally experienced harassment or bullying at work from other colleagues?	74%	77%

Theme ▾ Question ▾

Sum of Never

In the last 12 months how many times have you personally experienced harassment or bullying at work from other colleagues?



Year ▾

In the last 12 months how many times have you personally experienced harassment or bullying at work from patients/service users, their relatives, other members of the public?

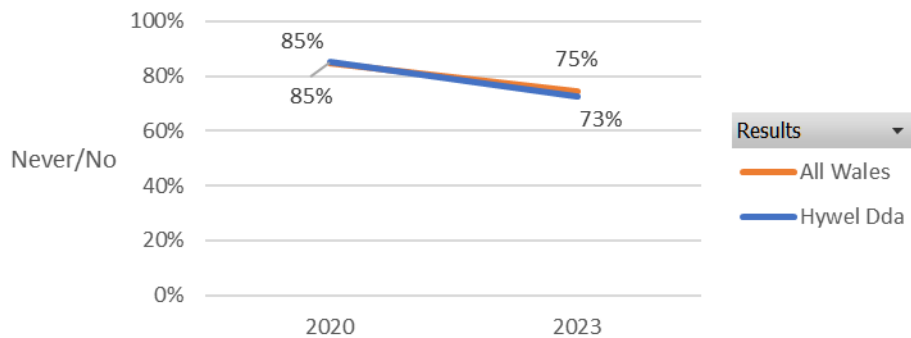
73%

75%

Theme ▾ Question ▾

Sum of Never

In the last 12 months how many times have you personally experienced harassment or bullying at work from patients/service users, their relatives, other members of the public?



Year ▾

	<b>HD Score</b>	<b>All Wales Score</b>
	<b>Never</b>	<b>Never</b>
In the last 12 months how many times have you personally experienced physical violence at work from patients/service users, their relatives or other members of the public?	90%	92%
	<b>HD Score</b>	<b>All Wales Score</b>
<b>We are continuously learning and improving :</b>	<b>Agree/Strongly Agree</b>	<b>Agree/Strongly Agree</b>
I am able to access the right learning and development opportunities when I need to	54%	56%
I feel supported to develop my potential	51%	56%
I have opportunities to improve my knowledge and skills	67%	69%
There are opportunities for me to develop my career in this organisation	46%	53%
This organisation offers me challenging work	67%	73%

**Summary of findings from those with scores lower than All Wales:**

- 45% of people felt valued by the organisation – but this is 5% less than the All-Wales figure.
- 31% are thinking of leaving the organisation and almost a quarter will look for a new job outside the organisation within the next 12 months.
- Although patients felt they were encouraged to report errors or near misses in relation to patient safety (70%), they were less likely to agree that they would be treated fairly ( 38%), given feedback ( 36%) or action would be taken ( 51%)
- 54% ( 5% less than the All-Wales score) felt their line manager asks their opinion before making decisions about their work.
- Only half of respondents agreed that team members take time out to reflect and learn.
- Almost two thirds trust their team members, 69% understand each other’s roles & 70% agree they work well with other teams.

- 5% less ( 54%) feel they have a good work/life balance compared to All Wales ( 59%) and less than that (51%) feel the organisation is committed to helping people achieve a work/life balance.
- 65% have shown signs of presenteeism and come to work when unwell ( 5% more than AW)
- 75% have never experienced harassment or bullying from managers/team leaders – 5% less than the AW figures.
- Less than half ( 45%) feel the “organisation act’s fairly regarding career progression/promotion, regardless of age, disability, ethnic background, gender, gender identity, religion & sexual orientation.
- In terms of development 51% ( 5% less than AW figures) feel supported to reach their potential
- Less than half - 46% ( 7% less than AW) feel there are opportunities to develop their career.
- Just over two thirds do not agree that the organisation offers challenging work.

## Appendix 2 - Current and planned WOD workstreams

The Workforce and Organisation Development directorate already have several work streams in operation to improve many of the areas highlighted through the survey findings.

### Workstream

<b><i>Non pay elements of pay deal</i></b>	Many of the requirements included in the non-pay elements of the collective agreement for 2022-2024 for Agenda for Change (AfC) staff have been implemented. <ul style="list-style-type: none"><li>• Unsocial Hours Allowance has been reinstated after one week's sickness absence since 1st March 2023 and has been made a permanent position.</li><li>• Implementation of the all-Wales Flexible Working policy including the principle that acceptance of flexible working becomes the default across the workforce unless there are clear reasons to decline.</li><li>• System in place to ensure staff are paid in line with national agreed terms and conditions for all the hours they work (including breaks and shift over runs and additional</li><li>• Confirm delivery of the CPD relevant requirements of the Nurse Staffing Levels Act (2016).</li></ul>
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### Future actions

Following a scoping exercise of the key issues arising from the non-pay deal, to enable all requirements to progress in partnership, the following workstreams were established at a workshop in December 2023 –

- Flexible working – to include flexible rostering practice and rosters.
- Agency reduction – with links to incentivising pay, contracts and general terms and conditions.
- Retention – to include retire and return.
- Sickness absence – to include parity between support for mental health and physical health.

Each workstream is jointly chaired by a nominated lead from the trade unions and a Workforce and OD colleague. Progress is monitored and reported through the Health Board Partnership Forum.

The non-pay programme of work was also incorporated into a Welsh Health Circular - (2024) 017, dated 28 March 2024, to provide a framework for the delivery in partnership of certain non-pay elements.

**Staff engagement**

Ensuring we foster a feeling amongst our colleagues of being valued for their outstanding commitment and dedication to the Health Board.

The Culture Workforce Experience (CWE) team has developed a recognition programme for Hywel Dda staff over the last two years. Chairs commendation (CC) award was launched in August 2022 to provide an equitable and meaningful way of recognising our colleagues who 'go above and beyond' and demonstrate the Health Board values to an exemplary level. One colleague a month is awarded for each of the three Chair's commendations of Compassion, Development and Innovation and Collaboration. The nominations are shortlisted by impartial staff panels monthly and celebrated quarterly in an event held for the winners and top two highly commended nominations for each category. Seven CC events have been held to date, with over 250 staff nominations.

The first Hywel's applause Staff awards event premiered in December 2022 and the second event has just recently taken place in May 2024. Staff are nominated by their colleagues across a range of categories and shortlisted by an independent panel. Almost all nominees report feeling appreciated by their colleagues, and 84% felt appreciated by the Health Board.

Long Service awards are presented to staff with over 25 years services and over 40 years' service to recognise their valuable contribution to the NHS. Over 1270 staff have received long service awards since its inception.

**Future actions**

There is a need for continued evolution with this programme. The team are establishing ways to demonstrate more positive appreciation through informal mechanisms throughout the organisation.

There will be a continued campaign to collate and share positive staff stories across HDdUHB, recognising the journey that was taken for staff to achieve results or achievements.

The introduction Hywel Dda virtual monthly dialogue with Chief Executive and Executive team will continue.

**Speak up /inappropriate behaviours**

The Committee have already seen the details for the new speak up identity and agenda. The team continue to work towards developing a positive culture toward speaking up. The Speak Up identity including a robust comms strategy is in place around agenda to break down myths, build psychological safety and move toward speaking up becoming a cultural norm. This involves creating a single identity for speaking up whether the issue is

clinical, or workforce related. The emphasis of the communications in relation to speaking up is that the responsibility is on all staff, regardless of position, to act when they need to speak up. Additionally, it provides reassurance that staff will be heard, and appropriate actions taken as a result. It will also simplify the process and clearly signpost staff to the various options available to them to report their concerns. There will also be more work undertaken to educate staff around what constitutes bullying, harassment, and discrimination.

Workforce and OD directorate has committed to deepening our cultural understanding in 2024-25 and beyond. Our workforce demographics and our expectations of experiences at work are changing for several reasons, including increased intergenerational working, more diversity amongst our workforce and the societal context which we are currently living through. All these factors can and will impact on our perceptions of behavioural norms and cultures at work. As an organisation, the next stage of our cultural progression is therefore focused on enabling us to gain a deeper understanding of our culture, particularly in relation to those issues that may have been perceived to be 'acceptable' in the past; or may be 'undiscussable' for a variety of reasons.

#### Future actions

The establishment of a dedicated bullying and harassment task and finish group to evaluate the results and develop framework.

The Health Board's established BAME bullying, and harassment group will also consider these results for future actions.

Understanding Misogyny Task and Finish Group has recently been established, with an initial exploration focus on analysing data and intelligence to identify patterns and emerging themes, whilst also researching best practice in other NHS organisations, including the Welsh Ambulance Service's pioneering work in relation to Understanding Sexual Safety in the Workplace.

#### **Retention**

The team have interpreted the survey results to establish specific reports for nursing and medical responses, which will be considered by our Nurse and Medical Retention Groups. The analysis will support strategic actions to support the trend of lower turnover for nursing staff and establish actions for medical staff.

The establishment of the nursing retention task and finish group has had many positive outcomes in nurse turnover figures. The medical retention task and finish group is still early in its inception and will be needed to try and replicate the influence across medical professionals' turnover rates

#### Future actions

The Medical Retention T&F Group was established in 2023, which involved analysing HD medical staffing data and intelligence as part of the exploration phase, with additional feedback and input from our Medical Leadership Forum. The action plan is currently being finalised to inform next steps in 2024-25.

A Retention Lead has recently been appointed on a 2-year fixed-term basis (HEIW-funded) to continue to focus on local organisational retention priorities and expand on some of the great work already underway, whilst also aligning with the HEIW national retention programme

The team will also be attempting to drill down the survey results for responses by Allied Health Professionals in preparation of that Retention Group being established in Autumn 2024.

**Staff  
wellbeing**

The risk of staff burnout is one that the organisation is conscious of. There is already a great deal of support for staff experiencing symptoms work related stress and burnout.

The vital support our Staff Psychological Wellbeing Service offers will continue in 2024-25, with a focus on aiming to provide all staff with the knowledge, skills, and resources to pay attention to their mental wellbeing and supporting our leaders to create the working conditions needed for good mental health.

The Recovery in Nature Ecotherapy programme was started in 2022 and is now in its third year. Clinical outcomes demonstrate a significant improvement in mental health and a reduction in symptoms of burnout. The qualitative evaluation highlights the significant positive impact with stories of personal transformation. There have been some challenges for staff accessing the programme due to constraints on staffing levels and release.

The main reason for sickness absence across the Health Board now relates to psychological factors, including stress, anxiety, and depression. This mirrors national trends and is in line with the overall increase in reporting of mental health problems across our population. Prevention and early intervention have been shown to give the best return on investment are , alongside having the right kind of psychological support when it is needed. Therefore the organisation has established a Task and Finish Group to identify the underlying causes of this trend and explore the support required to help staff to sustain their good mental health, stay in work, or if they

have been absent due to sickness, to return to work in safe and sustainable way. Representatives of this group form part of the membership of the sickness absence workstream (see non pay elements of pay deal above) to ensure collaboration.

The establishment of the health and wellbeing portal enables easier one stop access to health and wellbeing resources and is regularly updated.

**Future actions**

The re-establishment of the Health and Wellbeing Steering group to evaluate survey findings and develop wider frameworks for greater support for staff wellbeing.

The intention to more closely align Occupational Health and wellbeing services will be realised as part of the WOD directorate OCP.

The continued implementation of the Healthy Working Relationships agenda support peoples ability to remain at work.

**Managing performance**

In 2021, the Performance Management and PADR training programme was refreshed to align with the organisational goal to promote an appraisee-led performance culture. 104 training sessions on a meaningful PADR appraisal were held between 2021 to June 2024, with a total of 1,292 staff members attending. 98.8% of attendees were satisfied with the workshop, and the majority stated the workshop challenged their original views on performance management and PADR in a positive way. 75% said they now felt differently about PADR as a result. This has seen the PADR compliance rate rise to 77%, the highest result for the organisation and only 8% off WG target.

**Future actions**

The establishment of a specific task and finish group reviewing how HDdUHB manage poor performance and normalising performance conversations and succession planning within the managing performance process.

Continue to embed a managing performance culture consistently as 18% of attendees to workshops felt their manager still viewed the PADR/managing performance as a tick-box exercise.

**Leadership Development**

LEAP was created to develop and support our leaders enabling them to respond and adapt to the challenges both now and in the future. LEAP empowers leaders to build on their own and their teams' strength to develop individual and collective performance, provides

challenge and critical awareness of personal approaches to leadership, its impact, and their responsibilities. To date, 6 cohorts (a total of 97 delegates), have been or are going through the programme.

In addition to LEAP, there are several other development opportunities available to senior leaders, either directly through the Leadership and Development team or with partner organisations illustrated in the image below:

A New Consultant Development Programme (NCDP) is delivered for new and existing consultants. Since May 2023, 38 consultants have attended the course the latest cohort is due to conclude in November 2024. The aim of the programme is to enhance the understanding of the culture, values and their role within the organisation. In addition they will learn about personal resilience, wellbeing and personal development as well as effective team working

The establishment of a coaching network across the organisation. An increase in the number of qualified coaches in the network, with over 30 providing a dedicated service.

- To date the network has provided coaching to 59 staff resulting in over 180 sessions. Including those coaches in training the number of sessions is over 300
- 149 leaders have now attended The Coach Approach Workshop

#### Future actions

A new management development programme for front line managers has been launched with a first cohort having started in June 2024. Future cohorts will come on board regularly over the next 12 months.

## Appendix 3 – NHS Wales Staff Survey 2023 Action Plan

Source: NHS Wales Staff Survey 2023

Descriptor	Actions To Be Taken	Lead	Progress	Timeframe
Communication Campaign	<ul style="list-style-type: none"> <li>Communication strategy completed in preparation for October launch of national survey</li> </ul>	Rob Blake		End of August 2024
Speak Up Agenda	<ul style="list-style-type: none"> <li>New Speak Up Agenda launches</li> <li>New Speak Up platform will identify and monitor any concerns reporting bullying and harassment</li> </ul>	Rob Blake		September 2024
Bullying and Harassment	<ul style="list-style-type: none"> <li>New Bullying and harassment task and finish group to be set up. Utilise data from annual survey and speak up agenda as a measurable outcome</li> <li>An Understanding Misogyny task and finish group with an initial exploration focus on analysing data and intelligence to identify patterns and emerging themes</li> <li>The Health Board's established BAME bullying and harassment group will also consider these results for future actions</li> </ul>	<p>Rob Blake</p> <p>Christine Davies</p> <p>Steve Morgan</p>	<p>Assurance Framework provided to PODCC in July 2023</p> <p>Discovery Phase Design Phase Delivery Phase</p>	<p>End of October 2024</p> <p>September 2024 January 2025 February 2025 onwards</p> <p>Twice per annum</p>
Retention	<ul style="list-style-type: none"> <li>Survey data for nurses to be provided to Nurse Retention task and finish group for intelligence in supporting strategic actions</li> <li>Survey data for medical provided to Medical Retention task and finish group for intelligence in supporting strategic actions</li> </ul>	Corinna Lloyd-Jones	<p>Analysis Completed</p> <p>Analysis Completed</p>	<p>End of August 2024</p> <p>End of August 2024</p>

Descriptor	Actions To Be Taken	Lead	Progress	Timeframe
Retention (cont'd)	<ul style="list-style-type: none"> <li>Survey data for medical provided to Allied Health Retention task and finish group for intelligence in supporting strategic actions</li> <li>Produce reports for hot spots and comparison analysis where possible. Meeting with ODRM's – what are the read across threads for Cultural plans?</li> </ul>	<p>Corinna Lloyd-Jones</p> <p>Rob Blake</p>	<p>Analysis still to be done</p> <p>Awaiting formation of group Analysis to be completed</p>	<p>End of October 2024</p> <p>End of October 2024</p>
Health and Wellbeing	<ul style="list-style-type: none"> <li>The re-establishment of the Health and Wellbeing Steering Group to evaluate survey findings and develop wider frameworks for greater support for staff wellbeing</li> <li>The continued implementation of the Healthy Working Relationships agenda support people's ability to remain at work</li> <li>Continued progression on all elements of non-pay deal</li> </ul>	<p>Suzanne Tarrant</p> <p>Rob Blake and Corinna Lloyd-Jones</p> <p>Heather Hinkin</p>	<p>Several workstreams were established at a workshop in December 2023. Each workstream is jointly chaired by a nominated lead from the trade unions and a Workforce &amp; OD colleague. Progress is monitored and reported through the Health Board Partnership Forum</p>	<p>End of November 2024</p> <p>Continued Work</p> <p>Quarterly</p>

Descriptor	Actions To Be Taken	Lead	Progress	Timeframe
Managing Performance	<ul style="list-style-type: none"> <li data-bbox="392 225 985 456">• The establishment of a specific task and finish group reviewing how HDdUHB manage poor performance and normalising performance conversations and succession planning within the managing performance process</li> <li data-bbox="392 501 985 576">• Review appreciation and recognition programme</li> <li data-bbox="392 620 985 655">• Management development</li> </ul>	<p data-bbox="1012 225 1234 260">Rob Blake</p> <p data-bbox="1012 501 1234 536">Rob Blake</p> <p data-bbox="1012 620 1234 695">Amanda Glanville</p>	<p data-bbox="1256 620 1722 852">The Hywel Dda Manager programme for front line managers has been launched with the first cohort having started. Future cohorts will come on board regularly over the next 12 months</p>	<p data-bbox="1744 225 2092 300">First meeting arranged for 26<sup>th</sup> September 2024</p> <p data-bbox="1744 501 1883 536">April 2025</p> <p data-bbox="1744 620 1883 655">June 2024</p> <p data-bbox="1744 772 1861 807">Monthly</p>