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# Public Health Wales NHS Trust Welsh Language Clinical Consultation Plan

**Author:** Sara Peacock, Equality, Diversity and Inclusion Lead  
Elizabeth Cooper, Deputy Head of Ops, Screening Division  
Sikha de Souza, Consultant in Public Health  
Rachel Howell, Principal Public Health Practitioner

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**Purpose and Summary of Document**

The purpose of this document is to set out objectives and actions that will increase Public Health Wales' ability to offer and undertake clinical consultations and specialist smoking cessation services in Welsh. It sets out how we will work in a systematic way to mainstream Welsh language skills planning into all aspects of service planning and delivery, and especially into workforce planning. This document meets the requirements of Welsh Language Standard 110 and 110A, and interfaces with the implementation of

More Than Just Words and the Health and Care Standards.

**Work Plan reference: Welsh Language Standards (No.7) Regulations  
2018 Compliance Notice**

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## **1.INTRODUCTION**

After being informed of the organisation’s Welsh-language requirements under the Welsh Language Standards in our compliance notice of 2018 (which came into effect in 2019), the whole of Public Health Wales (PHW) underwent a significant programme of work to bring us into compliance with those obligations. The programmes enacted a considerable project to bring their services into compliance with the Standards, including:

- Ensuring that all written correspondence was issued bilingually, including all invitation and results letters and patient information leaflets.
- Ensuring that our web estate is all bilingual and that processes are in place to ensure that both are always updated simultaneously
- Installing telephony branching on contact telephone numbers to enable callers to be connected to Welsh or English speaking call handlers, according to their language choice.
- Advertising key roles as Welsh Essential when they came up for recruitment, and targeting advertisements with the support of the Welsh Language Officer and the Communications team to maximise interest among Welsh-speaking candidates.
- Working hard to raise awareness across all staff not just of the requirements of the legislation but also the reasons behind it, so that all staff support and champion the needs of Welsh-speaking service users.

Public Health Wales is proud to be a bilingual organisation and we want to support our staff to celebrate the Welsh language and culture in everything that we do. The targets within this plan to raise awareness of the Welsh language, upskill current staff and recruit more Welsh speakers in future, will embed the Welsh language further into our organisational culture.

We recognise and celebrate the hard work and commitment of the services to doing all that they can to ensure that our Welsh-speaking service users can access their services in an equitable manner.

This Clinical Consultation Plan is not concerned with matters already covered by the Standards (such as ensuring a Welsh-speaking reception

service or correspondence in Welsh), but rather how we can try to increase the availability and accessibility of Welsh-speaking clinical staff who can provide a consultation to service users in that language.

This clinical consultation plan details the steps that the main providers of clinical consultations within Public Health Wales will endeavour to take in order to further enhance their Welsh language offerings to service users. The output of smaller teams who may offer clinical consultations from time to time will feed into the update report.

## **1.1. Welsh Language Team**

PHW have a Welsh language team, who provide guidance and support to staff on Welsh language legislation and opportunities to develop the organisations Welsh language services. This support will further enable the below targets to be met, and Welsh language services to thrive within, and throughout the organisation. The Welsh language team support by:

- Giving advice and support on the Welsh Language Standards and how to best apply to teams' contexts.
- Creating and updating resources to help the organisation comply with the Welsh Language Standards.
- Signposting staff to courses to help improve their Welsh – whatever their current level.
- Maintaining an MS Teams group for both learners and more confident speakers within PHW, accessible to all staff.
- Hosting Grŵp Dysgwyr (Group for learners) – a weekly informal session/conversation to help staff improve their Welsh.
- Providing Iaith Gwaith badges and lanyards to Welsh learners and confident speakers alike to make Welsh more visible and to make it easier to identify Welsh speakers for both colleagues and service-users alike.
- Monitoring the progression of the Ymlaen Welsh language staff network, to ensure Welsh speakers and learners have a strong voice within PHW.
- Working closely with the People and OD Partners and Directorates to build Welsh speaking capacity into the organisation's Workforce Planning processes to further enhance the Welsh language services that are available.

## 2.CONTEXT AND INTERFACE

Public Health Wales is under a duty to implement the [Welsh Language Standards \(No.7\) Regulations 2018](#) in accordance with the [Compliance Notice](#) issued by the Welsh Language Commissioner on 30 November 2018. This includes the following standards:

### Standard 110

You must 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).

### Standard 110A

Three years after publishing a plan in accordance with standard 110, and at the end of a plan's 5 year period you must -

- (a) assess the extent to which you have complied with the plan; and
- (b) publish that assessment within 6 months.

'Clinical consultation' is defined in the Welsh Language Standards (No.7) Regulations 2018 as follows:

'A "clinical consultation" ("*ymgyngoriad clinigol*") means a health provision interaction between one or more individuals and a body;

"health provision" ("*darpariaeth iechyd*") means provision of health services as part of the national health service to an individual and includes the assessment, diagnosis or treatment of that individual.'

In this strategy, the term "individual" refers to someone attending a clinical consultation in a private capacity.

The Compliance Notice also includes standards relating to activities that are relevant to clinical consultations, such as staff recruitment and Welsh language skills development, Welsh language awareness training, vocational training through the medium of Welsh, telephone call handling, correspondence, provision of reception services, forms for use by individuals, documents for individuals, and promoting Welsh language services. These are not addressed as part of this plan, which is focused on the consultation itself.

[More Than Just Words](#) (The Welsh Language Government's Strategic Framework for Welsh Language Services in Health, Social Services and

Social Care) and the [NHS Wales Health and Care Standards](#) require NHS bodies in Wales to demonstrate that they offer language choice and ensure that they have Welsh language skills capability to provide services in the Welsh language. The Welsh Government plan for Health and Social Care, [A Healthier Wales](#), was published in 2018 to offer a whole-system approach to health and social care. One of the fundamental principles of the intention to drive changes in services is: "health and care services are tailored to individuals' needs and preferences, including in the language of their choice". The [Workforce Strategy](#) arising from that plan was published in 2020, and in addition to stating that "Supporting our workforce to deliver care using the Welsh language where needed is a fundamental principle which should underpin every area of this Workforce Strategy", it contains an action specifically to "Develop workforce planning guidance for Welsh language skills identification and development in the health and social care workforce".

The [NHS Wales Planning Framework 2022–2025](#) provides guidance on strengthening and developing medium-term planning for Health Boards and Trusts as they plan to improve services. The framework refers specifically to the requirement that bodies should demonstrate in their plans that they meet the statutory requirements of the Welsh Language Standards and plan and deliver services in accordance with the *More Than Just Words* framework.

Statutory guidance on the [Duty of Quality](#) in the NHS in Wales makes it clear that "Welsh language considerations must be embedded in the Duty of Quality", and aligns that Duty with the *More Than Just Words* plan.

The [Public Health Wales Strategic Plan 2022–25](#) states that "We need to support the use of the Welsh language and bilingual careers as demand for Welsh language services increase".

The [Well-being of Future Generations Act 2015](#) has as one of its well-being goals 'A Wales of vibrant culture and thriving Welsh language', and we have a statutory obligation to show how we are contributing to the achievement of this goal.

[Cymraeg 2050](#) is the Welsh Government's plan for growth, with the aim to reach 1 million Welsh speakers in the population by 2050. The workplace and services are two key areas in the second theme of this plan, "Increasing the use of Welsh".

## **3.SCOPE OF THE PLAN**

### **3.1 The Welsh Language Clinical Consultation Plan key activities:**

The Welsh Language Clinical Consultation Plan deals with the following key activities:

- Bilingual workforce planning, including recruitment, bilingual skills development and Welsh-medium vocational training
- Producing standard operating procedures, policy and other key documents
- Communicating and promoting the availability of Welsh medium clinical consultations
- Recording language preference

### **3.2. The Scope of this Welsh Language Clinical Consultation Plan**

The Welsh Language Clinical Consultation Plan applies to all Public Health Wales services that undertake clinical consultations. The services within the scope of this plan are:

- Wales Abdominal Aortic Aneurysm Screening Programme
- Breast Test Wales
- Diabetic Eye Screening Wales
- Newborn Hearing Screening Wales
- Help Me Quit

### **3.3. Our clinical consultations**

### **3.4. Screening**

Within Screening, the nature of the clinical consultation interaction is different for each of the programmes.

#### **Wales Abdominal Aortic Aneurysm Screening Programme (WAAASP)**

The programme employ a workforce of AAA screeners who directly carry out the clinical consultation with service users. The screeners are employed by Screening and then trained internally. For most service users this is a

one-off interaction. Some service users might then need to speak with one of the specialist nurses if an aneurysm is found that requires further action.

### **Breast Test Wales (BTW)**

The programme employs qualified radiographers to carry out the mammogram for eligible women. Participants are invited every three years.

There are also Assistant Practitioners who may be employed as already qualified or will commence as a trainee and then undertake a training programme within the role.

### **Diabetic Eye Screening Wales (DESW)**

DESW employs Health Care support workers and photographers that are trained within programme. Eligible people are currently invited to be screening every year from age 12 or date of diagnosis.

### **Newborn Hearing Screening Wales (NBHSW)**

The programme employ screeners that are trained within the programme. They carry out the hearing test on newborn babies either in a hospital or in a clinic setting.

### **Screening Programmes not in scope**

Antenatal Screening Wales – Screening Division manages the Antenatal Screening Wales Managed Clinical Network but does not have responsibility for delivery of Antenatal Screening.

Cervical Screening Wales - The cervical screening clinical interaction itself is carried out by staff outside the programme, in primary care.

Newborn Bloodspot Screening – the clinical interaction for the sample capture is carried out by midwifery staff employed by the health boards, outside our programme.

Bowel Screening Wales – the screening test is carried out by participants in their own home. When there is a positive test, participants are contacted by a Specialist Screening Practitioner for the next steps in the process – these are Health Board employees, though we do discuss Welsh language service provision as part of service review meetings.

### **Training**

The training team in Screening manage and deliver a diploma for screeners. There are some core modules that span all the programmes and many of these modules are now available in Welsh with translation planned for the others. At present we do not have an assessor or an IQA that speaks Welsh so we are not able to assess in Welsh yet. To date the Welsh modules have

been actively offered to Welsh speakers going through training and all have declined. We will continue to explore options so that assessments can be held in Welsh in future.

### **3.5. Help Me Quit**

Help Me Quit (HMQ) is the free Welsh NHS smoking cessation service. HMQ comprises the National HMQ Hub and National Telephone Support Service (NTSS), managed by Public Health Wales and local smoking cessation services managed and delivered by seven Local Health Boards.

This document considers the National HMQ Hub and NTSS only.

The National HMQ Hub and National Telephone Support Service employs a team of Call Handlers (5 x 1.0 WTE) and Telephone Support Advisors (3 x 0.8 WTE) alongside a Manager (1.0 WTE) and two Supervisors (2 x 1.0 WTE).

Trained within programme, the Call Handlers act as the first point of contact for smokers wishing to access NHS smoking cessation services in Wales. They are responsible for booking appointments, dealing with queries from the public and health professionals and liaising with Help Me Quit smoking cessation service providers. The Telephone Support Advisors and Supervisors provide specialist behavioural support and advice to smokers across Wales who are looking to quit over the telephone.

In addition to the internally provided induction and training programme, all staff are required to undertake a programme of online training and assessment developed by the National Centre for Smoking Cessation Training (NCSCT).

NCSCT is the recognised world-leader in delivering evidence-based and effective training in smoking cessation support and very brief advice on smoking (VBA). NCSCT resources support specialist stop smoking practitioners and other health and social care professionals who have contact with smokers. The NCSCT provides a suite of online, virtual and face-to-face services on behalf of Public Health Wales and others.

Completion of the Stage 1 and 2 Training and Assessment Programme is encouraged for all staff who support smokers to quit and provides staff with the core knowledge and skills to deliver effective behavioural support. Further training modules are also available to improve support offered to population groups with additional needs such as mental health and pregnancy.

Presently, these externally developed and hosted resources are not available in Welsh.

## **Translation**

When service users specify that they wish to attend their clinical consultations with us in Welsh, we facilitate this naturally with a Welsh speaking member of staff, wherever possible.

The majority of our clinical consultations are arranged in advance and therefore arrangements can be made to pair Welsh speaking service users and staff. If this isn't possible, the appointment should either be re-arranged for when a Welsh speaking member of staff is available, or we can offer the service user the opportunity to have a simultaneous translator present (the service user may decline this offer however).

If a clinical need for Welsh has been identified for a service user on the day of the appointment or during the appointment (which hadn't been specified previously) staff can access a Welsh speaker to translate via the Language Line app, with the service users consent.

## **4. RESOURCING THE PLAN**

Many of the actions in the plan given in section 7 do not require considerable additional resources (although they do require some); they are more concerned with taking a new look at how we do things.

By making sure we factor in Welsh-language considerations when commissioning new record-keeping systems as part of our standard programme of updates, or when revising Standard Operating Procedures, we can effect change without incurring additional cost. Not all of the changes that we would like are within our control in PHW however – some depend on national systems and others require input from Digital Health and Care Wales (DHCW).

### **Upskilling staff**

Since 2017 the [Learn Welsh Centre](#) has provided many Welsh courses free of charge to organisations across Wales in order to develop the Welsh speaking workforce in Wales. The majority of courses at all levels, including residential, are now free of charge. The cost for the paid courses are usually minimal.

### **Learn Welsh Scheme for the Health & Care Sector**

The National Centre for Learning Welsh has introduced an opportunity to develop a dedicated Learn Welsh scheme for the NHS. The project will be open to all Public Health Wales staff over a period of 3 years and will focus on building the confidence of members of staff who already have Welsh skills but lack the confidence to use them at work.

As an organisation we hope to encourage staff to participate in more than one element of the scheme. The purpose will be to work with members of the workforce who have a good knowledge of Welsh but do not have the confidence to use it in a work setting and in the delivery of care. The aim of the programme will be to create confident Welsh speakers so that staff are more likely to use their Welsh to communicate with others and meet the language needs of individuals.

The Learn Welsh scheme for the Health & Care sector will be key to those within the screening and Help Me Quit teams who currently lack confidence to use their Welsh at work.

## **Recruitment**

In order to attract more Welsh speakers and Welsh learners to our roles, we need to ensure that our job adverts and descriptions are reaching every part of the Welsh speaking community. We can do this cost effectively by advertising roles widely on social media recruitment channels and by working with Welsh Universities. Some recruitment channels do have cost implications, but these are minimal. Any costs incurred for advertisement of roles would need to come out of Directorate / Division budgets.

## **5. BASELINE**

### **5.1 Screening**

A baseline measurement of current Welsh-language service provision has been difficult to establish, because of a lack of standard reporting and record-keeping mechanisms for language choice, and the upheaval experienced by our Screening services during the Coronavirus pandemic. Establishing the ability to record and measure language choice and service provision is therefore part of the clinical consultation plan itself.

A key indicator for clinical consultations will be **service user experience data**. Previously collected data has been patchy and inconclusive, so improved data collection will itself be a key action. A new service user experience survey for the Screening Division is set to launch in the first quarter of 2023–24, and the first year's results will provide the baseline going forward. The question that will be used is:

Were you able to communicate in your preferred language [Yes/No]

- [If yes:] What was your preferred language? [Drop-down list with Welsh as the first option]
- [If no:] Please share your preferred language and the reasons why we couldn't meet your request

There is currently no **systematic way across the service of measuring** how many people (a) requested a Welsh-language consultation in response to the active offer, and (b) was subsequently matched with a clinic able to give that Welsh-language consultation. Development of programme-specific systems able to measure this in order to plan for growth need to be built into the plan.

Geographically, the density of Welsh speakers in different areas of Wales can be obtained from [Welsh Government statistics](#) derived from the Census and other population surveys. On a more granular level, linguistic profiles for individual GP clusters are included among the lifestyle and social factors reported by the PHW Observatory in their [General Practice Population Profiles](#).

Across the programmes, the baseline in terms of Welsh Language skills of front line clinical staff is as follows:

Programme	No. Screeners	No. Welsh Speakers
Wales Abdominal Aortic Aneurysm Screening Programme	23	7
Breast Test Wales	87	12
Diabetic Eye Screening	67	12
Newborn Hearing Screening Wales	38	10

## 5.2 Help Me Quit (HMQ)

HMQ's current client management system (and proposed new Patient Administration System (PAS) currently in development) is able to record an individual's language preference and this question is mandatory when booking a client into service. In 2022/23, 2% had a language preference other than English, with Welsh being the most common language preference other than English.

As a service, we aim to always have Welsh speaking Call Handlers available to facilitate enquiries and bookings in the Welsh Language. However, we recognise that unexpected absences can have an impact upon this coverage and will seek to build capacity and resilience to this in the future.

Through workforce planning and use of the Welsh Language Recruitment Form we have identified a gap within our Telephone Support Advisor (TSA) team for Welsh Language provision. We have since successfully appointed to this position with the staff member now delivering bilingual behavioural support for those quitting smoking. We also have access to a network of local services to support any Welsh language requests and also have access to interpretation services if additional capacity is required.

Across the current PHW Hosted HMQ Service, the baseline in terms of Welsh Language skills for the current staff group is as follows:

Job Role	Total Number of Staff*	Number of Welsh Speakers
Call Handler	5	2
Telephone Support Advisor	3	1
Supervisor	2	0
Manager	1	0

\*Total number of staff when service is at full capacity

### 5.3. Barriers to provision of Welsh language services

Barriers to provision of Welsh language services that have been identified across both clinical areas include:

- Challenges in **recruitment** of both Welsh speakers and specialised staff; this is exponentially harder when trying to recruit staff with both appropriate medical or behavioural change training and sufficient Welsh fluency
- **Confidence gaps** among existing Welsh-speaking staff in discussing medical matters, behavioural support and smoking cessation advice.
- **(Screening only) Identification** of language choice in screening (not routinely collected and stored with national patient records), and the subsequent difficulty of allocating those requiring Welsh-speaking service to clinics where that can be provided.

## **6. THEMES FOR FUTURE ACTION**

### **6.1. Technology and data**

The technology that we use within our services needs to enable us to easily capture service-users' language choice in a way that is consistent across our services and easily transferrable to other parts of the NHS (such as GPs and Health Boards). Not only will this facilitate a Welsh-language service, for us and for the other bodies along that service-user's journey, by allowing us to know language choice before the first consultation, but it will enable us to capture data to measure demand and inform future growth in provision.

### **6.2. Systems**

Any point along the service-user's journey that means they have to make a special request, or do something differently from someone who expects an English-language service as default, can be characterised as a "friction cost" that is creating a barrier to a Welsh-language service. These are the points at which people drop out and revert to the English default.

Scrutiny and revision of our systems can identify and remove these friction costs, enabling Welsh speakers to access a more equitable service. This also provides an opportunity for the service to realign its resources in a way that allows it to provide the Welsh-language service in an efficient and effective manner.

Whilst we will scrutinise the systems that are under our control to update, we do have dependencies on other national systems. We will be working with DHCW on updating these systems to ensure that they suit our needs.

### **6.3. Recruitment and upskilling**

To reach Welsh speakers in the jobs market in Wales, recruitment needs to be properly targeted and marketed, as these skills are at a premium and the market is very competitive. Most if not all clinical or specialist behavioural support posts will be advertised as "Welsh desirable".

For our specialist behavioural support or clinical posts we need to be mindful that we are drawing from an often small pool of applicants anyway, so advertising as Welsh Essential could be too restrictive, and clinically impactful if we do not manage to successfully recruit in a timely manner. However, it will be important to ensure that these are vigorously promoted towards the Welsh-speaking population. Phrases in the advertisement such as "Because of the current make-up of our team we particularly welcome applications from people with Welsh-language [and whatever other gaps

there are] skills” indicate that the recruiters are taking the Welsh needs seriously, and position Welsh as a skill and not a personal attribute.

The Resourcing and Welsh language teams have support and advice for marketing those vacancies that require Welsh skills (the resources and budgeting for each role sits within each directorate). However, recruitment is only one part of the answer. We must also consider the skills that already exist within our workforce and examine whether there are Welsh speakers whose clinical skills could be enhanced, or clinicians who could acquire the necessary linguistic skills. Learning a language “from scratch” is a considerable undertaking requiring a regular time commitment over a number of years, so not a very practical response to this issue. More realistic would be to identify those staff who have a good grounding in the language already, or even who are fluent Welsh speakers but not confident about using the language in a work environment, and target support to them.

Another strategy is to look at current training pathways and identify which of these are available through the medium of Welsh, then invest in “learning on the job” opportunities such as apprenticeships if appropriate.

## 7. ACTION PLAN FOR GROWTH

This plan focuses on those teams that have face-to-face and/or telephone contact with service users (rather than those where contact is by post), and on the specific staff within those teams who provide that service.

### Technology and data

Action	Outcome	Dependencies	Key personnel	Milestone targets	Target date
<p><b>Screening:</b> Audit requests for Welsh-language appointment, looking by programme and geography, and look at how many of those are successfully matched with a Welsh-speaking clinic.</p>	<p>Robust data on language choice is available to enable services to better plan provision and workforce.</p>	<p>Development of new IT systems and systematic collection of the data in a way that is auditable</p>	<p>Digital services Programme pathway administration staff</p>	<p>Year 1: To scope the process required to be able to collect data on requests and provision of Welsh language appointments. (Will be via a manual process)</p> <p>Year 2: Implement process to collect data on requests and provision of Welsh language appointments</p>	<p>Year 2</p>
<p><b>Screening:</b> Language choice field to be built into new screening records systems.</p>	<p>Language choice part of standard personal information for all eligible service users, to enable proactive offer of Welsh language service.</p>	<p>Development of new systems Screening IT/digital Discovery work</p>	<p>Digital services</p>	<p>Year 1: To scope how we can take forward the work to include a language choice field in screening IT systems</p> <p>Include the need to record Language preference as part of Screening Discovery work</p>	<p>Year 5</p>

				Year 5: Produce a detailed plan on how we will make the changes required to screening IT systems to enable recording of language choice.	
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## Systems

Action	Outcome	Dependencies	Key personnel	Milestone targets	Target date
<b>HMQ:</b> to strengthen our Active Offer ahead of referral (e.g. strengthening text on website; Language Preference box within self- referral form).	Clients can inform HMQ at referral that they require a Welsh Language service, to enable appropriate resource allocation.			Year 1: Complete evaluation of current active offer and identify areas to strengthen  Record and monitor requests for Welsh Language Service provision	Year 1
<b>Screening:</b> Programmes to evaluate communication with participants before they attend for screening.	Service Users can inform the programmes ahead of time that they will require a WL service, to			Year 1: Audit screening invite letters and websites to establish baseline of provision of active offer at the point of invitation	Year 3

<p>This will identify routes to enable the Active Offer ahead of appointments (e.g. strengthening text on website; adapting text on invitation letters).</p>	<p>enable suitable staff to be rota'd on, or enabling allocation to particular clinics.</p>			<p>Year 2: Develop a plan to move towards compliance for all programmes that are in scope</p> <p>Year 3: Complete a further audit to establish compliance</p>	
<p><b>Screening:</b> Programmes to strengthen standard operating procedures around clarity to service users on the interface/interaction with Health Boards (managing expectations) and passing on language choice already collected.</p>	<p>Service Users are aware what is and is not within PHW's control, and PHW services are actively playing their part in ensuring an integrated journey through the system with regard to language choice.</p>	<p>IT systems to record language choice</p> <p>Discussion with Health boards around accepting referrals including language preference and a commitment to act</p> <p>Systems outside of our control including those managed by DHCW</p>	<p>Programme coordinators who make referrals</p> <p>Health board staff who take referrals</p>	<p>Year 1: Establish baseline of how and when we communicate language preference with partners at the next stage of the pathway</p> <p>Year 2: Produce a plan and look at processes required to improve on baseline by 50%</p> <p>Year 5: To have processes in place with all partners at the end of the screening pathway to include language preference with referrals</p>	<p>Year 5</p>

<p><b>Screening:</b> Service User Experience (SUE) data regarding language choice to be monitored regularly, and ability for the clinical consultation to be carried out in Welsh where requested.</p>			<p>New SUE survey launched</p>	<p>Year 1: Establish baseline of whether service users report being able to access consultations in Welsh if they want</p> <p>Year 3: 5% improvement on 2023/24 baseline.</p> <p>Year 5: 10% improvement on 2023/24 baseline.</p>	<p>Year 5</p>
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## Recruitment and upskilling

Action	Outcome	Dependencies	Key personnel	Milestone targets	Target date
<p><b>HMQ:</b> Work with NCSCT to facilitate the availability of training and assessment in the medium of Welsh.</p>	<p>Increase number of advisors that are confident to deliver their specialist behavioural support and advice in Welsh</p> <p>This could be completed on a Once for Wales basis to potentially benefit other HMQ service providers also.</p>		<p>PHW Tobacco Control Team</p> <p>NCSCT</p>	<p>Year 1: engage with NCSCT to scope likely resource requirements for WL provision of training materials</p> <p>Year 3: Develop an options appraisal for resource development</p>	Year 1
<p><b>Screening &amp; HMQ:</b> Seek support from People &amp; OD to highlight and target Welsh-essential job advertisements to Welsh-speaking communities.</p>	<p>All Welsh essential roles are advertised with a strongly visible profile within Welsh-speaking media (e.g. Yr Awr Gymraeg; Mentrau Iaith).</p>		<p>Welsh Language Team; Recruitment Team; Welsh Language Group</p>	<p>Year 1: utilise social media to advertise 100% of Welsh language essential posts by ensuring all adverts for Welsh Language essential posts are sent to Welsh Language team to share through appropriate channels</p>	Year 1
<p><b>Screening &amp; HMQ:</b> Identify key staff with skills but not confidence and link with People &amp; OD to provide 1:1 support.</p>	<p>Welsh-speaking staff in key roles are empowered and confident to use the language in their work roles.</p>	<p>Capacity within P&amp;OD to offer 1:1 support to key staff</p> <p>Budget</p>	<p>Welsh Language Team; Welsh 1:1 mentors group; managers of frontline services</p>	<p>Year 1: engage with Welsh speaking clinical staff to establish their needs and best ways of providing support</p> <p>Year 3: implementation of offer as defined at the end of year 1</p>	Year 1

<p><b>Welsh Language Team:</b> Develop and cascade Welsh language support guidance on the Hwb and develop where needed.</p>	<p>Staff aware and have sight of the tools available to progress Welsh language services.</p>		<p>Welsh Language Team, Welsh Language Group</p>	<p>Year 1: Increase resources available to staff by 10% from current baseline</p>	<p>Year 1</p>
<p><b>HMQ:</b> HMQ Hub to audit current rotas and identify any regular shifts which do not have Welsh Language coverage.</p>	<p>Baseline data for Welsh Language service coverage and identification of areas for improvement.</p>			<p>Year 1: Rota staff to ensure 100% of shifts have Welsh language call-handler coverage</p> <p>Review SOP's to ensure all clients requesting Welsh Language support are assigned to an appropriate TSA</p>	<p>Year 1</p>
<p><b>HMQ:</b> Establish consistent use of Welsh Language Requirement form for all recruitment to determine if posts should be Welsh desirable or essential.</p>	<p>Increase number of clinical staff who can speak Welsh.</p>			<p>Year 1: Welsh Language recruitment form is used consistently and the number posts for which Welsh is desirable or essential is monitored</p>	<p>Year 1</p>
<p><b>Welsh Language Team:</b> Targeted Welsh language Awareness sessions for departments providing specialist behavioural or clinical services, where needed, to raise awareness of the need for Welsh services.</p>	<p>Upskill the knowledge of staff along the principles of the standards generally, the background to the clinical consultation plan, opportunities to learn Welsh and the resources available to assist these subjects.</p>	<p>Information to be cascaded throughout the organisation.</p>	<p>Welsh Language Team, staff who undertake specialist behavioural or clinical consultations</p>	<p>Year 1: share links to the core PHW resources on the Welsh Language Hwb</p> <p>Year 3: develop training package specifically for clinically facing staff</p>	<p>Year 3</p>

<p><b>Screening &amp; HMQ:</b> Work with the Welsh Language Team, the National Centre for Learning Welsh and Health Education in Wales to ensure our staff have access to NHS Wales wide learning opportunities.</p>	<p>Upskill staff along the Welsh language skills matrix to improve their Welsh.</p>	<p>Information provided</p>	<p>Welsh Language team, staff who undertake specialist behavioural or clinical consultations</p> <p>National Centre for Learning Welsh</p>	<p>Year 1: ensure that all staff have completed language skill matrix on ESR</p> <p>Year 3: provision of Welsh Language training that meets the needs of staff with clinical commitments in terms of accessibility as well as content</p>	<p>Year 3</p>
<p><b>Screening:</b> Establish network of Welsh-speaking clinical staff to enable mutual support and learning.</p>	<p>Clinical staff who speak Welsh (and who are learning) have easy access to each other for sharing ideas, information and key terminology, and for mutual support and mentoring.</p>	<p>New Teams channel and buddying system.</p> <p>Promote Ymlaen Welsh language staff network to clinical staff.</p>	<p>Welsh Language team</p>	<p>Year 1: Ymlaen Welsh language staff network promoted to all clinical staff</p> <p>Engagement with clinical staff through the Ymlaen Welsh language staff network to establish need for clinical network</p> <p>Year 3: establishment of clinical network. Feedback from members on whether it meets their needs</p>	<p>Year 3</p>
<p><b>Screening:</b> Use the workforce planning process to identify the linguistic profile of future skills gaps.</p>	<p>Linguistic needs are considered alongside clinical needs during the workforce planning process.</p>		<p>P&amp;OD: Workforce planning lead; HR Business Partners</p>	<p>Year 1: all programmes to map and record Welsh language skill levels of key clinical staff including baseline of competent and</p>	<p>Year 5</p>

<p>All programmes to map and record Welsh-language skill levels of key clinical staff.</p>	<p>Aim is to increase the number of staff who are competent and confident to deliver the clinical consultation in Welsh.</p>			<p>confident clinical staff in key roles</p> <p>Year 3: 10% increase on 2023/24 baseline in competent and confident staff in each programme.</p> <p>Year 5: 20% increase in competent and confident Welsh speakers on 2023/24 baseline in each programme.</p>	
<p><b>HMQ:</b> Use the workforce planning process to identify the linguistic profile of future skills gaps.</p> <p>Undertake an options appraisal to increase service capacity and resilience in respect of Welsh Language service provision</p>	<p>Linguistic needs are considered alongside clinical needs during the workforce planning process.</p> <p>Increase capacity of HMQ Hub to deliver the service through the medium of Welsh.</p>			<p>Year 1: all programmes to map and record Welsh language skill levels of key clinical staff including baseline of competent and confident clinical staff in key roles</p> <p>Year 5: 10% increase in competent and confident Welsh speakers on 2023/24 baseline in each programme.</p>	<p>Year 5</p>

