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# Evaluation of More than just words..., the follow-on strategic framework for Welsh language services in health, social services and social care, 2016-19: A Theory of Change (ToC)

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Views expressed in this report are those of the researcher and not necessarily those of the Welsh Government

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## **Glossary**

<b>Acronym/Key word</b>	<b>Definition</b>
Active Offer	Providing a service in Welsh without someone having to ask for it
ESR	Electronic Staff Records
FEI	Further Education Institution
HEI	Higher Education Institution
IT	Information Technology
NHS	National Health Service
Standards	Welsh Language Standards
ToC	Theory of Change

## 1. Introduction/Background

- 1.1 The Welsh Government has commissioned Arad and OB3 Research to undertake an evaluation of *More than just words*, the follow-on strategic framework for Welsh language services in health, social services and social care, 2016-19. The aim of the evaluation is to assess how, and to what extent *More than just words* has achieved its intended aim to promote and support the use of the Welsh language in health, social services and social care in Wales.
- 1.2 The evaluation will be undertaken within three main phases. This first is the development of a Theory of Change (ToC) which identifies and maps out a set of connected outcomes or pathways of change that should lead from supporting the delivery of initial activities to achieving desired outcomes. Identifying these connected pathways will form the basis of the second phase of the evaluation - the development of an evaluation framework. The evaluation framework will outline the evidence base required to demonstrate the extent to which activities leading to desired outputs and outcomes, identified in the ToC, have been achieved. The evaluation framework will in turn guide the research questions and information gathering process required to produce the evaluation evidence required - i.e. the third phase of the evaluation.
- 1.3 The three-phase process of the evaluation ensures that the findings produced relate specifically to the outputs and outcomes that support the intended changes and impacts outlined within the *More than just words* framework.
- 1.4 This report focusses on the development of the first of these three phases – the Theory of Change (ToC). The ToC presented below is informed largely by the views and experiences of stakeholders closely associated with the development of the *More than just words* strategic framework as well as those associated with delivering policies and day to day practices associated with health, social services and social care in Wales.
- 1.5 The report begins with a brief introduction to ToC principles as well as the strategic, legislative and research context within which *More than just words*

and the associated TOC is set. The report then outlines the research approach undertaken during this phase of the evaluation process, and a summary of the resulting fieldwork findings. These findings are then considered within the context of the *More than just words* strategic objectives – the basis of the ToC.

### **Introduction to Theory of Change**

1.6 A Theory of Change (ToC) is a tool to articulate how a programme is intended to achieve its aims and objectives by making explicit the assumed links between the programme's activities, outputs, outcomes and longer-term impacts. The ToC also seeks to describe and communicate the set of assumptions upon which steps that lead to the long-term impacts are based.

1.7 A ToC is a useful tool for planning, monitoring and evaluating a complex intervention because it demonstrates how changes could unfold and clarifies the early and midterm changes that need to happen in order for a longer-term outcome to be reached.

However, the aim of the ToC in the context of this evaluation, is not to outline areas for future consideration, instead it aims to outline what should be in place in order to achieve the *More than just words* framework objectives. This will be used as the basis against which to measure the progress gained during the period 2016 and 2019.

### **Strategic, legislative and research context**

1.8 In January 2011 the Welsh Language Policy Unit for Health & Social Services (within Welsh Government) established an independent Steering Group, which comprised a service user, individuals from health, social services and social care, stakeholders, regulators and academia to develop the original *More than just words* - a strategic framework for promoting the Welsh language in health, social services and social care in Wales which was published in November 2012<sup>1</sup>.

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<sup>1</sup> Welsh Government (2012), *More than just words* - Strategic Framework for Welsh Language Services in Health, Social Services and Social Care

1.9 This original strategic framework provided strategic direction from 2012 until 2015 and outlined six key objectives that all organisations were required to work towards:

- implementing a systematic approach to Welsh language services as an integral element of service planning and delivery;
- building on current best practice and planning, commissioning and providing care based on the “Active Offer” service;
- increasing the capability of the workforce to provide Welsh language services in priority areas and language awareness among all staff;
- creating leaders who will foster a supportive ethos within organisations, so that Welsh speaking users receive language sensitive services as a natural part of their care;
- providing education, learning and development programmes which reflect the services’ responsibility to plan and provide Welsh language services; and
- ensuring that all national strategies, policies and leadership programmes mainstream Welsh language services.

1.10 The original framework was also supported by three-year Action Plans – one for the NHS and one for Social Services. Many aspects of these action plans were complementary, and it was recommended that some of the actions should be taken forward in partnership between the NHS and Social Services. However, the follow-on strategic framework<sup>2</sup> published in March 2016, aimed to ensure a more integrated approach and therefore included one single action plan for both sectors based on seven key areas:

- National and local leadership, and national policy;
- Mapping, auditing, data collection and research;
- Service planning, commissioning, contracting and workforce planning;
- Promotion and engagement;
- Professional education;

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<sup>2</sup> Welsh Government (2016) More than just words - Follow-on Strategic Framework for Welsh Language Services in Health, Social Services and Social Care

- Welsh in the workplace; and
- Regulation and inspection.

- 1.11 The follow-on strategy aimed to build on and continue the momentum gathered by the first strategic framework. As such the overarching vision of the *follow-on strategy* remained largely the same as that of the first framework - i.e. to deliver Welsh language services throughout the care process that centres on the patient, their families and/or carers need.
- 1.12 The focus of the follow-on framework was to encourage providers to deliver care services that meet the needs of the individual, not just procedures. It aimed to support a greater level of recognition among service providers that the use of the Welsh language is not just a matter of choice but also a matter of need. The follow-on framework also contained a greater focus on outcomes for service users to ensure that individuals and families can understand what the delivery of the framework will mean for them.
- 1.13 A core element of both iterations of the framework is the Active Offer. An Active Offer simply means providing a service in Welsh without someone having to ask for it. It means creating a change of culture that takes the responsibility away from the individual and places it on service providers, avoiding the assumption that all Welsh speakers speak English anyway.

#### *Strategic Context*

- 1.14 The follow-on framework should be considered within the context of wider developments in Welsh language policy including the Welsh Government's strategy, [Prosperity for All](#), which sets out the importance of the Welsh language in developing a Wales that is, healthy, active, united and connected. Since the original publication of More than just words, the Welsh Language (Wales) Measure 2011 has become law, providing new [Welsh language Standards](#) across Welsh public life.
- 1.15 The introduction of the Welsh language standards in social care and more recently for the health sector works hand in hand with the implementation of More than just words. The actions in the follow-on strategic framework were

viewed especially as a means of supporting the work including increasing the capacity and capability of public bodies to meet requirements under the Standards.

- 1.16 The Welsh language strategy **Cymraeg 2050: A million Welsh speakers** sets out a vision for reaching a million speakers by 2050. In doing so, it places an emphasis on the role that *More than just words* will play in achieving the strategy's aims, explaining that:

“The ‘Active Offer’ principle is particularly relevant when considering the health and social care sector services. In Wales, the NHS, social services and social care is delivered by nearly 200,000 staff, and in the NHS alone, patients interact with the service 20 million times a year. The extent of the challenge this involves cannot be underestimated. However, in view of the number of staff and high level of interaction with the public, this sector has the potential to make a valuable contribution to our aim.”<sup>3</sup>

- 1.17 The Welsh Government sets out its national strategic direction for Health Boards and Trusts through a number of documents, including the Programme for Government (Taking Wales Forward) and health delivery plans. The Programme for Government set out the commitment to establish a **Parliamentary Review into Health and Social Care**. The Parliamentary Review gathered evidence from stakeholders and the public about how services in Wales should look and published its report in 2018.<sup>4</sup> In it, the authors refer to the ‘quadruple aim’ that has been adopted as a set of principles for health system reform within many organisations around the world. Two of the four aims – to ‘improve the experience and quality of care for individuals and families’ and to ‘enrich the wellbeing, capability and engagement of the health and social care Workforce’ – are very relevant within the context of health and social care and Welsh language policy.

- 1.18 The Welsh Government's response is **A Healthier Wales: our Plan for Health and Social Care**. This long-term plan addresses the review's recommendations and confirms the actions the Welsh Government will be

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<sup>3</sup> Welsh Government (2017), *Cymraeg 2050: A million Welsh speakers*, p. 54.

<sup>4</sup> The Parliamentary Review of Health and Social Care in Wales (2018).

taking, and the actions required of health and social care providers. There are ten 'design principles' to illustrate how the quadruple aim can drive change, including the 'personalised' design principle, meaning 'health and care services which are tailored to individual needs and preferences including in the language of their choice'.<sup>5</sup>

- 1.19 There is health planning at different levels and for different terms, which the theory of change for this evaluation will need to take account. **The NHS Wales Planning Framework**<sup>6</sup> provides guidance to strengthen and develop medium-term planning for Local Health Boards and Trusts. This was developed by Welsh Government and NHS Wales, in response to an identified need for more effective planning. The framework sets out parameters within which Health Boards and Trusts should plan. This includes a specific reference to the requirement that services are planned and delivered in line with the Welsh language strategic framework for health and social care in Wales, *More than just words* and the Welsh Government's response to the Welsh Language Commissioner's Primary Care Inquiry Report<sup>7</sup>. The planning framework goes on to specify that NHS organisations should promote the use of Welsh across services and must have a Welsh Language Bilingual Skills Strategy in place.

These principles are also reflected in the **Health and Care Standards** which establish a basis for improving the quality and safety of healthcare services by providing a framework which can be used in identifying strengths and achieving excellence. *More than just words* is referenced, and the Welsh language plays a role in the delivery of several standards, not least the standard to communicate effectively; 'in communicating with people health services proactively meet individual language and communication needs' (standard 3.2).<sup>8</sup>

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<sup>5</sup> Welsh Government (2018) *A Healthier Wales: our Plan for Health and Social Care*.

<sup>6</sup> Welsh Government (2019) *NHS Wales Planning Framework*.

<sup>7</sup> Ibid p. 11.

<sup>8</sup> Welsh Government (2015) *Health and Care Standards*.

### *Legislative context*

- 1.20 Health and social care service providers in Wales are subject to the Welsh Language Measure 2011, which requires that the sector treats the Welsh language no less favourably than the English language.<sup>9</sup> The Measure also created a procedure for introducing duties in the form of Welsh language standards<sup>10</sup> in the following areas; service delivery, policy making, operational, promotion and record keeping. The strategic direction to encourage greater use of the Welsh language across health and social services set by the *More than just words* framework complements or sits alongside the legally binding requirements associated with the Welsh Language Standards.
- 1.21 Wales' legislation for sustainable development through the Wellbeing of Future Generations (Wales) and the Social Services and Wellbeing (Wales) Acts also plays a part in the health and social care and Welsh language policy contexts.
- 1.22 The Welsh Government published the Well-being of Future Generations (Wales) Act in April 2015 to improve social, economic, environmental and cultural well-being. It aims to make public bodies think more about the long-term, work better with people and communities and each other and look to prevent problems. In doing so it sets out well-being goals, including a healthier Wales and a Wales of vibrant culture and thriving Welsh Language.

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<sup>9</sup> Welsh Language (Wales) Measure 2011.

<sup>10</sup> The Welsh Language Standards (published by the Welsh Language Commissioner) are a set of legally binding requirements which have applied to Welsh Government since 30 March 2016.

- 1.23 The Social Services and Well-being Act (Wales) 2014 places a duty on local authorities and Local Health Boards to jointly carry out an assessment of care and support needs. The Act sets out a number of overarching duties which apply, including an overarching duty to have regard to the characteristics, culture and beliefs of an individual (including, for example, language). The guidance acknowledges that ‘for many Welsh speakers, language is an integral element of achieving their care, and securing rights and entitlements will be about being able to use their own language to communicate and participate in their care as equal partners’<sup>11</sup> The Regulation and Inspection of Social Care (Wales) Act 2016 established a regulatory system which is in-line with the Social Services and Well-being Act (Wales). This new system focuses on placing service quality and improvement at the heart of regulation, focusing on the impact of services on the people who receive them, as well as giving amended power to the newly established Social Care Wales.
- 1.24 The rights of health and social care service users to communicate in a particular language is also enshrined in wider European and domestic legislation, such as the European Charter for Regional or Minority Languages, the Declaration of Rights for Older People in Wales, and the Rights of Children and Young Persons (Wales) Measure 2011 which protects the rights of children to use their own language as set out in the United Nations Convention on the Rights of the Child.

*Wider research*

- 1.25 In order to enable users to communicate clearly and confidently, research has shown that it is vital that they are able to use their chosen language whilst accessing care services. Research carried out on behalf of the Care Council for Wales, based on international evidence and research, has explained that strengthening language awareness within social care services contributes to enhanced user satisfaction, which also includes users having a sense of familiarity and belonging when able to converse in

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<sup>11</sup> Welsh Government (2015) Social Services and Well-being (Wales) Act 2014: Part 2 Code of Practice (General Functions), p. 15.

their chosen language.<sup>12</sup> These conclusions are also supported by other international research, concluding that clinical results and satisfaction within a caring environment are enhanced when both users and their carers speak the same language and carers are culturally aware and competent.<sup>13</sup>

1.26 In 2014, an inquiry panel acting on behalf of the Welsh Language Commissioner undertook a statutory inquiry into the Welsh language in primary care. This inquiry conducted a call for evidence, gathering views through stakeholder events, contact from members of the public, responses by stakeholder organisations and a survey of 1000 fluent Welsh speakers. The findings of the inquiry emphasised how important it is to Welsh speakers to be able to communicate in Welsh with health and social care service providers, concluding that “Welsh language service is a matter of need and not of choice for a number of patients”. The inquiry concluded by providing 33 recommendations on improving Welsh language services within primary care in Wales; such recommendations provide additional impetus and guidance for bodies seeking to align themselves with the principles of *More than just words*.<sup>14</sup>

1.27 Four key groups of health and social care service users have been identified as needing particular support to access services through the medium of Welsh. These service users are:

- individuals with mental health problems;
- individuals with learning disabilities or other special needs;
- the elderly and
- young children.

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<sup>12</sup> Davies, Elaine, *Different Words: Different Worlds? – The concept of language choice in social work and social care*, Care Council for Wales, p.20.

<sup>13</sup> T.D.Goode, M.C. Dunne, S.M. Bronheim (2006) *The Evidence Base for Cultural and Linguistic Competency in Health Care*. The Commonwealth Fund Henderson S Kendall E & See L (2011). *The effectiveness of culturally appropriate interventions to manage or prevent chronic disease in culturally diverse communities: a systematic literature review Health and Social Care in the Community*.

<sup>14</sup> Welsh Language Commissioner (2014) *My Language My Health*, p. 29.

- 1.28 The groups listed above include individuals are often the least capable of demanding their right to communicate through the medium of Welsh.<sup>15</sup> In particular, research has been carried out with care users with dementia, stating that the absence of appropriate language choice is a strong predictor for decreased well-being due to linguistic communication barriers between users and carers. Research has concluded that a number of Welsh speaking individuals with dementia would revert to using only their first language which can, in turn, lead to social isolation amongst individuals.<sup>16</sup> Research which looked at language and culture in the caregiving of people with dementia in care homes, further suggests a need to develop strategies to allow individuals to obtain the necessary bilingual services required to enhance individuals' satisfaction within the care environment.<sup>17</sup>
- 1.29 As such, the follow-on strategic framework notes that the Welsh language is considered a core component in delivering and communicating effective care services in Wales. The original framework noted that it is essential for individuals to receive care that both reflects their language and their cultural background 'in order to respect their identity and maintain their dignity.'<sup>18</sup>

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<sup>15</sup> Misell, Andrew, Welsh in the Health Service: The Scope, Nature and Adequacy of Welsh Language Provision in the National Health Service in Wales, (2000), p. 12.

<sup>16</sup> Ibid. p.26

<sup>17</sup> Martin, Conor et al, Language and Culture in the Caregiving of People with Dementia in Care Homes – What are the Implications for Well-Being?

<sup>18</sup> Welsh Government, More than just words strategic framework for Welsh Language Services in Health, Social Services and Social Care, (2012), p.16.

## 2. Our approach

2.1 The findings of this report are mostly based on qualitative feedback gathered from a series of individual interviews with 25 representatives from the following organisations:

- All Health Boards and NHS Trusts in Wales
- Social Care Wales
- Local Government Social Services
- Health Education and Improvement Wales (HEIW)
- Healthcare Inspectorate Wales (HIW)
- Colegau Cymru
- Welsh Government

2.2 A list of potential interviewees to contact to request an interview, was agreed with Welsh Government. Potential interviewees comprised senior strategic staff from the above organisations (Chief Executives, members of the NHS Welsh Language Executive Leaders Group, members of the group which developed the *More than just words* framework, members of the Welsh Government Partnership Board) as well as Welsh Language Officers.

2.3 The sample of interviewees were chosen on the basis that they were individuals who had either been involved in the development of the *More than just words* framework and / or had been instrumental in the delivery of policies and practices that supported the framework's objectives during 2016 to 2019.

2.4 The sample included mainly senior representatives within the settings listed above who could provide a strategic perspective, as well as Welsh language officers within health boards who could provide details and examples relating to implementing *More than just words* objectives within settings. The sample also ensured that views of representatives from different geographical areas of Wales were included as well as different areas or settings across the health and social care sector.

- 2.5 Service users are at the heart of *More than just words*. However, service users were not consulted during this phase of the evaluation, as the ToC interviews focussed on key factors and mechanisms that would have enabled the framework's objectives to be achieved as opposed to the actual impact these factors may have had on those who use the services. Evidence relating to the impact of *More than just words* on service users will be key to the next two phases of the evaluation. As such consulting with service users will form an important part of the required information gathering process included in both these phases.
- 2.6 Interviews were all conducted individually (rather than in a group setting) and conducted over the phone in most cases, with a minority conducted face-to-face where convenient for the interviewee. Interviewees were offered the choice to undertake the interview in Welsh or English.
- 2.7 As noted earlier, this phase of the evaluation process has focussed on developing a ToC. The stakeholder interviews therefore focussed on gaining an understanding of the intended pathways of change or connected outcomes that should have taken place between 2016 and 2019 in order to achieve the overall aims and objectives conceived within the *More than just words* framework.
- 2.8 The full interview guide used to gather qualitative feedback from these representatives is included in Annex A. In summary, the interview guide raised the following questions:
- What should **be available / be happening** within health, social services and social care settings across Wales if the main aims and objectives of the *More than just words* framework had been fully achieved? What would this **look like in practice**?
  - What **key factors** would need to be in place or need to change within these services to enable these outcomes to be achieved?
  - What **activities** and / or resources would be needed to **support** the development of these key factors or enable these changes?
  - What would the successful implementation of these activities and / or planned changes be dependent on i.e. what factors would need to occur,

be in place or be available to **enable the actions and activities required** to achieve the aims of *More than just words* to take place?

- What would need to be in place to **ensure** that **success dependent factors**, were supported across and within service areas?
- What **indirect external factors** / policies could / have influenced achieving the aims and objectives of the *More than just words* framework?

2.9 A summary of the views gathered during these interviews is presented in section 3. These views are then considered within the context of each of the seven *More than just words* objectives in order to map out the intended pathways associated with each objective. This is presented in section 4, where the diagrammatical figures included for each objective form the basis of our ToC. Each diagram outlines how the intended activities, outputs and outcomes associated with each objective link together to form a pathway of change that supports and / or leads to achieving the intended aims of *More than just words*.

2.10 The connected activity, output and outcome steps identified within the ToC will then inform the evaluation framework and subsequent evaluation research fieldwork that will follow. The evaluation framework will identify the information required to evidence whether the intended steps identified in the ToC have been achieved. This in turn will guide the information gathering process required to produce the final evaluation findings i.e. the three phases of the evaluation outlined earlier in section 1.2.

2.11 In short, the ToC identifies the intended steps to achieving the aims of *More than just words*, and the evaluation framework and fieldwork will identify whether, and if so to what extent, these steps have been achieved and the difference, if any this has made to service delivery and the experience of service users.

#### *Limitations to our approach*

2.12 Our approach to this phase of the evaluation has ensured that the findings are informed by the views and experiences of a range of stakeholders, each of which have a detailed understanding and knowledge of the context and

environment within which *More than just words* is set. However, our approach does have some limitations.

- 2.13 To begin with, although the ToC focusses on activities and developments that took place during the timeframe of the strategy framework (2016 - 2019), many of those consulted often expressed views that reflected current issues which may not necessarily have had an influence during the timeframe in question. An example of this is the recent introduction of the majority of Welsh language standards for the health sector coming into force from 30 May 2019.
- 2.14 The stakeholder interviews were designed to be reflective in nature. However, this approach often relied on the ability of stakeholders to recall situations from some time ago. References made by stakeholders to very recent policy developments or planned future interventions were removed from the qualitative data included in the analysis presented in the sections that follow. As far as is possible, therefore, the findings presented in this report reflect only on activities, policies, opportunities and challenges relating to 2016 – 2019. However, some caution may still be needed when interpreting some of the reflective views expressed by stakeholders as some of these may be influenced by more recent developments.
- 2.15 Another limitation of the approach is that not all stakeholders consulted had an explicit understanding of all aspects of the *More than just words* framework. Some stakeholders could only express views relating to their own specific area of the sector and / or the delivery of a few of the *More than just words* objectives. Some stakeholders offered views from the perspective of delivering the objectives of *More than just words* within health, social services and social care settings, others provided views relating to the development of the framework document itself. The range of stakeholders included in the consultation process ensured that this limitation was largely mitigated. However, it should be noted that not all stakeholders contributed views and opinions relating to all the subject headings included in section 3 below.

### **3. Stakeholder interview findings**

3.1 This section summarises the views and responses given by the stakeholders consulted during interviews guided by the discussion schedule included in Annex A. The findings from these interviews are presented as key areas that stakeholders consider would need to be in place or supported in order to achieve the *More than just words* objectives.

#### **What would achieving the aims of *More than just words* look like?**

3.2 Individuals consulted offered relatively consistent views as to what they understood to be the overarching aims of *More than just words*, and what the Active Offer should look like in practice. Most agreed that successful implementation of the Active Offer (i.e. ensuring that a service is provided in Welsh without someone having to ask for it) would ensure parallel delivery of services in Welsh and English across all health and social care settings in Wales.

3.3 Contributors noted that if the aims and objectives of *More than just words* had been fully achieved, service users would not feel 'awkward' or out of place communicating with services in Welsh. One stakeholder referred to a scenario where a service user initially contacts one of the services. If the Active Offer was available to this service user, they would not feel the need to explicitly express their language preference or specifically request that their enquiry be dealt with in Welsh. Instead they could simply make their enquiry in their preferred language. Those within the service setting dealing with the enquiry would expect to receive enquiries in Welsh and English and would therefore be able to respond to the needs of the service user equally well, regardless of which language they used.

3.4 One stakeholder likened the Active Offer to the availability of trolleys at a supermarket. Not everyone accessing a supermarket needs a trolley, but everyone expects one to be available if needed and don't expect to have to ask for one or be treated differently because they need one.

3.5 Most noted that achieving the aims of *More than just words* would ensure the use of Welsh would be 'normalised' and included as part of all

information, communication processes and materials available across the sector. Both languages would be visible in all the signage, written material and electronic information available within settings. Those accessing and working in these settings would also expect to hear both languages being regularly used by staff and service users. It was acknowledged that not everyone employed within the settings would be able to speak or understand Welsh fluently, but everyone would appreciate that engagement between service users and staff undertaken in Welsh would be a normal everyday occurrence. Everyone working in the settings would also understand that providing the Active Offer not only addresses language preferences or complies with statutory requirements, but in many cases is also an essential part of the health and care needs of individuals as well as ensuring they are treated with dignity and respect.

- 3.6 Common words used by those interviewed when referring to what, in their view, achieving the aims of *More than just words* should look like in practice included 'natural, every-day, choice, care, patients.' These are presented in the form of a word cloud in Figure 1. These commonly used words further illustrate the views of those interviewed that if the aims of the framework had been achieved, the use of Welsh across health and social care settings would be a natural every-day occurrence based around the choice of service users.
- 3.7 Stakeholders also noted however, that while some health and social care settings in Wales may have already been offering services that were close to the Active Offer prior to the introduction of *More than just words*, others, particularly those located in geographical areas where a relatively low proportion of the local population speak Welsh, would have been quite far away from achieving this.
- 3.8 Some were of the view that if the aims of *More than just words* had been achieved then we should expect to see the Active Offer embedded across all care pathways for patients, whether in the home, primary care or any other health and social care services: '*The Active Offer should weave through the care pathways naturally.*' (NHS Director of Workforce).



*words*. The views expressed were quite wide ranging, but the majority related to one of the following categories:

- **Existing workforce;**
- **Future workforce;**
- **Systems and processes;**
- **Bilingual communication material;**
- **Hearts and minds.**

#### *Existing workforce*

- 3.12 Ensuring that the workforce already in place had sufficient Welsh language skills was considered to be an obvious requirement if the Active Offer was to be delivered across settings in Wales. Many of those consulted also noted that although ideally *More than just words* would have encouraged the availability of sufficient Welsh language skills across all service areas, there were some areas that should have been prioritised. These include service areas supporting priority groups identified in section 3.8, as well as front line staff within settings with whom users first contact when accessing services.

#### *Future workforce*

- 3.13 It was generally recognised that short term measures alone (five years or less) aimed at increasing Welsh language capacity within the existing workforce would not achieve the desired outcomes supported by *More than just words*. Those consulted therefore felt that in order to achieve the desired outcomes, support would also have been required to develop Welsh language skills amongst those who were not yet part of the workforce but were considering a career in the sector. They were also of the view that individuals who already had Welsh language skills should have been encouraged to consider a career in the sector.

### *Systems and processes*

- 3.14 Stakeholders identified ways in which the development and application of various systems and processes could have supported progress towards achieving the aims of *More than just words*. These include:
- Systems that identify and map the level of Welsh language skills that exists within the workforce;
  - Systems that record the language preferences of service users and ensure that this information was available to all practitioners;
  - Processes that enable managers to plan staff rotas in a way that ensured that Welsh speaking practitioners could be matched with Welsh speaking service users.
- 3.15 Some fieldwork contributors noted that matching the Welsh language skills of practitioners with the Welsh language needs of service users could not have been achieved through systems and processes alone. Some practitioners, it was claimed, had been reluctant to use their Welsh language skills for fear that they may have been allocated a disproportionate level of responsibility to deliver Welsh language services within their setting. As a result, it was recognised that in order to encourage greater utilisation of existing Welsh language skills, the systems and processes implemented would have needed to be accompanied with reassurances, directed at Welsh speaking practitioners, that using their Welsh language skills would not overburden them with additional responsibility.

### *Bilingual communication material*

- 3.16 The consensus amongst those interviewed was that in order to achieve the aims of *More than just words*, all signage and public information available within settings should be available in both Welsh and English. This would not only ensure equal status and access to both languages, but in the opinion of those interviewed, would also create an environment where Welsh was considered a part of normal everyday life. It was also felt that the use of lanyards and badges worn by staff members to notify service

users and colleagues that they speak Welsh would encourage more Welsh to be spoken within the health and social care sector.

*Hearts and minds*

- 3.17 Contributors were of the view that the key factor upon which achieving the aims of *More than just words* is reliant on, is ensuring that all key individuals within settings, including health board members, elected representatives (e.g. councillors), senior executives, managers, practitioners, and other support staff, fully appreciate the value and importance of providing the Active Offer.
- 3.18 All those interviewed agreed that encouraging a positive attitude towards the Welsh language across all areas of the sector was essential if the introduction of any processes or activities aimed at supporting the Active Offer were to be implemented and embraced. Stakeholders recognised that achieving this in many settings across the sector would have required a big culture shift. Most stakeholders were of the view that this could have been achieved by raising awareness amongst all those associated with the health and social care sector, of the important role that language played in addressing the health and social care needs of service users.
- 3.19 It was recognised by stakeholders that support for the Active Offer would have been required at all staffing levels across the sector if actions relating to it were to be implemented and sustained. Stakeholders also agreed that committed leadership would have been required at all levels in order to ensure a change in culture and attitude within the health and social care sector. An example of this included language champions within organisations who could have served as drivers of cultural change.
- 3.20 Some stakeholders were of the view that the direction of travel required to win the hearts and minds of all personnel should have been from the bottom up. In their view raising the awareness of frontline staff of the importance of bilingualism and the Active Offer would have encouraged practices within some settings that would have increased the use of Welsh language in front line service provision. This would have provided examples of good practice, which in turn would have raised awareness and gained the support for more

Welsh language service delivery amongst senior personnel and colleagues across other health and social care settings.

Other contributors, however, were of the view that the focus should primarily have been on winning the hearts and minds of senior executives across the sector in Wales as well as senior personnel within the Welsh Government – both civil servants and politicians. In their view ensuring support for the Welsh language and the objectives of *More than just words* at senior executive level would have encouraged support for policies and practices that in turn would have filtered down to encourage greater support for the Welsh language and the Active Offer amongst personnel delivering front line services.

### **Success enabling factors**

#### *Existing workforce*

- 3.21 Welsh language training was the most commonly identified success enabling factor noted by stakeholders that would have been required to increase the Welsh language skills of those already employed within the health and social care workforce. It was also noted that training should have been available to staff of all Welsh language abilities including those who could already speak Welsh but lacked the confidence to use it within the workplace.
- 3.22 Some stakeholders were of the view that many individuals across the workforce who had been educated in Welsh and / or speak Welsh outside of work, may not necessarily have had the confidence to use the language in a formal working environment. It was suggested that activities aimed at supporting these individuals to utilise their Welsh language skills (possibly by encouraging them that using some Welsh is better than none) would have been a relatively quick way of increasing Welsh language capacity amongst those already employed within the sector.
- 3.23 Some stakeholders expressed a view that the Welsh language training delivered should have included formal and informal approaches. For example, training aimed at confidence building and reassurance should have been delivered in an informal manner, whereas training aimed at

gaining a language qualification may have needed to be delivered in a more formal 'classroom' style setting.

- 3.24 Stakeholders noted that alongside ensuring sufficient Welsh language training provision, individuals would have needed to be able to access the training opportunities available if they were to improve their skills. One interviewee noted that ensuring settings were operating at full or almost full staff capacity would have been a key requirement to enable managers to release staff to access the training available. It was noted that this would have been true for all training requirements, not just Welsh language training.
- 3.25 Alongside allowing staff time to take up any available Welsh language training opportunities, stakeholders were also of the view that, in order to encourage staff to take up these opportunities, it would have been important to ensure that the training available matched their skill needs. As such, it was considered that a 'one size fits all' training programme would not have met the skills needs of all individuals. Instead a range of training opportunities would have been needed; some training would have needed to be aimed at individuals who had no Welsh language skills and others aimed at competent Welsh speakers who simply needed to develop their confidence to use their language skills in the workplace.
- 3.26 Other contributors noted that even if all the required training had been available, accessible and appropriate to need, some individuals would still have needed further encouragement to take it up. It was noted that encouraging participation in Welsh language skills training was linked to the extent to which individuals employed across the sector were aware of the important benefits that providing bilingual services offer many service users. Some stakeholders also outlined that some individuals would have been encouraged to take up Welsh language training opportunities if they saw senior personnel within their settings also participating in the training available – i.e. following the example set by others.
- 3.27 Stakeholders noted however, that it should not be assumed that training courses would have automatically led to increased use of Welsh language

in the workplace. In order to achieve this, those who had gained Welsh language skills through training and support would also have needed to be given the opportunity and encouragement to use these skills in their day to day work. This in turn would have reflected the extent to which working practices, policies and systems in place within settings supported, enabled and encouraged individuals to place the same emphasis on Welsh and English in the workplace.

- 3.28 Many contributors also expressed views that in order to increase the use of Welsh in the workplace, settings would have needed to provide a supportive environment where individuals would have been encouraged to 'have a go' at speaking Welsh, even if it was not perfect or if they made mistakes. It was noted that a number of employees within the sector who had at least some Welsh language skills, lacked the confidence to use the language in front of colleagues and service users, for fear of being judged or criticised. Providing an environment that was supportive of the Welsh language would therefore have alleviated some of these confidence barriers.

#### *Future workforce*

- 3.29 It was recognised by those consulted that in order to increase the number of Welsh speakers who entered the health and social care workforce, more vacancies within settings should have included Welsh as an essential requirement within their job descriptions.
- 3.30 Stakeholders noted, however, that many settings had experienced difficulties filling some positions, particularly specialised posts within the health sector. Placing a requirement on potential candidates for these roles to also be able to speak Welsh would in their view have added to these recruitment challenges. Other contributors also recognised this and suggested that the ability to speak Welsh should only have been a pre-requisite for some key front-line posts.
- 3.31 It was also noted placing a requirement to be able to speak Welsh should possibly have been included primarily within job descriptions relating to reception desk jobs and other posts where service users have first contact with the services. Placing an increased requirement on the ability to speak

Welsh within other job descriptions, such as catering jobs and porters, etc., would have also encouraged an environment where more Welsh could be heard within settings and therefore 'normalising' the language to a greater extent.

3.32 Stakeholders reported that the induction period within a new role provides an opportunity to raise the awareness among newly recruited staff members of the importance of various policies and procedures. This period also provides an opportunity to introduce new recruits to the training opportunities available to them. It was therefore suggested that the extent to which settings focussed on the benefits associated with providing Welsh language services as part of their induction process would have had a considerable influence on the extent to which new entrants would have embraced the language and possibly taken up Welsh language training opportunities.

3.33 A few stakeholders were of the view that all new recruits – regardless of the position or area of responsibility – should have been required, as part of their employment contract, to learn a basic level of Welsh. This would have ensured that all staff had an ability to use and understand an essential level of Welsh.

3.34 Some stakeholders noted that informing school pupils within welsh-medium schools of the career opportunities available within the health and social care sector to individuals who have Welsh language skills, would have encouraged more Welsh speakers to consider pursuing a career in health and social care. These stakeholders also noted that the extent to which FE and HE institutions delivered health and social care courses in Welsh – or bilingually, would also have influenced the extent to which students could have maintained or improved their Welsh language skills before gaining employment in the sector.

#### *Systems and processes*

3.35 Stakeholders reported that IT systems such as NHS Electronic Staff Record (ESR) were available during 2016 - 2019 to record Welsh language skills across the sector. They also mentioned that in order for managers to use

the data available to identify members within their team who have Welsh language skills - and then plan staffing rotas around the availability of these individuals, sector-wide systems such as ESR would need to have been linked to local systems within settings.

- 3.36 Interviewees noted that ideally IT systems should have been in place that recorded at primary care level, the language choice of service users. This information should then have followed the service users throughout their health and social care journey so that Welsh language services could be directed towards them as and when necessary.

#### *Bilingual communication material*

- 3.37 Contributors who offered a view on communication materials suggested that if the objectives included in *More than just words* had been achieved organisations and settings should by now be routinely providing bilingual appointment letters, reminder letters and any other correspondence required by service users.
- 3.38 It was agreed by stakeholders that in order to do this, additional resources would have been required to ensure that all information available in English would also be available in Welsh. This would include in-house translation capacity so that materials could be produced in both languages at the same time without incurring time delays associated with commissioning external translation services.
- 3.39 A few of the stakeholders noted that in order to ensure that the Welsh language information produced was clear and accessible to as many service users as possible, it should have been written in a non-formal format (possibly following similar guidelines as the 'plain English' initiative used to produce written information in English).

#### **Core requirements**

- 3.40 Stakeholders identified strong leadership, policy, planning and accountability as the core factors required to support and encourage the positive changes in culture, understanding of need and commitment to

deliver Welsh language services needed in order to achieve the overarching aim and objectives of the *More than just words* framework.

3.41 They were also of the view that there is a mutually supporting relationship between these core requirements, whereby a positive culture and awareness of the need for Welsh language services supports stronger leadership, policy and planning and vice-versa.

3.42 These core requirements and enabling factors should have served as the cornerstone upon which key drivers of change, that would have led towards the delivery of the Active Offer, were dependent. These drivers include systems and processes, the Welsh language capacity of the existing and future workforce as well as the Welsh language environment and practices across settings.

## 4. Mapping stakeholder views to the *More than just words* objectives

4.1 This section relates the fieldwork findings outlined in section 3 above to the seven objectives included in the *More than just words* framework. It outlines the factors associated with each objective and how they relate to required outputs and outcomes identified during the fieldwork that support the delivery of the Active Offer – i.e. the theory behind the expected changes required to achieve the aims of the *More than just words* follow on strategic framework.

### **Objective 1: National and Local Leadership, and National Policy**

4.2 The *More than just words* document outlines that in order to achieve its aims, leadership must be demonstrated across every level of any organisation involved in health and social care. Those consulted agreed and identified strong leadership at all levels as a key requirement in supporting and delivering the Active Offer. It was recognised that strong leadership was integral to other key requirements associated with the delivery of the framework aims i.e. policy and planning, recognition of, and awareness of need, commitment to change and accountability. There was also recognition that strong leadership was required from Welsh Government and Social Care Wales, at local health board and local authority levels as well as from those managing and delivering services.

#### *Leadership at a national level*

4.3 Leadership at a Welsh Government level would include a focus on commitment to the Welsh language and the Active Offer within national policies and strategies such as (but not limited to) the NHS Planning Framework, Health and Care standards, and the Social Services and Well-being (Wales) Act 2014. Contributors to the fieldwork also noted that strong leadership and commitment at a national level in Wales would be demonstrated by prominent individuals within the Welsh Government / National Assembly for Wales actively championing and supporting the framework and the importance of delivering the Active Offer. It was considered that leadership at this level would in turn encourage greater

focus and strong leadership at a senior executive level across health boards and within local authorities. This should ensure that a high priority was placed on the Welsh language and providing the Active Offer at a local level across health boards, NHS trusts and local authority funded services.

*Leadership at a senior / executive level*

- 4.4 Contributors noted that strong leadership at a senior executive level e.g directors of local Health Boards would be evident by a focus on the Welsh language within local health board and local authority social services' policy and planning documents. It was also noted that strong leadership at this level would take the form of senior / executive personnel across settings encouraging use of the Welsh language and championing the Active Offer.

*Leadership at a management and operational level*

- 4.5 Leadership at a management and operational level (e.g at a workforce development manager level) across the sector, should ensure that the plans and policies included within local health board and local authority social services' policy and planning documents would be supported and put into practice at an operational level within settings. As a result, stakeholders noted that they would expect to see continued or increased delivery of bilingual services within settings, support for workers to access Welsh language training, and recruitment processes that encourage more Welsh language skills into the workforce.

- 4.6 In summary, strong leadership at a national level would be evident by the extent to which the need to focus on the Welsh language within health and social care was included in national strategic documents and policies. This should influence stronger leadership at senior / executive level across health board settings and social service departments within local authorities. This would be evident by the extent to which a focus on Welsh language service delivery and the Active Offer was included in service delivery and workforce development plans. This in turn should lead to greater leadership at local delivery level evidenced by the focus on Welsh language included in local delivery plans being put into practice.

4.7 The basic sequence of events outlined above, summarises stakeholder views relating to the direction of travel they would expect from top down leadership influence. Some were of the view that the direction of influence could also be from the bottom up, whereby good practice relating to the Active Offer demonstrated at a delivery / operational level increases awareness and understanding at senior level, which in turn could encourage stronger leadership.

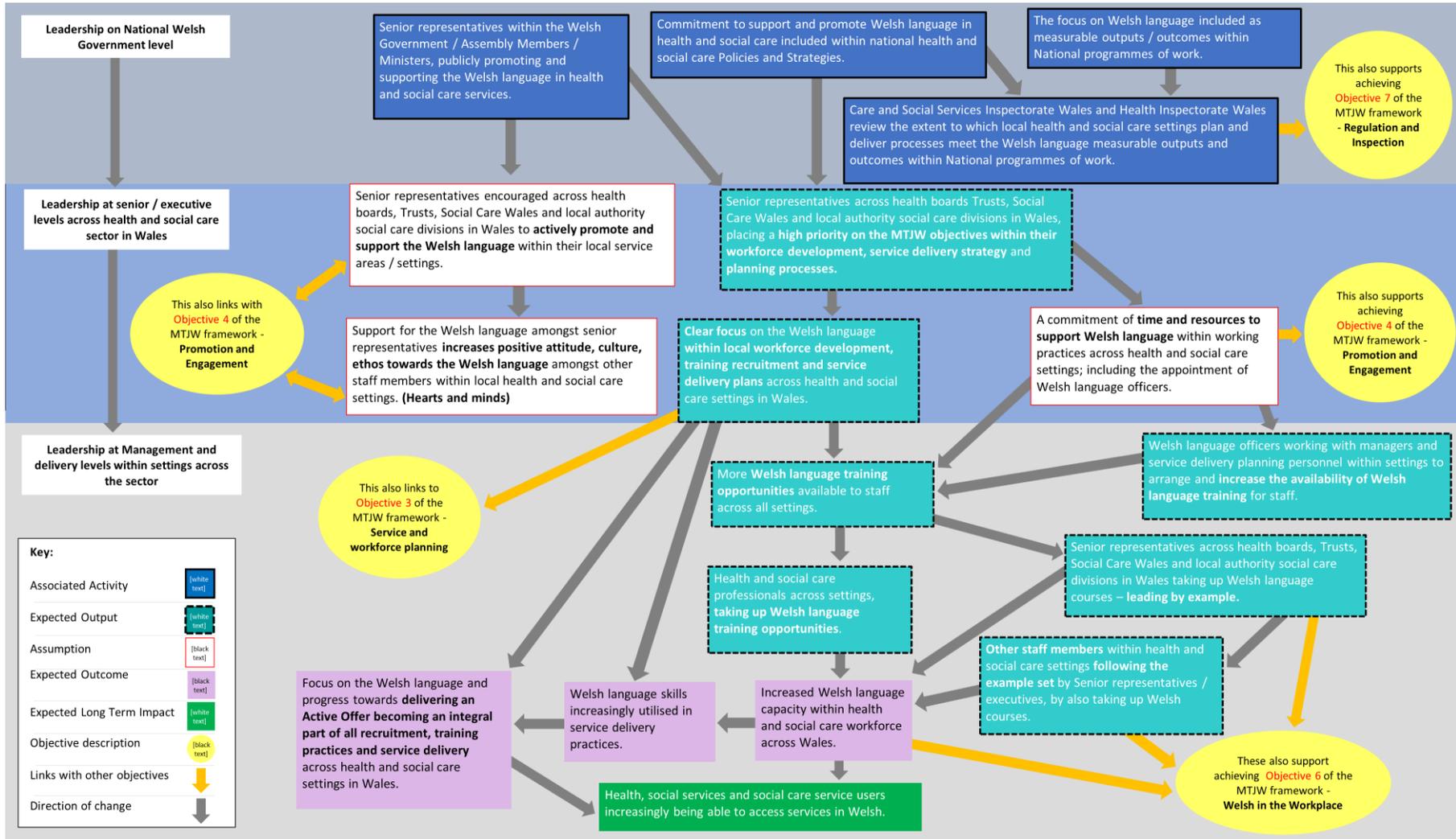
*Hearts and minds*

4.8 As noted in section 3, the majority of those consulted noted that ensuring a culture and ethos, across all areas of the health and social care sector, that was supportive of the Welsh language would have been an essential aspect of making progress towards achieving the aims of the *More than just words* framework during the period from 2016 and 2019. This was often referred to as gaining 'heart and minds'. It would follow therefore that a positive culture change of this nature would have been necessary to encourage stronger leadership at all levels during the same time period.

4.9 However, there was also an opinion that strong leadership and a supportive culture were mutually supporting factors. While winning 'hearts and minds' was recognised as a prerequisite to strong leadership, it was also recognised that strong leadership could encourage a cultural shift that would lead to gaining more 'hearts and minds'.

4.10 Figure 1 below illustrates the pathways of interconnected activities, expected outputs and desired outcomes associated with strong leadership – the Theory of Change associated with leadership in relation to progress towards delivering the aims of the *More than just words* during the period of 2016 to 2019.

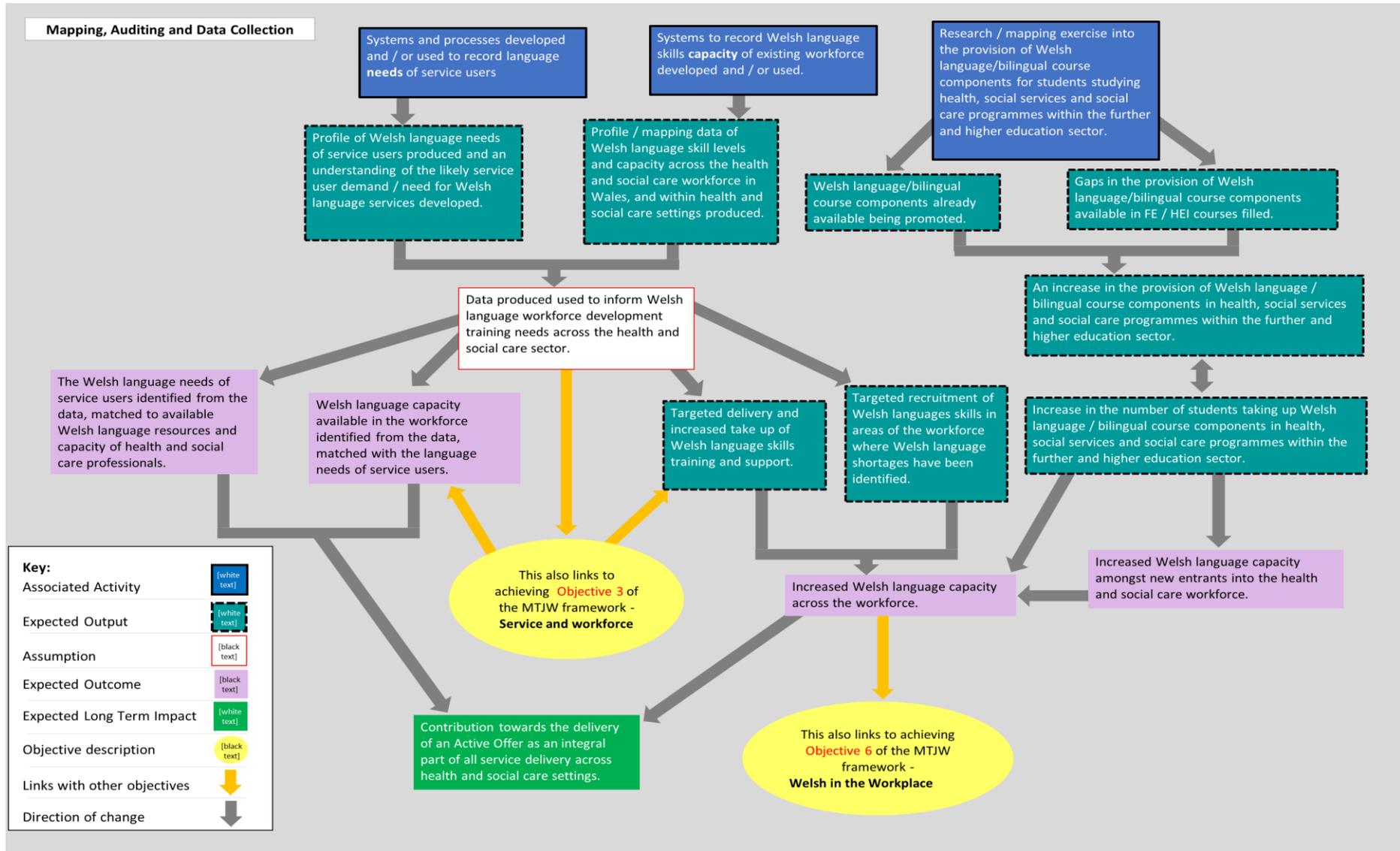
**Figure 4.1: Theory of Change for Objective 1: National and Local Leadership, and National Policy**



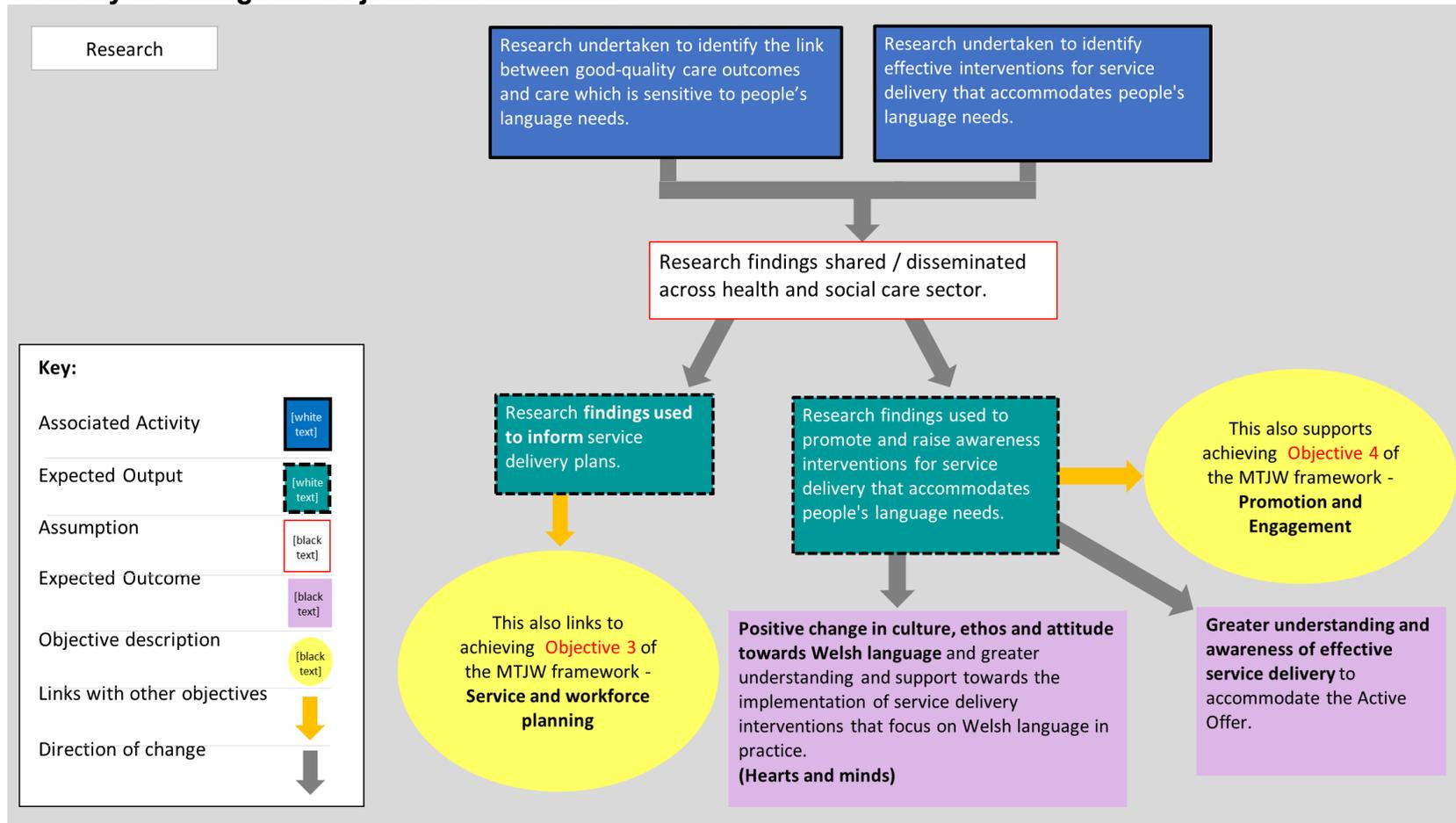
## **Objective 2: Mapping, Auditing, Data Collection and Research**

- 4.11 The *More than just words* document outlines that the collection of evidence relating to the Welsh language needs of the community, which health and social services serve, and data on the level of workforce Welsh language capacity across the sector, is vital in order to plan service delivery and workforce development effectively.
- 4.12 This was echoed by those who contributed to the fieldwork consultation findings who also noted that effective systems (mainly IT) and processes were required in order to match the Welsh language skills available within the workforce to the language needs of service users.
- 4.13 It was also noted that research into, and the dissemination of evidence that further demonstrates the need to communicate with people in their first language in order to provide good quality health and social care, was a key factor in raising awareness of need. This in turn was considered vitally important in the process of winning hearts and minds – which as noted elsewhere in this document was considered one of the core requirements from which all other progress towards achieving the aims of *More than just words* stem.

Figure 4.2: Theory of Change for Objective 2: Mapping, Auditing, Data Collection



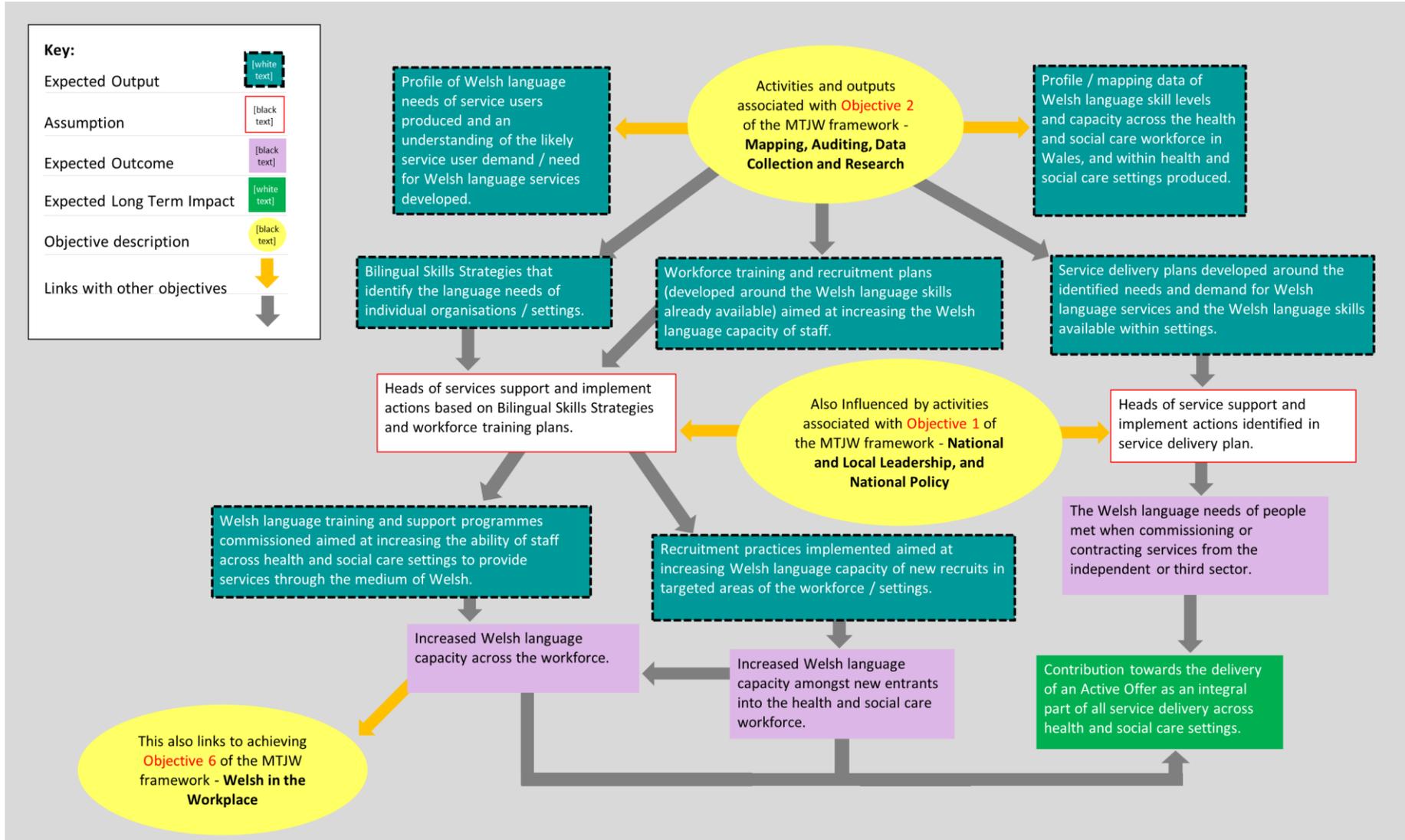
**Figure 4.3: Theory of Change for Objective 2: Research**



### **Objective 3: Service Planning, Commissioning, Contracting and Workforce Planning**

- 4.14 The *More than just words* document outlines that workforce planning and organisational developments have a central part to play in relation to staff training to increase Welsh language capacity as well as map and coordinate Welsh language skills within the workforce in order to progress towards being able to provide the Active Offer across services.
- 4.15 Those consulted stressed the importance of developing plans that were supported by evidence of need. This links to the information outputs supported under objective 2 above. i.e. the data gathered from systems and processes that monitor and record demand for and capacity to provide Welsh language services across the sector.
- 4.16 The evidence produced should then form the basis of informed workforce development (including training and recruitment) and service delivery plans that reflect the evidence available.
- 4.17 As with many other areas of planning and implementation relating to achieving the aims of the framework, those consulted emphasised the important role that awareness and understanding plays in developing a positive attitude and culture (hearts and minds) that encourages the development and implementation of these plans.

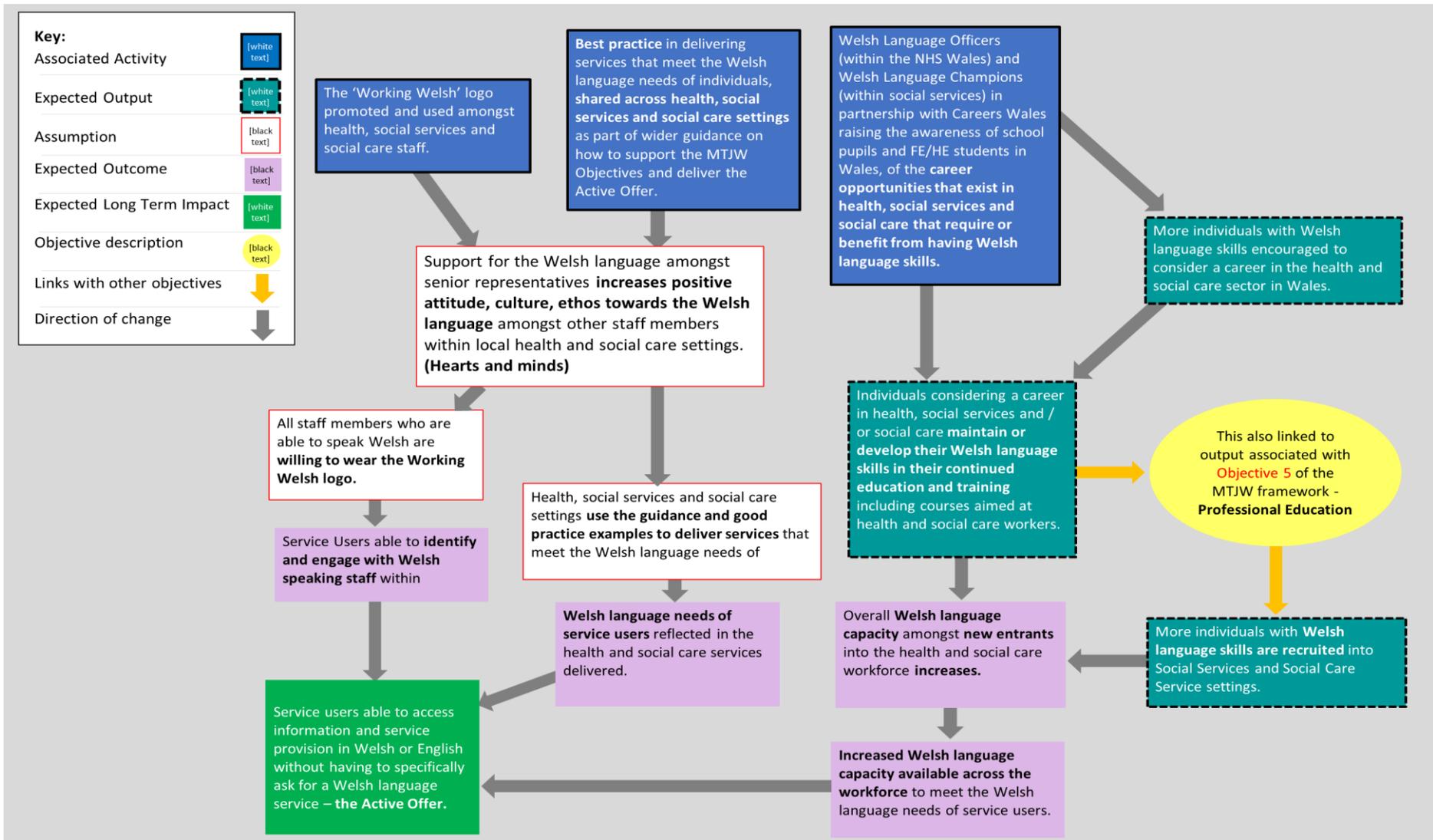
**Figure 4.4: Theory of Change for Objective 3: Service Planning, Commissioning, Contracting and Workforce Planning**



#### **Objective 4: Promotion and Engagement**

- 4.18 The *More than just words* document outlines that visual markers such as the Working Welsh logo should be used to enable service users to identify staff members who can speak Welsh. The framework also encourages key partners to develop information resources that support the delivery of the Active Offer.
- 4.19 Those consulted also noted the importance of visual markers not only to enable service users to identify Welsh speaking staff but also to convey a message that Welsh was a 'normal' everyday part of service delivery.
- 4.20 Many stakeholders also emphasised the need to promote how Welsh language is used in various occupations within the health and social care sector to young people in schools and college students in order to encourage more Welsh language skills among future workforce recruits.

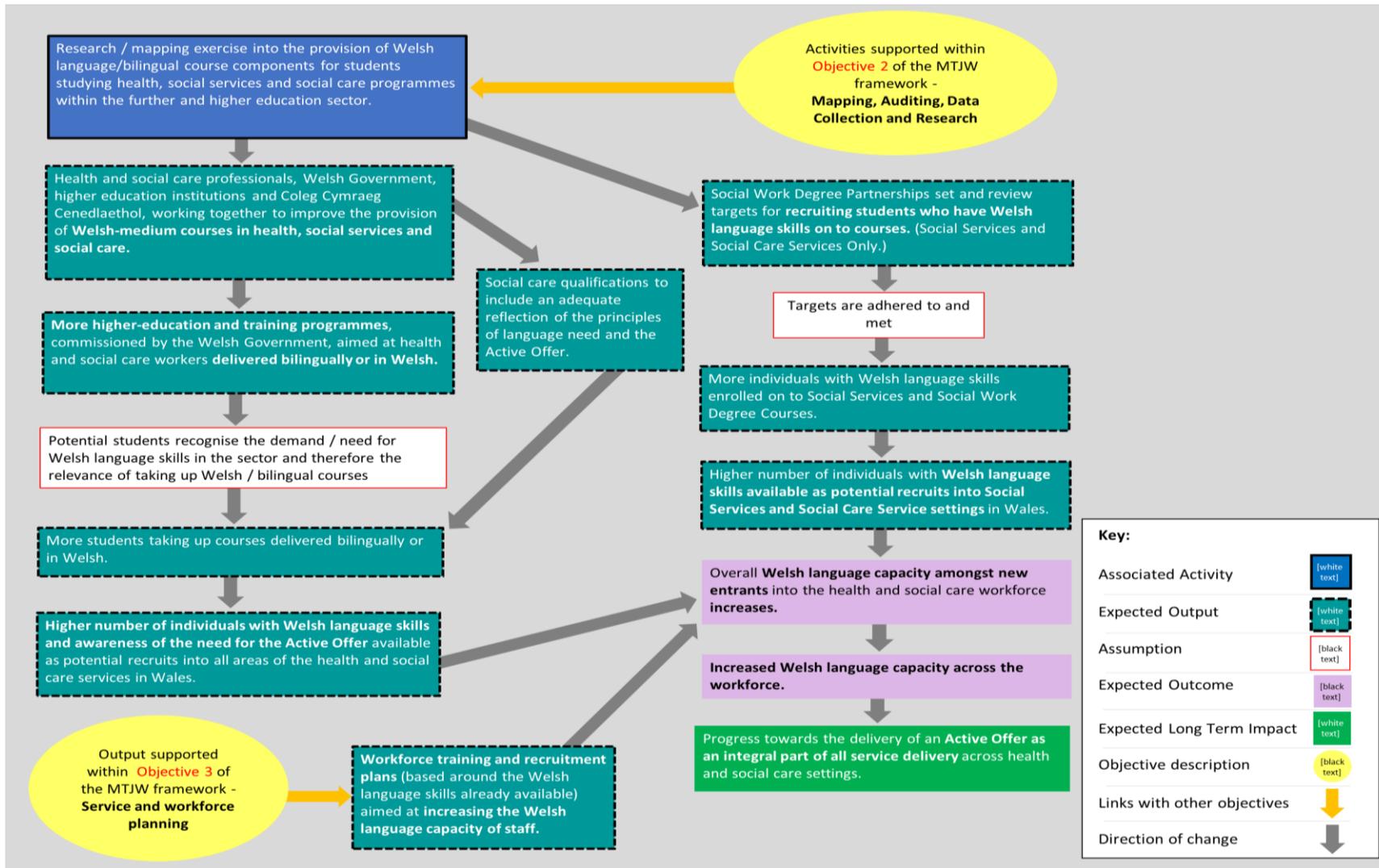
Figure 4.5: Theory of Change for Objective 4: Promotion and Engagement



### **Objective 5: Professional Education**

- 4.21 The *More than just words* document outlines that investing in the workforce of the future in order to ensure that it has adequate levels of Welsh language skills is an imperative part of the process of supporting the delivery of the Active Offer. It is also noted that the education commissioning process at further education (FE) and higher education (HEI) level should be based on, and informed by, workforce planning.
- 4.22 Those consulted voiced views that supported this. Some also noted that alongside increasing the supply of Welsh language skills, by embedding Welsh language skills development within education planning and delivery for health and social care professionals, the sector also needed to demonstrate a demand for Welsh language skills within its workforce. A clear demand for Welsh language skills within health and social care vacancies and career paths would encourage more individuals considering a career in the sector to take up FE and HE courses that have a focus on Welsh language skills.

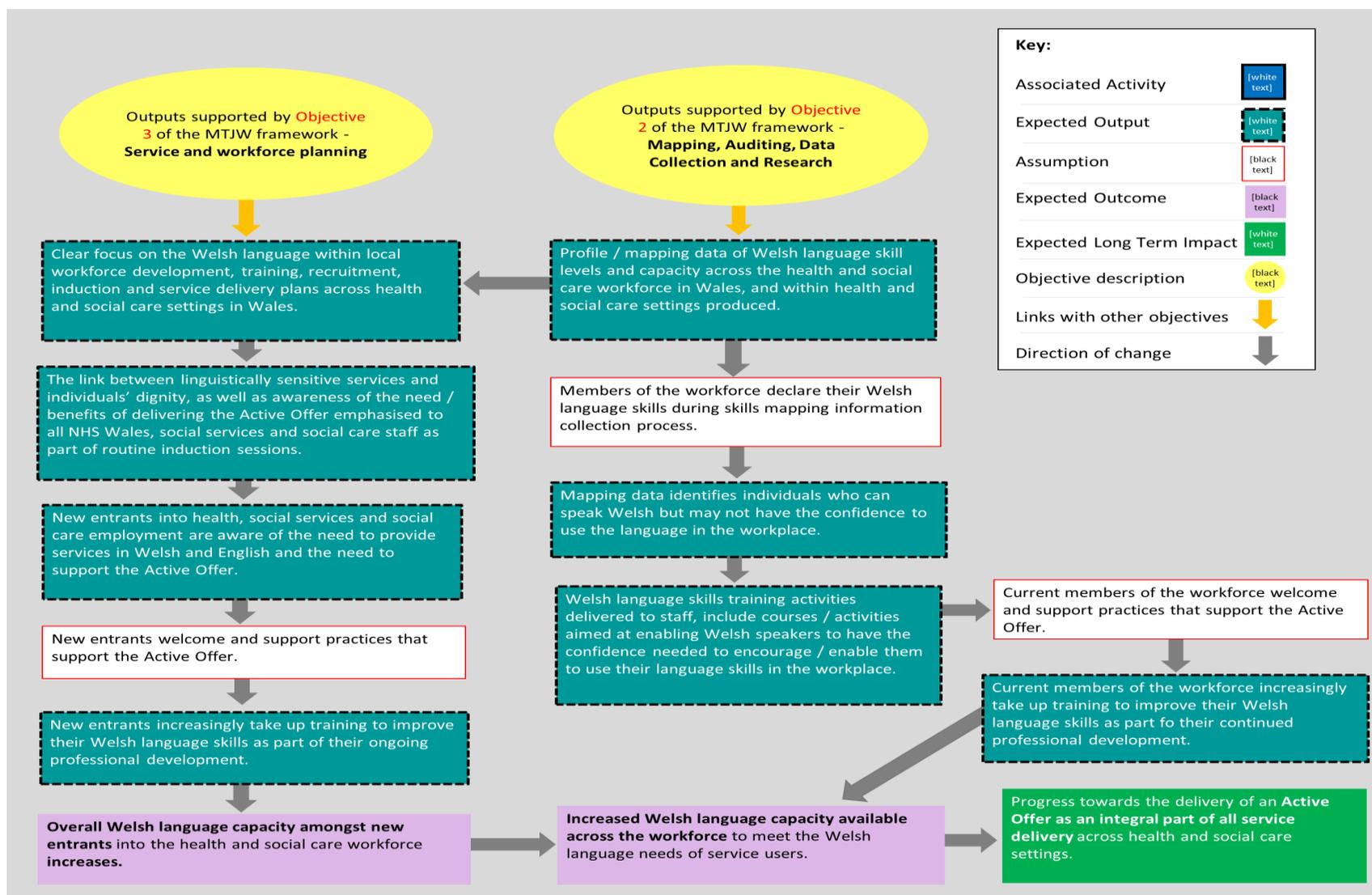
Figure 4.6: Theory of Change for Objective 5: Professional Education



## **Objective 6: Welsh in the workplace**

- 4.23 The *More than just words* document outlines that ‘in order to achieve the aims of the framework, NHS Wales and social services departments should develop an effective recruitment and retention strategy to ensure that staff teams have the capacity to provide services through the medium of Welsh’.
- 4.24 Recruitment and retention of staff was also recognised as a priority amongst those consulted. A number of contributors noted the challenges that exist across the sector in recruiting the required professional skills into some posts and expressed concerns that adding Welsh language skills as a desirable or essential requirement may make some positions very hard to fill.
- 4.25 As noted earlier in section 3, there was also a recognition that some Welsh language skills within the workforce were underutilised due to either a lack of confidence among some workers to speak Welsh in the workplace, and/or a reluctance amongst some Welsh speaking staff members to disclose their Welsh speaking skills for fear that they may be charged with delivering the majority, if not all of Welsh speaking services within their service delivery team.

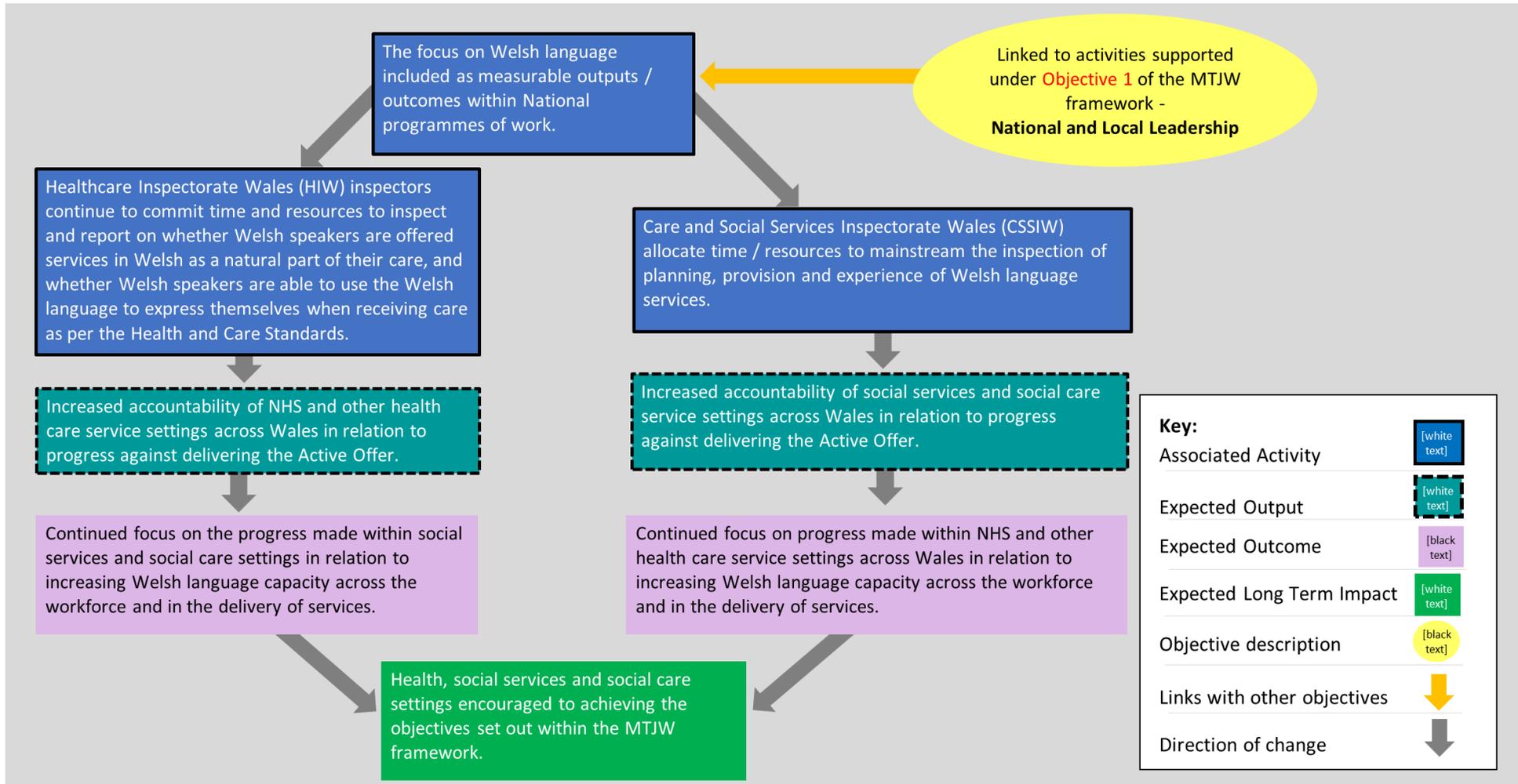
Figure 4.7: Theory of Change for Objective 6: Welsh in the workplace



## **Objective 7: Regulation and Inspection**

- 4.26 The *More than just words* framework notes that ‘the role of the inspectorates is vital if language need and a cultural shift to the Active Offer is to be made a reality. Their work will assess the experiences of people and identify whether they received linguistically appropriate care.’
- 4.27 Fieldwork contributors noted that in their view accountability was a core requirement in order to ensure that the plans and actions required to deliver the Active Offer were put in place. It was also noted that there was a risk that in the absence of accountability, only tokenistic actions to support the framework would be implemented. This it was noted was a particular risk given the competing demand for limited resources that already exists within the health and social care sector in Wales.

**Figure 4.8: Theory of Change for Objective 7: Regulation and Inspection**



## 5. Next steps

The theory of change findings outlined in this report will be used as the basis of the evaluation framework which will guide the next phase of the evaluation process. Our understanding of the linkages and interdependencies between the framework's objectives and core requirements and key drivers enables us to determine which areas to review, which questions to ask (and the potential sources that will provide answers to these questions). This in turn will inform us of the extent to which the *More than just words* framework encouraged and enabled progress towards delivering the Active Offer across the health and social care sector in Wales.

Key areas that will need to be reviewed and questions that will require answers include (but are not necessarily limited to) the following:

### *National / all sector level questions*

- Are there examples of prominent Assembly Members / Ministers and WG officials taking a leading role in supporting the objectives of the *More than just words* (MTJW) framework?
- Are there examples of Senior representatives across health boards, trusts, Social Care Wales and local authority social care departments in Wales, adopting a positive and supportive attitude and culture towards Welsh language and taking a leading role in supporting the objectives of MTJW within their settings?
- Do national health and social care policies and strategies emphasise the need to deliver Welsh language services in health and social care and / or the need to support Welsh language capacity or the health and social care workforce?
- Has a high priority on the MTJW objectives been placed within workforce development and service delivery strategy and planning processes?
- Do national programmes of work include Welsh language developments as measurable outputs / outcomes?
- Do Care and Social Services inspectorate Wales (CSSIW) and Health Inspectorate Wales (HIW) inspections hold health and social care settings to account in relation to the extent to which local service delivery planning processes meet the identified measurable outputs and outcomes?

- Have processes / systems in place recorded the profile / produced mapping data relating to the Welsh language skill levels across the health and social care workforce in Wales?
- To what extent did these systems fully capture data relating to the Welsh language skills across the sector?
- How has this data been used?
- What does the data outline about the Welsh language capacity trends across the sector between 2016 and 2019? To what extent is the Welsh language capacity amongst the future health and social care workforce increasing?
- Do / have more students taken up higher education and training courses delivered bilingually or in Welsh?
- Has the Welsh language capacity amongst future entrants into the health and social care workforce increased as a result?
- How and to what extent have the Welsh language needs of service users been met in the health and social care services delivered.
- Have service users across Wales been involved/ asked for views on improving Welsh language services?

*Local / case study level questions*

- Have proposed activities included in the service delivery plans that focus on Welsh language been put into practice across settings?
- Have / are service users able to access services in Welsh?
- Have Welsh language skills been included in staff training / CPD, and future staff recruitment processes across health and social care settings in Wales?
- Has Welsh language capacity within local health and social care workforces increased?
- Have processes / systems in place recorded the profile / produced mapping data relating to the Welsh language skill levels across the workforce within health and social care settings?
- To what extent did these systems fully capture data relating to the Welsh language skills across the sector? How has this data been used?
- Are Service users able to identify and engage with Welsh speaking staff when they access health, social services and social care? Are Service users able to

access information and service provision in the language of choice without having to specifically ask for this

- Have service users seen improvements/ increased awareness and offer of services in Welsh?
- Have service users been involved/ asked for views on improving Welsh language services?

## Annex A

### Intro text:

*The purpose of this discussion is to understand what you consider to have been the intended steps and actions to achieve the overall vision and aims of the More than just words follow-on strategic framework. Your views and those of others consulted during this stage, will be used to produce a theory of change model. A theory of change model identifies and maps out a set of connected outcomes or a pathway of change, that should lead from supporting the delivery of initial activities to achieving desired outcomes. The theory of change model produced will then inform the development of an evaluation framework which will guide the next stage of the study.*

The Welsh Government's original *More than just words* framework for Welsh language services in health and social care was launched in 2012. The follow-on strategic framework was launched in 2016 to maintain momentum but also support a greater level of recognition among service providers that the use of the Welsh language is not a just a matter of choice but also a matter of need. The framework set out actions under seven objectives: national and local leadership; mapping, auditing, data-collection and research; service planning; promotion and engagement; professional education, Welsh in the workplace and regulation and inspection.

At this stage we are gathering views on what **should ideally** take place to date in order to achieve the overall aims originally conceived within the framework, as opposed to what **has** taken place in practice. Gathering evidence as to what **has** taken place will be the focus of the evaluation phase that will follow later in the year.

Views you express will be anonymised. Notes and/or recordings gathered during the interview will not be shared with anyone outside of the evaluation study team and will be deleted three months after the end of the contract.

### Interview questions

**Interviewer to ask:** Did you receive the privacy notice which accompanied the invitation e-mail? Do you have any questions relating to that? Are you happy to proceed with the interview based on the information included in the notice? If interviewees have not received a copy of privacy notice – interviewer will produce a copy which the interviewee can review before the interview begins.

## Questions:

- What in your view should we ideally expect to see available / happening at this point in time, across Social Care and Health Services in Wales if the main aims and objectives of the *More than just words* framework had been fully achieved?
  - What would achieving these aims and objectives look like in practice - what would we expect to see being delivered / available to service users a) across all service areas b) within the service area you work in / represent?

e.g. All health and social care service users in Wales could access the service they need in either English or Welsh.

- What changes across all service areas / within your service area, do you think *More than just words* intended to support in order to achieve its aims? – what would these changes look like in practice?

e.g. More front line / customer facing staff employed across the sector who can deliver services bilingually.

- In what way / how would making / implementing these changes have led to achieving the *More than just words* aims?
- How could / would these intended changes supported / encouraged by *More than just words* be implemented / supported in practice across service areas?

e.g. Up skilling the Welsh language / bilingual skills of existing staff across the sector. Recruiting more staff with Welsh language / bilingual skills.

- What activities / resources would have been needed to support the introduction / development of the changes intended by *More than just words*?

e.g. Welsh language training for existing staff members. Increasing the priority placed on Welsh language skills within job descriptions and recruitment processes.

- What would the successful implementation of the activities and the planned changes you identified earlier be dependent on i.e. what factors would we need to

assume would occur/ be in place / be available to enable the actions and activities required to achieve the *More than just words* aims to take place?

e.g. staff across the sector being able / having the confidence / opportunity to use their Welsh language skills in practice.

- What needed to be in place to ensure that these *More than just words* success dependent factors, were supported across and within service areas?

e.g. buy-in and support from senior management and directors.

- What indirect external factors / policies could / have influenced achieving the aims and objectives of the *More than just words* framework?

e.g. the introduction of the Welsh language standards for health within the timeframe of the *More than just words* framework