

Anti-racist Wales Action Plan – HEIW

1. Introduction

1.1 HEIW is a unique organisation in NHS Wales, established in 2018 as a Special Health Authority with a leading role in the education, training, development and shaping of the healthcare workforce in Wales. Our workforce consists of over 560 individuals from a range of backgrounds including frontline NHS services, various education settings, and other public sector services or professional sectors such as finance and IT.

1.2 Our purpose is to develop a workforce that delivers excellent care to patients and service users and excellent population health. As a Special Health Authority, we undertake a wide range of functions to support NHS Wales:

- Leadership Development
- Workforce development and transformation
- Careers and widening access.
- Workforce strategy planning intelligence
- Education and Training – planning, commissioning, and delivery.

2. Response

2.1 HEIW are committed to the delivery of the Anti-racist Wales Action Plan (ARWAP) and the Welsh Government's commitment to make Wales an anti-racist nation by 2030. HEIW was able to play a pivotal role in helping shape the plan through our Medical Director who was part of the First Minister's Cross-Government Race Equality Action Plan Steering Group. We broadly support the five priority actions which have been agreed as cornerstones for NHS Wales and the five enabling health goals.

2.2 HEIW has embedded all relevant health goals and priority actions into our 2023 – 2027 Strategic Equality Plan (SEP) and SEP enabling action plan and has taken an intersectional approach to ensure that we consider the impacts of other protected characteristics supported by other Welsh Government plans such as the LGBTQ+ Action Plan.

3. Consider the effectiveness of Welsh Government actions to deliver the plan, including what is being done to ‘lead by example’ in taking a pro-active and cross-governmental approach to racism.

3.1 We understand the want of those who have contributed to the plan that a focus must be on actions not words, however, the decision for the action plan to take radical rather than incremental steps at pace, in reality, has become a challenge for both Welsh Government and health boards due to the scale of the organisations involved, financial implications, resources and governance.

3.2 We were made aware following the launch of the plan, that the Welsh Government were not at the stage where they were able to share their best practice across NHS Wales organisations or answer specific queries regarding the delivery of the plan as they were yet to develop their own internal mechanisms to deliver the plan. They have provided assurances that once these have been completed, they will be shared with the wider NHS to support a cohesive approach to deliver the plan across health.

3.3 However, since the launch of the plan in 2022, The Welsh Government has been invited to attend the NHS Wales Equality Lead group on several occasions to provide an update on their progress towards delivery of the plan and answer any queries. Subsequently, a frequently asked questions document (FAQ) was produced from these sessions to address some of the initial concerns.

3.4 HEIW has taken a pro-active approach to delivering the plan at a local level and has worked with other NHS organisations, third-sector organisations and community groups to understand how each of us can support the wider NHS, however, this has been dependent on available finance, limited resources and existing best practice. To enact the scale of change required in the action plan at pace to make measurable impacts on those from a Black Asian and minority ethnic background will require a more robust pro-active communication plan for the Welsh Government to share its own progress and clarity on delivery of the plan.

4. Consider progress and monitoring arrangements for the Plan, including the role of the public sector (local authorities, health, education), third sector and where applicable, the private sector.

4.1 The ARWAP makes clear that the purpose of the consultation was to test the appetite for an action plan, and consultation over what the specific measurement performance indicators would look like was not included. Although the actions for health contain intended outputs and impact there remains no clear guidance in the action plan or since its launch of what the performance indicators of these impacts would look like across NHS Wales.

4.2 For example, Priority Action 1 outlines that the implementation of the anti-racism action plan will reduce people's experience of racism while being recruited, progressing, and working or accessing services, however, it does not provide any clarity on how as an organisation we monitor and measure this impact, what does a reduction look like and what is considered 'good' etc.

4.3 We have previously raised this concern with the Welsh Government following the launch of the action plan and are content at this stage that the response was that we should consider at a local level what is considered appropriate monitoring and measurement. At HEIW our Strategic Equality Plan is fulfilling this role. We will

however adhere to any all-Wales monitoring arrangements for the plan which may be introduced in the future to provide a consistent approach across NHS Wales.

4.4 HEIW has one specific action in the plan to ensure all commissioned programs provide evidence of anti-racist principles and reflect our SEP, which we have achieved by incorporating these requirements into our procurement and commissioning decision-making. However, HEIW is mentioned several times alongside NHS Wales organisations and NHS boards in the 'lead and partners' section against specific actions, however, the plan does not differentiate between who is the lead and who is the partner responsible for the delivery of the actions. This has been raised with the Welsh Government, who advised us that they would provide clarity to all those mentioned in the plan on whether they are a lead or partner. At this point in time, this lack of clarity has resulted in several actions being delayed or not achieved by the indicated timescales.

5. Explore what channels of communication has been established to ensure people with lived experience are informed of the plan's progress and what changes are happening as a result of the plan.

5.1 The plan asks for organisations to provide Ethnic Minority Networks with appropriate levels of resources and access to the Board. The Welsh Government has provided us with clarity and assurance in our approach to providing a Wellness and Inclusion Champions network which has been designed by our workforce and takes an intersectional approach to supporting and enhancing equality, inclusion, and wellbeing. Our network includes those from a Minority Ethnic background, those with other protected characteristics and those who are allies and provided access to senior leadership and opportunities to shape and inform our culture.

5.2 Progress towards HEIWs delivery of the action plan is reported through our SEP which is publicised to our workforce, wider NHS and stakeholders' inclusion of our Black, Asian and Minority Ethnic partners and community groups. However, the plan does not provide any guidance, best practice, or a consistent approach across NHS

Wales on how those with lived experience should be engaged and informed by the progress of the plan.

6. Evaluate the effectiveness of the Plan in its first year, including whether actions have been delivered, what the key outcomes have been so far and to determine why any outstanding actions have not been implemented.

6.1 Following the launch of the action plan, Equality Leads from across NHS Wales were invited to meet with the Welsh Government to discuss the implementation of the plan regarding local context. We raised concerns that several actions across the health section of the action plan were ambitious as these relate to a requirement to provide an anti-racism training element across NHS Wales, specifically for our board members and wider NHS workforce, however, the plan had not provided any detail on who would provide the training, how it would be funded and who would be responsible for monitoring this.

6.2 Subsequently, we were assured that any local interventions that could be put in place would be sufficient alongside a recommendation from the Welsh Government to utilise an in-house training offering until they were able to provide more details on how this training has been implemented. HEIW has implemented several anti-racism interventions for our workforce and has been able to support the wider NHS where possible.

6.3 HEIW has been part of a collective voice during discussions with the Welsh Government to ensure that the training required to deliver the action plan is consistent and accessible by all NHS health boards. We are pleased that the Welsh Government has endorsed this approach and are encouraged to see work progressing on the creation of an all-Wales Anti-racism module as part of the working group. Subsequently, those actions regarding training across the NHS have not been achieved by the initial deadline and remain ongoing.

7. Given the importance of intersectionality, the inquiry will also consider how the plan and policies have taken account of people's intersecting identities and how these have been taken into account when developing and implementing the Plan.

7.1 The plan has highlighted that those who had consulted in the development of the plan were concerned about the topic of intersectionality and that the plan would take a simplistic approach to focusing on one protected characteristic. The plan does state that the themes are repeated within other plans and that as the plan is put into action, governance frameworks for other plans will also be adjusted and reporting mechanisms put in place in the future.

7.2 HEIW alongside other NHS organisations raised concerns regarding intersectionality following a meeting with the Welsh Government prior to the launch of the LGBTQ+ action plan which advised that at that stage there had been no co-production between the creation of both plans. We were assured that before the launch of the LGBTQ+ action plan intersectionality would be reflected in the various action plans going forward.

7.3 We acknowledge that intersectionality has been addressed in the LGBTQ+ action plan and the ARWAP has been referenced, however, it has been difficult to apply an intersectional approach to delivering the actions in the ARWAP as the deadline of several of the actions to be delivered was by December 2022, and the LGBTQ+ action plan was not published until February 2023. To effectively implement an intersectional approach all action plans would need to have been developed and launched together and the actions aligned to mitigate focusing on specific interventions in isolation.