




People and Culture Committee

28 January 2020, 09:30 to 12:30
Executive Meeting Room, Headquarters, St Cadoc's Hospital

Agenda

1		
9:30 - 9:35 Welcome and Introductions		Verbal Pippa Britton
1.1		
Apologies for Absence		
1.2		
Declarations of Interest		
2		
9:35 - 9:45 Review and approve the draft minutes and action sheet of the last meeting held on 24 October 2019		Attachment Pippa Britton
	2. PCC Minutes 24.10.19.pdf	(8 pages)
	2. PCC Action Sheet 24.10.19.pdf	(2 pages)
3		
9:45 - 10:35 Leadership		Presentation Sue Ball
4		
10:35 - 11:05 HEIW Strategy Update		Verbal Geraint Evans
5		
11:05 - 11:35 IMTP Update & Future Work Programme		Presentation Geraint Evans
6		
11:35 - 12:05 Clinical Futures Update		Presentation Julie Chapelle
7		
12:05 - 12:15 Welsh Language Standard 110		Attachment Sue Ball
	7. Welsh Language Standard 110.pdf	(15 pages)
8		
12:15 - 12:25 Agile Working Framework Update		Verbal

9
12:25 - 12:30 Any Other Business

Verbal

All

10
Date of Next Meeting

10.1
Tuesday 28 April 2020 at 9.30am in rthe Executive Meeting Room, ABUHB
Headquarters, St Cadocs

Pippa Britton

11
Papers for Information/Reference

11.1
Workforce & OD Risk Register

Attachment



11. Workforce & OD Risk Register.pdf

(3 pages)

Aneurin Bevan University Health Board Minutes of the People and Culture Committee held on Thursday 24th October 2019

Present:

- | | |
|---------------|-----------------------------|
| Pippa Britton | - Chair, Independent Member |
| Louise Wright | - Independent Member |
| David Jones | - Independent Member |

In Attendance:

- | | |
|-----------------|--------------------------------------------------------------------------|
| Geraint Evans | - Director of Workforce & OD |
| Richard Bevan | - Board Secretary |
| Sue Ball | - Assistant Director of Workforce & OD |
| Jill Evans | - Senior Organisational Development Manager
(Equality Lead) |
| Kate Davies | - Workforce Performance Manager |
| Julie Chappelle | - Assistant Workforce Director - Workforce Planning,
Clinical Futures |
| Sarah Simmonds | - Assistant Director of Workforce & OD |
| Rachel Williams | - Committee Secretariat |

Apologies:

- | | |
|-----------------|----------------------------------------------|
| Emrys Elias | - Vice Chair |
| Dianne Watkins | - Independent Member |
| James Quance | - Head of Internal Audit |
| Gabrielle Smith | - Performance Audit Lead, Wales Audit Office |

PCC 2410/01 Welcome and Introductions

The Chair welcomed members and officers to the inaugural meeting of the People and Culture Committee, and in particular welcomed attendees who were present.

The Committee was advised that the focus of the meeting was to consider the challenges facing workforce and to establish the priorities for the Committee going forward.

PCC 2410/02 Declarations of Interest

There were no Declarations of Interest made relating for items on the agenda.

PCC 2410/03 Setting the Context

Geraint Evans provided an update regarding the establishment of the Committee and the structure for the first

meeting. The Committee was informed of the key areas which would be covered by the workforce presentation:

- National Workforce Challenges
- National Frameworks
- Workforce Analysis
- People Plan and IMTP Priorities
- Achievements
- Opportunities
- Future Work Programme

National Workforce Challenges

The Committee was informed that research had been undertaken to look at the top three national workforce challenges. It was recognised that changing employee expectations, current and prospective workforce/skill gaps and technology presented challenges across all employment sectors. Sarah Simmonds presented the three main national workforce challenges:

Millennials –

It was reported that Millennials (born between early 1980s and 1990s) made up more than half of the national workforce and typically changed employers every 16 months. The Committee was advised that Millennials expected flexible careers with agile working and a mobile work environment. It was added that baby boomers (1946 – 1964) and generation X (1960s – early 1980s) were also set to have longer working lives due to financial necessity. It was recognised that offering flexible working with dynamic career progression needed to be considered to retain staff. It was emphasised that positive links with those that had left the organisation also needed to be maintained to attract those staff back at a later date.

Technology –

The Committee noted that most employers surveyed expected technology to determine new workforce skills. It was also noted that technology would inform how we communicate and engage workforce. It was acknowledged that closer alignment between IT and Workforce Strategies was required going forward.

Workforce Gaps –

It was reported that females accounted for 77% of the total all Wales NHS workforce and workforce is currently aged 50 or above. It was recognised that more people were also living with chronic conditions. The Kings Fund recognises the

importance of new roles and a multidisciplinary approach to fill workforce/skills gaps. It was emphasised that keeping up with the pace of change was a common theme throughout.

National Framework

The Committee was advised of the following National Frameworks which influenced our agenda:

- Wellbeing & Future Generation Act
- A Healthier Wales
- HEIW Draft Workforce Strategy
- Political Drivers e.g. Brexit
- National Terms & Conditions & Employment Law
- Professional & Regulatory Bodies
- Welsh Language and Equality Legislation
- Social Services and Wellbeing Act

The Committee discussed the cross sector challenges with regards to career development. It was noted that the Health Board was working closely with Coleg Gwent regarding the output from the Healthcare Support Worker courses and the widening access agenda. It was agreed for this to be added to the future work programme for the Committee.

ACTION: Secretariat

Workforce Analysis

Julie Chappelle presented the workforce analysis for the Health Board. The following key points were noted:

- The size of ABUHB workforce was 11,362 wte, which equated to 14,310 people;
- The gender profiles for all Health Boards were similar, being female dominant (77:23);
- Further work was required to bring ABUHB in line with Welsh Language Standards - 0.30% of staff were welsh language proficient;
- ABUHB had a high completion rate within ESR for Nationality with 96% of staff being British – this was due to efforts to prepare for BREXIT;
- The ABUHB sickness absence rate was consistent with all Wales position;
- The PADR compliance was slightly higher than the all Wales position;
- Statutory and Mandatory compliance was lower than the all Wales average however, the managers guidance was being reviewed and a new video package was being developed;

- Staff in post had increased by 817 wte in the past 8 years:
 - The numbers of Administration staff had increased by 347 - potentially as a result of managed practices and the new ward based roles which were developed to relieve pressure from clinical staff. Julie Chappelle agreed to include figures within the slide to circulate to all members of the Committee;

ACTION: Julie Chappelle

- The numbers of Allied Health Professionals had increased by 75;
 - There was an increase in Additional Clinical Service by 254;
 - Medical & Dental had increased by 79 wte;
 - Nursing and Midwifery had increased by 28 wte;
 - Estates & Ancillary had decreased by 52;
- The development of a role to manage sickness absence was being considered as part of winter planning – It was agreed to look at this in more detail at a future Committee meeting;

ACTION: Secretariat

- There was an expected decrease in Band 1s since they were not being appointed anymore as part of the most recent NHS Wales AFC pay deal;
- There was a decrease in Band 5 by 35 wte which reflected the constant challenge for nurse recruitment at this banding level;
- 1/3 of overseas nurses had been retained which was in line with the national figures;
- The Health Board was currently linked in with the Philipians and India regarding potential recruitment;
- Highest increase in staff as a percentage was band 8A (35%) and 8C (28%);
- The sickness absence rate was higher than normal this summer but similar to the rest of Wales;
- Future workforce would be made up of generation X, Millennials and the start of generation Y;
- In 2008 12% (1280) of staff were millennials, which had increased to 37% (5404) in 2019;
- Over the past 5 years ABUHB millennials had increased by 17%, which could equate to 70% of our workforce in 10 year's time.

Our response to the Challenges – People Plan

The Committee was advised that performance was monitored by the Finance and Performance Committee and at monthly Workforce and OD business meetings.

Achievements

Sue Ball provided the Committee with an update on the Health Board's workforce achievements to date. The following key achievements were noted:

- Clinical Futures Implementation Plan – The Plan was developed to outline the different components and actions required to deliver the Workforce programme. The programme of work had a clear emphasis on positive staff engagement and well-being and a particular focus on the transformational change needed to implement our Clinical Futures Strategy. It was noted that this was progressing at pace and included an established network of over 600 Clinical Futures Champions. The Health Board's plans recognised that staff experience shaped patient experience and the care delivered. As a result, the Health Board had developed an Employee Experience Framework that brought together the two essential cornerstones of employee well-being and engagement;
- Staff Engagement Audit - It was reported that the Health Board received substantial assurance following the recent audit;
- Employee Experience Framework - The Employee Experience Framework Toolkit contained a survey to monitor engagement and well-being. It was noted that the Health Board was scoping the feasibility of developing a Centre of Excellence for Employee Well-being which could be used to promote and develop well-being strategies and approaches for the benefit of our staff and the NHS in Wales. It was noted that the Framework had been presented at a recent Board Development session and was well received. Work was also underway with Divisions to look at feedback for specific teams;
- Defence Employers Recognition Scheme Gold Award –The Health Board offered priority healthcare for veterans who were referred for health issues related to their military service. It was reported that the Health Board had responded to feedback from Armed Forces Forum Colleagues and agreed to fast track referrals to our CAMHS services for the children of Armed Forces families, which supported the continued commitment to the Armed

Forces Covenant. It was added that ABUHB was the first Health Board in Wales to do this;

- The clinical Futures Transformation Modules for Managers have received very positive feedback and evaluation. 260 places (40 dedicated to medical staff) have been offered during the autumn. A further 120 planned for Spring 2020;
- New Recruitment Web pages/Branding – It was reported that the Health Board had launched new bilingual recruitment webpages and supporting branding materials to improve the Health Board’s ability to attract and retain staff. It was added that the Health Board had secured agreements with market leaders to provide a range of recruitment advertising methods which would enable ABUHB to widen reach in the UK and internationally using enhanced social media marketing;
- New Roles Physician Associates/Core Care Team/Primary Care MDT roles – It was noted that work to develop these roles and teams was underway;
- Financial Wellbeing – Financial Wellbeing had been a focus for the Health Board over the past 12 months gaining shortlist stage for the NHS Awards;
- Primary Care Academy – It was reported that the aim of the Academy was to support individuals to transition into Primary Care where their transferrable skills could be utilised and enhanced;
- Revised Disciplinary Model – A process had been developed and agreed with Trade Union colleagues to support reducing the timeframe for disciplinary investigations and the overall process, including suspensions. It was noted that within the first 3 months of implementing the new approach overall timeframes had reduced by 40% and the number of staff on suspension had reduced by 80%;
- HCSW Delegation – A pilot to evaluate the effectiveness of delegation practices had been undertaken on the surgical ward. This had identified a number of opportunities to improve delegation practices and support top of licence working, efficiency and patient care. The Health Board was working in conjunction with HEIW to develop a case study and publicise the work to develop a framework which would be shared across Wales;
- Partnership Working – The Health Board had continued to operate with excellent partnership working with Trade Unions (TUs) including regular TU partnership forums and development sessions;

- Voluntary Listening Service was developed to support the bullying workstream. A 'Showing Respect and Taking Responsibility' anti-bullying toolkit had been developed and launched.

Workforce Opportunities

The Committee discussed workforce opportunities to address the three main national workforce challenges. It was reported that the Health Board would continue to develop new roles and work with Universities and schools to address workforce gaps. An academy approach would be used to consider succession planning and apprentice models. It was noted that workforce plans would be developed in line with technology changes. The Committee discussed Millennials and recognised the need to consider recruitment practices, job design and agile and flexible working strategies.

Opportunities – Workforce Strategy for Wales

The Committee discussed the importance of the strategy, its key features and the Health Board's response. It was reported that the Strategy was due to be signed off in November 2019. It was agreed for the Strategy to be presented at the next Committee meeting to discuss in more detail.

ACTION: Secretariat

PCC 2410/04 Future Work Programme

The Committee discussed and agreed the following priorities for the Committee going forward:

- Leadership
- Recruitment and retention
- Healthier Wales - HEIW Social Care Wales Workforce Strategy – to schedule for January 2020
- Volunteers
- How deliver Care Closer to Home and the Primary Care Workforce
- Communications Strategy
- Health and Wellbeing of Staff
- Resourcing – Recruitment, supply chain, widening access
- New roles, Primary Care Workforce – to ensure right focus
- People Academy – leadership and succession planning, apprenticeships, careers
- Variable pay – standard item to monitor but create extended slot when required
- Equality and Diversity (including Welsh Language)

It was recognised that there needed to be an emphasis on using people effectively. It was agreed that each Committee meeting going forward would have a dedicated one hour slot to focus on one of the identified priority areas. Geraint Evans agreed to look at how the priorities fit moving forward to develop into a work programme.

ACTION: Geraint Evans

PCC 2410/05 Papers for Information

The Committee received the following papers for information:

- Finance & Performance Paper (May 2019)
- HEIW Draft Social Care Wales Workforce Strategy
- Clinical Futures Implementation Plan
- People Plan (Updated May 2018)
- Values and Behaviours Framework
- Employee Experience Framework

The Committee agreed for the Finance and Performance paper to be scheduled as an item for information at each meeting.

ACTION: Secretariat

It was agreed for members to let the Chair know in advance of future meetings if they wish to raise any points on the papers for information.

ACTION: All

PCC 2410/06 Any Other Business

The Committee received the draft Terms of Reference for consideration. It was agreed for the Committee to review the Terms of Reference and provide comments to Richard Bevan by 6th November 2019.

ACTION: All

It was agreed to upload the presentation onto Board Books and circulate to all members of the Committee.

ACTION: Secretariat

PCC 2410/07 Items for Board Consideration

There were no items for Board Consideration.

PCC 1206/08 Date of Next Meeting

The next meeting will be held on Tuesday 28th January 2020 at 09:30am in the Executive Meeting Room, ABUHB Headquarters, St Cadoc's Hospital, Caerleon.

People and Culture Committee Thursday 28 January 2020

Action Sheet

(The Action Sheet also includes actions agreed at previous meetings of the Quality & Patient Safety Committee and are awaiting completion or are timetabled for future consideration for the Committee. These are shaded in the first section. When signed off by the Quality & Patient Safety Committee these actions will be taken off the rolling action sheet.)

Agreed Actions – Wednesday 24th October 2019

Minute Reference	Agreed Action	Lead	Progress/ Completed
PCC 2410/03	Setting the Context Work with Coleg Gwent in relation to the Healthcare Support Worker development to be added to forward work programme.	Secretariat	Complete – Added to forward work programme.
	Breakdown of the administration figures to be included within the slide and circulated to all members of the Committee.	Julie Chappelle	Complete - Additional slide added providing administration figures and the updated presentation circulated to members of the Committee
	Look at the sickness management role in more detail at a future Committee meeting.	Secretariat	Complete – Added to forward work programme.
	HEIW Social Care Workforce Strategy to be presented at the next Committee meeting to discuss in more detail.	Secretariat	Complete – Added to agenda.
PCC 2410/03	Future Work Programme Look at how the	Geraint Evans	Complete - To be included in the IMTP Update presentation

Minute Reference	Agreed Action	Lead	Progress/ Completed
	priorities fit moving forward to develop into a work programme.		at the next Committee on 28 January 2020.
PCC 2410/04	Papers for Information Finance and Performance paper to be scheduled as an item for information at each meeting.	Secretariat	Complete – Added to forward work programme.
	Members to let the Chair know in advance of future meetings if they wish to raise any points on the papers for information.	All	Complete – Members to inform Chair when necessary.
PCC 2410/05	Any Other Business Committee to review the Terms of Reference and provide comments to Richard Bevan by 6 th November 2019.	All	Complete – Comments received and Terms of Reference approved by Board in November 2019.
	Upload the presentation onto Board Books and circulate to all members of the Committee.	Secretariat	Complete – Presentation circulated to all members of the Committee.



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Aneurin Bevan University Health Board
People and Culture Committee
Tuesday 28 January 2020
Agenda Item: 7

Aneurin Bevan University Health Board

Welsh Language Standard 110

“Increasing the offer of the delivery of Welsh language clinical consultations”

Executive Summary

Purpose

The purpose of this paper is to outline the approach the Health Board have taken to “Increasing the offer of the delivery of Welsh language clinical consultation” in line with Standard 110 within Section 44 Welsh Language (Wales) Measure 2011. Standard 110 requires the Health Board to publish a plan for each 5-year period setting out –

- (a) The extent to which you are able to offer to carry out a clinical consultation in Welsh;
- (b) The actions you intend to take to increase your ability to offer to carry out a clinical consultation in Welsh;
- (c) A timetable for the actions that you have detailed in (b).

The supplementary paper, **Appendix 1** developed in partnership with clinical colleagues, outlines the approach being taken by the Health Board to ensuring an increase in the offer of clinical consultations through the medium of Welsh.

The People and Culture Committee is asked to review the content of the paper that provides assurance that the Health Board is meeting the requirements of this Standard.

The Committee is asked to: (please tick as appropriate)

Approve the Report	
Discuss and Provide Views	
Receive the Report for Assurance/Compliance	✓
Note the Report for Information Only	

Executive Sponsor: Geraint Evans, Director of Workforce & OD

Report Author: Sue Ball, Assistant Director of Workforce & OD

Report Received consideration and supported by :

Executive Team		Committee of the Board	
		[Committee Name]	

Date of the Report: 16 January 2020

Supplementary Papers Attached:

Appendix 1 - Five year plan to improve the number of clinical consultations offered through the medium of Welsh

Background and Context

The Welsh Language (Wales) Measure 2011 was approved by the National Assembly for Wales and was given Royal assent on 09 February 2011.

This legislation gives the Welsh language official status in Wales, and reinforces the principle that, in Wales, the Welsh language should not be treated less favorably than the English language.

The Measure also:

- Created the procedure for placing duties on organisations in the form of Welsh Language Standards (“the Standards”).
- Established the role of the Welsh Language Commissioner (“the Commissioner”) to scrutinise compliance.
- Gave the Commissioner power to investigate any allegations of interference with someone’s freedom to use the Welsh language.

The Welsh Language Standards have been imposed on all NHS Wales organisations. The Standards cover the areas of service delivery; policy making; operational; promotion and record keeping. The Standards are further supported by a broad range of other strategic drivers.

The Board received a paper on the implementation of the Welsh Language Standards in July 2019. This paper included a mapping exercise and RAG rating for each of the 121 Standards imposed on the Health Board.

Work in progress and approach

The Health Board has a Strategic Welsh Language Group who provide advice and assurance to the Board in regard to the discharge of its functions and the meeting of its responsibilities in line with the requirements of the Welsh Language Standards. In advance of, and since the receipt of the Standards we have maintained close liaison with the Office of the Welsh Language Commissioner. The Strategic Group is chaired by the Director of Workforce and OD and since receipt of the Standards imposition in November 2018 the membership of this group has been strengthened.

A recent Internal Audit of the implementation of the Welsh Language Standards provided the Health Board with reasonable assurance that arrangements to secure governance, risk management and internal control, within those areas under review, are suitably designed and applied effectively.

Priorities and actions

The Strategic Welsh Language Group have agreed a programme of work to fully implement the Welsh Language Standards and monitor the implementation of the actions agreed.

Assessment and Conclusion

The Health Board has a long standing programme of work in place to support the 'active offer' of Welsh medium services for our patients with evidence of the positive impact that that this has made to individuals and their families. This has been complimented by well-established on-going engagement with the Welsh speaking community. This has ensured that their voices are heard and they are able to influence the ongoing development of our Welsh Language Services. However, delivering the Standards within the timescales imposed and in the context of the community we serve with our current staff profile remains challenging. As such the implantation of the Welsh Language Standards has been identified as a Corporate Risk.

Ongoing support and visible leadership that role models best practice and living our values will continue to be required to drive the cultural change and practical actions needed to effectively deliver the Welsh Language Standards.

Recommendation

The People and Culture Committee is asked to review the content of the paper that provides assurance that the Health Board is meeting the requirements of this Standard.

Supporting Assessment and Additional Information

Risk Assessment (including links to Risk Register)	The risk of not meeting the requirements of Standard 110 will compromise the ability of the Health Board to ensure it treats the Welsh Language no less favourably than the English Language as required by the Welsh Language Standards.
Financial Assessment, including Value for Money	There are no financial implications identified within this paper.
Quality, Safety and Patient Experience Assessment	The paper recognises that increasing the number of clinical consultation offered through the medium of Welsh will support the quality, safety and patient experience agenda.
Equality and Diversity Impact Assessment (including child impact assessment)	An equality and impact screening has been undertaken that supports the work to improve the services we offer to our Welsh speaking patients and public across each of the protected characteristics.
Health and Care Standards	Welsh language skills is linked to the workforce standard.
Link to Integrated Medium Term Plan/Corporate Objectives	Positive patient experience is reflected throughout our IMTP.

The Well-being of Future Generations (Wales) Act 2015 – 5 ways of working	Long Term – Increasing our offer of clinical consultations through the medium of Welsh is an investment in the future ways of working for a sustainable workforce.
	Integration
	Involvement – Clinical staff have been involved in developing this 5 year plan.
	Collaboration
	Prevention
Glossary of New Terms	Nil
Public Interest	There is no reason why the report cannot be published.



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Welsh Language Standard 110

“Increasing the offer of the delivery of Welsh language clinical consultation”

Aneurin Bevan University Health Board

Action Plan for 2019 – 2024

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1. Executive summary

In line with Section 44 Welsh Language (Wales) Measure 2011, in particular Standard 110, the Health Board is required to publish a plan for each 5-year period setting out –

- (d) The extent to which you are able to offer to carry out a clinical consultation in Welsh;
- (e) The actions you intend to take to increase your ability to offer to carry out a clinical consultation in Welsh;
- (f) A timetable for the actions that you have detailed in (b).

It is evident from Aneurin Bevan University Health Board's Welsh Language annual report 2019 to the Commissioner's Office that the establishing a baseline of current staff's Welsh language skills has been challenging. This has made our assessment of the organisations capacity to offer Welsh language services difficult. The Electronic Staff Record (ESR) data indicates that only 32.87% of staff have completed their individual assessment of Welsh language competency. Therefore ensuring increased completion of ESR Welsh language competencies is a priority for the Health Board in order to develop metrics to monitor progress and to ascertain an accurate baseline of the workforce's Welsh language skills. The Health Board's Welsh Language Unit has continued to raise staff awareness of the importance of completing their Welsh language competencies through continued staff engagement and communication.

The Welsh Language Unit has also continued to support staff in developing an awareness of Welsh language and culture and the importance of the 'Active Offer' which ensures that patients are offered a Welsh medium service without having to ask for it. This is an integral part of embedding our Values and Behaviours within the organisation. Developing staff confidence in using the Welsh language with the continued provision of Welsh Language Awareness sessions and 'Meet and greet' training sessions is being prioritised. Working in partnership with the local Mentrau Iaith and Coleg Gwent, work is underway to offer further Welsh language courses and awareness sessions, this will include the development of an innovative 'Personal Language Profile' scheme, in 2020. Welsh Language Awareness is delivered on all Corporate Inductions to ensure new staff are fully aware of the importance of the 'Active Offer' and the requirements of the Welsh Language Standards.

Addressing the population need is a key factor in formulating the 5-year plan required by the Welsh Language Standards to demonstrate an increase in our ability to offer clinical consultations through the medium of Welsh. Consequently, the first 3 years of this plan will focus on increasing the offer in the Caerphilly borough, which has the highest percentage of Welsh speakers in Gwent¹. An evaluation of the actions of the first 3 years in Caerphilly will inform best practice to be rolled out across the other boroughs of Gwent in successive years.

¹ According to the 2011 Census 11.2% of people living in Caerphilly are Welsh speaking; 9.9% in Monmouthshire; 9.8% in Torfaen; 9.3% Newport and 7.8% in Blaenau Gwent.

Particular focus will also be given to increase the offer of Welsh clinical consultation in services accessed by the 'vulnerable groups' noted in the 'More than Just Words' Strategy. These groups are:

- Children and young people
- People with learning disabilities
- People with mental health problems
- Older people

SECTION 1: ANNUAL REPORT

2. Introduction and background

The Welsh Language (Wales) Measure 2011 was approved by the National Assembly for Wales and was given Royal Assent on 09 February 2011.

This legislation gives the Welsh language official status in Wales, and reinforces the principle that, in Wales, the Welsh language should not be treated less favourably than the English language.

The Measure also:

- Created the procedure for placing duties on organisations in the form of Welsh Language Standards ("the Standards").
- Established the role of the Welsh Language Commissioner ("the Commissioner") to scrutinise compliance.
- Gave the Commissioner power to investigate any allegations of interference with someone's freedom to use the Welsh language.

This document has been produced in accordance with the requirements placed on the Health Board under the Welsh Language Standards, Section 26 of the Welsh Language (Wales) Measure 2011.

Section 26 of the 2011 Measure enables the Welsh Ministers to specify Standards, and Section 39 enables them to provide that a Standard is specifically applicable to a person by authorising the Commissioner to issue a notice of regulatory compliance.

A notice of regulatory compliance was placed on Aneurin Bevan University Health Board on 30 November 2018, in the form of Standards.

Standard 110 requires the Health Board to publish a corporate 5 year Welsh language plan, setting out the extent to which it is able to offer to carry out a clinical consultation in Welsh and the actions it intends to take to increase its ability to offer to carry out a clinical consultation in Welsh.

3. Our approach to ensuring an increase in the offer of delivering Welsh language clinical consultations

The Health Board vision is that by 2024, our capacity to offer Welsh language clinical consultations to our service users in Gwent shall be comparable with the linguistic needs of the communities we serve.

Our priorities for increasing the offer of delivering Welsh language clinical consultations for the first 12 months are:

- Developing this corporate 5-year Welsh language plan, setting out the extent to which we are able to offer to carry out a clinical consultation in Welsh and the actions we intend to take to increase our ability to offer to carry out a clinical consultation through the medium of Welsh.
- Gaining a better understanding of the linguistic needs of the communities we serve.
- Keeping the resources of the Welsh Language Unit under review in order to ensure effective support for the workforce.
- Identify the number of Welsh speaking staff currently employed by the Health Board that are confident to offer a clinical consultation in Welsh.

We will identify our progress against the following measures:

- Governance arrangements in place to support monitoring the implementation of the Welsh Language Standards.
- Increasing the number of staff completing their Welsh Language Competencies via ESR.
- Improving the Welsh language resources and training offer available to staff.
- Making the most of the Welsh Language skills within the workforce.
- Increasing staff awareness of the Welsh language, its culture and the positive impact this has on effective patient experience.

This document aims to provide a baseline for where Aneurin Bevan University Health Board is; sets out the progress we have made against each of our priorities and describes the outcomes against which progress can be monitored.

4. Outcome 1

Establish a clear baseline of staff Welsh language skills

Progress against this outcome will be measured by the following indicators:

- **Measure 1:** Compliance rate for completion of individual Welsh Language Competencies on ESR.
- **Measure 2:** Uptake of Welsh Language training offer.

5. Outcome 2

Action by Divisions and staff will mean that the Health Board routinely provides an 'Active Offer' of Welsh to service users and every effort is made to ensure that language choice is ascertained and respected

Progress against this outcome will be measured by the following indicators:

- **Measure 3:** Number of active offer posters displayed by divisions.
- **Measure 4:** Number of staff undertaking Welsh Language Awareness training.
- **Measure 5:** Translation service referral rate.

6. Outcome 3

Action by the Health Board's divisions and staff will mean that more service users are offered a Welsh language clinical consultation

Progress against this outcome will be measured by the following indicators:

- **Measure 6:** Number of service users requesting Welsh language consultations.
- **Measure 7:** Patient and carer feedback.

7. Outcome 4

Investment in additional resource to increase the offer of Welsh language clinical consultation

Progress against this outcome will be measured by the following indicators:

- **Measure 8:** Number of procured translators added to system.
- **Measure 2:** Uptake of Welsh Language training offer.
- **Measure 4:** Number of staff undertaking Welsh Language Awareness training.
- **Measure 5:** Translation service referral rate.

SECTION 2 - ACTION PLAN AND PRIORITIES FOR 2019 - 2024

The Health Board is required to produce and publish a plan to identify, monitor and evaluate action needed within timescales. The Health Board's Executive Lead is the responsible role for Welsh language. Progress is reported formally to the Board via established governance arrangements, which include a Strategic Welsh Language Group, the Executive Team and the People and Culture Committee. Reporting of progress to the Board will be published on our website as required after a 3 and 5 year period.

Having reviewed our progress against our annual report to the Welsh Language Commissioner's Office produced in 2019, we have updated our action plan to

ensure that it will enable us to better respond to the challenges identified by our review. This will ensure that the organisation is in a position to meet the requirements of Standard 110.

8. Development of an Aneurin Bevan University Health Board Action Plan for Standard 110 (2019 – 2024)

Following our assessment of progress against priorities we have reviewed how service provision may need to change. We have developed actions to be undertaken during the period of this plan and in particular actions and outcomes we want to see happen over the coming 5 year period. Given our current low rate of compliance with ESR Welsh language competencies it has proved difficult to fully assess our current capacity to provide Welsh language clinical consultations without the use of translation services. It has therefore been necessary to include the data collection on ESR as a baseline to measure to monitor progress as an outcome for the early stages of this plan.

9. Priorities for the coming year

This Action Plan sets out to improve outcomes between now and 2024. We have also identified within the plan priorities for 2019 - 2024 that reflect our local challenges. There are to increase the:

- Number of staff completing ESR Welsh language competencies.
- Uptake of Welsh language eLearning.
- Uptake of the Welsh language training offer.
- Uptake of Welsh Language Awareness training with particular focus on the 'vulnerable groups' noted in the More than Just Words Strategy.

The focus of the first 3 years of this plan will be on services provided within the Caerphilly borough, with particular focus on services that support the vulnerable groups identified in the 'More Than Just Words Strategy'. The Strategy Review published in year 3 will build on best practice and inform identified actions to implement across the remaining boroughs to embed this strategy across the Health Board.

10. Performance measures and management

The Welsh Language Strategic Group has agreed the outcome measures identified in Section 3 with performance measures that will be used to monitor progress.

SECTION 3 – OUTCOME MEASURES

Year 1 - 2020	Year 2 - 2021	Year 3 - 2022	Year 4 - 2023	Year 5 - 2024
Outcome 1: Establish a clear baseline of staff Welsh language skills				
<p>Actions:</p> <ul style="list-style-type: none"> • Increase communication with staff around Welsh language competencies; • Create reporting mechanism to feedback and compare divisional/departmental compliance; • Feedback compliance through Welsh Language governance arrangements and divisions/departments. 	<p>Actions:</p> <ul style="list-style-type: none"> • Evaluate Year 1 - Compare divisional/departmental progress celebrate and communicate success. 	<p>Actions:</p> <ul style="list-style-type: none"> • Strategy review to evaluate first 3 years - evaluation to inform actions to be rolled out across other counties in year 4; • Publish report on progress; • Ensure published data is analysed at a local level and any potential service improvements are considered and implemented where necessary. 	<p>Actions:</p> <ul style="list-style-type: none"> • Monitor outcome of actions in years 1-3 and consider potential within other counties. 	<p>Actions:</p> <ul style="list-style-type: none"> • Create a profile of staff's Welsh language skills and compare with the linguistic needs of the communities they serve to recognise potential; • Publish strategy review to evaluate 5 year plan – measures to sustain achieved actions over the past 5 year period and actions for the next 5 year period; • Ensure published data is analysed at a local level and any potential service improvements are considered and implemented where necessary.

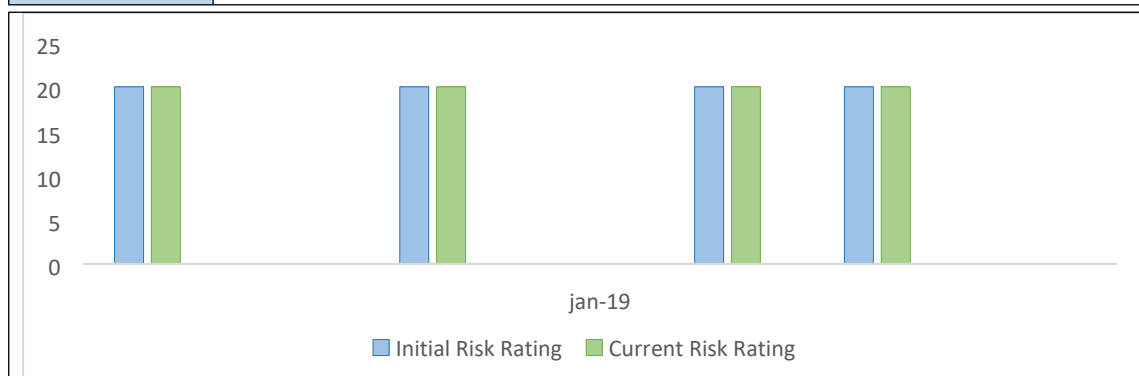
Year 1 - 2020	Year 2 - 2021	Year 3 - 2022	Year 4 - 2023	Year 5 - 2024
Outcome 2: Action by Health Board divisions and staff will mean that the organisation routinely provides an 'Active Offer' of Welsh to service users and every effort is made to ensure that language choice is ascertained and respected.				
Actions: <ul style="list-style-type: none"> • Increase visibility of Welsh language in clinical areas - distribution of active offer posters across all clinical areas; • Snapshot audits of targeted clinical areas to monitor compliance; • Create and cascade active offer toolkit; • Provision of Welsh Language Awareness Sessions for targeted departments/divisions; • Increase uptake of targeted staff of Welsh language eLearning. 	Actions: <ul style="list-style-type: none"> • Evaluation of snapshot audits conducted during year 1 – set targets to improve compliance; • Evaluate and review toolkit; • Evaluate uptake of Year 1 Welsh Language Awareness sessions for targeted departments/divisions; • Evaluate uptake of Year 1 Welsh language eLearning. 	Actions: <ul style="list-style-type: none"> • Strategy review to evaluate first 3 years - evaluation to inform actions to be rolled out across other counties in year 4; • Publish report on progress; • Ensure published data is analysed at a local level and any potential service improvements are considered and implemented where necessary 	Actions: <ul style="list-style-type: none"> • Establish a formal mechanism for recognition of exceptional contribution to the delivery of the Welsh Language agenda ; • Monitor outcome of actions in years 1-3 and consider potential within other counties. 	Actions: <ul style="list-style-type: none"> • Publish strategy review to evaluate 5-year plan – measures to sustain achieved actions over the past 5 year period and actions for the next 5 year period; • Ensure published data is analysed at a local level and any potential service improvements are considered and implemented where necessary. • Paper to Executive team to establish Welsh Language Awareness sessions on all relevant programmes.

Year 1 - 2020	Year 2 - 2021	Year 3 - 2022	Year 4 - 2023	Year 5 - 2024
Outcome 3: Action by the Health Board's divisions and staff will mean that more service users are offered a Welsh language clinical consultation				
<p>Actions:</p> <ul style="list-style-type: none"> • Establish a Welsh Language Patient Forum in the targeted area to engage with service users; • Engagement with service users to obtain patient experience; • Monitor number of Welsh speaking service users requesting Welsh clinical consultation. 	<p>Actions:</p> <ul style="list-style-type: none"> • Communications Campaign to share patient experiences with health board staff. 	<p>Actions:</p> <ul style="list-style-type: none"> • Strategy review to evaluate first 3 years - evaluation to inform actions to be rolled out across other counties in year 4; • Publish report on progress; • Ensure published data is analysed at a local level and any potential service improvements are considered and implemented where necessary. 	<p>Actions:</p> <ul style="list-style-type: none"> • Monitor outcome of actions in years 1-3 and consider potential within other counties; • Establish Welsh Language Patient Forums across all counties. 	<p>Actions:</p> <ul style="list-style-type: none"> • Publish strategy review to evaluate 5 year plan – measures to sustain achieved actions over the past 5 year period and actions for the next 5 year period; • Ensure published data is analysed at a local level and any potential service improvements are considered and implemented where necessary.

Year 1 - 2020	Year 2 - 2021	Year 3 - 2022	Year 4 - 2023	Year 5 - 2024
Outcome 4: Investment in additional resource to increase the offer of Welsh language clinical consultation				
<p>Actions:</p> <ul style="list-style-type: none"> • Procurement of third parties to deliver additional Welsh language courses and Welsh Language awareness sessions (e.g. Coleg Gwent, Menter Iaith, etc); • Procurement of additional translation services to ensure a sufficient bank of translators are available to accommodate an increase in the offer of Welsh clinical consultations. 	<p>Actions:</p> <ul style="list-style-type: none"> • Ensure data from previous year is analysed at a local level and any potential deficit in resources are considered and addressed where necessary. 	<p>Actions:</p> <ul style="list-style-type: none"> • Ensure data from previous year is analysed at a local level and any potential deficit in resources are considered and addressed where necessary. 	<p>Actions:</p> <ul style="list-style-type: none"> • Ensure data from previous year is analysed at a local level and any potential deficit in resources are considered and addressed where necessary. 	<p>Actions:</p> <ul style="list-style-type: none"> • Ensure data from previous year is analysed at a local level and any potential deficit in resources are considered and addressed where necessary.

Corporate Risk to a Page Report - as at end of December 2019

CRR029	Director Lead: Director of Workforce & OD, Director of Nursing, Medical Director, Director of Therapies and Health Science	Date Opened: March 2017
	Assuring Committee: Finance and Performance Committee / People & Culture Committee	Date Last Reviewed: January 2020
	Risk: Failure to recruit and retain appropriately skilled staff and senior leadership to deliver high quality care.	Target Risk Review Date: Weekly review undertaken
	Impact: Negative impact on patient care and service delivery due to lack of skilled workforce, low staff morale, increased sickness and turnover.	



	Consequence	Likelihood	Score
Initial Risk Rating	5	4	20
Current Risk Rating	5	4	20
Target Risk Score <small>(Risk Appetite Level Low Business Driver - Level Low)</small>	Ultimate Target		Incremental Target
	5		15 - June 2020
Movement since last presented to Board in September 2019	Risk remained unchanged 		

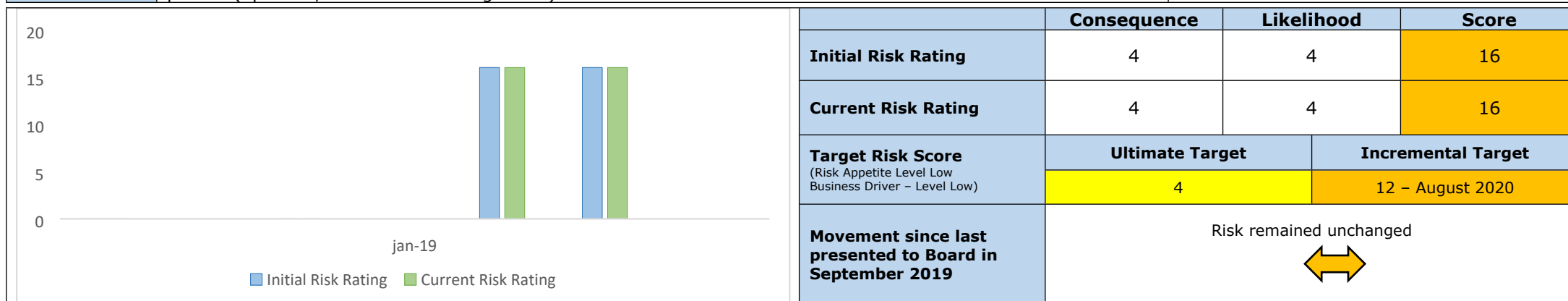
Controls in place	Action taken to mitigate the risk
<ul style="list-style-type: none"> Regular workforce reporting including medical and nursing vacancies to the Finance & Performance Committee and the People and Culture Committee as appropriate. Regular reporting of Clinical Futures recruitment activity to the Workforce & OD Clinical Futures Workforce Group/Delivery Board. Internal performance monitoring of recruitment plans and KPIs including workforce performance dashboard. Review of nursing vacancy tracker, profiling vacancies to March 2021. Monitoring of Job Planning compliance and the Escalation Policy. Robust escalation and authorisation process for filling bank/agency shifts. Regular review of plans in place to maximise recruitment and support retention in all identified areas including registered nurses and medical staff. Review of nursing vacancies and staffing at Strategic Nurse Workforce Group & Nurse Staffing Act Implementation Group. Annual winter workforce plan with reporting regular Executive Team Winter Planning meetings. 	<ul style="list-style-type: none"> Continued implementation of the Nurse Staffing Act across acute areas. Implementation and pilot of the "Core Care Team Model" in November 2019 which is a new workforce configuration for the wards, evaluation due February 2020. Overseas recruitment: 7 Registered Nurses have started and 28 are due to commence over the next 4 months. 4 Radiographers have commenced and 1 more is due to commence in the next quarter. Confirmed RN Student Streamlining numbers - 60 starters planned for March 2020. Commencing the next phase of RN Student Streamlining for September cohort - due to commence work in June-Sept 2020. Improved our offer to attract to medical vacancies - specifically for overseas candidates by offering an MSc training route. Recruitment of Portfolio GP roles and continued focus on hard to fill areas: Nursing - NHH wards: Medical - Mental Health, Paediatrics, Obs & Gynae, Medicine and ED and develop actions to reduce current recruitment timelines. Flexible use of Bank and Agency to ensure safe staffing levels, winter pay incentives via bank commenced December 2019 to run to end of March 2020. Continue to implement and monitor recruitment plans for registered nurses and medical vacancies. This includes overseas recruitment campaigns and working with national initiatives e.g. "Train, Work, Live" and BAPIO recruitment. Continued focus and support of workforce and recruitment and staff engagement plans for the Clinical Futures Programme and review in line with national recruitment market. Continued promotion of the new recruitment materials and webpages, including the development of a multi-disciplinary recruitment video advert launched January 2020 via social media. Individual Ward risk reviews undertaken of actions and plans by Executive Team. Continue to consider skill mix including opportunities for multi-disciplinary teams in acute and primary care settings e.g. Primary Care Academy and Physicians Assistant roles. Supporting the Divisions to understand the findings and put in place actions from the Employee Experience Survey. Continue to review workforce data on turnover, stability index etc.

Corporate Risk to a Page Report - as at end of December 2019

Assurances	Links to
<ul style="list-style-type: none">• HIW Reports• Working the Delivery Unit and Reporting• Community Health Council Reports• Internal Audit and Wales Audit Office Report• Reports from the Learning Committee and Lessons Learnt Reports• Divisional Reports including assessments of Health and Care Standards• Bi-annual report to Board regarding Nurse Staffing Levels Act (Wales) 2016 and compliance.	Strategic Priorities in the IMTP This is an enabling risk in support of the delivery of all priorities of the IMTP.

Corporate Risk to a Page Report - as at end of December 2019

CRR056	Director Lead: Director of Workforce and Organisational Development	Date Opened: April 2019
	Assuring Committee: People and Culture Committee	Date Last Reviewed: January 2020
	Risk: Inability to comply with the Welsh Language Standards, imposed as a result of the Welsh Language (Wales) Measure 2011	Target Risk Review Date: Monthly review undertaken
	Impact: Failure to deliver on the Standards presents 3 main risks; namely, patients will not get the Welsh medium service they need and as such their experience and outcomes may be compromised; the reputation of the Health Board will be damaged which could reduce public and staff confidence and we may receive substantial financial penalties from the Welsh Language Commissioner if a failure to deliver on a Standard is proved (up to £5,000 for each infringement).	



Controls in place	Action taken to mitigate the risk
<ul style="list-style-type: none"> Detailed action plan for the implementation of the Standards to mitigate this risk. Monitored through the Welsh Language Strategic Group. A series of Working Groups led by subject matter experts are informing the challenge against the time scales for implementation and the development of more detailed programmes of work for implementing the Standards. Close liaison with the Office of the Welsh Language Commissioner and Welsh Language leads in Welsh Government. Welsh Language Standards awareness activities continue to be held across the Health Board, these include; roadshows, training sessions, attendance at Divisional Senior Management teams and departmental meetings, one to ones with all Executive Directors, attendance at Health Board events such as conferences, community events, joint community and staff language awareness training. 	<ul style="list-style-type: none"> A series of Protocols and Guidelines have been developed and approved to meet the requirements of the Standards. Additional funding agreed by the Executive Team to support implementation. Working collaboratively with other Health Boards and Public sector bodies to learn lessons, share best practice and develop all Wales challenges. A series of Frequently Asked Questions have been developed and are being published one at a time on the intranet as well as on the Welsh Language homepage. The Welsh Language homepage has been revised and updated with useful links and additional resources for staff. The Welsh Language Unit has been restructured to ensure effective use of the limited resource available so that performance, efficiencies and economies of scale are realised. This will include the provision of Welsh Language Tutor activities.

Assurances	Links to
<ul style="list-style-type: none"> National and Local Reports and reporting requirements to Welsh Government and the Welsh Language Commissioner Welsh Language Commissioner Assessments Local Action Plans and Processes WAO and Internal Audit Reports 	Strategic Priorities in the IMTP
	This is an enabling risk in support of the delivery of all priorities of the IMTP.