

POLICY FOR WELSH LANGUAGE AND PRIMARY CARE

Introduction

A comprehensive view should be taken of how primary care services in Wales should be developed to meet the needs of its bilingual population and should therefore be responsive to the needs of the Welsh speaker regardless of the number of Welsh speakers living in the local area.

The Health Board is required by statute to comply with the standards regime under the Welsh Language (Wales) Measure 2011 and has legislative requirements under the overarching principles of the Measure to ensure that:

- In Wales, the Welsh language should not be treated no less favourably than the English language and;
- Persons in Wales should be able to live their lives through the medium of Welsh should they choose to do so.

The Health Board recognises that many people communicate their care needs most effectively in Welsh. For many Welsh speakers being able to use your own language has to be seen as a core component of care, not an optional extra. Effective verbal communication between the health professional and the patient is a core clinical function, with research showing that effective communication is an integral part of the quality and safety of health care.

Communicating in Welsh improves the quality and safety of care for Welsh speakers and a failure in communication may pose risks for the patient's safety and welfare. With this in mind, the Health Board is committed to adopting a positive and proactive approach to delivering high quality services that are centred on users' needs - ensuring that the linguistic needs of Welsh speaking individuals are central to their care.

Objectives

The objectives of this policy are:

 To establish a clear impact assessment procedure to inform decision making in relation to primary care services and its impact on opportunities for persons to use the Welsh language and treating Welsh and English on the basis of equity, according to the principles established in the Welsh Language (Wales) Measure 2011.

• To increase the offer and improve the quality of Welsh language primary care services, within established NHS resources for the benefit of patients.

Operational Date		Expiry Date
TBC following approval		Formal – three years
		Informal – one year
Scope		
This policy applies to all staff on all location	s across the Health Board.	
Equality Impact Assessment	An Equality Impact Assessment has been carried out and attached in Appendix 1.	
Distribution	All primary care staff via t Director of Primary Care	he
To be read by	All primary care staff	
Documents to read alongside this Policy	Welsh Language Standard 2018 Cwm Taf Morgannwg Univ Health Board Welsh Language Standards Compliance No Follow on Strategic Frame Welsh Language Services Social Services and Social 2016-2019 Welsh Government More t Words Action Plan 2019-2 The Well-Being of Future Generations (Wales) Act 2	ersity lage tice 2018 work for in Health, Care than Just

	My Language, My Health Report 2014
Approved by	Julie Denley
Accountable Executive / Lead Director	Julie Denley
(responsible for formal review every three years)	
Author / Management Lead	Welsh Language Services Manager
(carries out informal review annually)	
Freedom of Information Status	Open

If the review date of this policy has passed, please ensure that the version you are using is the most up to date either by contacting the document author or the Corporate Services Department.

To avoid use of out of date policies please do not print and then store hard copy of this document.

Out of date policies cannot be relied upon.

Amendment Record

If a change has been made to the document, the changes must be noted and circulated to the appropriate colleagues.

Detail of change	Why change made?	Page number	Date of change	Version	Name of Policy Author

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1. Purpose

The Health Board have a responsibility under the Welsh Language (Wales) Measure 2011 and Welsh Language Standards to ensure equity of opportunity for persons to use Welsh language within our services and to treat the Welsh and English languages, on the basis of parity.

The policy outlines clear expectations around the application of the Welsh Language Impact Assessment within Primary Care and ensures that due process is followed, ensuring equity in opportunities for persons to use the Welsh language and ensuring services are treating the Welsh language no less favourably that the English language.

2. Policy Statement

This policy has been developed to mitigate against any potential negative effects a decision made in relation to providing a primary care service may have on:

- 1) Opportunities for persons to use the Welsh language, and
- 2) Treating the Welsh language no less favourably that the English language

Additionally this policy has been developed to assist the health board to consider how decisions made in relation to primary care services can be taken so that they would have positive effects, or increased positive effects on the above.

We also have a statutory obligation to fully consider the effects of our decisions in relation to services on the Welsh Language. This means that any such decision making process should consider how our decision affects the language and those who speak it. As a general rule, if your decision has the potential to impact on people, it will impact in some way on Welsh speakers and therefore on the Welsh language. Matters relating to the Welsh language are relevant across policy fields and we will reflect linguistic considerations when we develop, implement and oversee the delivery of policies and services, by ourselves and others.

3. Principles

This policy has been developed on the values enshrined in the More than Just Words Framework, that all users should be treated with dignity and respect and should receive accurate assessments and appropriate care,

and as such the Health Board are committed to mainstreaming Welsh language services into all aspects of service planning and delivery.

4. Scope

The Strategy will apply to all primary care services, including any joint schemes with other Clinical Boards or partner agencies.

4.1 Definition

Within the Health Board current primary care services include:

- Primary Care Contractor Services (see section 4.2)
- Urgent Primary Care Out of Hours
- Cardiff Health Access Practice asylum seeker service
- Cardiff Health Access Practice Safe Haven service
- HMP Cardiff healthcare provision

Other services may deliver healthcare which can also be provided via General Medical Services, such as the Department of Sexual Health providing contraceptive services directly. These are classed as distinct services although some aspects of their provision overlap.

4.2 Primary Care Contractors

Primary Care Contractors are independent, self-employed contractors and are not subject to the Welsh Language Standards. They are subject to the National Health Service (Welsh Language in Primary Care Services) (Miscellaneous Amendments) (Wales) Regulations 2019.

As such this policy will not apply to decisions made within the relevant Primary Care Contractor contracts or frameworks, but will apply to any decisions made by the Health Board regarding services which are delivered within Primary Care Contractor settings outside of the relevant contract or framework. This may include but is not limited to: Primary Care Cluster initiatives; Pacesetter schemes; seasonal schemes such as winter initiatives, UHB directed and funded schemes

5. Legislative and NHS Requirements

5.1 Freedom of Information Act 2000

This policy is open and published on the Cwm Taf Morgannwg University Health Board website

5.2 Equality Impact Assessment

The attached Equality Impact Assessment Tool must be used to assess any potential negative outcomes and decreased negative effects a decision made in relation to providing a primary care service may have on opportunities for persons to use the Welsh language, and treating the Welsh language no less favourably that the English language and to consider how the decision can be taken or implemented so that it would have positive effects, or increased positive effects on opportunities for persons to use the Welsh language, and treating the Welsh language no less favourably than the English language.

5.3 Welsh Language Standards (The Standards)

The Standards place duties on organisations in Wales to deliver services through the medium of Welsh, consider the language when making policies, encourage more Welsh language use in the workplace, promote the language and keep records of how they are performing their duties.

Standard 78 and 78A are relevant to this policy. Detailed information about these can be found here.

5.4 More than Just Words Action Plan 2019-2020 - Delivering the Active Offer

The Active Offer continues to be a core element of the new Action plan. It is important that staff offer Welsh language services to patients, rather than expect patients to have to ask for them. Information and guidance can be found here.

5.5 The Well-Being of Future Generations (Wales) Act 2015

The Act states that the Welsh language should be given due consideration as part of setting and delivering well-being objectives reflecting its official status in Wales and the national well-being goal of "a thriving Welsh language". Where specific outcomes are identified as priorities e.g. promoting or protecting the language, or ensuring the adequate bilingual provision of services that meets local need, these should considered in the setting of well-being objectives. Further information can be found here.

6. Procedure

In order to comply with the Welsh Language Standard to which this policy refers, the health board must publish a policy which takes into consideration the needs of the Welsh speaking population that primary

care serves. A Welsh language impact assessment must be completed in all planning and decision making to ensure the following points are considered:

- (a) What effects, if any (and whether positive or negative), the decision would have on
 - (i) opportunities for persons to use the Welsh language, and
 - (ii) treating the Welsh language no less favourably than the English language;
- (b) How that decision could be taken or implemented so that it would have positive effects, or increased positive effects, on
 - (i) opportunities for persons to use the Welsh language, and
 - (ii) treating the Welsh language no less favourably than the English language;
- (c) how the decision could be taken or implemented so that it would not have adverse effects, or so that it would have decreased adverse effects on
 - (i) opportunities for persons to use the Welsh language, and
 - (ii) treating the Welsh language no less favourably than the English language.

Welsh language impact assessment tool

The attached Welsh Language Impact Assessment Tool must be used to assess any potential negative outcomes and decreased negative effects a decision made in relation to providing a primary care service may have on opportunities for persons to use the Welsh language, and treating the Welsh language no less favourably that the English language and to consider how the decision can be taken or implemented so that it would have positive effects, or increased positive effects on opportunities for persons to use the Welsh language, and treating the Welsh language no less favourably than the English language.

7. Training

There are no specific training needs for the implementation of the policy. Potential training issues could be identified as part of the implementation of the policy which will be addressed with the Welsh Language Unit should they arise.

8. Review, Monitoring and Audit Arrangements

The policy will be reviewed after 3 years, however a further review in year 5 is required satisfy Welsh Language Standard 78A.

8.1 Summary of approval process

This policy will follow the appropriate process for all other primary care policies.

8.2 Operational date

To be confirmed following approval.

8.3 Review of policies and procedures

This policy will be reviewed by a working group consisting of staff from the Welsh language departments and primary care in the following health boards:

Aneurin Bevan University Health Board

Cardiff and Vale University Health Board

Cwm Taf Morgannwg University Health Board

The policy will also be reviewed by the Directors of Primary Care on an all Wales basis.

8.4 Audit

A formal audit tool is not included in this policy, as it is expected that on the expiry of 5 years after publishing the policy in accordance with Standard 78A (whether or not revisions have been made to this policy) and on the expiry of each subsequent period of 5 years you must –

- (a) Assess to what extent the Health Board has complied with the policy; and
- (b) Publish that assessment on the Health Board's website within 6 months of the end of the period.

9. Managerial Responsibilities

9.1 Responsibility

Senior managers responsible for services delivering primary health care to patients must take overall responsibility for implementing and monitoring

this policy. They must also ensure that all of their employees are aware of their responsibilities.

9.2 Consultation process

This policy was written in consultation with the Welsh language and primary care staff from Aneurin Bevan and Cardiff and Vale University Health Boards.

9.3 Accountability

Although the Director of Workforce and Organisational Development is accountable for the Welsh Language Standards in the Health Board, the Director of Primary Care will be accountable for this policy.

10. Retention / Archiving

This policy will be published on the Cwm Taf Morgannwg University Health Board website.

11. Non Conformance

The Director of Workforce and Organisational Development is ultimately responsible for the Welsh language in the Health Board. All non-compliance will be reported and acted upon in accordance with disciplinary procedures and escalated to the Quality, Safety and Risk Committee and Executive Board.

12. Equality Impact Assessment Statement

See Appendix 1.

13. Privacy Impact Assessment Statement

This policy has been passed through the screening questions in Appendix A of the Cwm Taf Morgannwg Privacy Impact Assessment Policy. No further requirement for Privacy Impact Assessment was identified.

14. References

Welsh Language Standards No 7 2018

<u>Cwm Taf Morgannwg University Health Board Welsh Language Standards</u> <u>Compliance Notice 2018</u>

Follow on Strategic Framework for Welsh Language Services in Health, Social Services and Social Care 2016-2019

Welsh Government More than Just Words Action Plan 2019-2020



Appendix 1: Equality Impact Assessment - Policies

Section 1: Preparation

This section must be completed at the beginning of a policy review. For advice on its completion please contact the Equality Team on 01443 744800. For examples of completed EIAs please see the Equality site under Useful Staff Information on Sharepoint.

Section 1 - Preparation			
	Title of Policy - what are you equality		
	impact assessing?	POLICY FOR WELSH LANGUAGE AND	
1.	Please state whether it is a new or	PRIMARY CARE	
	existing policy?		
2.	Policy Aims and Brief Description - what are its aims? Give a brief description of the Policy (The What, Why and How?)	This Policy is required by the Welsh Language Standards and establishes the need for decisions in relation to providing a Primary Care service to be assessed in for their impact on 1) opportunities to use the Welsh Language and 2) not treating the Welsh language less favourably than English.	
3.	Who Owns/Defines the Policy? - who is responsible for the Policy/work?	This Policy was developed by the Welsh Language team in consultation with colleagues from Primary Care and with other Health Boards (Aneurin Bevan UHB and Cardiff & Vale UHB).	
	Who is Involved in undertaking this EqIA? - who are the key contributors and what are their roles in the process?	This EIA was completed by the Equality & Welsh Language Officer, deputising for the Welsh Language Services Manager. The internal consultees were the same as for the original policy.	
4.	Please note this should be completed by the author but the views of other team members, service users etc should be sought.	Public consultation was not deemed necessary because the policy is relatively limited in scope and because it is necessary to formulate the policy in order to comply with Welsh Language Standard 78.	

Section 1 - Preparation			
5.	Other Policies - Describe where this Policy/work fits in a wider context. Is it related to any other policies/activities that could be included in this EqIA? Is it relevant to the Integrated Medium Term Plan (IMTP)	The purpose of the policy is to ensure the Health Board is compliant with Welsh Language Standard 78. The IMPT recognises that "The Health Board is committed to improving and promoting bilingual service provision and recognises the positive impact this has upon our Welsh speaking service users". Complying with the standards is itself part of the IMTP.	
7.	What might help/hinder the success of the policy? These could be internal or external factors. E.g. training, awareness raising.	A failure of staff involved in planning to take the policy into consideration.	
8.	Is the policy relevant to "eliminating discrimination and eliminating harassment?"	The policy does not directly relate to discrimination or harassment based on a protect characteristic, although there is reason to suspect that being a Welsh speakers with particular protected characteristics might increase an individual's vulnerability to indirect discrimination. These individuals would therefore be expected to benefit from the policy (see individual sections below).	
9.	Is the policy relevant to "promoting equality of opportunity?"	The policy does not directly relate to equality of opportunity based on a protect characteristic, although there is reason to suspect that Welsh speakers with particular protected characteristics might be particularly vulnerable to indirect discrimination and thus benefit from the policy (see individual sections below). The language of the Welsh language standards is inclusive, based around the principle that Welsh not be treated less favourably than English.	

Section 1 - Preparation			
		They therefore promote the equality of opportunity for speakers of Welsh, enshrining their right to receive services in Welsh.	
10.	Is the policy relevant to "promoting good relationships and positive attitudes?"	The language of the Welsh language standards is inclusive, based around the principle that Welsh not be treated less favourably than English. They therefore promote the equality of opportunity for speakers of Welsh, enshrining their right to receive services in Welsh.	

Section 2. Impact

Please answer the following

Consider and refer to the information you have gathered from census data, relevant organisations and groups, staff groups, individuals etc. Please indicate the likelihood and risk associated with the issues raised.

Do you think that the policy impacts on people because of their age?

(This includes children and young people up to 18 and older people)

According to the 2011 census, Welsh speakers are disproportionately likely to be young: although approximately 11% of the overall population of the health board are Welsh speakers this rises to 30% among 12-14 year olds. Children in Welsh medium education may potentially be better able to access health care in Welsh, and very young children in Welsh speaking households may have little or no English. Ensuring a high level of care is available in Welsh thus ensures that these young people have the best access to healthcare.

Whilst individuals in older groups (60+) are less likely to be Welsh speakers according to the census, those who do speak in that group may have a particularly vital need for healthcare in Welsh. Some conditions associated with age such as Dementia or Alzheimer's have been associated with a loss of language skills, particularly in acquired languages and for individuals whose first language is Welsh this frequently results in a deterioration in their ability to use English (see Welsh Government *More than Just Words* Framework). Widening the availability of services in Welsh would be particularly beneficial for this group.

Do you think that the policy impacts on people because of their caring responsibilities? I.e. would it affect their ability to care for somebody who is primarily dependant on them?

There is no reason to expect an additional impact on carers because of their status, though a positive impact on an individual being cared for could be achieved if they were someone who would benefit from care being provided in Welsh.

Do you think that the policy impacts on people because of their disability? E.g. sensory loss, physical disability, Learning disability, some mental health issues

Some individuals with particular disabilities are particularly likely to benefit from Welsh language services, specifically individuals with learning disabilities whose ability to communicate in English may be limited. The provision of Welsh language services in both mental health and learning disability services are priority areas in the Welsh government *More than Just Words* framework. Widening the availability of services in Welsh would be particularly beneficial for these groups.

Do you think that the policy impacts on people because of Gender reassignment? This includes all people included under trans* e.g. transgender, non-binary, gender fluid etc

Individuals undergoing transition access these services primarily through Primary Care, and therefore it is anticipated that an improvement in the availability of Welsh language services in that sector would improve the experience of Welsh speakers undergoing transition.

Do you think that the policy impacts on people because of their being married or in a civil partnership?

There is no direct impact on this group beyond the general impact on an individual Welsh speaker's healthcare.

Do you think that the policy impacts on people because of their being pregnant or having recently had a baby?

There is no direct impact on this group beyond the general positive impact on an individual Welsh speaker's healthcare.

Do you think that the policy impacts on people because of their race? (This includes colour, nationality and citizenship or ethnic or national origin such as Gypsy and Traveller Communities.)

There is no direct impact on this group beyond the general positive impact on an individual Welsh speaker's healthcare. Although Welsh is the native language of an historically White region, statistically

in the census, modern Welsh speakers have a similar demographic profile to the general population. Therefore it should not be assumed that people will not be Welsh speakers, and vice versa because of their particular race.

Do you think that the policy impacts on people because of their religion, belief or non-belief? (Religious groups cover a wide range including Buddhist, Christians, Hindus, Jews, Muslims, and Sikhs)

There is no direct impact on this group beyond the general impact on an individual Welsh speaker's healthcare. Statistically in the census, Welsh speakers have similar demographic profiles to the general population.

Do you think that the policy impacts on men and women in different ways?

There is no direct impact on these groups beyond the general positive impact on an individual Welsh speaker's healthcare.

Do you think that the policy impacts on people because of their sexual orientation? (This includes Gay men, heterosexual, lesbian and bisexual people)

There is no direct impact on these groups beyond the general positive impact on an individual Welsh speaker's healthcare.

Do you think that the policy impacts on people because of their Welsh language? (e.g. the active offer to receive services in Welsh, bilingual information etc).

The Human Rights Act contains 15 rights, all of which NHS organisation have a duty to act compatibly with and to respect, protect and fulfil. The 7 rights that are particularly relevant to healthcare are listed below.

Consider the relevance of your Policy to these Human Rights and list any available information to suggest the Policy may interfere with, or restrict the enjoyment of these rights.

The right to life

No impact anticipated.

The right not be tortured or treated in an inhuman or degrading way No impact anticipated.

The right to liberty

No impact anticipated.

The right to a fair trial

No impact anticipated.

The right to respect for private and family life, home and correspondence No impact anticipated.

The right to freedom of thought, conscience and religion No impact anticipated.

The right not be discriminated against in relation to any of the rights contained in the Human Rights Act

No impact anticipated.

Section 3 Outcome Report

Policy Title:	
Organisation:	
Name:	
Title:	
Department:	
Date:	
Summary of Assessment:	
Please indicate issues of significant concern and changes that will be made to the policy accordingly.	
Please indicate whether these changes have been made.	
Please indicate where issues have been raised but the policy has not been changed and indicate reasons and alternative action taken where appropriate.	
Monitoring Arrangements:	
Review Date:	
IZENIEM Dale:	

OP01

This is usually the	
same as the policy	
review date.	
Signature of all	
Parties:	
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