



Russell George MS
Chair
Health and Social Care Committee

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Dear Mr George

Health and Social Care workforce

Thank you for the opportunity to contribute evidence to your work on the health and social care workforce. The Commissioner aims to promote and facilitate the use of the Welsh language. Our comments will therefore focus specifically on the importance of developing the Welsh language skills of the health and care workforce so that Welsh speakers across Wales receive services through the medium of Welsh. We understand of course that there are major challenges facing the health and social care services in Wales at the moment and that those challenges relate particularly to recruitment. However, providing services in Welsh contributes to the Welsh Government's priorities for providing quality care that is focused on the needs of individuals and is seamlessly provided around the individual. For many who need care in Welsh because of the nature of their illness and for many who prefer to receive services in Welsh, quality care means care through the medium of Welsh. We are therefore glad that you will be holding an oral evidence session with Health Education and Improvement Wales (HEIW) and Social Care Wales (SCW) during the autumn term to consider the Workforce Strategy for Health and Social Care. Below we respond to the points posed in your consultation.

1. Plans for implementation of A healthier Wales: our workforce strategy for health and social care (published in October 2020), including progress made to date and whether delivery is on track for 2030.

The Commissioner responded to the consultation on the draft Strategy, pointing out that there was only one reference to the Welsh language in it and suggesting ways of strengthening the Strategy. We were therefore pleased that the final Strategy showed an awareness of the need to provide care

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in Welsh and included actions in relation to the Welsh language and a commitment to improving the Welsh language skills of the health and social care workforce. This includes specific actions to:

- Work with education providers to ensure education meets the needs of the health and social care system, and includes programmes delivered through the medium of Welsh. (Action 18)
- Work with education providers to support the workforce to develop and/or improve Welsh language skills. (Action 19)
- Develop workforce planning guidance for Welsh language skills identification and development in the health and social care workforce. *This will be used to implement the Welsh language Skills Strategy and inform our workforce supply.* (Action 30)

However, as is the case with all strategies, the implementation is more important than the words. The Commissioner's staff are members of the Welsh Language in Health and Social Care Partnership Board. The Partnership Board had the opportunity to share its views with HEIW and SCW during the process of formulating the strategy. The final Strategy was published in October 2020. It set out the intention to develop a series of implementation plans to realize the ambition and achieve the strategy. In early March 2020 a workshop was held for Partnership Board members to contribute to the content of these action plans. Since the publication of the Strategy, we understand that both HEIW and SCW have been focusing on implementing some actions in the Strategy as a matter of urgency following the Covid-19 crisis; that a one-year action plan has been developed and a medium-term action plan is in the process of being developed. We are, however, keen to know more about the implementation plans and how we as Commissioner and other stakeholders can contribute to ensuring that they lead to increasing the capacity of the health and social care workforce to provide care in Welsh. There are defined and constructive actions in relation to the Welsh language in the Strategy, and some work has already been done in relation to steps 18 and 19 (as we outline below in 3). However, we are very keen to see more definite plans to implement the Strategy's vision for the Welsh language. Part of that is ensuring that the Welsh language is fully integrated into all the actions in the Strategy, not just those directly related to the Welsh language. Only by knowing more about these plans can we judge whether the Strategy is on track to deliver by 2030 in terms of the workforce's ability to provide care in Welsh.

2. The alignment of the strategy and its implementation with other priorities and actions, including those identified in the Welsh Government's Programme for Government for 2021-2026, and A Healthier Wales: our Plan for Health and Social Care (2018).

It is not clear from the Welsh Government's Programme for Government for 2021-26 which objectives derive directly from the Workforce Strategy for Health and Social Care. This may be because the short-term implementation plans above have given rise to some of the intentions included in the Programme for Government. As an organisation we do not work specifically in the health field so many of the objectives in the Programme for Government may have been discussed and agreed within the health sector specifically and we would not therefore be aware of them.



We believe that the Strategy contains a number of appropriate actions that are aligned with those of *More than just words, the strategic framework for Welsh language services in health, social services and social care*¹. At the end of August 2021 an evaluation of *More than just words 2016-19*² was published. The evaluation contains several findings and recommendations relevant to the implementation of the Health and Care Workforce Strategy. Work and plans to implement the Strategy need to be made fully aware of these conclusions and recommendations. The Welsh Government has convened a task and finish group to develop a five-year work plan for *More than just words* for the future. That five-year work plan must be closely aligned with the Workforce Strategy for Health and Social Care implementation plans. The Government's aim in this regard aligns with the Cymraeg 2050 2021-26 work plan³ which states the aim of 'responding to the evaluation of 'More than just words' and develop a work programme to increase the use of Welsh in health and care and build capacity to offer Welsh language services' and 'support the health, social care, local government and third sectors to identify opportunities to increase the use of Welsh among their workforces and with the public they serve, prioritising workforce planning in terms of language skills and recruiting more Welsh speakers'. There is an obvious link between the priorities of Cymraeg 2050 and the aims of the Workforce Strategy and there is a need to ensure that the implementation of both plans go hand in hand.

In our response to the consultation on the draft Strategy we highlighted the importance of Welsh language standards in workforce planning. Since 2016 local authorities are required to comply with Welsh language standards⁴ and since 2019 health bodies are also required to comply with standards⁵. We emphasized the need to fully consider how operational standards required of both local authorities and health bodies can feed directly into current and future workforce planning. We also noted that the expectations placed because of the standards on local authorities with regards to meetings to discuss the wellbeing of individuals and the clinical and primary care requirements made of health boards should be fully integrated into the strategy.

In the case of both health bodies and local authorities there are specific operational standards relating to developing the Welsh language skills of the workforce through planning and training. For example, they are required to assess the language skills of their workforce; to give staff the opportunity to receive Welsh lessons and training to use Welsh in certain instances; and training courses on Welsh language awareness, an understanding of the duty to act in accordance with Welsh language standards and an understanding of how Welsh can be used in the workplace. In addition, when assessing the needs for a new or vacant post, the need for Welsh language skills must be assessed. They are also required to develop a policy on the use of Welsh internally, with a view to promoting and facilitating the use of Welsh also.

¹ [More than just words \(gov.wales\)](#) (2016-19) and [More than just words Action Plan 2019–2020 \(gov.wales\)](#)

² [Evaluation of More than just words..., the follow-on strategic framework for Welsh language services in health, social services and social care, 2016-19 \(gov.wales\)](#)

³ [Cymraeg 2050: our plan for 2021 to 2026 \[HTML\] | GOV.WALES](#)

⁴ [The Welsh Language Standards \(No. 1\) Regulations 2015 \(legislation.gov.uk\)](#)

⁵ [The Welsh Language Standards \(No. 7\) Regulations 2018 \(legislation.gov.uk\)](#)



In the case of local authorities, standards relating to meetings to discuss the wellbeing of individuals place a responsibility on local authorities to ascertain whether an individual wishes to speak Welsh in these meetings to discuss their wellbeing and to provide simultaneous translation if individuals so wish and it is not possible for the meetings to be held in Welsh without translation (standards 25-26A). Health Boards are required to publish a plan for each 5-year period indicating the extent to which they can offer clinical consultations in Welsh (standards 110 and 110A). They are also required to outline the steps they intend to take to increase their capacity to offer clinical consultations in Welsh and a timetable for doing so. Standards 23-24 which are relevant to health boards also make require health boards to ascertain whether inpatients wish to use the Welsh language during their stay in hospital. Also, there is a requirement for health bodies to publish a policy on providing a primary care service (standards 78 and 78A). These standards once again underline the importance of developing the Welsh language skills of the workforce and awareness of the importance of providing care in Welsh.

We see that there is clear scope to consider how to integrate the implementation of the Strategy and the implementation of many of the above standards and to see how each can strengthen the implementation of the other and lead to improved services for Welsh speakers. We would therefore welcome a better understanding of what consideration has been given to the standards in plans to implement the Workforce Strategy for Health and Social Care. Action 30 of the Workforce Strategy 'Develop workforce planning guidance for Welsh language skills identification and development in the health and social care workforce' is essential in this regard. However, we are not yet aware of plans to develop workforce planning guidance or the Welsh language Skills Strategy that is referred to in the Strategy.

3. The extent to which HEIW/SCW's workforce strategy and broader work on workforce planning and the commissioning/delivery of education and training, will ensure that we have a health and social care workforce which is able to meet population health and care needs, and support new models of care and ways of working, including optimising the use of digital technology and the development of Welsh language services.

At present we do not believe that it is possible to measure the extent to which the strategy will ensure that we have a health and care workforce that can meet the health and care needs of Welsh speakers. That is because the extent to which the strategy is being implemented is not clear to us at this time. For example, as we have noted above, we are not aware that implementation plans have been published for each of the seven objectives so we cannot judge whether the proposed actions are adequate. However, it is fair to say that some positive steps have been taken in terms of commissioning / delivery of education and training recently. This builds on the work done over the last few years by the Coleg Cymraeg Cenedlaethol to extend the provision of health and care courses through the medium of Welsh and encourage students to take advantage of them.

There are commendable steps in the Health and Social Care Workforce Strategy in terms of commissioning/delivery of education and training that have great potential for developing the skills



of the future workforce. These include actions 18 and 19. In terms of action 18 we understand that there are specific requirements with respect to the Welsh language in HEIW's Allied Health Professional Education procurement process. This is to be welcomed of course and is a very positive step with respect to looking at training the workforce of the future. The requirements relate to increasing opportunities to follow courses through the medium of Welsh; increasing opportunities for learning and developing confidence in the Welsh language and raising the awareness of providing care in Welsh as part of all courses. However, there is a need to ensure that the expectations made of education providers are constantly monitored and that they increase over time so that Welsh language provision increases and that more people leaving health education courses can provide care in Welsh in future. It is also positive that a BSc Nursing and BSc Mental Health Nursing will be available at Aberystwyth University from 2022 onwards as it may lead to the recruitment of more Welsh speaking students in west Wales. Similarly, it is positive that a medical course is being delivered at Bangor University in conjunction with Cardiff University and that there are plans to establish a medical school in Bangor in the future, and that there will be a new speech and language therapy course at Glyndwr University from 2023 onwards. Taking courses of this kind closer to potential Welsh speaking students will hopefully attract more to follow the courses. There are other positive steps as well, such as an online induction course which emphasizes the importance of the Welsh language in healthcare for the primary care / Community Sector that all 9,000 students must follow and pass.

However, if Welsh speakers are not in the first place deliberately recruited to health and social care education courses to meet the needs of the workforce, it is not clear how there will be a significant increase in the capacity of the workforce to provide care in Welsh. At present it is not clear to us whether there is a systematic process in place across health and care services in all health boards and local authorities to identify which professions have Welsh language skills gaps and what the size of the gap is. It is also not clear to us how such information about the gaps in Welsh language skills in particular professions are passed on to HEIW and the SCW so that, in the case of HEIW clear requirements are placed on education providers to recruit Welsh speakers and develop the Welsh language skills of those professions in line with action 18. We know that there is a target for recruiting Welsh speakers to speech and language therapy courses because it has been identified as a priority area. *More than just words*, however, identifies several other priority areas such as older people, mental health service users, people with dementia, and children and young people. We believe that specific strategies for workforce development of these sectors need to be developed as a matter of urgency in line with the Strategy's action 7 'Review and develop targeted plans for a) significant shortages in professional and occupational groups and areas of difficult to recruit to them including medicine, home care, social work and nursing; b) under-represented groups'. These specific strategies should cover developing the skills of existing staff and set a framework for increasing the number of people leaving the health education system able to provide care in Welsh in their respective fields.



We know for example that some guidance is given with regards to planning the provision of Services in Welsh in the NHS Wales Planning Framework 2019 to 22.⁶ However the recent evaluation of *More than just words* found that the Welsh language was not integrated fully into these plans, ‘... a review of IMTPs indicates that these documents include very few references to More than just words. It appears that the Welsh language in general is not clearly embedded in these documents beyond a couple of paragraphs in stand-alone sections, which often refer to existing work rather than plans for future work. References to the Welsh language within the IMTPs reviewed do not tend to have priorities, outcomes, outputs or specific key performance indicators (KPIs) attached to them. Hardly any reference is made within these documents to the benefits of the Active Offer to service users. Where there is reference to the Welsh language within these plans, it tends to be within the context of the Welsh Language Measure (2011) and the Welsh Language Standards’ (3.19).’ All Health boards also have bilingual skills strategies but the evaluation of *More than just words* finds that they are not detailed enough to implement the plans, ‘Some stakeholders noted, however, that in many cases, bilingual skills strategies and other local workforce and service delivery plans include aspirational aims relating to the Welsh language but do not necessarily contain detailed plans relating to how these aspirations should be put into practice. Stakeholders noted that this lack of practical detail has likely been due, at least partly, to the relatively low levels of data available relating to the Welsh language skills capacity of the workforce and the Welsh language needs of service users’ (5.4). The evaluation does however find that more reference is made to the Welsh language in strategy and planning documents within social care and social services supported by local authorities than they do within healthcare. However, the population needs assessments conducted by Regional Partnership Boards in 2017 in general lacked consideration to the Welsh language. We hope that the next round of assessments and area plans will give more consideration to the needs of Welsh speakers and in so doing workforce and service planning can be improved.

It is therefore clear from the above quotes that there is a need for a better understanding of the care needs of the public and the language skills of the workforce in order to be able to create definite plans to increase the availability of Welsh language services in a meaningful way. Without having a detailed understanding of the needs of the health and social care system in terms of Welsh language skills, it will be very difficult to measure the success of the actions undertaken as part of the Strategy.

Action 19 of the Strategy relates to working with education providers to support the workforce to develop and/or improve Welsh language skills. This is of course essential as work undertaken through the commissioning process etc will not come to fruition for some years. We know that some projects to develop the Welsh language skills of the workforce have been undertaken prior to the publication of the Strategy as a result of the Cymraeg Gwaith/Working Welsh scheme run by the National Centre for Learning Welsh. Such projects have been undertaken in some health boards and with care workers in partnership with SCW. However, it is now clear that there is a need for a national strategy to develop the skills of the existing health and care workforce. Short-term projects in some are not sufficient. It is time for fully funded national strategy to raise the Welsh language skills of workers in the health and social care sector, specifically targeted at employees working in

⁶ [nhs-wales-planning-framework-2019-2022.pdf \(gov.wales\)](https://www.gov.wales/nhs-wales-planning-framework-2019-2022.pdf)



priority fields and professions in terms of providing Welsh language services. As such, action 24 of the Strategy sets out the intention of ‘developing a clear strategy for Continuing Professional Development (CPD) across professional and occupational groups’. There is a clear need for a CPD strategy in the Welsh language across professional and occupational groups beginning with priority areas.

With regards to CPD, it is important to note the findings of the *More than just words* that ‘stakeholders were of the view that many of the main barriers to implementing Welsh language services occur at the operational director or manager level, often referred to by stakeholders as the ‘middle tier’ within organisational settings.’ (3.10). The training given to managers with regards to workforce planning and the Welsh language must be considered, and how it goes hand in hand with the intention in action 30 of the Strategy to ‘develop workforce planning guidance for Welsh language skills identification and development in the health and social care workforce’.

Action 8 of the strategy outlines the intention of ‘implementing a modern values based bi-lingual recruitment approach for all health and social care staff.... to ensure a streamlined, speedy, efficient, smooth, accessible, inclusive recruitment approach and excellent experience for new employees.’ It should be noted that SCW’s recent recruitment campaign *gofalwn.cymru* has given a clear place to the importance of Welsh language skills for a number of posts in the field. However, we are aware of concerns among many professional bodies and royal colleges representing smaller professions in the health sector (such as occupational therapy, speech and language therapy, physiotherapy etc.) about the new method of recruiting from education courses in Wales (known as ‘streamlining’). The commendable aim of the new approach to recruitment is to ensure that students who receive an NHS bursary to study in Wales take up employment in Wales for a period of two years after graduation. The concern is that the lack of courses and therefore the number of places means that there are not enough suitable candidates for the advertised posts, and that Welsh students who would have wanted to study in Wales but failed to do so for various reasons (location of provision, personal circumstances etc) are excluded from these opportunities to apply for posts and therefore do not return to work in the NHS in Wales. Among them are Welsh speakers who desperately need to be attracted back to work in Wales. We are keen to ensure that this problem is resolved as a matter of urgency in partnership with the royal colleges and professional bodies. There is also concern about whether health boards will be able to recruit employees in line with their assessments of the linguistic requirements of new advertised posts, which they are required to do by the Welsh language standards (see 2 above).

4. The mechanisms, indicators and data that will be used to measure progress in implementing the workforce strategy and evaluate its effectiveness.

We believe that securing better workforce data is one of the most important elements of the Strategy in terms of planning to increase the capacity of the health and social care workforce to deliver services in Welsh. Without better data on workforce skills and skills gaps in different professions, as well as data on the need for Welsh language services it is very difficult to plan and set



objectives for improving the situation. As a result, it will be impossible to measure the progress of the strategy and evaluate its effectiveness.

The recent evaluation of *More than just words* found that the lack of data impedes the provision of Welsh language services, ‘the limited availability and inconsistency of data relating to the Welsh language needs of service users and the Welsh language capacity of the workforce has placed further restrictions on the extent to which Welsh language service provision can be planned and implemented. A lack of bilingual compatible digital systems is also evident, limiting the extent to which any data relating to the Welsh language or recorded in Welsh can be shared within and between services and settings.’ (12.13). The evaluation recommends that *More than just words* in future should ‘place an emphasis on its role in guiding the sector to gather consistent data relating to the Welsh language needs of service users and use this data to address any Welsh language skills shortage. The sector could also benefit from further support relating to how patient and workforce data collected could be used to plan workforce development and service delivery – and guidance to implement these plans’ (recommendation 8). The workforce strategy for health and social care included specific actions that could contribute to improving this situation including ‘Creating a centre of excellence for workforce intelligence for health and social care in Wales’ (action 28) and specifically with regards to the Welsh language ‘developing workforce planning guidance for Welsh language skills identification and development in the health and social care workforce.’ (action 30).

We know that Social Care Wales is leading on developing a more strategic approach to social care data⁷ in collaboration with the Welsh Government and other partners and we have contributed to their work in this regard. However, as we have already noted and what the findings of the *More than Just Words* evaluation underlines is that much more detailed data on the language skills of the workforce needs to be collected in order to plan the education and training of the current and future workforce. Plans to do this must be urgently implemented.

5. Whether the financial and other resources allocated to implementation of the strategy are adequate.

We do not know what resources have been allocated to implementing the Strategy so we cannot comment on this issue.

6. The extent to which the strategy and its implementation are inclusive, reflect the needs/contribution of the whole workforce—for example, on the basis of profession, stage of career or protected characteristics—and also take into account the role of unpaid carers and volunteers.

We welcome the fact that the Strategy includes specific steps aimed to developing the workforce to be able to provide care in Welsh and that this need permeates the Strategy. However, as we have already noted we believe that a national strategy for improving the Welsh language skills of all employees in the health and care sector needs to be developed. This requires detailed and specific

⁷ [Strategic approach to care data | Social Care Wales](#)



plans for some priority sectors / professions as a matter of urgency. These include professions working with older people, mental health service users, people with dementia, and children and young people. In this regard, we look forward to seeing the action plan for the mental health workforce in Wales⁸ currently being drawn up by HEIW and SCW.

7. Whether there are any specific areas within the strategy that would benefit from focused follow up work by the Committee.

We would encourage you to consider follow up work to scrutinize in detail the implementation of the Strategy in relation to increasing the Welsh language skills of the health and social care workforce so that it meets the needs of Welsh speakers across Wales.

We hope you find these comments helpful in your scrutiny session. Although several positive steps have been taken to increase the language skills of the workforce over recent years, it is not clear at this stage how the Health and Care Workforce Strategy will be implemented in relation to the Welsh language or how the Strategy will be funded. We therefore welcome the Committee's inquiry and would be pleased to contribute evidence to similar sessions in the future on the implementation of this vital Strategy and the health and social care workforce.

Yours sincerely,

Aled Roberts

Welsh Language Commissioner

⁸ [Mental Health workforce- Fit for our future! - HEIW \(nhs.wales\)](https://www.nhs.uk/healthcare-workforce/fit-for-our-future/)