GIG CYMRU NHS WALES

Llywodraeth Cymru
Welsh Government

Adroddiad lefel sefydliad

Organisation-level Report

Safon Cydraddoldeb y Gweithlu (SCG)
Gweithlu cynhwysol sy'n darparu'r gofal gorau

Workforce Equality Standard (WES)
An inclusive workforce provides the best care

1. Swansea Bay University Health Board: Organisational-level data snapshot

Priority Indicator	Data identified issue / Area requiring improvement	What Improvement Looks Like
Leadership and Representation	Persistent gaps in Board representation and senior progression, with inequality in recruitment conversion	Improved representation at senior and Executive levels, with equitable and consistent conversion from shortlisting to appointment
Professional development	Appraisal processes well established and delivered with minimal variation across staff groups	Sustained high appraisal coverage with equitable access and strong linkage between development and progression opportunities
Disciplinary and capability	Low case volumes but consistent variation in disciplinary outcomes across staff groups, indicating uneven application of processes	Consistent proportionate application of disciplinary thresholds and processes across all staff groups, supported by strong governance and oversight
Workplace behaviours	Elevated exposure to harassment and bullying across the workforce, with uneven experience across staff groups; moderate levels of discrimination	Significant reduction in harassment and bullying, with consistent behavioural standards and experiences across all staff groups regardless of protected characteristic
Wellbeing, safety and voice	High levels of physical violence alongside uneven confidence in speaking up, indicating variation in psychological safety across groups	Reduced exposure to physical harm and consistently strong confidence in speaking up, with staff experiencing safety and effective organisational response
Workplace conditions sustainability	Sustained high levels of burnout and workload pressure across the workforce, despite available support mechanisms	Reduced burnout and presenteeism, with demonstrably sustainable workload and consistent experience of recovery and support across all staff groups

2. Purpose and Scope

This report presents an equity-focused analysis of the Workforce Equality Standard data for SBUHB It highlights where staff experience differs by protected characteristic, where intersections deepen disadvantage, and where SBUHB has the strongest opportunities to act. The scope covers all protected characteristics captured in WES. It uses the same national indicators and methodology to ensure comparability and the focus is on actionable findings, not exhaustive description. To better describe organisational culture, the WES Indicators were grouped into six domains, aligned to contributors influencing workplace experience.

- **Leadership and Progression**
- **Professional Development**
- **Disciplinary and Capability**
- **Workplace Behaviours**
- **Wellbeing and Safety**
- **Workplace Conditions**

A thematic analysis allows more strategic insight, moving from a long list of indicators to a coherent organisational story for SBUHB. Grouping indicators that conceptually belong together allows patterns to

emerge and thus help identify systemic challenges rather than seeing indicator silos. It also allows anchoring the intersectional narrative in lived experience domains.

3. Executive Summary

There are systemic challenges across several key domains, particularly in relation to workplace behaviours, wellbeing and safety, and workplace conditions.

The most significant risks arise from high and widespread exposure to harassment, bullying, and physical violence, combined with sustained workload pressure and high levels of burnout. These experiences are not evenly distributed, with some staff groups—particularly those with protected characteristics and those in non-disclosure categories—experiencing consistently worse outcomes. While reporting of incidents is generally strong, confidence in speaking up varies across groups, indicating uneven psychological safety.

Workplace conditions represent a sustained structural risk, with high levels of burnout and continued pressure to work when unwell. Although support mechanisms such as flexible working and adjustments are in place, they are not sufficient to offset workload intensity or ensure recovery, pointing to a need for operational and workforce redesign.

Leadership and progression show moderate but persistent inequity, with clear underrepresentation at Board level and evidence that recruitment and senior progression processes are not consistently converting workforce diversity into leadership outcomes. Disciplinary processes, while low in volume, show consistent variation in outcomes across staff groups, suggesting the need for greater consistency in decision-making.

Overall, SBUHB's equity challenge is system-wide, driven by high exposure to harm and unsustainable working conditions, alongside inconsistent outcomes at key decision points. Addressing this will require coordinated action across culture, safety, leadership, and workforce sustainability, rather than isolated interventions.

Executive Assurance Questions
Are recruitment and senior progression decisions converting workforce diversity into equitable leadership outcomes?
Are appraisal and development processes being maintained at high equitable levels across all staff groups?
Are disciplinary processes applied consistently and fairly across all staff groups?
Are all staff experiencing a safe and respectful working environment, with consistent standards of behaviour and response?
Are staff equally safe from harm and consistently confident to speak up across all parts of the organisation?

Are recruitment and senior progression decisions converting workforce diversity into equitable leadership outcomes?

4. Domain Profiles

SBUHB has a workforce profile closely aligned with NHS Wales, with slightly higher ethnic diversity and broadly balanced representation across most protected characteristics, providing a strong basis for equity analysis.

- **Ethnic minority staff make up 12.5% of the workforce, marginally higher than the NHS Wales average (11.3%). Representation across Asian, Black, and Mixed/Other groups is broadly proportional, indicating a robust and visible ethnic minority pipeline for progression and experience analysis.**
- **The gender profile closely mirrors the national picture, remaining predominantly female, and the age distribution is well balanced, with similar proportions of staff aged 16–30, 31–50, and over 51 compared with NHS Wales. This suggests a stable mix of early-career, mid-career, and later-career staff.**
- **Disabled staff representation is slightly below the national average (5.7% vs 6.3%), while LGBTQIA+ representation is broadly aligned with NHS Wales.**
- **Levels of Unknown responses are somewhat higher than national levels for some characteristics, particularly disability and sexual orientation, while Prefer Not to Say rates are slightly lower than NHS Wales, indicating mixed but generally acceptable disclosure confidence.**
- **Religious affiliation closely reflects national patterns, with no single group disproportionately represented.**

Overall, SBUHB has a representative and stable workforce composition, with sufficient diversity across ethnicity, age, gender, and other characteristics to support meaningful and reliable equity analysis in subsequent domains.

4.1 Equity scoring

Equity RAG ratings were derived through a triangulated assessment of each domain, combining the scale of inequality (difference from benchmark), the consistency of patterns across protected characteristics, and the robustness of the data. Particular weight was given to signals that were repeated across multiple groups and indicators, while findings based on small numbers or inconsistent patterns were treated cautiously to avoid over-interpretation. The Equity Scorecard and ratings are designed to support data interpretation at a glance and to highlight specific areas of disparity. Priority actions have also been identified.

Rating	Meaning	Response
Minimal or no inequity	Broad parity; no consistent disadvantage pattern	Maintain what works
Mild inequity	Small or inconsistent differences	Monitor for deterioration
Moderate inequity	Consistent disadvantage across multiple indicators	Focused domain improvement action needed

🚫 **Severe inequity**	**Persistent, intersectionally reinforced disadvantage**	**Executive oversight needed**

4.2 Organisational Workforce Equity Scorecard

Domain	Overall equity signal	Characteristics most affected	Key intersectional risk signals	Comparison to national pattern	Primary equity signal	Action priority
Leadership and Representation	🟠 Moderate	Ethnic minority staff; disabled staff (senior levels)	Ethnicity and disability intersect with seniority and recruitment conversion	Similar to or slightly worse than national	Senior leadership pathways not converting workforce diversity into outcomes	Targeted (senior progression and recruitment conversion)
Professional Development	🟢 Minimal	None identified	No stable intersectional patterns	Stronger than national	Appraisal delivery equitable and well embedded	Maintain and assure quality
Disciplinary & Capability	🟠 Moderate	Ethnic minority staff (disciplinary entry)	Weak intersectional reinforcement; capability data limited	Broadly aligned with national	Low-volume but uneven use of formal disciplinary processes	Targeted (decision-making consistency and assurance)
Workplace Behaviours	🔴 Severe	Ethnic minority, disabled, women, LGBTQIA+, PNS	Reinforcing disadvantage across multiple characteristics	Worse than national across all indicators	Widespread and uneven exposure to harassment and bullying, with additional but more moderate levels of discrimination	Urgent (culture, prevention, and accountability)
Wellbeing & Safety	🔴 Severe	Ethnic minority staff; PNS groups	Ethnicity intersects with higher exposure; non-disclosure with lower voice	Worse than national on exposure	High harm exposure with uneven psychological safety	Urgent (harm reduction and speaking-up confidence)
Workplace Conditions	🔴 Severe	Ethnic minority, disabled, women, PNS	Reinforcing pressure and burnout across groups	Worse than national	Unsustainable workload and high burnout	Urgent (workload and recovery)

4.3 Leadership and Progression Domain

Equity rating	Headline finding
🟠 Moderate	**Clear Board-level under-representation, strong and repeated senior progression distortions, below-parity recruitment conversion, consistently lower confidence in fair progression**

Overview

The Leadership and Progression domain for SBUHB shows moderate inequity, with clear friction at Board representation, senior progression, and recruitment conversion stages, despite a diverse and broadly representative workforce.

At Board level, ethnic minority representation is below workforce levels (overall Board difference −12.5%), with greater under-representation at Executive level (−12.5% ethnicity; −18.8% disability). While Non-Executive representation is closer to workforce composition for some characteristics, the overall pattern indicates that senior leadership does not yet reflect the diversity of the workforce, particularly at Executive level. Elevated *Unknown* representation at Board level suggests that non-disclosure intersects with seniority and should be monitored.

Progression ratios across AfC bands show significant distortion at senior transition points. In particular:

- **Upper-to-senior and lower-to-senior transitions show ratios at or near zero for some characteristics, indicating very low likelihood of progression into senior roles.**
- **Earlier transitions (lower-to-middle and middle-to-upper) are less extreme, suggesting that progression barriers intensify at senior levels.**

Recruitment conversion from shortlisting shows a clear and interpretable equity signal. The overall likelihood of ethnic minority staff being appointed from shortlisting is below parity (LR ≈ 0.51). While this is less severe than in some organisations, it nonetheless indicates that shortlisting does not consistently translate into appointment for ethnic minority candidates, including within clinical and non-clinical roles.

Perceptions of fair progression are weaker than in several comparator organisations, with only 48.7% of ethnic minority staff and 56.6% of White staff agreeing that opportunities are fair. Lower confidence among *Other*, *Unknown*, and *PNS* groups reinforces the view that progression systems are not consistently trusted, particularly at senior levels.

Intersectional signals

Intersectional signals are present but not uniformly compounded. Ethnicity intersects most clearly with Board under-representation and recruitment conversion, while disability intersects with Executive-level representation gaps.

Lower confidence in fair progression among Other, Unknown, and Prefer Not to Say groups suggests that visibility and disclosure confidence intersect with progression experience, though these signals are not reinforced across all indicators.

Overall, the intersectional picture points to concentrated senior-level friction, rather than widespread disadvantage across all career stages.

Organisational interpretation

Leadership and progression systems in SBUHB appear functionally established but fragile at senior decision points. While the workforce provides a robust and diverse pipeline, this diversity is not being converted reliably into senior leadership outcomes.

The primary equity risk in this domain is therefore conversion and consistency, particularly at:

- **Shortlisting-to-appointment stages, and**
- **Progression into senior and Executive roles.**

Without targeted attention, these senior-level barriers risk undermining confidence and long-term equity outcomes, despite otherwise positive workforce composition.

4.4 Professional Development Domain

Equity rating	Headline finding
Minimal	Likelihood ratios at or above parity, high appraisal coverage across all protected characteristics, absence of reinforcing or compounded disadvantage

Overview

The Professional Development domain shows a strong and equitable picture, with high appraisal coverage across all protected characteristics and likelihood ratios at or very close to parity.

Overall likelihood of staff having a recorded appraisal is above parity (LR ≈ 1.02), indicating that appraisal delivery is not systemically unequal by protected characteristic. Appraisal rates for ethnic minority staff are high (76.5%), slightly higher than for White staff (74.9%), demonstrating no disadvantage in access to professional development.

Across gender, disability, age, sexual orientation, and religion, appraisal coverage is consistently in the mid-70% range, with only minor variation between groups. This suggests that professional development processes are embedded and routinely delivered, rather than dependent on individual managers or teams.

Importantly, Unknown and Prefer Not to Say groups also show comparable appraisal coverage, indicating that non-disclosure does not appear to limit access to appraisal or development opportunities.

Intersectional signals

Intersectional signals are weak and non-reinforcing. No protected characteristic shows consistently lower appraisal likelihood across multiple dimensions, and there is no evidence of compounded disadvantage.

This indicates that professional development processes are operating as a universal entitlement, rather than being selectively experienced.

Organisational interpretation

Professional development systems in SBUHB appear mature and consistently applied. While appraisal coverage is not yet universal, the distribution of access is equitable, and differences between staff groups are small, stable, and non-directional.

This domain represents a clear organisational strength and does not require targeted equity intervention. The focus should be on maintaining quality, consistency, and linkage between appraisal and progression, rather than addressing access gaps.

4.5 Disciplinary and Capability Domain

Equity rating	Headline finding
🟠 Moderate	Directional differences that warrant monitoring, limited ability to draw strong conclusions from capability data due to low case volumes

Overview

The Disciplinary and Capability domain shows a directional but cautious equity signal, based primarily on formal disciplinary processes (Indicator 8). Local capability process data (Indicator 9) is very low volume, which limits the strength of equity conclusions that can be drawn for capability.

Entry into the formal disciplinary process shows variation across protected characteristics, with an overall likelihood ratio above parity (LR ≈ 1.31). Absolute entry rates remain low across all groups, but ethnic minority staff show a higher entry rate (1.91%) compared with White staff (1.46%), indicating a directional disparity.

Similar directional differences are visible across some other characteristics (including disability and age), but these patterns are not consistently reinforced across all characteristics and should be interpreted cautiously in light of small absolute case numbers.

Capability processes (Indicator 9) are used very infrequently, with extremely small percentages recorded across all groups. While some likelihood ratios appear elevated, these are driven by single-case effects and are not suitable for robust equity interpretation.

Intersectional signals

Intersectional signals are weak and non-reinforcing. Ethnicity shows some association with disciplinary entry, but this is not compounded across multiple characteristics and cannot be triangulated meaningfully with capability data due to very low volumes.

Higher volatility in Unknown and Prefer Not to Say categories reflects small denominators rather than structural inequity.

Organisational interpretation

Formal disciplinary processes in SBUHB appear to be used sparingly, but with some unevenness in application across staff groups. The available evidence suggests a need for continued assurance and consistency checks, rather than indicating systemic failure.

Given the very limited capability data, the appropriate organisational response is routine monitoring and governance oversight, ensuring that thresholds and decision-making remain fair as case volumes fluctuate.

4.6 Workplace Behaviours Domain

Equity rating	Headline finding
Severe	High prevalence across harassment indicators, with moderate but still elevated discrimination

Overview

The Workplace Behaviours domain shows consistently high levels of harassment, bullying, and discrimination, with rates above NHS Wales benchmarks across all indicators. Exposure is both elevated and widespread, indicating a system-level issue rather than isolated risk.

Harassment from patients and the public is high across the workforce (mid-20% to low-30%), with ethnic minority staff (31.7%) and disabled staff (32.4%) reporting higher exposure than others. Staff-to-staff harassment is similarly elevated, with many groups above 25–35%, and particularly high levels among disabled and PNS groups.

Reported discrimination is also material and uneven, with higher rates for ethnic minority staff (19.2%), women (28.0%), and disabled staff (20.3%), confirming that negative workplace behaviours are persistent across multiple groups, albeit less extreme than harassment indicators.

Intersectional signals

Intersectional signals are strong and reinforcing patterns driven primarily by harassment indicators, with discrimination contributing but less consistently. The data shows repeated elevated exposure across:

- **Ethnicity (higher harassment and discrimination)**
- **Disability (notably high staff-to-staff harassment)**
- **Gender (significantly higher discrimination reported by women)**
- **Disclosure status (Unknown and PNS groups consistently reporting worse experience)**

Crucially, these patterns are repeated across all three indicators, indicating systemic inequity rather than isolated variation. The presence of multiple affected groups suggests that risk is embedded in organisational culture rather than confined to specific teams or roles.

Organisational interpretation

Workplace behaviours in SBUHB represent a significant and immediate organisational risk, driven primarily by elevated harassment and bullying.

The prevalence and consistency of high exposure across multiple indicators suggest that behavioural standards are not being applied consistently, and that existing prevention and response systems are not sufficiently effective.

This is not a marginal issue. The data indicates the need for organisation-wide action, such as strengthening behavioural expectations, improving consistency of response, increasing visibility of accountability, and ensuring confidence in reporting and resolution mechanisms.

4.7 Workplace Safety Domain

Equity rating	Headline finding
Severe	High levels of violence exposure across multiple groups, consistent reporting behaviour, repeated signals of uneven speaking-up confidence

Overview

The Wellbeing and Safety domain shows elevated levels of physical violence, with rates above NHS Wales benchmarks and variation across protected characteristics, alongside moderate and uneven confidence in speaking up.

Experience of physical violence is notably higher than national levels, particularly for ethnic minority staff (15.2% vs 12.7%) and for several other groups including LGBTQIA+ staff and those selecting Prefer Not to Say. Exposure is not confined to a single group, indicating widespread risk across the workforce.

Reporting of incidents among those affected is generally strong, with most groups reporting rates around 70–80%, suggesting that staff are willing and able to report incidents when they occur. However, some extreme values are driven by small numbers and should be interpreted cautiously.

Confidence in speaking up is moderate but slightly below national levels for some groups, typically mid-50% range, with lower confidence among PNS and some Unknown groups. This indicates that while reporting systems function, psychological safety is not consistently experienced across all staff.

Intersectional signals

Intersectional signals are present and partially reinforcing. Ethnic minority staff experience higher exposure to physical violence, while Prefer Not to Say and Unknown groups show lower confidence in speaking up.

Although these patterns are not fully compounded across all indicators, they suggest that risk and voice are unevenly distributed, particularly for less visible or less confident groups.

Organisational interpretation

Wellbeing and safety systems in SBUHB appear partially effective, with strong reporting behaviour but insufficient reduction in harm exposure and uneven confidence in speaking up.

The data suggests that staff are experiencing harm at relatively high levels, and while they are able to report concerns, not all groups experience consistent confidence in speaking up. This indicates a need to strengthen both prevention and psychological safety, rather than focusing solely on reporting mechanisms.

4.8 Workplace Conditions Domain

Equity rating	Headline finding
Severe	Consistent, system-wide patterns of elevated burnout and pressure, supported by robust survey data and reinforced across domains.

Overview

The Workplace Conditions domain shows a high-risk profile, with persistent pressure, high burnout, and only moderate access to flexible working, indicating that working conditions are not currently sustainable across the workforce.

Access to workplace adjustments is broadly appropriate, particularly for disabled staff, suggesting that formal support mechanisms are in place. However, access alone is not translating into improved experience.

Satisfaction with flexible working is lower than national levels, typically around 60–65%, indicating that flexibility is less consistently experienced or effective than in stronger organisations.

Pressure to attend work when unwell is widespread, with many groups reporting rates above 20%, and particularly high levels for disabled staff and some disclosure groups. This indicates ongoing presenteeism and workload strain.

Burnout levels are very high across all groups, typically 70–80%, and higher than national benchmarks. This includes elevated burnout for ethnic minority staff (74.1%), women (74.8%), disabled staff (81.7%), and PNS groups (80%+), indicating that pressure is both systemic and unevenly experienced. This indicates that workload pressure is both systemic and sustained rather than short-term or localised.

Intersectional signals

Intersectional signals are strong and reinforcing. Higher burnout and pressure are observed across:

- **Ethnicity**
- **Disability**
- **Gender**
- **Disclosure groups (PNS / Unknown)**

These patterns are consistent across both burnout and presenteeism indicators, indicating compounded disadvantage and systemic workload pressure.

Organisational interpretation

Workplace conditions in SBUHB are not sustainable in practice. While support mechanisms exist, they are insufficient to offset high workload demands, leading to widespread burnout and pressure to work when unwell.

This represents a structural workforce risk, requiring a shift from policy provision to workload reduction, recovery, and operational redesign.

5. Preserving What Works

The analysis highlights some important strengths:

- **Professional Development is equitable and well-embedded, with strong appraisal coverage.**
- **Workforce composition is diverse and representative, providing a solid pipeline.**
- **Reporting of safety incidents is reasonably strong, even where exposure is high.**

These strengths provide a foundation for recovery but need to be reinforced alongside improvements in higher-risk domains.

6. Data-Informed Opportunities for Action

The data indicates that SBUHB faces systemic equity challenges across multiple domains, particularly in leadership progression, workplace behaviours, wellbeing & safety, and workplace conditions.

The most urgent priorities lie in workplace behaviours and safety, where harassment and physical harm are high and widely experienced, with discrimination present but less consistently elevated. Action should focus on strengthening behavioural standards, improving accountability, and ensuring consistent response to incidents, alongside building confidence to report and resolve issues.

In workplace conditions, SBUHB must address workload intensity and recovery, as existing flexibility and adjustments are not reducing burnout or presenteeism. This requires a shift towards operational redesign and sustainable workforce planning.

In leadership and progression, the opportunity is to ensure that a diverse workforce is translated into equitable senior outcomes, by improving recruitment conversion and senior progression transparency.

Disciplinary processes show moderate and manageable risk, requiring ongoing assurance, while professional development remains a clear strength and should be preserved.

7. What Success Would Look Like

Success for SBUHB would involve a fundamental shift in workforce experience, particularly in reducing harm and improving sustainability.

- **In workplace behaviours and safety, success would mean substantial reductions in harassment, discrimination, and physical violence, alongside increased and consistent confidence to speak up.**
- **In workplace conditions, success would be reflected in lower burnout and reduced pressure to work when unwell, indicating that workload has become manageable.**
- **In leadership, success would involve improved conversion of workforce diversity into senior roles, supported by fair and transparent processes.**

Overall, success would be seen in reduced risk, narrowing disparities, and a more stable, sustainable workforce experience.

8. What Next

The WES organisational report sits at the midpoint of the NHS Wales planning and assurance cycle. This report should be used as a structured equity diagnosis, to informs IMTP planning and refinement of organisational strategic equality priorities. These priorities will translate into delivery plans and tested through SEP assurance meetings and mid-year assessment (October). Findings will be reported through the governance process to Boards and Welsh Government, enabling scrutiny of both progress and impact. As the cycle repeats annually, this creates a continuous feedback loop—linking data, planning, delivery, and assurance—ensuring sustained governmental oversight, accountability, and progressive improvement in workforce equity outcomes.