

HDdUHB - Review of progress against SEP objectives April 24 – October 24

Strategic Equality Objective 1 - Leadership by all

Action Plan 2024-2026. Updates for the reporting period 1st October 2024 – 31st March 2025 are in **blue text**

What will we do?	By when?	Lead Directorate / Department	Inter-linked with other policy drivers / legislation	What will success look like?	Update on action March 24 – October 24
<p>Staff, including board members, will use their lived experiences and act as role models to create positive experiences for colleagues and service users.</p>	<p>End of Year 2</p>	<p>Workforce and Organisational Development (Board members and Diversity & Inclusion team)</p>	<p>Anti-racist Wales Action Plan LGBTQ+ Action Plan</p>	<p>Active involvement of Board members in reviewing the Strategic Equality Plan and associated action plans. 10% increase annually, in the number of staff engaged with staff network activities.</p>	<p>The Health Boards Strategic Equality Plan was approved by Board members in March 2024. Following on from this, key issues that were highlighted from the analysis of the subsequent Strategic Equality Plan Annual Report for 2023-2024 and supporting documents (Workforce Equality report, Workforce Equality action plan and the Pay Gap report) have been raised at Board level in September 2024, and Board members have responded positively to ensure that these areas of disparity are addressed (as outlined in our submission document).</p> <p>Further information on the progress made in regard to the Board seminar session and the forming of an Equality Diversity and Inclusion Task Force during this reporting period can be found on page 37 of our submission document.</p> <p>An Independent member has been assigned the role of Equality Board Champion and another Independent Board member chairs our Black, Asian and Minority Ethnic Advisory group and are therefore able to use their lived experiences and act as role models to create positive experiences for colleagues and service users.</p> <p>A new Equality and Inclusion sub-committee is in the process of being established to ensure that the ARWAP and LGBTQ+ action plans as well as the Health Board's Strategic Equality Plan have visibility at board level as well as across the organisation.</p> <p>Work continues to promote and develop our staff networks. Current data shows that membership has increased across all our staff networks.</p> <p>Staff network sessions have been scheduled and planned throughout 2025. The Equality and Diversity team have created a platform for continuous communication/feedback between themselves and the staff network members – a forms document is routinely promoted at each staff network session to ensure staff network members have a voice in the direction of the network. By doing this the Equality and Diversity team are ensuring that the networks cater for the needs of its members and play an active role in supporting members.</p>

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<p>Deliver an annual programme of Active Bystander training and identify opportunities to embed training on racism and discrimination into additional programmes e.g. Management Development programmes, INFORM, Corporate Induction, Making a Difference.</p>	<p>End of Year 2</p>	<p>Workforce and Organisational Development (Diversity & Inclusion team and People Development team)</p>	<p>Anti-racist Wales Action Plan LGBTQ+ Action Plan</p>	<p>Staff will be confident to stand up to racism and all forms of discrimination and are empowered to voice any concerns.</p> <p>10% annual increase in staff completing the Active Bystander training.</p>	<p>Hywel Dda University Health Board facilitates a rolling programme of Active bystander training, providing staff with the skills and confidence to call out discrimination and inappropriate behaviour. The training is supported at Board level and staff are provided with the sources of support that are available within the Health Board.</p> <p>During the reporting period, 2 Active Bystander Training Sessions have been delivered to 55 Health Board Staff members as follows:</p> <ul style="list-style-type: none"> • 2nd July = 30 attended • 2nd September = 25 attendees <p>A further 2 sessions are scheduled to take place over the next reporting period.</p> <p>Active Bystander training will be prioritised as a key training programme and will continue to be offered and promoted to all HDUHB staff members for the forthcoming year.</p> <p>During this reporting period 4 further Active bystander sessions were delivered to a total of 96 Health Board staff members as follows:</p> <ul style="list-style-type: none"> • 14th November = 21 attendees • 12th December = 19 attendees • 12 February = 28 attendees • 10th March = 28 attendees <p>We also actively look to identify opportunities to embed training on anti-racism and discrimination into all additional programmes, such as Person-Centred Approach, LEAP and Hywel Dda Manager where the Business, Partnerships and Inclusion team have embedded training on equality, diversity and inclusion including racism and discrimination.</p> <p>Further information on the progress made regarding our Active bystander and Person-Centred Approach training as well as the EDI modules of our, LEAP and Hywel Dda Manager programmes, can be found on page 6 of our submission document.</p>
<p>All Leadership and Management Development programmes will incorporate topics relating to diversity, inclusion and wellbeing.</p>	<p>End of Year 2</p>	<p>Workforce and Organisational Development (People Development team and Organisational</p>	<p>Workforce, Organisational Development and Education 10-year strategy</p>	<p>Staff completing Leadership Development programmes have the confidence and skills to become more inclusive leaders.</p>	<p>Both LEAP and the New Consultant Development Programme include sessions on ED&I and Wellbeing (personal and team) with a focus on leaders' responsibility to create working environments where people can be themselves and can flourish and thrive. Feedback from these sessions and from the programmes has indicated that leaders are developing the confidence and tools to be more inclusive and that they</p>

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		Development team)		<p>Success can be measured by scoring questions related to leadership and management from:</p> <ul style="list-style-type: none"> • Engagement surveys • Exit surveys <p>Risk: Staff are not honest when completing exit interviews. We can mitigate against this by allowing exit interviews (and other surveys) to be completed independently/anonymously.</p>	<p>are more aware of and able to focus on their own and their teams' wellbeing.</p> <p>These topics are also included in the Hywel Dda Manager programme (led by the People Development team) so these messages are being given to managers and leaders at all levels within the organisation. Evidence from national staff surveys and local cultural surveys are used to inform local action plans relating to equality and diversity issues.</p> <p>Evaluation of programme delivery indicates that these sessions are well received and valued by the leadership learners.</p> <p>The analysis of staff responses to the 2024 national survey is being completed and will form part of the EDI Task Force work programme for 2025/6, led by a Board Independent Member. It will also be sent to the relevant teams for consideration. Work will continue with the development of actions to further increase staff participation for the 2025 survey.</p>
Any inequalities, unfair practice and bullying and harassment are identified and addressed promptly.	End of Year 1	Workforce and Organisational Development (Workforce team)	<p>Workforce, Organisational Development and Education 10-year strategy</p> <p>Anti-racist Wales Action Plan</p> <p>Workforce Race Equality Standard</p>	<p>Monitoring and reporting of any cases of bullying, harassment or discrimination involving staff will include the accurate capture of protected characteristics.</p> <p>Risk: There is a risk that the findings of the staff survey could indicate or provide reasons of why staff report high levels of stress, ill-health, sickness. Or could have further impacts in terms of high staff turnover or reputational damage to the Health Board.</p>	<p>Our report was submitted to NHS Employers on 31 May 2024. This was the submission required by the National Workforce Implementation Plan for the period 1 January 2024 to 31 March 2024. The next report is due in May 2025. No trends or concerns were noted in the report from the cases received, however 7% of staff reported via the NHS staff survey that they had experienced discrimination at work from colleagues and 7% said they had experienced discrimination at work from patients, their relatives, or members of the public. As a result of these findings the Bullying and Harassment Task and finish group has been re-established to investigate these findings further.</p> <p>Work is currently underway to compile the Health Board's report, which is scheduled for submission in May 2025. At this stage, it is too early to identify any trends or concerns for the current year. Further details will be included in our next submission.</p>
Organisational Development Relationship Managers will work with staff at all levels to identify cultural patterns and emerging themes to co-develop or update People Culture Plans.	End of Year 2	Workforce and Organisational Development (Organisational Development Relationship team)	Workforce, Organisational Development and Education 10-year strategy	Every Health Board directorate and key staff group will have a People Culture Plan which is grounded in organisational evidence and learning.	Every directorate across the Health Board (HB) is supported by an OD Relationship Manager (ODRM), who focuses on promoting and providing proactive and responsive support across the HB through engaging with services to facilitate an understanding of what makes the greatest difference in improving the experiences of their staff. They work collaboratively to build a true picture based on the interpretation of qualitative and quantitative intelligence from various workforce data sources, including a bespoke culture survey we designed in line with the HB's cultural themes. This informs the co-creation of strategically aligned

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					<p>People Culture Plans, which, in turn, influences and nurtures local ownership for delivery, with progress continuously supported and measured by our ODRMs. As part of our continuous improvements to intelligence and triangulation, we have commenced scoping methods to layer data and insights from a variety of sources to enable a richer thematic understanding across the HB in relation to cultural patterns and emerging themes to further inform the focus and development of our OD responses, including People Culture Plans. Also, following the results of the 2023 All Wales Staff Survey, a new Task and Finish Group has been established to explore the wider cultural issues in relation to bullying and harassment.</p> <p>As noted in the previous update, our ODRMs have continued to focus on promoting and providing proactive and responsive support to local teams to enable healthy and happy working cultures during this period, including:</p> <ul style="list-style-type: none"> engaging with the services/teams to facilitate an understanding of what matters the most to their staff and what makes the greatest difference in improving their experience at work based on the interpretation of qualitative and quantitative intelligence from a range of workforce data sources relating to employment experience and working cultures. reviewing our accessible Toolkits (one for each of the seven themes) to support leaders to develop and engage their teams and feel better equipped to manage cultural change. supporting teams with conflict resolution by aiming to 'nip things in the bud' through facilitating restorative approaches which encourage constructive dialogue over confrontation, e.g. mediation and facilitated conversations.
<p>The Health Board will commit to the Aspiring Board Members Programme, ensuring education, mentoring and support to participants, particularly people from a Black, Asian and minority ethnic background.</p>	<p>End of Year 1</p>	<p>Workforce and Organisational Development (Board members and Organisational Development team)</p>	<p>Anti-racist Wales Action Plan</p>	<p>Increase the number of people who are able to evidence more effectively their ability to undertake the role of a non-executive member and increase the diversity on Boards.</p>	<p>As part of the Anti-racist Wales Action Plan, Welsh Government committed to the development of an Aspiring Board members programme. The first cohort to join the programme are expected to start in May 2025. It is recognised that Boards need to be representative of their workforce and diversity of membership draws on wider lived experiences and provides a greater understanding of under-represented groups. The aim of the programme is to create a robust pipeline of diverse applicants but, as well as non-executive Director positions, the programme is intended to help individuals recognise the wider opportunities that exist within Health.</p> <p>The New Aspiring Board members programme was launched by Academi Wales in early March 2025. Details of the programme have been shared</p>

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					<p>across the Black, Asian and Minority Ethnic networks across the Health Board to raise awareness as well as using media channels to promote the opportunity to our local communities.</p>
<p>The Health Board will deliver a Welsh Language plan that supports our ambitions to enhance our Welsh language and culture, and engages and inspires our staff, patients, and broader communities.</p>	<p>End of Year 2</p>	<p>Communications and Engagement (Welsh Language team)</p>	<p>More than Just Words The Welsh Language Standards (No.8) Regulations 2022</p>	<p>Achievement of the key performance indicators (KPIs) outlined within the Bilingual Skills policy, Cymraeg 2050, and More than Just Words whilst also striving to comply with the Welsh Language Standards.</p>	<p>The Health Board continues to support staff, teams and departments to comply with the Welsh Language Standards.</p> <p>The Health Board continues to promote its bilingual skills strategy in order to improve staff Welsh language skills to be able to support the active offer and contribute to the targets as set out in Cymraeg 2050.</p> <p>Diwrnod Shwmae will be celebrated within the Health Board in order to support Welsh Language culture and also the opportunities available to staff to learn or improve their Cymraeg.</p> <p>The Health Board continues to support staff, teams and departments to comply with the Welsh Language Standards. The Health Board continues to promote its bilingual skills strategy in order to improve staff Welsh language skills, part of this is learning courses such as Cwrs Croeso (for complete beginners) and Cwrs Codi Hyder (for people who don't have the confidence to use their Welsh), this will help us to be able to support the active offer and contribute to the targets as set out in Cymraeg 2050. We held an internal health board Eisteddfod to raise awareness of Welsh culture as well as continue to celebrate national days such as Diwrnod Shwmae, Dydd Gwyl Dewi and Dydd Santes Dwynwen. We use these days to remind staff of the opportunities available to staff to learn or improve their Cymraeg as well as to remind staff of the Welsh language Standards.</p>
<p>Provide an annual report to the People, Organisational Development and Culture Committee to demonstrate the progress being made to implement the Anti-Racist Wales Action Plan.</p>	<p>End of Year 1</p>	<p>Black Asian and Minority Ethnic Advisory Group</p>	<p>Anti-racist Wales Action Plan</p>	<p>The Health Board annual report will demonstrate progress which moves beyond the required Welsh Government actions.</p>	<p>Regular reports have been provided to the People, Organisational Development and Culture Committee to demonstrate the work of the Black, Asian and Minority Ethnic Advisory Group. An update on the Anti-racist Wales Action Plan was presented and discussed at the August meeting and demonstrated that good progress has been made towards the Anti-racist Wales Action Plan and local action plan. More detail on the actions achieved by each of the six themes, as well as next steps is provided in our submission document, or the paper presented to the Committee can be accessed via the Health Board's public website.</p> <p>The next report is due May 2025.</p>

Strategic Equality Objective 2 - Working together to improve health and well-being for all

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Re-launch and strengthen the Health Equity Group and work collaboratively to implement actions to reduce health inequalities.	End of Year 2	Public Health and Wellbeing	Well-being of Future Generations (Wales) Act Socio-economic Duty	Increased profile and focus on health equity in services, and the Health Board's work with partners and partnerships.	<p>A Health Improvement and Equity Oversight Group has been established in the Health Board and one meeting has taken place to date. An Equity Framework is also being developed which will be piloted using an agreed, service area where equity improvement is identified as needed. An Equity Operational Group will take forward this pilot once the Oversight Group has agreed the service area.</p> <p>Health Impact Assessment has been mandated by the Public Health Act (Wales) 2017 and work is underway to ensure this is implemented and integrated into the Health Board's Quality Impact Assessment and Integrated Impact Assessment processes.</p> <p>The Health Improvement and Equity Oversight Group has been established in the Health Board to monitor and oversee the Health Improvement Strategic Plan. Two meetings have taken place to date and the work to review a proposed Equity Framework is ongoing. Taking forward a commitment outlined in the Health Board's long-term strategy 'A Healthier Mid and West Wales', a 'Social Model for Health and Well-being' Steering Group, made up of key partners across the region, was established in June 2024. A definition and set of 6 principles have been agreed with a Framework, to include a progress checker maturity matrix and Charter, is currently under development to help partners embed the principles within their organisations. A 'Summit' event was organised for 20 March 2025 with Professor Sir Michael Marmot and Cormac Russell as keynote speakers. PSB Chairs and specific Delivery Group members were invited to attend.</p> <p>H DUHB has established a Housing and Health Community of Practice for stakeholders to collaborate and share information to mitigate the impact of poor housing on health, with a focus on temperature, air quality & falls.</p>
Work in partnership to tackle the barriers experienced by homeless and other vulnerable groups to deliver support to address inequalities in health.	End of Year 2	Workforce and Organisational Development (Community Development Outreach team)	Improving the Health and Well-being of Homeless and Specific Vulnerable Groups – Health Action Plan	10% increase in the number of individuals being signposted and participating in activities focused on promoting public health interventions e.g. healthy eating, smoking cessation, exercise or receiving information about how to access health services.	<p>The Health Board's Community Development Outreach Team (CDOT) continued to work in partnership with diverse communities and vulnerable groups to have a better understanding of the issues they experience when accessing healthcare. The CDOT team aim to break down barriers to healthcare and inequality and be a bridge between these often rarely heard from communities and the health board. CDOT work closely with Gypsies, Roma and Traveller communities, homeless and vulnerably housed, asylum and refugees and Black Asian and Minority ethnicities. CDOT regularly attend and hold events, attend drop-ins.</p> <p>During this reporting period the CDOT visited several emergency accommodation sites in Pembrokeshire alongside the Smoking Cessation team.</p>

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					<p>The CDOT continued to attend drop in events for those that are homeless and vulnerably housed. During the reporting period, CDOT also invited the Community Immunisation Team to attend alongside them, where they were able to undertake testing for Blood Born Viruses (BBV) for members from the Polish and Romanian community.</p> <p>The CDOT have continued to work with diverse communities and vulnerable groups across the three counties during this reporting period. They have supported newly arrived asylum seeker and refugee families by introducing them to healthcare services and ensuring they know how to access emergency care. The CDOT have worked collaboratively with Ethnic Youth Support Services (EYST), the Local authority and Health Board teams to break down barriers in accessing health care.</p> <p>The CDOT continued to reach out to those that are homeless and vulnerably housed by visiting drop ins, soup kitchens and emergency accommodation connecting people with the services that can help them. CDOT have introduced both the Smoking cessation and the Community Immunisation Team with these seldom heard groups and have facilitated visits which have resulted in smoking cessation referrals and Blood borne virus (BBV) testing.</p> <p>The CDOT continue to work with Gypsies and Traveller communities. The CDOT held a mocktail event during this reporting period where members of the Gypsies and Traveller community could learn about alcohol reduction. CDOT have also engaged with visiting families from both the Traveller and Show persons community making sure they know where the nearest health care facilities are. Recent engagement included building relationships with New Travellers on an off grid residential setting and engaging community members in a public consultation.</p> <p>The CDOT have also held a health and wellbeing day in a local Mosque where Health Board teams and the third sector came together to showcase what support is available in the local area. The CDOT engaged with multi-cultural communities through visits to multicultural drop in's and well-being walks as well as providing health information in their native language.</p> <p>During this reporting period, CDOT has:</p> <ul style="list-style-type: none"> Developed a small multi agency working group to support homeless and vulnerably housed drop in and homeless Polish community

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					<ul style="list-style-type: none"> Offered immunisations by attendance at drop in's, emergency accommodation, foodbanks during a catch up "walkabout" across three counties Held an 'Eating on a budget session' at a drop in event Held multiple factory engagement events, where screening, smoking and alcohol information was given to workers from all over the world Undertook work-based visits at various barbers, nail bars etc. to form connections within communities. Maintained regular attendance at Mosques <p>CDOT also facilitated two Arts in Health projects in two separate Gypsy and Traveller communities, funded by The Arts Council of Wales and Hywel Dda charities. These projects created a safe space with the main aim of sharing early prevention health messages, and resulted in increased wellbeing, better community engagement, and six smoking cessation referrals.</p>
Work in partnership to implement the Armed Forces Covenant Duty and improve access to priority treatment for eligible Veterans.	End of Year 2	Workforce and Organisational Development (Diversity and Inclusion Team)	Armed Forces Covenant Duty	<p>10% annual increase in the number of GP practices signing up to the Health Education and Improvement Wales Veteran Friendly GP Scheme.</p> <p>Risk: If GP's are not aware veterans may not be referred for priority treatment or not identified as a veteran on referral.</p>	<p>The <u>HEIW Veteran-Friendly Practices Scheme</u> was launched in early 2023 to enable GP practices to sign up voluntarily to undertake specialist training on veterans' health and wellbeing and promoting fair treatment and respect for people who have served in the UK Armed Forces, and their families in order to be a registered "veteran-friendly practice".</p> <p>By the end of the reporting year 2023-24, three GP practices in the Hywel Dda area had completed their VFP accreditation. Work has started with each practice's veterans champion to promote the scheme and support and encourage practices to register to the scheme. This scheme will ensure that the GP practices will have a greater awareness and understanding of the needs of veterans, as well the referral for priority treatment.</p> <p>During this reporting period, an additional GP practice has enrolled in the HEIW Veteran-Friendly Practices scheme. The Health Board Armed Forces Clinical Champion has delivered presentations at cluster leads meetings to further promote the scheme. Efforts are underway with the Armed Forces Champion at Ystwyth GP Practice to develop a good practice report, which will demonstrate the impact of the scheme on the organisation and its veteran patients.</p>

Strategic Equality Objective 3 – Embedding a person-centred approach

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<p>Deliver a programme of awareness raising training on topics related to protected characteristics which are in addition to the mandatory requirements e.g. neurodivergence, sensory loss, transgender awareness.</p>	<p>End of Year 2</p>	<p>Workforce and Organisational Development (People Development team and Diversity & Inclusion team)</p>	<p>Workforce, Organisational Development and Education 10-year strategy All Wales Standards for Accessible Communication and Information for People with Sensory Loss LGBTQ+ Action Plan</p>	<p>Staff have an increased awareness of how to deliver a person-centred approach which values everybody's unique needs. % of staff recording they have increased confidence and awareness of how to implement a person-centred approach in their day-to-day work (as recorded in training evaluation and feedback surveys). Risk: The Business Partnerships and Inclusion team are aware that a number of Health Board staff will find it difficult to attend training due to their clinical commitments. We therefore try and record any training and save related resources on our SharePoint page so that staff can access when they have capacity to do so. Due to the Health Boards current financial situation continuation of external training providers may become unfeasible. The Health Board will continue to prioritise external training based on greatest need.</p>	<p>A breakdown of the Learning and Development and Leadership and Management training on offer to staff across the Health Board has been included in our submission document. In addition to this the Business, Partnerships and Inclusion team also provided ad hoc training (22 separate sessions or programme of sessions delivered during this reporting period), which are usually arranged in response to a specific learning need identified by staff or in line with events highlighted within our Diversity Calendar. Please see an example of training facilitated by the Business, Partnerships and Inclusion team during this reporting period (not an exhaustive list):</p> <ul style="list-style-type: none"> • Equality Week: Looking closer at inverse digital care and inclusion (1 of 5 Equality week sessions). • First Steps to Trans Inclusion. • Person Centred Approach. • EqIA training delivered to Cardiac Physiology Dept. • Introduction to LGBTQ+ language. <p>Further breakdown of the Learning and Development and Leadership and Management training on offer to staff across the Health Board has been included in our submission document.</p>
<p>Deliver psychological wellbeing support for staff which takes account of the unique needs and preferences of individuals.</p>	<p>End of Year 2</p>	<p>Workforce and Organisational Development (Staff Psychological Wellbeing Service team)</p>	<p>Workforce, Organisational Development and Education 10-year strategy Matrics Cymru: Guidance for Delivering Evidence-Based Psychological Therapy in Wales</p>	<p>Staff have access to a broad range of accessible options which take account of the diverse needs of staff. 100% of the Staff Psychological Wellbeing Service team will have attended additional awareness training related to protected characteristics e.g. neurodivergence, sensory loss, anti-racism, transgender awareness.</p>	<p>Raising team awareness The Staff Psychological Wellbeing Service team members are all up to date with the mandatory training requirements. In addition to this, further training is being undertaken (51% completed) which covers the following:</p> <ul style="list-style-type: none"> • Making a Difference • Transgender awareness • Working with sensory loss • Unconscious Bias • Active Bystander training • Cultural Awareness • Patient Centred Care

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				<p>Risk: Delivery of services needs to be culturally sensitive. This can be mitigated by the Wellbeing service team having cultural awareness training.</p>	<ul style="list-style-type: none"> • Understanding Assessment and Autism • Understanding Effective Communication and Autism <p>Service Provision</p> <ul style="list-style-type: none"> • A range of options are currently available across all aspects of service delivery. • Review of access to 121 service provision for ethnic minority staff with discussion underway with the Black, Asian and Minority Ethnic network to identify barriers and solutions. <p>Team Awareness: An additional 5 courses have been added to the training list for all team members to undertake. These additional modules are:</p> <ul style="list-style-type: none"> • Anti-racist Practitioner Training, • Religion and Belief, • First Steps to Trans / LGBTQ+ Inclusion, • Trans awareness training. <p>Across the 14 courses the team currently undertakes, compliance stands at 77%. Plans are in place for further attendance as soon as additional dates become available.</p> <p>Service Provision: Focus group have been held with Staff Carer's Support Network, to identify additional needs. Actions have been identified and are currently being implemented to address these needs.</p> <p>The Staff Psychological Wellbeing Service team are working with the Health Board's Black, Asian, and Minority Ethnic Staff Network to enhance the accessibility of the Staff Psychological Wellbeing Services for minority ethnic staff and address the stigma. Measures have been implemented to address these needs.</p>
<p>Improve the experiences for staff, patients and carers with sensory loss through the implementation of the Sensory Loss Friendly accreditation scheme in our public and patient areas.</p>	<p>End of Year 2</p>	<p>Workforce and Organisational Development (Partnership & Inclusion team)</p>	<p>All Wales Standards for Accessible Communication and Information for People with Sensory Loss</p>	<p>20% increase in the number of departments participating in the Sensory Loss Friendly Accreditation scheme.</p> <p>Risk: If the All Wales Standards for Accessible Information and Communication are revised and expanded to include other needs in</p>	<p>The Health Board has put forward an application and been successfully accepted to this year's Bevan Exemplar Programme by Bevan Commission. The Bevan Commission is the Wales' leading think tank providing independent and authoritative advice on current and future health and care to the Welsh Government and leaders in NHS Wales, the UK and worldwide. Through this Programme, a dedicated project team will be supported by Bevan Exemplars and will work collaboratively with stakeholders including those who use our services to further improve practice in health and care and create change with the people and for the people in the system and those who use it.</p>

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				<p>addition to sensory loss, this could pose additional challenges. This can be eased by the work currently ongoing with regards to the standards that ensure all communication and information needs are addressed, not only from a sensory loss perspective.</p>	<p>The Health Board Bevan Exemplar project is titled: “Meeting the communication and information needs of people with a sensory loss when accessing our healthcare services”. It is aimed to enable services in Hywel Dda and, potentially, all other health boards, to adhere to the Standards. Through this Programme the project team aims to roll-out the Sensory Loss Friendly Checklist to at least three service areas within Hywel Dda and further develop a robust “Sensory Loss Friendly Accreditation Scheme” that will enable all service areas, in particular, hospital wards, outpatient areas, accident and emergency, GP practices and other services to provide accessible services for all.</p> <p>This project does not only contribute to the implementation of the Standards but also ensures that the Health Board is putting people at the heart of everything we do and that we deliver equitable services for all and in ways that promote dignity and respect. Whilst this project focuses on the communication needs of people with sensory loss, there is a potential to expand this project to include communication needs of people with other disabilities or language barriers and meet the needs of patients with a range of protected characteristics. This project would also ensure that, as required by the Equality Act (2010), the Health Board is making reasonable adjustments to ensure those with protected characteristics do not experience discrimination when accessing our services.</p> <p>The Bevan Commission Exemplar Programme 2024-25</p> <p>The Bevan Commission’s Exemplar Programme is part of the Bevan Commission which is Wales’s leading think tank providing independent and authoritative advice on current and future health and care to the Welsh Government and leaders in NHS Wales, the UK and worldwide. Through this Programme, a dedicated project team have been attending Bevan Exemplar events to gain networks and leadership and innovation skills to support them translate the Sensory Loss Friendly Assessment (SLFA) Checklist project idea into practice. The Bevan Exemplar project team have been working together and collaboratively with stakeholders including those who use our services to further improve the SLFA Checklist project. Communication and engagement activities are ongoing with various partners such as Llais and Wales Council of the Blind, as well as several other partnership forums such as Professional Hearing Collaborative Group and Sensory Loss Partnership Forum, to ensure the SLFA Checklist is informed and shaped by the feedback and input from people with lived experiences and relevant partners.</p> <p>The Health Board Bevan Exemplar project is titled: “Meeting the communication and information needs of people with a sensory loss when</p>

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					<p>accessing our healthcare services". This project will enable services in Hywel Dda and, potentially, all other health boards, to:</p> <ul style="list-style-type: none"> • Adhere to the All-Wales Standards for Accessible Communication and Information for People with Sensory Loss. • Improve patient experience for people with sensory loss accessing our services. • Improve confidence among members of staff to assess their patient areas for accessibility and where needed, introduce changes to improve accessibility and meet the needs of those with sensory loss. • Ensure we are providing a consistent and equitable health and care system for all. <p>The new SLFA Checklist is currently being piloted and continually being improved in partnership with three service areas in Hywel Dda:</p> <ul style="list-style-type: none"> • Meddygfa Whitland Surgery. • Ophthalmology Unit, Withybush General Hospital. • Outpatients, Cardigan Integrated Care Centre. <p>This project will not only support the implementation of the Standards but also will ensure that the Health Board is putting people at the heart of everything we do and that we deliver equitable services for all, in ways that promote dignity and respect. Whilst this project focuses on the communication needs of people with sensory loss, it is designed to include the communication needs of people with other disabilities or language barriers and meet the needs of patients with a range of protected characteristics as we prepare for the implementation of the new All-Wales Standards for Accessible Communication and Information. As set out in the Equality Act (2010), this project will also help service areas to be confident in making reasonable adjustments to ensure those with protected characteristics do not experience discrimination when accessing our services.</p>

Strategic Equality Objective 4 - Being an employer of choice

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<p>Develop a refreshed apprenticeship model to extend the range of apprenticeship roles and offer diversity within career pathways.</p>	<p>End of Year 1</p>	<p>Workforce and Organisational Development (Future Workforce team)</p>	<p>Workforce, Organisational Development and Education 10-year strategy</p>	<p>Increased participation, in particular within under-represented groups with multiple entry points for Healthcare apprentices by December 2024. 10% increase in non-clinical apprenticeships.</p>	<p>We have refreshed our offer this financial year and have step off points during the Apprenticeship programme. We have additional non-clinical pathways including a recently commenced Finance Apprenticeship. We have increased participation in under-represented groups within the Health Care Apprenticeship Programme .A few successful candidates this year who are from Black, Asian and Minority Ethnic communities have been linked with the Culture and Workforce Experience Team, who were able to connect them with individuals who are part of the Black, Asian and Minority Ethnic advisory group, and supported the new apprentices with things like prayer spaces and introduction to colleagues.</p> <p>The Health Board has various programmes such as Pathway 4 which enables local young people with learning disabilities to access work experience opportunities within the Health Board, we also have translated this to volunteering where the Pathway 4 candidates have applied for volunteering roles as they enjoyed their work experience with us. Reasonable adjustments have also been made for apprentices during the application progress and once in post, which has resulted in a more diverse cohort.</p> <p>We are currently scoping opportunities to include a widening access apprenticeship offer which focuses on entry level qualifications with an output of Band 2 or Band 3 roles. This would support the continuity for candidates such as Pathway 4 learners and others who have ambitions to work for the Health Board but at lower bandings than the current apprenticeships offer.</p> <p>Finance apprenticeships have now been rolled out across the Health Board with 2 new finance apprentices recruited in 24/25. We are still establishing the Apprenticeship Offer for 2025-2026 which is likely to include a widening access route.</p>
<p>Increase our monitoring of the uptake of learning and development opportunities to ensure all staff are encouraged to progress and have opportunities for learning and development.</p>	<p>End of Year 2</p>	<p>Workforce and Organisational Development (People Development team)</p>	<p>Workforce, Organisational Development and Education 10-year strategy</p>	<p>A system will be established to record and monitor the uptake of learning and development opportunities and increase participation by those in underrepresented groups.</p>	<p>Over the past six months, a focus has been around improving the data to allow the recording, monitoring, and evaluation of the uptake of training and learning opportunities. By digitalising these systems, it allows us to access equality data through ESR, therefore will be able to provide more detailed analysis in our future reporting. By digitalising all data, it is increasingly apparent that local training and development opportunities are not always being captured on ESR, as local systems prevent identification of any training not authorised. This has been rectified through new systems and management awareness. In addition, training opportunities are being promoted through underrepresented groups, to</p>

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					<p>widen awareness about the opportunities available and how to access these.</p> <p>There has been a period of embedding automated systems and this has given us the ability to now amalgamate training data for all Agenda for Change staff. Following the end of the financial year, all training data will be analysed and combined with equality data, showing training accessed by underrepresented groups.</p> <p>Next steps: to identify how medical and dental staff group training data is collated from a different system to further improve data recording and analysis.</p>
<p>Nursing and Medical Retention Task and Finish Groups will identify opportunities that enable staff to share unique cultural experiences in order to identify, deliver and realise opportunities to work differently across the Health Board.</p>	<p>End of Year 1</p>	<p>Workforce and Organisational Development (Workforce team)</p>	<p>Workforce, Organisational Development and Education 10-year strategy</p>	<p>The aim will be to achieve a reduction in staff turnover of:</p> <ul style="list-style-type: none"> • Medical: 1% in 2024/25 • Nursing: 0.5% in 2024/25 <p>Risk: Will the proposed growth to our workforce be enough to meet the increasing demands on services and with existing staff members reaching retirement stage and leaving the Health Board. Mitigation outlined in the update column</p>	<p>Our Retention Task and Finish Groups oversee specific projects as a vital element of sustaining and growing our workforce to meet the increasing and changing demands on services. Our Nurse Retention Group was initially established in 2022 and our Health Board Nurse Retention Action Plan has been mapped to the All-Wales Nurse Retention Plan to ensure alignment with national priorities. We have continued the positive trajectory of implementation between April and September across all areas, including:</p> <ul style="list-style-type: none"> • Shaping Organisational Culture • Understanding our Data and Communicating with our Staff • Supporting New Starters and Those Changing Roles • Supporting International Staff • Development and Career Planning (at all stages of an employee's career) • Flexible Working • Flexible Retirement • Health and Wellbeing • Recognising and Rewarding Staff <p>Our Nurse Retention Group continues to meet on a 4-week basis and we recently invited members to review the Group's progress, with feedback including it being useful for key nursing colleagues to have the opportunity to be sighted on important developments across the organisation, share best practice, generate ideas, access key resources and offer peer-to-peer support in improving retention across the Health Board. We established our Medical Retention Group in 2023 and have recently widened membership of the Group to ensure representation from Primary Care, GPs and Mental Health. Our Medical Retention Group continues to meet on a 6-weekly basis and our Health Board Medical Retention Action Plan mirrors the headings and elements of our Nurse Retention Plan. In</p>

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					<p>relation to Allied Health Professions retention, exploration work and research is being finalised ahead of establishing our AHP Retention Group in Autumn/Winter 2024.</p> <p>We have continued the positive trajectory of implementation across all our Retention Plans, for example:</p> <ul style="list-style-type: none"> • Supporting International Staff: contributing to the NHS Wales IEN app which supports their onboarding. • Development and Career Planning: progressing the 'Day in the Life' stories, where we collect experiences of nursing staff from a demographically wide selection to understand their unique individual experiences and highlight areas of good practice. This will also help to showcase different ways of obtaining qualifications and entering nursing roles within the HB, to hopefully support internal movement within. Also, for our medical colleagues, we have increased education in relation to the portfolio pathway (CESR) and our New Consultants Development Programme which enables our new consultants to learn more about Hywel Dda as an organisation, while simultaneously establishing a network of peers from across all sites • Flexible Working: working in partnership with TU colleagues, a Task and Finish Group has been established, consisting of managers and staff who have a progressive approach to flexible working. An example of a key action to date is a flexible working maturity assessment spread and scale project, which is being planned and managed from a quality improvement perspective and includes teams across various staffing groups. • Flexible Retirement: working in partnership with TU colleagues, a Task and Finish Group has been established, consisting of managers and staff who have experienced the retire and return process. Examples of key actions to date include creating a video as a training resource for both managers and staff to showcase how a coaching conversation can take place about flexible retirement and creating a SharePoint page to capture information. • Recognising and Rewarding Staff: capturing positive and empowering staff stories of best practice and 'centres of excellence' across the HB which hold significant learning value, and thereby act as an important means of increasing energy and motivation around how we spread and scale changes.
The Health Board's commitment to being an inclusive employer is visible and staff are able to	End of Year 2	Workforce and Organisational Development	Workforce, Organisational Development and Education 10-year strategy	The Health Board will develop a strategic approach to its participation in national accreditation schemes which benchmark best practice e.g. Disability Confident Employer, Carer Confident,	The Health Board's Recruitment team are in continuous discussions with DWP and Welsh Government regarding the Disability Confident Scheme and the recruitment of people who identify as having a disability.

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be their true selves at work.		(Workforce team)		Veteran Aware, Pride in Veterans Standard.	<p>The Health Board displays the relevant logos for national accreditation schemes in email signatures, and recruitment literature.</p> <p>During this reporting period, the Business, Partnerships and Inclusion team have developed a central document that captures the relevant accreditation schemes. This will ensure the Health Board is aware of when renewal dates are approaching and can ensure that we continue to maintain our accreditations.</p> <p>During this reporting period the Health Board has reaffirmed its accreditations to both the Pride in Veterans Standard (PIVS) and the Veteran Aware scheme.</p> <p>Recruitment Campaigns continue to promote available job opportunities across various platforms to ensure we are reaching as many individuals within our communities as possible:</p> <ul style="list-style-type: none"> • Internally via Global emails and Viva Engage • Social Media - Facebook, X and LinkedIn • Partner organisations <p>Discussions continue with DWP and Welsh Government Disabled People's Employment Champion's regarding Disability Confident Scheme and the recruitment of people who identify as having a disability. We also utilise the support from these organisations for workplace guidance, advice and best practice which can be implemented within the Health Board.</p>
Through the analysis of the data we will develop an understanding of the barriers impacting our workforce and their opportunity for career progression.	End of Year 2	Workforce and Organisational Development (Workforce Planning team and Workforce Intelligence team)	Workforce, Organisational Development and Education 10-year strategy	<p>Continue to analyse and report on pay gap data in particular gender, disability and ethnicity, as well as other sources e.g. exit interviews.</p> <p>Development of initiatives to address the barriers to career progression which have been identified e.g. medical retention plan.</p> <p>Risk: A lack of career progression and development may have a negative impact on staff retention.</p>	<p>The Pay Gap reports were submitted and approved at the Health Boards public board meeting in September, following consideration at the Staff Partnership Forum and People, Organisational Development and Culture Committee (PODCC).</p> <p>The NHS Wales Shared Services Partnership (NWSSP) developed a video promoting the importance of recording ED&I data in ESR (to improve reporting) which was shared with ED&I leads across Wales for comments. The Health Board were involved in shaping revisions to the video which has now been uploaded to ESR and is being used to encourage staff to update their EDI information.</p> <p>A brief review has also taken place during the reporting period of nurses qualified in the last 2 years and the proportion promoted/progressed based on:</p> <ul style="list-style-type: none"> • Ethnicity

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					<ul style="list-style-type: none"> • Age • Gender • Disability <p>Details of the review will be included in the next reporting period and an overview of the issues identified outlined in our submission document.</p> <p>Work was undertaken by NWSSP to develop a video resource to promote the importance of recording ED&I data in ESR (to improve reporting). The video resource was shared with ED&I leads for comments and all comments were fed back to NWSSP.</p> <p>This video was further edited in line with the comments provided by the Health Boards ED&I leads and has been shared via ESR carousel and viva engage.</p> <p>Development of the Staff movement advice app (SMA) is being carefully reviewed to ensure all ED&I data, including nationality, (which is currently captured on our hires forms) is included so there is no gap in data gathering when moving to the new electronic solution.</p>
<p>We will work to increase the number of people applying as Health Board volunteers from under-represented groups.</p>	<p>End of Year 2</p>	<p>Workforce and Organisational Development (Future Workforce team)</p>	<p>Workforce, Organisational Development and Education 10-year strategy</p>	<p>Evidence of increased diversity in the reported characteristics of Health Board volunteers.</p>	<p>Throughout this financial year the Health Board in collaboration with the Community Development Outreach Team and have been attending spaces such as resettlement meetings and Mosques to share details of apprenticeship and volunteering opportunities, to increase our diversity across apprentice applicants/volunteers.</p> <p>It is expected that this outreach work will result in increased diversity in our volunteering network and ultimately lead to employment opportunities.</p> <p>The Future Workforce Team continues to work with the Community Outreach teams, to connect with different communities such as refugees. In addition, volunteering advertising has branched into communities such as the local pharmacy, butchers etc. a combination of these actions has resulted in an increase in diversity across our volunteering population with 13.8% of our active volunteers disclosing a disability. This year has also seen an increase in veterans now volunteering.</p>