

**Cyflwynwyd yr ymateb i ymgynghoriad y [Pwyllgor Iechyd a Gofal Cymdeithasol](#)
ar y [gweithlu Iechyd a Gofal Cymdeithasol](#)**

**This response was submitted to the [Health and Social Care](#)
[Committee](#) consultation on [Health and Social Care Workforce](#)**

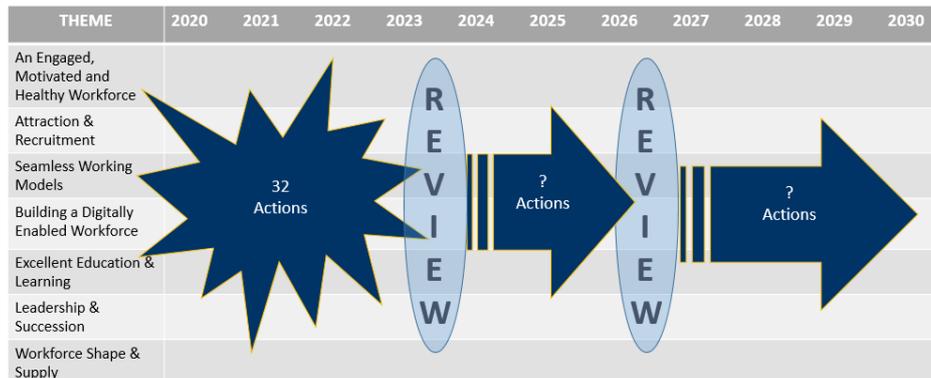
HSC 14

**Ymateb gan: | Response from: Addysg a Gwella Iechyd Cymru a Gofal
Cymdeithasol Cymru | Health Education and Improvement Wales and
Social Care Wales**



[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.](#)

We have made significant progress since this 10 year strategy was published one year ago and are on track for delivery by 2030. This ambitious strategy is divided into three phases, with a review point every three years, allowing for adjustments to ensure it remains live and valid.



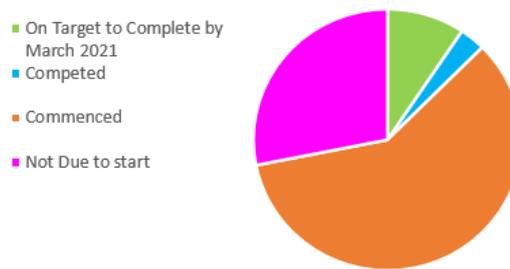
It is important to note that the pandemic required us to adjust the first phase of actions, and to pause some actions to allow engagement with our partners to develop medium term implementation plans and progress actions together. Both social care and health are currently under significant pressure and short-term annual planning approaches are in place in relation to many services.

Our implementation planning to date has therefore necessitated a short-term focus, recognising the wide ranging and significant pressures on the system which could not have been foreseen during development. An initial 6 month [supporting the winter protection plan](#) prioritised areas of the workforce strategy to support the response to Covid-19 and winter pressures, resulted in early implementation in some areas and was delivered by [March 2021](#). Our subsequent annual plan for 2021-2022 is on track.

We took an early decision to use our existing governance mechanisms to oversee delivery of early implementation. The objectives and deliverables from the WFS's 2021-2022 plan are integrated in our [corresponding](#) organisational [business plans](#). We jointly provide leadership and direction, on behalf of the organisations who will deliver the strategy with us. A joint HEIW/Social Care Wales steering group reports to both organisations' CEO and Chairs, through to the respective Boards and consequently Welsh Government. As part of our operating model, we use our stakeholder briefings, regular board papers and update reports to share our progress. We will look at refreshing our governance as part of medium-term planning to support ongoing collaboration with the wide range of partners required to deliver the strategy.

The strategy comprises seven overarching themes, with 32 actions coming together to deliver our ambition of a motivated, engaged and valued Health and Social Care workforce, with the capacity, competence and confidence to meet the needs of the people of Wales. The wellbeing of the workforce is central to delivery, with inclusion and Welsh language being woven through all implementation plans. While some actions are not yet due to start, all 32 actions will commence

during phase 1 (the first 3 years) of the strategy, and although some actions will take longer than others to deliver in full and progress is on track as shown in the chart below.



While there are actions which will inform the future plans of Health Education and Improvement Wales (HEIW) and Social Care Wales, many of the actions in the strategy are to be implemented at a strategic level, with the expectation that actions are reflected locally by lead partners, for example at a national level we can set out approaches to support recruitment and retention, but they need to be implemented more locally. Health Boards and Trusts have been mandated to use workforce strategy's actions and the national clinical framework to make rapid progress against their own plans.

HEIW and Social Care Wales have progressed implementation this year, aligned to our respective IMTP/Annual Plan and business plans, which are developed through engagement with key stakeholders, including NHS and social care organisations, local authorities, professional bodies and other key stakeholders. Following this exceptional year, we will develop our medium-term implementation plan and clarify the lead and supporting responsibilities across the health and social care community and wider where appropriate. Progress highlights from each of the mutually dependent themes are below.

1. An engaged, motivated and healthy workforce

Much of this theme will be achieved over the lifetime of this strategy, and to date we have progressed work in support of the longer goal, ministerial priorities and the programme for Government. Early in the pandemic, we implemented measures to support staff wellbeing, and were key partners in a joint health and care sub-group of the workforce cell which developed resources, and access to specialist service, which we are evaluating to inform future work.

Phase one has seen HEIW and Social Care Wales reciprocating membership on our respective health and wellbeing networks and sharing good practice to drive improvement. By end March 2022, we will have developed sector specific wellbeing (action 1) and staff governance (action 2) frameworks, through engagement with our workforce, and this approach, will promote the development of our joint frameworks during the lifetime of this strategy.

HEIW led the delivery of the NHS staff survey (action 4) which took place in November 2020. Workforce wellbeing and engagement measures were included and inform the Welsh Government NHS Wales performance framework indicators (action 5), while Social Care Wales has worked with government on the local authority performance and improvement framework, taking a lead on workforce data. A further survey is scheduled early in 2022. Social Care Wales also completed an engagement survey in relation to the wellbeing of the workforce and introduced an Employee Assistance Programme in December 2020, opening access to a range of support services to the paid

workforce in the private and voluntary sector. A wellbeing conversation toolkit which will provide a range of resources and support for managers to hold wellbeing conversation with their teams has been developed across health and social care and will launch imminently.

We monitor and publish the achievements of our strategic equality plans, and commitments to the Welsh Government Race Equality Action Plans and reflect these in the development of our inclusive implementation plans.

Although Social Care Wales and HEIW are leading the implementation of the strategy, it is recognised that action across many organisations involved in the sectors is needed to meet its ambitions. For example, an important action in under this theme is the commitment to work towards fair reward and recognition across the health and social care workforce. This action explicitly cites the report of the Fair Work Commission. The Welsh Government has established a Social Care Fair Work Forum, bringing together employers and trade unions in a social partnership model to support the move towards fair work. The Forum has set out an [ambitious plan](#) for its work and has been providing detailed advice to the Welsh Government on the important Programme for Government commitment to ensure a Real Living Wage for social care workers.

2. Attraction and Recruitment

Our work aims to attract a wide range of people including but not limited to children and young people, to consider careers in health and care and to provide ample opportunities for career development, extension and expansion into new and different areas. We continue to make best use of the bi-lingual [WeCare](#) (Social Care Wales) and [Train.Work.Live](#) (HEIW) marketing approaches, and are working towards the longer term goal of establishing a national careers service for health and social care within the lifetime of this strategy (action 6). In preparation for this, we have brought together our approaches to careers, and in July 2021 formally launched a joint careers network to further links with key stakeholders including the Department of Work and Pensions and Careers Wales which is strengthening links between job seekers and careers in our sector. In areas of acute workforce shortages work has commenced on workforce plans for key occupations recognised in the actions such as nursing, social work and the direct care workforce (action7).

We will launch ‘Tregyrfa/Careersville’ our English and Welsh Language digital virtual villages that will house various different elements of health or social care delivery and the associated careers available. Our plan is that Tregyrfa/Careersville, evolves over the 10 years of the strategy, to become not only established in school calendars, but as a recognisable, go-to resource, which includes live events and support for applying to universities and jobs for anyone interested in health and/or care.

3. Seamless working models

Our ability to work as a whole system will be critical to our recovery. The workforce strategy identified enablers to support this, particularly in seamless working, and in delivering excellent education and learning, underpinned by digital capability and compassionate leadership. Our joint work supporting the strategic programmes for primary care, mental health and the implementation of the AHP framework feature strongly in progressing our workforce strategy.

Our first step in developing a multi professional primary care workforce plan (action 9), is to ensure that the education and training is in place. We have completed proposals for a new multi professional education and training infrastructure that will drive the roll out and implementation of education and training across all relevant professions and at all stages of learning, from undergraduate to advanced practice. The infrastructure will consist of a national education and training unit linked with a network of local multi professional primary care academies. This is a critical platform to ensure that the future pipeline for the primary care workforce are sustainable and embedded. We anticipate that this will be in place in 2022 subject to investment being agreed.

We have also mapped and reviewed current education and training programmes for primary care, as well as developed new frameworks to support these such as the GP Nursing Competence Framework, which has helped to identify gaps and priorities, and to inform wider strategic discussions about funding models.

Our development of a joint multi professional/multi service strategic mental health workforce plan (action 10), will use the themes of the workforce strategy to set out a sustainable approach to the future workforce, and is on target for delivery in March 2022. Progress to date has included extensive engagement, workforce intelligence analysis, deep dive reviews of non-traditional workforce areas and a review of best practice/future models. We are focusing on some early priorities around CAMHS, clinical psychology and perinatal services, and progressing work to support training required for implementation of liberty protection safeguards.

Our work to translate the workforce models being developed through Regional Partnership Boards (action 11) into a good practice guide for integrated working was originally paused due to the impact of the pandemic and the emergency response. The work has now been refocused to support the winter plan with a compendium of existing tools and guidance being drawn together, alongside good practice and innovation that is already in place. Links have been maintained with the regional partnership workforce boards to support implementation of the strategy. We already have established with Qualifications Wales and Consortium, joint vocational qualifications across social care and health at Level 2-5, as well as a joint apprenticeship framework to underpin workforce models. The joint health and social care induction framework is also in place (action 13) and a joint approach to implementation tested through a pilot in Hywel Dda area we will now share lessons learnt, to ascertain next steps, timeframes and investment required for wider delivery.

During 2021-22 we expanded training to health workers in care homes through care home education facilitator (CHEF) roles; are piloting a joint training initiative approach to hospital discharge and have contributed to the development of an induction standard for volunteers, led by the WCVA. Throughout the pandemic we have worked with workforce regulators (action 14) and this has been focussed on the flexibilities required to support during the response to Covid-19, including for example temporary registers.

4. Digitally Ready Workforce

The pandemic has led to an acceleration of the use of digital technology as a means of facilitating remote working to deliver an effective service. The opportunity to deliver a more creative culture, supporting innovation and responsiveness has changed how some services are delivered.

We are working to increase digital capability throughout our workforce, enabling them to work and learn using appropriate technology and digitally enabled ways of delivering health and care services, and working with partners to increase the availability and catalogue of virtual learning solutions, including e-learning, virtual classroom and simulation. We are building relationships with key partners including TEC Cymru relating to training resources for remote clinical assessment skills, Digital Public Services and Digital Communities Wales and have close working relationships with the newly established Digital Health and Care Wales.

5. Excellent Education and Learning

Delivering excellent education to support the health and care workforce, is key to all ministerial priorities, as well as the wider socio-economic agenda, and critical in ensuring our workforce is able to meet the needs of our population.

The pandemic has had significant impact on this area, disrupting academic studies, particularly in face-to-face teaching, assessment, clinical placements, rotations and progression. Our teams and partners undertook a mammoth exercise, rapidly altering the way programmes and examination components were delivered, to ensure that disruption to the quality of the student experience, programmes, timeframes and mechanisms to ensure course completion was minimised as far as possible (action 18). We are working with University providers, Agored Cymru, City and Guilds, WJEC and other awarding bodies, to share intelligence of the impact of Covid-19 on the delivery and achievement of qualifications to support and commission the delivery of excellent education programmes at all levels to deliver a competent, capable and confident workforce.

Our long-term goal is one that challenges traditional ways of training and education delivery to deliver a flexible and sustainable workforce. We are maximising opportunities for work-based learning (WBL) and apprenticeships and working to support a reduction in differential attainment across health and care education programmes. A range of support mechanisms have been introduced to support learning providers and employers to implement the new suite of health and social care vocational qualifications including good practice workshops and peer learning support. A research and engagement project to establish what is needed for a fit-for-the-future social work student qualifying support framework that reinvigorates social work as a valued career choice is underway (action 23).

Throughout all of our work we are driving improved opportunities for learners to undertake education and training through the medium of Welsh (action 19). The HEIW education and training plan continues to grow graduate and trainee numbers, and we are working with the system to ensure that they are attracted into jobs in Wales. Our contract specification also requires that all under-graduates undertake an annual one hour module on Welsh language awareness, every student who wants to study the Welsh language receives free lessons and education providers assess the demand for WL teaching when developing new courses. In the regulation of the Social Work Degree by Social Care Wales, there has been a long standing commitment to delivery of Welsh medium provision as well as supporting individuals to learn and develop their Welsh language skills.

6. Leadership and Succession

While we have this theme identified separately in the strategy, our approach to leadership is [evidence based](#), underpinning all that we do in creating the right culture which allows our people to thrive, and consequently improve outcomes for the people we serve.

We have made excellent progress in this area and have completed 2 of the 3 key actions with significant progress towards delivery of the third. We have developed and launched the principles for compassionate leadership for health and social care in Wales, because of the compelling evidence of the positive impact on workforce wellbeing and quality of patient care (action 25). These principles clarify our shared definition, understanding and language relating to what compassionate leadership looks like, and how it translates into the work that we do.

We have also developed compassionate leadership online content to 'spotlight' individual principles and themes, providing a range of accessible tools and resources that support embedding of these Principles and behaviours across the system. We continue to produce digital learning and engagement content and development opportunities to support leaders during and post covid-19, and recently launched 'Gwella on Air' comprising podcasts from NHS leaders and teams sharing how they have created compassionate and collective cultures within the workplace (action 26).

We have 21 active and vibrant leadership networks on 'Gwella', our digital leadership platform, resulting in the creation of boundaryless leadership development opportunities that leverage relationships and support the career paths of aspiring NHS Wales leaders (action 27). The Gwella site has had over 320,000 page hits since its launch in August 2020, with 23,000 unique users accessing the site. We have curated nearly 230 published resources and have had over 1,000 NHS employees accessing learning events.

A National Talent Management Board, targeting the succession into executive director roles is in place, supported by an NHS Wales Operational Talent Group. Executive Director Success Profiles to support recruitment processes and career development have been agreed. Our NHS Aspiring Executive Talent Network is now supported by the development of an Aspiring Executive Leadership Development Programme - 'Leading with Compassion' and an Executive Mentoring Programme. We have created access to a suite of leadership master classes and have re-established the NHS National Graduate Management Programme.

Social Care continues to benefit from a range of well-established leadership programmes aimed at team managers, middle managers as well as aspiring Directors and Directors programmes through a range of taught programmes, action learning and peer support programmes. This suite of leadership programmes has over the past five years seen 21 Statutory Directors and 32 Heads of Service (adults and children) come together to learn from each other and experts in the field. Over the past 7 years, more than 400 team managers and more recently 26 middle managers from local authorities have successfully passed the accredited 12-month programme, developed to speak to their specific roles within social care. Specialist peer learning programmes have also recently begun to support learning and sharing of intelligence across children's services.

7. Workforce Supply and Shape

Our work to develop the centre of excellence for workforce intelligence (action 28) is a long-term goal, with the first phase concentrating on the need to develop capacity and capability in workforce planning, underpinned by the availability of high quality robust data, and appropriate data systems to enable effective planning and workforce modelling. We need to improve the skills, knowledge, confidence and the data quality, we enable us to plan more effectively, and this is a key element of

the WFS. We are developing resources and shared approaches and have adopted a standardised methodology of the 6-step approach to workforce planning (action 29), which we are utilising to frame our approaches to the strategic workforce plans we are developing for mental health and nursing.

Social Care Wales has led a major reform of the approach to collecting workforce data across social care. A new collection system has been established that gathers data from statutory, private and voluntary providers in all settings, which will lead to published data being available to the sector on a new workforce data portal.

To date we have developed digital resources and online training to support workforce planning for health and social care providers, shared approaches to workforce data collection and planning and by the end of this financial year we will have published the workforce plan for the mental health workforce, direct care workforce and social work workforce, and supported the development of a national workforce plan for both imaging and cellular pathology, mentoring the service managers to develop their organisational level plans that underpin the co-production of the national plan (action 31).

Specifically, by the end of October 2021, health and social care will be able to access online workforce planning toolkits. These resources are available bi-lingually and are fully accessible. There will also be a tool that will enable both teams and individuals to assess their capability in workforce planning. There will also be online pre-recorded training for workforce planning in primary care, again this is fully accessible and bi-lingual. Work is on target to develop a workforce planning training pack that can be flexibly delivered by organisations to local teams. This will be supported by the development of the underpinning workforce planning competences for services managers.

We are also supporting our volunteer workforce and are working closely with WCVA and 'Helpforce' including the recent development of the volunteering framework.

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 \(2018\)](#).

The workforce strategy is wholly aligned to the priorities and actions mentioned and the core messages within them are embedded in the strategy which was reaffirmed in the reset and recovery document. 'A Healthier Wales' set out the initial commission for HEIW and Social Care Wales to develop this workforce strategy for the health and social care system, and so forms the bedrock of this strategy. The quadruple aim to have an engaged, sustainable and responsive workforce, for example, is reflected in our commitment to ensuring wellbeing, inclusion and the Welsh language and culture are woven through implementation plans.

The workforce strategy is essential to ensure the ambitions to transform service models set out in 'A Healthier Wales' can be delivered successfully and will deliver the ambition of 'a seamless social care and health system. We regularly map strategic documents to ensure the strategy actions are fit for purpose and support delivery of the programme for government.

As previously highlighted, we incorporated our implementation plans into our respective business /IMTP planning arrangements, and progress is monitored through our performance management systems. We issued a [report](#) following the 6 month 'supporting winter protection plan' and have created a resource pack for sharing with key stakeholder outlining our progress to date and next steps.

We regularly review the WFS hence our ability to bring forward initial implementation plans and respond to the pressures facing health and care in our 'support to the winter protection plan' late in 2020, and our ongoing response to the pandemic. More recently we have aligned our WFS actions to the Programme for Government.

Our work to provide excellent education and training includes HEIW's support to the development of the new medical school in North Wales, widening access to health and social care careers, an increase in work-based learning, health and social care apprenticeships, which account for nearly 40% of all apprenticeship starts. HEIW is the health development partner in Wales, with Social Care Wales providing the same role for social care in Wales, and as such have a key role in reviewing and creating apprenticeship frameworks and recognised prior learning routes. This is complimented by our attraction and recruitment approach to careers (6) within theme 2, and combines with our excellent education and training, which continues to grow vocational learners, graduate and trainee numbers to increase the workforce pipeline, and attract them to jobs in Wales.

Our seamless working theme highlights the workforce implications of national programmes including the strategic primary care programme (9) with the development of a primary care education and training framework for the multi professional team needed to work in primary care settings. We are on target to deliver the strategic mental health workforce plan for health and social care (10) by March 2022, with increases in mental health nursing and medical workforce, already in train through education and training commissioning process.

We were pleased to see the programme for government commitment to pay care workers the real living wage, as this was a message we clearly heard in our engagement and consultation phases and will positively impact on the delivery of action 3. Pay is one element of the fair reward and recognition, and we have been working to improve and increase parity between health and care staff as well as within the care sector itself. Social Care Wales is part of the fair work forum working closely with partners to find solutions to implementing the real living wage.

3. The extent to which HEIW/Social Care Wales'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.

We are one year into a ten-year strategy and realise our ambition of having an engaged, motivated workforce with the capacity, capability and confidence to meet the needs of the people of Wales. We are confident that it will deliver on this, and that we have the right set of actions, which were developed through the largest engagement exercise in health and care workforce arena. Even

though we could not have foreseen the pandemic, we regularly review our aims, objectives and deliverables to support the 32 actions to ensure we are on track.

The workforce strategy development, highlighted the need to escalate our plans to develop capacity and capability in workforce planning, underpinned by the availability of robust data and appropriate systems to enable effective planning and workforce modelling. We are key contributors in the national programmes and lead on development of workforce solutions and models. Our prudent in practice guidance is in synergy with the national clinical framework, our digital introduction to social care training programme supporting potential new recruits into the sector.

In the past 18 months the adoption of digital technologies has been greatly accelerated, because so many organisations have been forced to quickly digitise products and services. The pandemic has demonstrated unimaginable capacity for rapid transformation, with many long-term plans, like telehealth, executed in a matter of days or weeks, but this is not without challenges. Whilst there are definite opportunities in continuing with the more agile and responsive approach required in such an emergency, public bodies have a legal obligation to consider the long-term impact of their decisions, and to prevent persistent problems such as poverty and health inequality. The pandemic has certainly accelerated some progress, but it has also surfaced some entrenched structural inequities in our society

Within health and social care, the Welsh government had already committed to increasing investment in digital transformation and skills, recognising the likely impact of new and emerging medical and digital technologies. And in *A Healthier Wales: Our Workforce Strategy for Health and Social Care (2020)* HEIW and SCW have stated that “by 2030, the digital and technological capabilities of the workforce will be well developed and in widespread use” (p.25). The timely [Topol Review \(2019\)](#) explored how technology would impact healthcare, specifically, and concluded that the NHS should focus on “building a digitally ready workforce that is fully engaged and has the skills and confidence to adopt and adapt new technologies in practice and in context” because within 20 years, “90% of all jobs in the NHS will require some element of digital skills”, and “staff will need to be able to navigate a data-rich healthcare environment” .

Our commitment to building a ‘digitally ready workforce of the future’ must also to ensure a digitally capable workforce of now, building capacity and capability to inform good decision making, and to empower staff to help shape their future. Developing the healthcare workforce is a fundamental building block to achieving digital transformation and improving outcomes, more broadly. HEIW has identified the need to define, develop and embed digital skills, capabilities, and literacy of the workforce, and has fully committed to this in key planning documentation.

We are mindful that planning for a sustainable workforce is reliant the availability of expert skills to enable that planning, and high-quality data and data systems to inform our plans. Improving our workforce intelligence will enable more robust decision making on the shape of the workforce, and diagnose the underlying issues more effectively, for example in relation to population demographics, population health and care need, the workforce model, shortage of people or skills gaps. It also enhances opportunities to focus on competence-based roles, supported by access to flexible education provision, and underpinned with a need to ensure that our careers offer and supporting information, meets the needs of all ages and all stages of life.

Both HEIW and Social Care Wales are undertaking major reviews of their approach to education and commissioning. For example, we have revised our approach to GP education and clinical placements, rapidly expanded simulation approaches and are delivering the pharmacy transformation programme simulation. HEIW has completed the phase 1 review of under-graduate pre-registration commissioning and have commence the process for Phase 2. Our commissioning process includes significant changes to increase welsh language provision, flexible and distributed learning and recognition or previous skills, with the need for inclusion and a focus on student wellbeing.

A review of Social Work Education and funding is in place recognising the immediate recruitment pressures in Social Work and will present findings as to the supply and demand for social work and the challenges facing the learning supply with comparisons made to other UK nations and other professional pathways in Wales i.e., health and education.

We have contributed to the evaluation of More than Just Words and remain active partners of the Health and Social Care Welsh Language Partnership Board. We continue our strategic and practical support to support development of Welsh language services, for example the delivery of dementia and welsh language sessions; guidance and support resources for employers in embedding a culture of using welsh at work and supporting the delivery of the active offer.

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

We are committed to developing medium term implementation plans – the immediate focus has been on immediate workforce pressures given the pandemic. The implementation plans will have indicators and data to track progress. The complexity of evaluating the effectiveness of the WFS, will require a system approach, given the wide range of factors that can impact on the workforce nationally as well as locally. We will include data and indicators regarding the nurse staffing levels act implementation, reduction in sickness, improved engagement and reduced vacancies to demonstrate the impact of the WFS and will report our progress through the governance structure we described earlier in this document, which will include publishing an annual report in the public domain.

We have been implementing the strategy for a year which although has been in a very different environment, we have ensured robust governance around implementation through our plans, with clear objectives, deliverables and reporting mechanisms through to our respective Boards and government. Equally we have been transparent in the activities and outcomes achieved against the ambition of the workforce strategy through published plans and reports.

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

We recognise that Social Care Wales and HEIW are providing the strategic leadership in the implementation of the strategy, but there is also action required by other partners/groups at local, regional and national levels e.g., social care fair work forum, local health boards, local authorities

and regional partnership boards. There are a number of areas that will require further investment for example action 3 on fair reward and recognition, and as the implementation plans are developed in partnership, requirements for further investment may emerge. We must acknowledge that what we spend on our workforce is not a cost but an investment, and we will ensure that we get maximum value from this.

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.

The strategy development was absolutely and completely inclusive. We recognised that the health and social care workforce is multi-dimensional so held the biggest ever workforce consultation exercise in Wales, with the resulting strategy designed to be applicable and relevant to individual professions, services client groups and settings. We committed to an inclusion thread, woven through each of the actions rather than as a separate theme, as we also did with the Welsh language and wellbeing, to ensure that these fundamental elements are front and centre of all that we do.

Our strategic equality plans and the WG race equality action plan underpins our functions in relation to our workforce, education and training, supporting those with protected characteristics. We are leading the work around differential attainment, and in accessing careers in health and care through non-traditional routes in our Made in Wales approach.

In particular we have continued to support carers, for example through Membership of the Ministerial Advisory Group for Carers, supporting a Carers Learning Improvement network. In the Social Care Wales Workforce Development Programme Grant there is a national priority for carers assessment and carers awareness training. We also support the promotion of the Carers Aware training aimed at Social Workers being delivered by Carers Wales.

We have absolute commitment to an inclusive approach, and when developing the medium-term implementation plans we will engage our stakeholders in the co-production, development and testing of our approaches.

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

We would hope that the committee will continue to take an interest in this going forward. We suggest areas of particular interest to the committee would be in our approach to compassionate leadership, and digital skills development.

HEIW & SCW
October 2021

ABOUT US

Social Care Wales was established (under the Regulation and Inspection of Social Care (Wales) Act 2014) in April 2017. Our work aims to support the priorities for the well-being of future generations for the sector, the public and Welsh Government. Social Care Wales is the workforce regulator for social work and social care workers, and is also responsible for workforce learning and development and providing strategic leadership for service improvement, research and data. We have an influential role in shaping research priorities and building strong links with stakeholders to improve care and support. Social Care Wales also has a responsibility for the development of the workforce in the early years and childcare sector.

Health Education and Improvement Wales was established 1 October 2018 and is one of twelve organisations in NHS Wales. As a Special Health Authority, Health Education and Improvement Wales (HEIW) 2019 sits alongside the Health Boards and Trusts in NHS Wales and has a leading role in the education, training, development and shaping of the healthcare workforce in Wales; supporting high quality care for the people of Wales.

AMDANOM NI

Sefydlwyd Gofal Cymdeithasol Cymru (o dan Ddeddf Rheoleiddio ac Arolygu Gofal Cymdeithasol (Cymru) 2014) ym mis Ebrill 2017. Nod ein gwaith yw cefnogi'r blaenoriaethau ar gyfer llesiant cenedlaethau'r dyfodol ar gyfer y sector, y cyhoedd a Llywodraeth Cymru. Gofal Cymdeithasol Cymru yw rheoleiddiwr y gweithlu ar gyfer gweithwyr gwaith cymdeithasol a gofal cymdeithasol, ac mae hefyd yn gyfrifol am ddysgu a datblygu'r gweithlu a darparu arweiniad strategol ar gyfer gwella gwasanaethau, ymchwil a data. Mae gennym rôl ddylanwadol wrth lunio blaenoriaethau ymchwil a meithrin cysylltiadau cryf â rhanddeiliaid i wella gofal a chymorth. Mae Gofal Cymdeithasol Cymru hefyd yn gyfrifol am ddatblygu'r gweithlu yn y sector blynyddoedd cynnar a gofal plant.

Sefydlwyd Addysg a Gwella Iechyd Cymru ar 1 Hydref 2018 ac mae'n un o ddeuddeg sefydliad yn GIG Cymru. Fel Awdurdod Iechyd Arbennig, mae Addysg a Gwella Iechyd Cymru (AaGIC) 2019 yn eistedd ochr yn ochr â'r Byrddau Iechyd a'r Ymddiriedolaethau yn GIG Cymru ac mae ganddo rôl flaenllaw yn y gwaith o addysg, hyfforddiant, datblygu a llunio'r gweithlu gofal iechyd yng Nghymru; cefnogi gofal o ansawdd uchel i bobl Cymru.