



Date: 16th December 2021

Russell George MS
Chair, Health and Social Care Committee

(By email only)

Dear Russell,

Thank you for the Health and Social Care Committee's correspondence, dated 23rd November 2021, requesting further information following our attendance at the evidence session of the Health and Social Care Committee on the 4th November.

As requested, we attach a written paper on behalf of both organisations, setting out our responses to the areas of additional information requested

If there is anything more you need then please get in touch.

Yours sincerely,

Alexandra Howells
Chief Executive
Health Education and Improvement Wales

Sue Evans
Chief Executive
Social Care Wales

1. We discussed with you the impact of the pandemic on clinical placements and the ability of healthcare students to gain sufficient skills in clinical practice. Where access to clinical placements may have been restricted by the pandemic, for example in respect of dentistry, do we have assurance that newly-qualified practitioners have been able to gain the skills and experience to practice safely?

We do have assurance that newly qualified practitioners have been able to gain the skills and experience to practice safely. Health Education and Improvement Wales (HEIW) has been working with key university and placement provider partners throughout the pandemic to ensure our healthcare students continue to meet the proficiencies required of their professional programmes. These requirements are overseen through robust practice supervision and assessment processes that must meet regulatory standards. HEIW has continued to undertake contract monitoring with each university delivering healthcare programmes to review timely completion dates for all commissioned programmes.

From the outset of the pandemic, HEIW set up an All-Wales Placement Reference Group comprising all University programme leads and education leads from all Health Boards in Wales. This group enabled timely intelligence on emerging academic and placement issues arising across nursing, allied health profession and healthcare science programmes. Group outcomes and issues were also reported through an internal HEIW Education and Training Cell. HEIW has been able to coproduce a wide range of organisational principles, position statements and wider learning resources through the All-Wales Placement Reference Group to support students to continue their programme journeys to the point of registration. This included university and placement providers facilitating placement learning opportunities that enabled students to achieve learning outcomes notwithstanding pandemic conditions which also included an initial student deployment period.

In collaboration with university and placement provider partners, work has been directed to maximise existing placement capacity and to develop innovative placement capacity solutions. Through contract monitoring and application of a range of quality metrics, HEIW has been assured of robust and transparent supervision and assessment of students meeting relevant professional regulation standards, in terms of enabling achievement of proficiencies and fulfilling requirements for programme hours. Students are assessed on their proficiency and professional attitudes in each placement and during academic time by allocated supervisors, educators and assessors, and this includes a requirement for confirmation of progression at set points during a programme. HEIW also funds Practice Education Facilitators who are involved in all aspects of the quality management and assurance of students' practice learning.

HEIW is assured that all nursing, midwifery, allied health profession and healthcare science students who are confirmed as having met programme requirements to enter a professional register have done so as a result of achievement of relevant professional learning outcomes confirmed at progression points throughout their programme and at final university programme award boards. Following issue of a notification to practice by the professional regulator, registrants then enter a period of supported preceptorship during the first period of their employment in order to consolidate their scope of practice and further professional development.

In respect of dentistry, we do not commission undergraduate training and are therefore not responsible for these healthcare students.

Our trainees are General Dental Council registered post graduate trainees (dental foundation, core and speciality) and are monitored closely in terms of progression through close supervision and completion of an e-portfolio which details their progress. This is monitored by both their Education Supervisor in the practice they are in, and their Training Programme Director who oversees their training. They all have formal Interim Reviews of Competence Progression mid-year and Final Reviews of Competence Progression at the end of their training where progress is formally reviewed and outcomes awarded and any necessary adjustments or remedial support is made.

The trainees were affected slightly differently depending on the context in which they were working. Dental Foundation trainees are placed in general dental practice and while they were not moved the clinical activity they would have been expected to undertake may have been impacted by restrictions to dental services, both in terms of the range of clinical procedures and also the reduction in patient throughput. Arrangements were made for the trainees to have phantom-head models in their practice placements to enable simulation to take place and not impede their training. This was supplemented by additional educational sessions and material being made available. When dental services resumed they were able to resume normal activity and progression. We were able to ensure that all Foundation Dentists satisfactorily completed their training.

Dental Core and Specialty trainees had a slightly different experience as they are placed in hospital or community dental services and their training is further on from basic clinical skills. Many were temporarily redeployed in the acute sector with the transferable skills they possess however they were able to use this work to form part of their portfolio of training and contribute towards their progression. We were able to ensure that all satisfactorily progressed or completed in their training.

2. What are your views on the role of non-medical prescribing, for example by pharmacists or allied health professionals, and what plans do you have in place to support this?

We are very supportive of the role of non-medical (independent) prescribing (IP). There are many examples where we have progressed this to date and we continue to develop this across the professions that are legally allowed to take this forward. Across the UK, discussions are ongoing about extending IP rights.

HEIW supports Health Boards and Trusts through an annual allocation of funding for the development of independent prescribers. This budget is allocated to support Health Boards and Trusts develop their independent prescriber capacity. We commission this education from 5 Higher Education establishments across Wales and work closely with the Health Boards and Trusts regarding the allocation and use of this budget.

As part of the implementation programme for the changes to the Initial Education and Training of Pharmacists (IETP), which includes Independent Prescribing, HEIW is leading on a collaborative piece of work with key stakeholders to consider how

pharmacy services and the pharmacy workforce need to transform to optimise the increasing prescribing skills of the whole workforce within a multi-disciplinary team. This is being considered across the whole integrated care pathway and will support the expected changes to the Community Pharmacy contract. The programme of work will be aligned to the themes within the workforce strategy for health and social care.

3. How will the workforce strategy or the associated implementation plans support the development of extended skills and advanced practice roles across professional groups, and ensure that health and care professionals are able to work at the ‘top of their licence’

The workforce strategy’s aim is to deliver a motivated, sustainable, competent, capable and confident workforce for Wales by 2030. All themes contribute to supporting the development of extended skills and advanced roles, but in particular the themes of education and learning (theme 5), professional leadership (theme 6), understanding the shape and subsequent workforce planning, and working seamlessly in new and different ways (theme 3) will have the greatest impact. We designed the strategy to take account of prudent healthcare principles – which is particularly important when developing new roles and extending practice so that people only do what only they can do – essentially therefore working at the ‘top of their licence.’

HEIW’s education commissioning remit supports post-graduate training for all registered healthcare professionals. As part of this we work closely with Health Boards and Trusts to understand their needs, plans and requirements with current priority areas including

- Community and primary care including GP Out of Hours and 111.
- Cancer services
- Mental health services
- Diagnostic services
- Hospital based Eye care
- Unscheduled care

In order to ensure people are able to develop advanced practice and extended practice skills, and work at top of their licence we are funding and supporting a range of initiatives and programmes across Health and Social Care in line with the ambitions set out in the Workforce Strategy. These include,

A new post qualifying framework for social workers which will be introduced in 2022, which is reflective of extensive engagement with the sector during 2021 to ensure that the framework is reflective of the current needs of the social work profession. Equally, there will be a comprehensive learning and development programme implemented in 2022, across health and social care, to meet the requirements of the new Liberty Protection Safeguards. This will involve not only “baseline” training to equip the workforce for the training, but it will contain new qualifications to support the development of increased capacity of the workforce.

The new suite of vocational qualifications implemented in September 2019 and September 2020 includes specialist pathways that allow the recognition of a wider range of competencies and provide progression particularly between level 3 and 4 and levels 4 and 5.

A scoping exercise is due to take place this financial year to understanding the current skills and capabilities of research and data analyst functions in social care with a view to developing an improved learning and development offer for those functions within social care.

We are currently developing career pathways for all of the pharmacy workforce beyond the post of registration as part of our integrated medium-term planning. We have already included the development of our existing pharmacist workforce with our IETP programme (see above) and a parallel programme of work will consider the development of the pharmacy technician workforce. The pharmacy workforce remodelling will consider how the whole pharmacy team will maximise their skills to do more for patients at all points of care.

As part of our joint work to progress a strategic workforce plan to support mental health services, HEIW commissioned a Level 7 Child/Adolescent mental health module at Bangor University, for any professional currently working with children and adolescents with mental health needs in a variety of environments which included CAMHS; School Nurses; Social Workers; Health Visitors; Occupational Therapists; Adult mental Health Nurses; Paediatric Nurses; Learning Disability practitioners; Art Therapists and Dieticians. The university delivered this programme through distance learning to ensure equality of access.

4. During the session we discussed with you the strategy theme of ‘Building a digitally ready workforce’. Please provide further details of what assessments have been made of the additional investment in training (financial and staff time) that may be required to ensure that the health and social care workforce is prepared and able to adopt new technologies and harness innovation

Work in this area is progressing in health and social care sectors in parallel, ensuring shared learning as we go forward.

Within social care, the Social Care Wales Workforce Development Programme (SCWWDP) grant has a national priority linked to the development of digital skills and infrastructure which was introduced in 2021/2022 grant year – the monitoring reports that we will receive in July 2022 will outline the investment made and the impact of this investment.

Equally we are committed in 2022 to undertaking research that better understands the shift that has been made to digital learning and development from the more traditional face to face provision that existed prior to the pandemic

Across health, formal assessment of the additional investment in training (financial and staff time) has not been completed as a stand-alone exercise. The assessment is being compiled as a result of a number of different pieces of work that are currently ongoing. These include

- Development of the digital skills capability framework for NHS staff will map the competencies of staff required to work in a digital environment and provide a self-

assessment tool to assess individual areas of competence and signpost to relevant training and education resources. If used for teams or group of staff this will be able to capture requirements above the individual level. First examples of this will be for Allied Health Professional and Healthcare scientist

- As part of the strategic objectives for 2022/23 HEIW are developing the training and education requirements of the future doctor, this will assess the changes required to training and education frameworks
- The work programme for strategic review two will identify gaps in postgraduate education and identify new courses, e.g. genomics
- The review of the health informatics apprenticeship lead by HEIW and DHCW, will provide insight into the future training needs of staff
- Feedback from business cases developed by NHS organisations where time and resources have been included to support digital transformation
- Feedback from existing programmes and new digital education programmes such as the Masters in health informatics and the new digital transformation ILA

The output of these programmes of work will inform the additional investment required in the future

5. How does the workforce strategy and associated implementation planning take adequate account of the whole workforce across health and social care, including not just frontline practitioners but also ancillary staff and managers

The workforce strategy is applicable to the whole workforce, whether they are employed through statutory or private providers, voluntary providers, or are volunteers or carers. Our leadership theme is focussed on leadership at all levels, creating the right conditions and culture for people to thrive, supported by excellent working practices and opportunities for education and career development. There is an increasing and compelling body of evidence linking wellbeing, capability and engagement of the health and social care workforce to improved outcomes for the people we serve.

The SCWWDP grant is all sector regardless of role and our revised workforce data collection processes capture the profile of this part of the workforce so we can better understand it. Equally there is a range of management and leadership training available to those involved in managing social work teams as well as heads of service and senior leaders within Local Authorities.

Consideration is currently being given to providing learning and development opportunities at a national level through the national commissioning board for commissioning and contracting staff in social care services.

A range of provision is available to social care managers, both in terms of their own development needs but in support to their teams as well. A suite of vocational qualifications including specialist pathways exists at Level and 4 for managers, with a main audience of managers of social care settings and services.

We are both progressing the development of staff governance frameworks, during this first implementation phase, and wellbeing frameworks, which will apply to all staff. There is also a specific action on volunteers and carers, due towards end of the first

phase, that will be developed with partners through our implementation proposals – event in spring next year, co-design next phase of implementation.

As with our engagement phase of the strategy development, where we reached many staff from all different areas, our implementation plans will be developed with stakeholders which include staff and managers, to ensure appropriate engagement, coproduction, and representation. Key stakeholders also include our trade union colleagues with whom we have strong relationships.

6. Evidence from the General Medical Council highlights that the exam pass rate for BAME trainees is 15 per cent lower than for white trainees across all medical specialties in Wales. Please outline what role HEIW and SCW have in tackling barriers experienced by students from ethnic minority backgrounds, and in particular what action is being taken to understand and address the attainment gap.

HEIW is committed to encouraging and supporting diversity within the healthcare workforce and also promoting the widening access agenda to ensure that those we train are representative of the communities they serve. The diversity of UK graduates in regard to ethnicity and other protected characteristics continues to increase, which is to be welcomed and supported. Between 2018 and 2020, HEIW undertook significant research, data analysis and engagement with key stakeholders, including Students, Service Users, Health Boards and Trusts and Universities to ensure the future structuring of education across Wales and the content of health professional education and training would support diversity for all individuals with protected characteristics in line with equality law.

As a result, HEIW's new health professional contracts, which commence in 2022, embed measures that promote the recruitment and ongoing support of students from BAME backgrounds. Current HEIW data offers assurance that our partner HEIs are recruiting from a wide range of ethnic groups. However, to further support this HEIs will be required to implement a contextual admissions policy contained within the new contract, whereby programme entry tariffs will be lowered for students that hold a protected characteristic and are underrepresented in education. The new contracts will require our partners universities to provide specialist advice and support for students regarding diversity, inclusion and practising a religion; and also allow for the gathering HEIW of data and engagement with students which will allow for the identification of any potential variations in experience, perceptions, or attainment for different groups with protected characteristics.

The association between ethnicity and progression in postgraduate medical training has received particular attention in the UK over the last few years. There has been a focus on understanding and addressing the differential attainment gap which has been identified between graduates of IMG, UK BME and UK white backgrounds. The former two groups are more likely to experience issues impacting their progression. HEIW has established a programme of work to increase understanding of such differences and introduce a range of initiatives to address this; this includes ensuring that our trainers are appropriately trained and skilled in understanding cultural diversity and unconscious bias to better support these individuals. This work is essential as recruiting international medical graduates (IMGs) has been and continues to be an

important part of ensuring the sustainability of the medical workforce in Wales. Despite plans to increase UK and Wales medical student numbers, it is likely that this reliance on IMGs will continue to be a crucial component of our workforce plans and so requires particular attention. HEIW is also committed to fully understanding barriers and challenges faced by trainees with other protected characteristics, the impact this has on their training experience and where necessary to introduce measures to address any identified issues so that diversity, equality and fairness are fundamental to all aspects of training in Wales.

7. During the session you mentioned that there were gaps in the equality and diversity monitoring data that you hold on the health and social care workforce, for example in respect of ethnic background and disability status. You acknowledged that there was a need to “push on completion of data so that we’ve got more accurate numbers”. Please outline what actions will be taken to improve the completeness and robustness of this data.

For HB/Trust staff, the ESR data shows that currently 88% have completed the relevant ethnicity fields. 5% have ‘not stated’ (an active choice not to state) and 7% is currently unknown. In relation to disability, 3% of staff have stated that they have a disability, 4% have not disclosed, 70% have indicated no disability and 23% have not completed the field. While this is not a mandatory field in ESR, HBs and Trusts encourage their staff to complete the information to help improve planning and staff experience.

For primary care, the National Workforce Reporting System Wales currently captures 3 protected characteristics, Age (96.8% complete), Race (Ethnicity) (85% Complete), Sex – Gender (96% complete).

These are mandatory elements completed by GP Practices.

NWSSP engages with General Practice Managers focusing on specific demographics to maintain data quality. Anonymised equality data analysis is available to healthcare leads to inform discussions and planning at a National, Health Board and Cluster level.

We can draw a certain amount of data from the register in social care but this needs complementing with data from the wider workforce.

The new workforce data collection process has improved the data sets to ensure consistency with other national metrics but this is an area that we recognise needs continual strengthening and improvement including being clear in our communications as to the reasons why this data is important and how it influences and impacts on policy development and priority setting.

In terms of professional pathways, there has been an increase in the % of black, Asian and ethnic minority students pursuing the degree in social work (6.4% in 2017/18 to 8.3% in 20/21.)

8. Please outline how the strategy, and associated implementation plans, recognise and will address the lack of diversity in some areas, for example social work, especially in senior management positions.

The work of the WeCare Wales is consistently focusing on the diversity of workforce and the need to improve areas of under represented groups e.g. males, Welsh speakers, people from a Black, Asian, ethnic minority. Improved data collection will help profile accurate pictures, nationally, regionally and locally so that greater focus can be put on relevant and specific campaigns.

The review of the social work qualifying framework will provide data and insights into the current social work qualifying provision in terms of levels of attrition and attainment across various metrics which will lead to a series of improvement recommendations.

Our compassionate Leadership strategy embodies inclusion through its core. This is enhanced by the Compassionate Leadership Principles for Health and Care in Wales, developed through engagement and consultation and act as a route map guiding the creation of compassionate and inclusive cultures across health and care in Wales. One of the seven Principles includes as leaders across health and care in Wales we will *'Improve equality, inclusion and diversity, consciously removing barriers and boundaries'*. To embed this principle a series of resources are being developed including master classes, learning modules, case studies, podcasts that will form part of a resource pack that will be provided to organisations to embed into leadership and management training as well as a means of embedding into systematic processes such as recruitment and appraisal.

To inject pace and highlight the importance of this work, HEIW have established a strategic national Talent Board Chaired by the Chief Executive of NHS Wales and Director General for Health and Social Services. This Board is supported by a strategic operational group with subgroups developed to progress work at pace around:

- Inclusion and Diversity
- Talent and Succession Pipeline Priorities ('At Risk' positions)
- Succession Strategy Review and update
- Access and assessment of Talent

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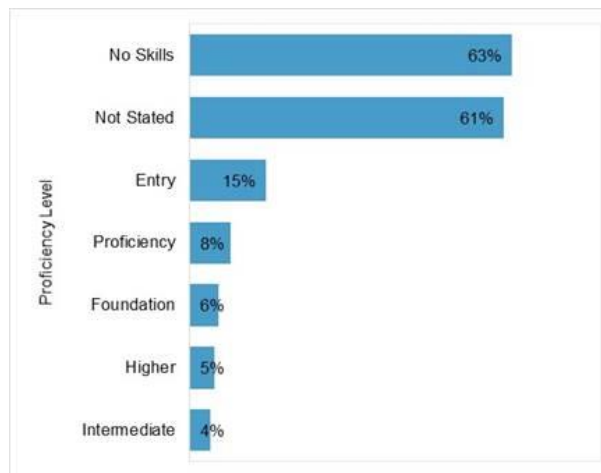
The review of the social work qualifying framework will provide data and insights into the current social work qualifying provision in terms of levels of attrition and attainment across various metrics which will lead to a series of improvement recommendations.

9. What processes are in place across health and care services to identify where Welsh language skills gaps are, and ensure that this information is systematically available to HEIW and SCW?

The NHS Electronic staff record currently has a field to identify Welsh Language competency. This is a self-assessed field based on the following categories.

Welsh Language Skill Level	Definition
No Skills / Dim Sgiliau	I cannot understand or speak any Welsh
Entry/ Mynediad	I can: Pronounce Welsh words, people's names, place names etc. Greet and understand a greeting Understand and use basic everyday words and phrases e.g. thank you, please, excuse me, may I speak to...etc.
Foundation / Sylfaen	I can: Understand the gist of Welsh conversations in work Understand, ask and respond to simple job related requests, questions and instructions Express opinions in a limited way as long as the topic is familiar
Intermediate / Canolradd	I can: Understand much of what is said in the workplace Keep up a simple conversation or answer simple questions on a work related topic but may need to revert to English to discuss complex or technical issues Offer advice on simple job-related matters
Higher / Uwch	I can: Keep up an extended casual work related conversation Give a presentation with a good degree of fluency but may need to revert to English to answer unpredictable questions or explain complex points.
Proficiency / Hyfedredd	I can: Advise on/talk about routine, non-routine, complex, contentious or sensitive issues related to own experiences Give a presentation/demonstration and deal confidently with hostile or unpredictable questions

To date 39% of all staff have completed this field with the results below. This will form part of the actions within the strategy's theme 7 to improve the quality of data and systems to enhance our workforce intelligence, however responsibility for this sits with statutory delivery bodies.



Improved workforce data collection will improve the understanding of the Welsh capability of the social care workforce.

Social Care Wales have been actively involved in a range of projects/initiatives with a couple of examples shown below.

'Welsh Language Skills in your workforce – using them effectively' has been designed to support providers to deliver the requirements of More than Just Words. The resources was produced as a direct response to requests from frontline workers in health and social care services. The resource enable employers to identify what Welsh language skills (1-5 ALTE) that already exist within their workforce. Sometimes these are hidden through lack of confidence or because no value has been placed on them. This pack aims to help make effective use of existing skills as one would any other workplace skill, for the benefit and well-being of people who use services, and is an integral part of workforce planning.

'Language, dignity and Care' has been developed as a 'train the trainer' resource to support language awareness training for people working in health and social care, and for people who are in further or higher education. The resource is equipped to help the trainer presenting to teach about language awareness whilst encouraging discussions on how best to work bilingually, educate and empower learners and workers on how to offer a valuable service to service users ensuring that language is always a central consideration.

Social Care Wales and partners have delivered a series of online, bitesize session on Welsh language and dementia. The sessions were open to anyone providing care to people living with dementia and in particular those who felt less confident to speak any Welsh with people they were delivering services to. There were 8 topics, lasting around half an hour where delegates could choose to attend as many of the sessions as they liked. At each session there was a speaker, signposting to resources and a chance to ask questions. A further drop in session was also arranged for delegates to come back together with other attendees to share anything they may have done differently as a result of attending and work through any barriers faced, or solutions found.

Whilst there are undoubtedly significant gaps in the data available, getting comprehensive, up to the minute data is just part of the solution. Staff also take part in awareness/ induction sessions on the Welsh language so that they can appreciate the importance of Welsh, they know how to make the active offer to patients and they know where to turn immediately for help if the need for a Welsh language service is identified.

Both HEIW and Social Care Wales are members of the Mwy na geiriau task and finish group and have action plans aligned to the findings of the evaluation of the Welsh Government overarching plan

10. During the session, we discussed with you the availability of bilingual and Welsh medium nursing training and social work NVQs, including placements. Please provide details of the number of such training places and their distribution across Wales. We would also welcome information on the uptake of these training places, and how the level of demand for Welsh medium/bilingual training places is assessed.

We do not specifically commission bi-lingual places for the Nursing, Allied Healthcare Professions and Healthcare Science profession. We have taken a very different approach. The HEIs are required to support ALL students to either have access to bi lingual provision or provide opportunity for students to enhance their Welsh language skills in practice.

From 2022 new education contracts have set clear expectations of the education provider in relation to the Welsh language support that all students can expect to see. This includes accepting written work as part of assessment or examination in Welsh, assessment of skills at beginning or course, providing opportunities to learn Welsh or develop existing skills free of charge. Services such as occupational health,

personal tutor and provision of policy information and support services through the medium of Welsh.

In the annual reporting, we will be asking each course in each university to make submissions on numbers of students sitting the Induction programme, and detailed statistics on the language levels (ALTE 1-5) for each course - will give us fairly accurate data on the language skills of each individual cohort. The reporting mechanism in turn involves the Coleg Cymraeg Cenedlaethol, and so any courses where a significant amount of Welsh speakers are represented will be flagged up to them, and result in proactive opportunities for the Coleg Cymraeg and the Welsh language officers within HEI's to have meaningful conversations on the growth of Welsh language provision based on robust, annual data. This will allow them to have meaningful conversations with the HEI's about establishing more Welsh language teaching provision. This in turn will feed in to the HEI's recruitment plans, and will be supported by our attraction work for example through Tregyrfa, our Welsh language digital careers platform.

A large proportion (approximately 90%) of Nursing and Midwifery teaching in Bangor is available in Welsh, and Aberystwyth are suggesting that at least 40% of the Nursing course there can be taught in Welsh

There is some provision across Cardiff Metropolitan and Glyndwr universities for sharing online teaching in Welsh as well, with a pilot having taken place last year, according to the Tender evaluation questionnaire. The questions we asked at the Tender Evaluation stage were more general, focussing on ideas on how HEI's intended to grow provision over coming years – more specific data can be gathered (on an ongoing basis, both qualitatively and quantitatively) when the reporting cycles start taking place.

Our recent review of the Social Care Workforce Development recognised that there is not sufficient training and learning resources available. We have a commitment to Mwy na geiriau and the active offer in our plans. We recognise that there is an opportunity for medium term implementation to take account of the work of the task and finish group looking at Mwy na geiriau evaluation findings.

In terms of professional pathways, in 2019/2020, 275 social work students undertook learning of 5 credits or more through the Welsh Language. (This figures included students who undertook a Welsh Language awareness eLearning module) and 146 took learning of 40 credits or more.

11. Some stakeholders have raised concerns that the funding of care does not take into account the cost of providing bilingual or Welsh language services, including increasing Welsh language skills in the workforce. What are your views on how this should be addressed?

To support ongoing, sustainable approaches we need to have a clear strategic intent to support the sector to upskill in their Welsh Language skills, so that it becomes part of an overall learning and development offer on a consistent basis. This will require both funding and the creation of capacity in terms of the workforce having time to improve their language skills, through courses, access to online resources, peer and group support to practice language skills, etc. It also requires role modelling and visible leadership at all levels, to continually embed the importance of language through every day working lives.

Additional Information

Data

In your evidence paper you refer to a new data collection system for social care that gathers data from statutory, private and voluntary providers. Please outline how the system will take account of the contribution of unpaid carers.

The new data collection system is only aimed at the paid workforce but Social Care Wales is a member of the Carers Ministerial Advisory Group and each of its sub group and is actively contributing the overall carers strategy in line with our remit and areas of responsibility.

Other issues

During the session, you agreed to share the following with the Committee:

A briefing paper on the We Care recruitment campaign is attached to the email .

Details of the national resources made available through the strategy to support health and social care staff wellbeing

The link to these resources is <https://socialcare.wales/service-improvement/health-and-well-being-resources-to-support-you-during-the-coronavirus-covid-19-pandemic> and at present these resources are contained within our Social Care Wales generic website but plans are underway to develop a dedicated online portal for health and well being which will be available in 2022.



Gofalwn
.cymru

WeCare
.wales

WeCare Wales

ADSS Cymru
update

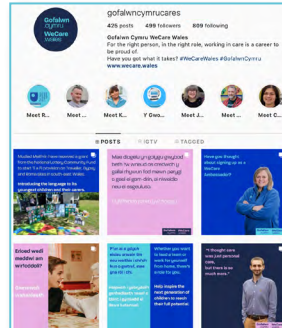
What is WeCare Wales?

WeCare Wales is the national attraction, recruitment and retention programme for social care and early years. It aims to raise the profile of the sectors and support recruitment and retention in the care workforce. Launched in March 2019 work to date has focussed on a range of key themes including:

- raising the profile of the sectors
- diversity in the workforce, including gender and the Welsh language
- focussed campaigns for Social Workers, Home Care and Nurses in social care settings
- campaigns focussed on younger audiences
- supporting entry into the sector, for example through apprenticeship routes.

Promoting WeCare Wales

- TV
- Newspapers
- Online
- Out of home
- Social media.



Statistics:

More than **30,000** engagements on social media since launch

Broadcast on Sky, ITV Wales, S4C, All 4

Public perception survey:

Adults – Improving the quality of life up to **28%** (2020) from **3%** (2018)

Children – Positive impact of child development **47%** (2020) from **8%** (2018)

Stories from practitioners

More than 50 videos of care professionals have been created to highlight the value of working in care. Case studies of Social Workers, Home Care Workers, Nursery Managers, Childminders and many more showcase the wide range of opportunities available in care.

Please contact us if you know someone who has a great story to share.

Real stories from real people
Find out if you have what it takes from our case studies below.

Childcare. Helping build your child's future and yours.
A big thank you to Sam and Hollie's Daycare Nursery for helping us create this special film.
[Learn more](#)

Jane Rogers Head of Children's Services
Jane from Monmouthshire County Council talks about the values and skills needed to work in social care.
[Learn more](#)

Menna Jones Co-owner of Ffalabalam Nursery
A big thank you to Ffalabalam Nursery for helping us create this special film.
[Learn more](#)

Abacus Day Nursery Parents and carers
We asked parents and carers for their honest thoughts on sending their children back to childcare settings during the pandemic. Although things are different, the staff at Abacus Day Nursery have done all they can to continue providing a safe space for children to learn and have fun.
[Learn more](#)

Real stories from real people
Find out if you have what it takes from our case studies below.

WeCare Wales TV Advert
WeCare Wales launches its new job portal with a TV advert at the forefront of the campaign. A big thank you to Karima and Pinesfield Health and Social Care for helping us create this special film. For more information on working in social care, visit [www.WeCare.wales/jobs](#).
[Learn more](#)

Nel Owen Home Care Support Worker
Nel worked on a farm for 15 years before changing career and becoming a Home Care Support Worker, caring for people in her community.
[Learn more](#)

Hannah Pearson Care Home Activities Co-ordinator
Due to the coronavirus pandemic Hannah was made redundant from her previous role as a hotel manager. Working in the care sector felt important to her and it is the first job she has had that utilises her degree in fine art.
[Learn more](#)

Sara Davies Assistant Director at Pobl Group
Sara sought after a career change that gave back to the community. She started from the bottom and has worked her way up, to now overseeing the supported living environments and community services.
[Learn more](#)

Statistics:

2.2+ million video views

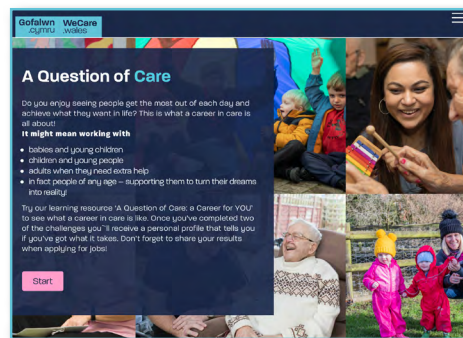
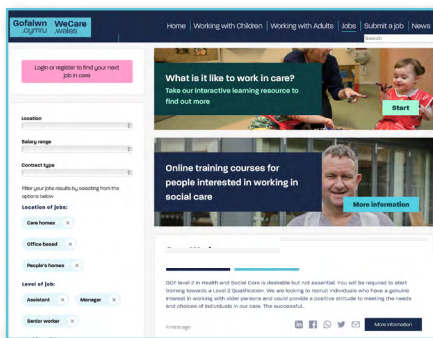
Supporting recruitment – WeCare Wales Jobs Portal

The WeCare Wales Jobs Portal is a free online resource advertising all jobs in care. Through a simple search function, jobseekers can find care vacancies in their area.

Jobseekers are encouraged to try the 'A Question of Care: a Career for YOU' quiz. This is a values-based online learning resource where people can experience what it's like working in care. Once two of the challenges have been completed, a personalised report is produced on how well the individuals values are suited to working in care. Employers can use resource as part of a values-based recruitment exercise.

The Jobs Portal has been widely promoted through TV adverts, in print, online and through social media.

If you have a vacancy and would like it to appear free of charge on the portal, visit the [WeCare Wales website](http://www.wecare.wales).



Introduction to Social Care Training

Piloted across South West Wales, this training programme helps jobseekers gain an insight into working in care and provides foundational learning to help them as they begin their career in care. This training programme is now available across Wales.

Statistics:

More than **3,000**
jobs posted this year

96,000 visitors

Making connections

WeCare Wales have worked with DWP and Job Centre Plus to run sessions for over 500 work coaches. Resources have been created to help them better understand the care sectors and help jobseekers make an informed choice in beginning a career in care.

Working with organisations who are supporting redeployment from industries that are making redundancies.

Career Cards have been created and shared with all comprehensive schools in Wales, supported by Careers Wales, the cards help students gain an insight into the variety of roles and career paths available in care.



Working with the seven regions of Wales

Funded by Social Care Wales, there are WeCare Wales Regional Career Connectors in each of the seven regions of Wales. These roles are key to shape and inform the national programme of work through highlighting the pressures, challenges and learnings from each region. They develop relationships with schools, colleges and employability programmes in their area, ensuring the WeCare Wales brand is used to provide national consistency but with local and regional flexibility.

Statistics:	£350,000 investment per year into the regional roles	1,200 Career Card packs shared
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How to access resources and support

The WeCare Wales website has information about working with children and adults in Wales. People can learn about the roles available and watch videos of real people's experiences working in these roles.

The website also includes a stakeholder toolkit with ready to use materials.

To access the stakeholder toolkit go to www.wecare.wales/stakeholder-toolkit

Username: Stakeholders

Password: Toolkit_WeCare!

Use WeCare Wales materials on your website to help showcase the world of care and guide people to the wealth of information available on the [WeCare Wales website](http://www.wecare.wales).



Statistics:

More than **300,000** website visitors

WeCare Wales Awards

WeCare Wales Children Instagram competition

Launched on Instagram this September, members of the public have been asked to nominate a childcare team, play provider or childminder that they feel deserves to be recognised for their efforts.

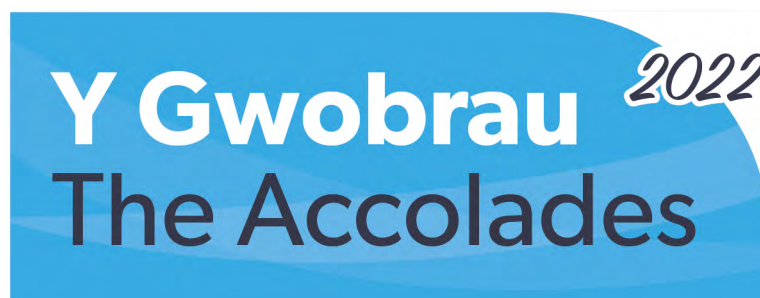
To nominate a provider, they need to:

- post an image of their nominee on Instagram
- share why they're nominating them
- tag @gofalwncymrucare using the competition hashtags #PlantGofalwn and #WeCareChildren.

A panel of judges will then whittle them down to six finalists and the winner will be chosen by a public vote during WeCare Wales Week from 11 to 17 October 2021.



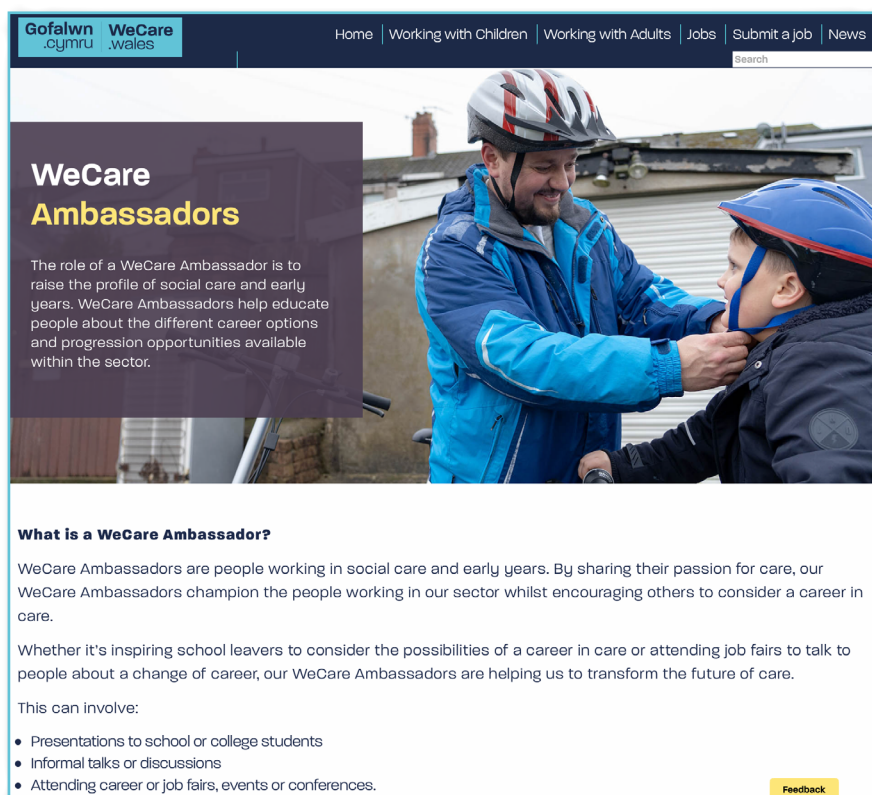
The WeCare Wales Accolades Award recognises the critical work carried out by individuals working in care. For more information visit [Social Care Wales's website](#).



WeCare Ambassadors

The WeCare Ambassadors bring to life working in care for pupils in schools, colleges, and career events across Wales. Individuals who are currently working in the sector share their story about what working in care is really like.

If you know anyone who would like to become a WeCare Ambassador, visit www.wecare.wales/ambassadors



Gofalwn .cymru **WeCare .wales** Home | Working with Children | Working with Adults | Jobs | Submit a job | News

Search

WeCare Ambassadors

The role of a WeCare Ambassador is to raise the profile of social care and early years. WeCare Ambassadors help educate people about the different career options and progression opportunities available within the sector.

What is a WeCare Ambassador?

WeCare Ambassadors are people working in social care and early years. By sharing their passion for care, our WeCare Ambassadors champion the people working in our sector whilst encouraging others to consider a career in care.

Whether it's inspiring school leavers to consider the possibilities of a career in care or attending job fairs to talk to people about a change of career, our WeCare Ambassadors are helping us to transform the future of care.

This can involve:

- Presentations to school or college students
- Informal talks or discussions
- Attending career or job fairs, events or conferences.

Feedback

WeCare Wales Week

This year's WeCare Wales Week will be held between 11-17 October 2021.

The week will focus on supporting recruitment into care through promoting the WeCare Wales Jobs Portal and new Employers Portal, a careers event for jobseekers, and highlight the excellent work that goes on with children across Wales through the WeCare Children Instagram competition.

