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Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board

Achieving Equity

Strategic Equality Plan

2024 - 2028



Accessibility Statement

This report and any supporting documents are available in Welsh and can be made available in other languages and formats on request

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Foreword

Welcome to Betsi Cadwaladr University Health Board's (BCUHB)
Strategic Equality Objectives and Action Plan for 2024-2028.

This plan demonstrates our continuous commitment to promote and deliver equality, diversity and human rights in all that we do. The Health Board is committed to equity in health for our service users. We are committed to creating a fairer and more diverse workplace, where diversity is welcomed and people are valued. During 2020-2024, the Health Board has experienced the growing challenges facing the NHS as it responds to unprecedented service pressure, new medical technologies, and a changing workforce and different health issues.

Our SEP is a key part of the Health Boards commitment to achieving our goals of:

- Improve physical, emotional and mental health and well-being for all.
- Target our resources to people who have the greatest needs and reduce inequalities.
- Support children to have the best start in life.
- Work in partnership to support people – individuals, families, carers, communities – to achieve their own well-being.
- Improve the safety and quality of all services.
- Respect people and their dignity.
- Listen to people and learn from their experiences.

As a Health Board, we will work to ensure that our statutory obligations to deliver the Public Sector Equality Duty and the Socio-economic Duty are

understood and discharged. We will scrutinise implementation of our Strategic Equality Plan (SEP), agreed by our Health Board in 2024, and will strive to ensure that our organisation is fair, responsive, inclusive and accessible for all, as we work towards the goal to create a fairer, more equal Wales.

The Health Board recognises that for positive changes to happen within our organisation and the wider society, we need to identify the barriers that prevent people accessing healthcare. We need to address issues relating to access to services, infrastructure, socio-economic disadvantage and the diversity of our workforce and population. We need to work in partnership to remove barriers to achieve equality of outcomes and uphold people's rights.

This plan acknowledges the evidence and recommendations in the strategic frameworks such as the Commission for Equality and Human Rights, *Equality and Human Rights Monitor 2023, Is Wales Fairer?* The Welsh Government's *Locked Out Report: liberating disabled people's lives and rights in Wales beyond COVID-19* and *Advancing Gender Equality in Wales Plan 2020-2023*.

Other key national drivers for our Equality Objectives include the *Anti-racist Wales Action Plan* and *LGBTQ+ Action Plan for Wales*. We recognise that within the four year cycle of this plan the Welsh Government's Disability Task Force will have led to a *Disability Plan for Wales*. The Health Board will incorporate the recommendations and actions into its plans, both within the SEP and key Health Board documents such as the *Integrated Medium Plan (IMTP)* and the Health Board Long Term Plan – *Living Healthier, Staying Well*.

The Health Board believes that equality is about providing personalised care based on an individual's needs. It is about treating everyone with dignity and respect. We must consistently communicate effectively, meet individual needs and continually review our services to ensure that they are and remain accessible and inclusive.

The Health Board would like to thank everyone who has taken the time to provide their views, ideas and feedback. They have shaped our priorities for action and formed the basis of the Equality Objectives within our Strategic Equality Action Plan.



Dyfed Edwards
Chair



Carol Shillabeer
Chief Executive

Our Commitment to Achieving Equity

Promoting equality, inclusion and valuing diversity are all fundamental to accessing health care and addressing better health outcomes.

The Health Board's Commitment to Equality, Diversity and Inclusion is at the centre of everything we do. This involves building an inclusive, and diverse working environment, where equality is advanced, diversity is valued and there is a core belief in equitable access to services and discriminatory behavior is challenged from the start. We want our staff to feel valued and safe at work.

We want our patients and their families, friends and carers to feel safe and have trust in us. We recognise that when we create this culture, our services will also benefit and be compassionate, inclusive and accessible. The goal for our Strategic Equality Objectives for the next four years is focused on reducing health inequalities, and improving wellbeing and healthcare in north Wales.

This document sets out our Strategic Equality Objectives for the next four years and aims to demonstrate how we will meet the Equality Duty. Our objectives are guided by the BCUHB Vision, Values and Purpose.

Our Vision:

- We will improve the health of the population, with particular focus upon the most vulnerable in our society.
- We will do this by developing an integrated health service which provides excellent care delivered in partnership with the public and other statutory and third sector organisations.
- We will develop our workforce so that it has the right skills and operates

in a research-rich learning culture.

Our Values:

- Put patients first.
- Work together.
- Value and respect each other.
- Learn and innovate.
- Communicate openly and honestly.

Our Purpose: To improve health and deliver excellent care.

About the Health Board and the Population in north Wales

Betsi Cadwaladr University Health Board is the largest health organisation in Wales covering 2,500 square miles, and is responsible for providing primary care, community care, mental health, public health and acute hospital services.

We have three district hospitals; Ysbyty Gwynedd in Bangor, Ysbyty Glan Clwyd in Bodelwyddan and Wrexham Maelor Hospital, along with a network of community hospitals, health centres, clinics, mental health units and community team bases. We also coordinate the contracting arrangements of Primary Care services and NHS services provided by dentists, opticians and pharmacists in north Wales¹.

686,909 people live in north Wales². BCUHB is an anchor institution and we

¹ <https://bcuhb.nhs.wales/>

² On census day 2021

employ a significant number of staff – 19,376 people, of whom the vast majority also access our services. As an anchor institution, we recognise that we have a role in working with communities across north Wales to support and encourage them into health and social care career pathways.

Features within north Wales:

- We have a large geographical area covering significant rural areas.
- We have a growing older population and variation of age profiles across Local Authorities.
- We are less ethnically diverse than Wales.
- We have significant numbers of our population who are Welsh-language speakers.
- We have an increasing number of people with long term health conditions and 10.2% of people provide unpaid care³.
- We have some of the most socio-economically deprived areas in Wales, particularly along the north Wales coastline which has been worst hit by the cost of living crisis.
- 23.1% (862 offences) of all hate crimes in Wales (reported 2022-2023) were in north Wales with disproportionate high rates of transgender and disability related hate crime⁴.

We recognise that health inequalities in north Wales exist and we are committed to achieving equity in health. Further demographic data are in Appendix 2.

³ Nomis - Official Census and Labour Market Statistics - Nomis - Official Census and Labour Market Statistics (nomisweb.co.uk)

⁴ Hate crime, England and Wales, 2022 to 2023 second edition - GOV.UK (www.gov.uk)

Equality Legislation and Strategic Context

The Strategic Equality Plan contains the key priority areas that the Health Board needs to focus on to improve the lives and experiences of people in Wales. These are aligned to a range of national and local strategic drivers, which will be included in the implementation action plan. The Health Board recognises that during the four year life time of these Equality Objectives and Strategic Equality Plan, we will see the publishing of the Welsh Government's Disability Action Plan. The key areas for action identified will be included in the implementation plan to ensure that resources are allocated and progress is made.



Table showing alignment of the legislative requirements, strategic drivers, engagement and local plans:

Further details on these are contained within Appendix 1.

Legislative Compliance ↓	Strategic Drivers ↓	Engagement and Involvement ↓	Alignment with BCUHB plans ↓	Intelligence and Success Indicators ↓
Wellbeing of Future Generations Act	Maternity Care in Wales – 5 Year Vision	NHS Wales Equality Leadership Group	BCUHB Living Healthier, Staying Well	Population Demographics
Socio-economic Duty	Gypsy, Roma and Traveller Health Needs Assessment	Internal Consultation	Duty of Candour	Health Needs Assessments
Human Rights Act	Age Friendly Wales	Equality Stakeholders	Risk Management Strategy	Census Data (Knowing Our Patch internal document)
The Children's Act	Advancing Gender Equality in Wales	Equality Networks	Integrated Medium Term Plan/Annual Plan	Employment Data
Social Services and Wellbeing (Wales) Act	Nation of Sanctuary	Public Consultation	Health and Wellbeing Plans	Hate Crime Data
Public Sector Equality Duty	Women's Health in Wales Report	Stakeholder Engagement	NHS Wales Planning Framework	Performance Metrics

Health and Social Care (Quality and Engagement) Act 2020	Accessible Communication Standards	Patient Groups	Communications and Engagement Strategy	Workforce Data
Duty of Quality	Anti-racist Wales Action Plan	LGBTQ+ Listening Event	North Wales Public Sector Equality Network	Waiting List Data
	Code of Practice for Autism	Anti-racist Plan engagement	Special Measures Framework	Pay Gap Reports
	Is Wales Fairer?	Partnership Intelligence	Integrated Health Community Plans	Patient Experience Data
	Children and Young People's Plan		Cluster Plans	
	Welsh Government Strategic Equality Plan		Estates Strategy	
	Disability Rights Taskforce		Getting It Right First Time	
	LGBTQ+ Action Plan		People Strategy	

Special Measures Framework

In February 2023, Welsh Government placed the Health Board into Special Measures. Special measures is the highest escalation level, identified when arrangements need significant change and improvement.

“Key to achieving this will be supporting and enabling our staff to deliver high quality effective services. We recognise that compassionate leadership will be crucial to creating a culture where staff feel empowered achieve this.”

What are Strategic Equality Objectives?

As a listed body in Wales under the Equality Act 2010, we are required to publish Strategic Equality Objectives and develop a plan every four years. As a large organisation in Wales, we are an ‘anchor institution’. This means that our long-term sustainability is tied into the wellbeing of the populations we serve. Our responsibilities are both as a health provider and employer. The purpose of this Strategic Equality Plan is to describe BCUHB and document the steps that the Health Board is taking to fulfil its Specific Duties under the Equality Act. The Strategic Equality Plan is aligned to Regulations 14 and 15 within the Public Sector Equality Duty in regards to publishing and review work.

How did we develop our Strategic Equality Objectives?

The Equality Objectives have been co-designed, recognising that a focus on health alone will not meet the diverse needs of our population. Taking a whole system approach and working in partnership with a range of people

and organisations across the public, private and third sectors is the most effective and inclusive way to understand the experiences, views and needs of our population, and how we can appropriately respond to them.

In June 2023, the Health Board launched a public survey, inviting public sector organisations, businesses, community groups, patients, carers and the wider population of north Wales to complete. This was available online and several face-to-face engagement sessions took place across north Wales. The Equality team attended community group meetings and events to meet as many members of different communities across north Wales as possible.

The results of the engagement work were analysed by the Equality Team and an initial 17 themes emerged. From these, six overarching objectives were identified. These give the framework for the development of the action plan. This information alongside who took part can be found in Appendix 3. Additional engagement work has been undertaken as part of the Anti-racist Action Plan and the LGBTQ+ Action plan. Further engagement was undertaken by North Wales Public Sector Equality Network. The Shared Objectives can be found in Appendix 4.

We undertook extensive analysis of our strategic drivers, legislative requirements and local intelligence to ensure these are reflected in this plan while also aligned to the integrated medium term plan.

Our Strategic Equality Objectives for 2024-2028



Introducing our Strategic Equality Objectives

Objective A: Achieving equity by working in partnership – ‘nothing about you without you’



Working in
Partnership

Statement:

This objective underlines our commitment to listening to and working with our partners and population to design and deliver equitable, rights based healthcare that is sustainable.

What the evidence tells us:

We know that we need to work with people.

- The Marmot Review⁵ tells us that: "Health inequalities result from social inequalities. Action on health inequalities requires action across all the social determinants of health."
- From the engagement process in developing the Strategic Equality Objectives within this plan, it was clear the importance of peoples voices and experiences in co-production.
- The strategic drivers outline the duty to engage such as a commitment to improve public engagement under the ‘A Healthier Wales’ wellbeing goal under the wellbeing of Future Generations Act 2015.

⁵ Marmot Review 10 Years On - IHE (instituteofhealthequity.org)

How we plan to achieve this:

Priority		Intended Outcomes	Outcome Measures	Timescales
A1	To identity opportunities in embedding principles of co-production and co design for transformation programmes, strategy development, service planning and review and key guidance and reports. To nurture service user involvement.	<p>To ensure evidence of inclusive decision making is consistent.</p> <p>To ensure that the lived experience of the north Wales population, including those living with known health inequality, informs service development.</p> <p>Increase in the accessibility of health services.</p> <p>Developing a stronger relationship between service users and service providers.</p>	<p>Number of strategies and business cases going to Board that have been co-produced.</p> <hr/> <p>Percentage of strategies and business cases going to Board that have been co-produced.</p>	2024-2025
A2	Progress recommendations within the Women's Health in Wales Discovery Report to improve the health outcomes for women and girls.	<p>Identifying and embedding techniques and behaviours that ensure Women's and girls' voices are heard in every interaction they have with the NHS.</p> <p>Providing prompt access to help and support across the health system.</p> <p>Developing better workplace and mental</p>	<p>Patient related experience measures.</p> <hr/> <p>Patient related outcome measures.</p> <hr/> <p>Staff numbers accessing Staff Wellbeing and</p>	2024-2028

		<p>health support, enabling increased uptake of self-care and lifestyle management, and enhancing support to cope with the health and wellbeing consequences of parental and carer responsibilities.</p> <p>Enhancing and providing easier access to high quality information resources.</p> <p>Pioneering best practice and providing advice and guidance on how the workplace can support wellbeing, work/life balance and mental health.</p> <p>Evidence base created based on research on key topics that support the needs of women and girls to be used to raise awareness and understanding.</p>	<p>Support Services.</p> <p>NHS Staff Survey around supporting staff with wellbeing.</p> <hr/> <p>Patient related experience measures.</p> <hr/> <p>Patient related outcome measures.</p>	2025-2028
A3	Develop an evidenced based engagement programme informed by Health Needs Assessments to involve underserved groups.	To improve the relationship between groups representing people who share protected characteristics and Health Board leaders.	Outcome measures to be determined by the evidence base.	2024-2026
A4	Use the Well North Wales programme to	Reduce health inequalities.	Annual review of Public Health Data	2024-2028

	work with partners to further develop system approaches to reducing health inequalities.		will measure progress.	
A5	BCUHB to continue to actively influence and support Wales NHS Equality Leadership Group.	Shared approach in key areas such as Equality Impact Assessments.	Increase of collaborative Equality Impact Assessments, Improved quality of assessment completed.	2024-2025
		Welsh Government Reporting and coordination of Equality campaigns.	Increased sharing of resources around campaigns.	2024-2028
A6	To develop an equality support function for the Regional Partnership Board for improving health outcomes.	Enhance the understanding of health inequalities and Public Sector Equality Duty responsibilities leading to improved decision making.	Clear equality principles adopted through Regional Partnership Board priorities.	2025-2026

Objective B: Achieving equity by providing high quality inclusive services

Inclusive
Services

Statement:

This objective underlines our commitment to develop and deliver services at the right time, and in the right environment that is truly accessible, and that will meet individual needs.

What the evidence tells us:

- Health Inspectorate Wales National Review of the experiences of maternity services⁶ highlighted the negative experiences and outcomes of ethnically diverse people accessing maternity care.
- The Locked Out Report⁷ highlighted the adverse experiences of disabled people including barriers to accessing maternity services, primary care, urgent and emergency care.
- Many Deaf people are not recorded as being Deaf in their primary care records. If they are then referred to other health services, specific details that may impact on their health service experience are frequently not passed on and therefore unknown⁸.
- Within healthcare settings LGBTQ+ people feel that they may face unequal treatment and discrimination. Examples of these inequalities are highlighted in the LGBT Health report conducted by Stonewall⁹, stating almost one in four LGBTQ+ people (23%) have at one time witnessed discriminatory or negative remarks against LGBTQ+ people by healthcare staff. In addition, 14% of respondents avoided healthcare treatment due to

⁶ phw.nhs.wales/services-and-teams/improvement-cymru/our-work/matneossr/report/

⁷ Locked out: liberating disabled people's lives and rights in Wales beyond COVID-19 [HTML] | GOV.WALES

⁸ https://www.swansea.ac.uk/media/Deaf-People-Wales_Hidden-Inequality-2021.pdf

⁹ lgbt_in_britain_health.pdf (stonewall.org.uk)

concerns that they would experience discrimination because of their LGBTQ+ identity.

How we plan to achieve this:

Priority		Intended Outcomes	Outcome Measures	Timescales
B1	To implement BCUHB Anti racist Action Plan (ARAP).	Full details of outcomes are aligned to the Anti racist Wales Action Plan.		
B2	To develop and implement BCHUB LGBTQ+ Action Plan – Together in Pride - Making Wales the most LGBTQ+ friendly nation in Europe.	Full details of outcomes are aligned to the LGBTQ+ Action Plan for Wales – Together in Pride - Making Wales the most LGBTQ+ friendly nation in Europe.		
B3	To implement Welsh Government Code of Practice for Autism Services.	Full details of outcomes are aligned to the Welsh Government Code of Practice for Autism Services.		
B4	To review the findings of the Welsh Government Disability Rights Task Force and implement any recommendations.	Outcomes and measure for this priority are awaiting the publication of the Welsh Government report.		
B5	Ensure the availability of accessible information to patients and carers in line with the Accessible Communication Standards, including BSL charter and Welsh	<p>Improve the access to information and services for people who experience communication barriers.</p> <p>Improve staff awareness of Welsh Interpretation and Translation Language Service (WITS).</p>	<p>Produce and distribute community language packs.</p> <p>Uptake of WITS service.</p>	<p>2024-2025</p> <p>2024-2028</p>

	Language standards.	Pilot the use of Sign Live BSL interpretation digital app.	Evaluation report.	2024-2026
		Sign up to the BSL Charter	BCUHB sign up to the BSL: Charter.	2024-2028
B6	Embed the Children's Rights Charter across Transformation Programmes.	Improve awareness of Children and Young People's rights in health care.	<p>Patient related experience measures.</p> <p>Patient related outcome measures.</p> <p>Sign up to the Children's Right Charter.</p>	2024-2028
B7	Implement a My Health Passport scheme – All About Me, across Primary and Secondary Care.	<p>Improve the experiences of patients who share protected characteristics.</p> <p>To promote person centred care.</p>	<p>Patient related experience measures.</p> <p>Evaluation of Health Passport scheme.</p>	2025-2027
B8	To implement the north Wales Accessibility Panel project.	Improve the accessibility of places and spaces that contribute to health care and public health.	<p>Number of participants who undertake audits training.</p> <p>Implementation of the findings of audits reports.</p>	<p>2024-2025</p> <p>2025-2028</p>

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Objective C: Achieving equity through Governance and Accountability

Governance
and
Accountability

Statement:

This objective underlines our commitment to doing things transparently with honesty and integrity.

How we plan to achieve this:

Priority		Intended Outcomes	Outcome Measures	Timescales
C1	Improve BCUHB digital systems and processes to record and monitor patient and workforce equality data to inform intelligence led planning.	Ability to disaggregate patient and workforce data by protected characteristic to inform inclusive decision making.	Increase Protected Characteristic data available from Patient Systems – year on year.	2024-2028
			Increase Protected Characteristic data available from Workforce Information Systems year on year.	2024-2028
C2	To strengthen compliance with the Socio-economic Duty.	Reduce inequalities of outcome within strategic decision making for those who experience	Number of strategies and business cases going to Board that	2024-2028

		socio economic disadvantage.	have Socio economic assessment completed.	
C3	Establish parity for 'equality' as a performance domain within BCUHB performance framework.	Increased accountability on delivering inclusive care. Equality Key Performance Indicators (KPIs) to be embedded within BCUHB Performance Framework.	Improve performance within the Equality KPI's year on year.	2026-2028
C4	Develop and embed an equality and human rights based framework for inclusive decision making, for project management processes, pathway review and procurement.	To improve guidance around inclusive decision making. To embed equality principles in governance processes. Undertaken Equality Maturity matrix self-assessment.	Improvement of Equality Maturity matrix self assessment score year on year.	2024-2028
C5	To deliver regular equality education sessions to the Board to embed equality and human rights duties.	To ensure that Board Members know their duty – in relation to the Equality Act 2010.	Attendance numbers. PADR objectives in relation to equality.	2024-2028 2025-2026

Objective D: Achieving equity by being a kind and compassionate organisation

Kind and
Compassionate

Statement:

This objective underlines our commitment to showing everyone kindness, respect and dignity that everyone is entitled to.

What the evidence tells us:

- Recognising the need to build trust with our communities.
- The Public Sector Equality Duty¹⁰ requires evidence of clear transparent decision making. This includes evidence of **Due Regard** to the need to:
 1. put an end to unlawful behaviour that is banned by the Equality Act 2010, including discrimination, harassment and victimisation
 2. advance equal opportunities between people who have a protected characteristic and those who do not
 3. foster good relations between people who have a protected characteristic and those who do not
- Evidence shows that “if leaders and managers create positive, supportive environments for staff, those staff then create caring, supportive environments for patients, delivering higher quality care”¹¹.
- As part of the engagement process stakeholders raised concerns about incidents of non-inclusive behavior.
- Evidence from Datix and Patient Carer Experience highlights the

¹⁰ Equality Act 2010 | EHRC (equalityhumanrights.com)

¹¹ Developing Collective Leadership For Health Care | The King's Fund (kingsfund.org.uk)

need for further support around compassionate and inclusive care.

- Emerging data from the NHS Wales Staff Survey in BCUHB 20% of staff strongly agreed that care of patients/ service users is the organisations top priority.

How we plan to achieve this:

Priority		Intended Outcomes	Outcome Measures	Timescales
D1	Embed equality principles and outcomes within the BCUHB Leadership, Culture and Engagement programme of work.	Board members, Senior Leaders and Managers to take an active role in the oversight of Equality, Diversity and Inclusion priorities supported by greater awareness and training.	Attendance numbers. PADR objectives in relation to equality.	2024-2028 2025-2028
D2	Improve the support for staff facing socio-economic disadvantage.	Managers to signpost appropriate support to staff. Staff are able to access and receive support.	Number of people accessing Money Helper Service.	2025-2026
D3	Strengthen and further develop equality related actions to improve diversity in our recruitment, and to effectively support our workforce.	Improve the diversity of applicants and appointments.	Improvement within workforce equality reporting for protected characteristics.	2024-2028
D4	Publish pay gap reports for gender, race and disability to further inform workforce planning to reduce pay gaps.	Close the pay gap for gender, race and disability. Improve working conditions and workforce retention.	Reduction of the pay gap differences year on year within the pay gap reporting.	2024-2028

D5	Develop role of Equality and Inclusion Champions across the BCHUB workforce.	Improve participation of Equality Champions within all services across BCUHB.	Increase number of Equality Champions.	2025-2028
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Objective E: Achieving equity by innovation

Innovation

Statement:

This objective underlines our commitment to continuous learning, innovative practice and approaching new ideas with an open mind.

What the evidence tells us:

- People who are in most need of health and care including disabled people and older people are the least likely to be on-line according to the Inverse Digital Care Law.¹²
- The Socio-economic Duty requires the Health Board to reduce inequality of outcome for those who experience socio-economic disadvantage.¹³
- By increasing awareness, we achieve greater understanding of the barriers faced for people who share protected characteristics and communities of interest. This will help find solutions to meet the needs of our communities.

¹² <https://www.nuffieldtrust.org.uk/news-item/digital-and-remote-primary-care-the-inverse-care-law-with-a-21st-century-twist>

¹³ <https://www.gov.wales/socio-economic-duty-overview>

How we plan to achieve this:

Priority		Intended Outcomes	Outcome Measures	Timescales
E1	Develop a digital inclusion evidence and best practice resource.	Inform the delivery of the Digital Roadmap.	Improved uptake of digital appointments.	2024-2025
		Gain an evidence based understanding to barriers to digital inclusion. Understanding community digital assets.	Improved feedback of our digital services.	2026-2028
E2	Horizon scanning: proactive responses to legislative changes that impact on health and wellbeing services.	Leaders and senior Managers are aware of new / upcoming legislation that has an impact on health and wellbeing services.	BCUHB involvement in consultation responses for white papers.	2024-2028
E3	To increase awareness of equality campaigns and events aligned to BCUHB strategic priorities.	Increased representation from contributions to equality campaigns across BCUHB.	Attendance to events.	2024-2028
		Increased visibility of equality related events and activities.	Visits to Betsi Net Equality pages and number of likes / comments.	2024-2028
E4	To take action to address health needs of vulnerable groups. (E.g., homelessness, Gypsy, Roma and Traveller,	To prevent and reduce health inequalities in vulnerable groups in North Wales. To improve the physical and mental health outcomes of	Progress on the BCUHB action plan on improving equality monitoring.	2024-2028

	<p>socio-economic disadvantaged.)</p>	<p>vulnerable groups in north Wales.</p> <p>Improved access to prevention and health care services for vulnerable groups in North Wales</p> <p>Data available by protected characteristics to identify the health needs of vulnerable populations, and inform the provision of services through an inequalities lens.</p> <p>Asylum seekers and Refugees health care needs are met alongside the needs of the wider community.</p> <p>Staff and prisoners have an increased understanding of suicide prevention.</p> <p>Opportunities to prevent homelessness are better understood across the system.</p> <p>People with learning disabilities are not experiencing premature mortality due to</p>	<p>Increase in number of equality monitoring fields completed on Welsh Patient Access Scheme (WPAS).</p> <hr/> <p>Progress on plan of action to meet the increasing number of Asylum Seekers resident in North Wales</p> <hr/> <p>Increase in knowledge and understanding of suicide prevention for staff</p> <hr/> <p>Local Authorities Homelessness strategies are mapped across North Wales.</p> <hr/> <p>Uptake rates for screening and</p>	
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		preventable health conditions	NHS Health Checks.	
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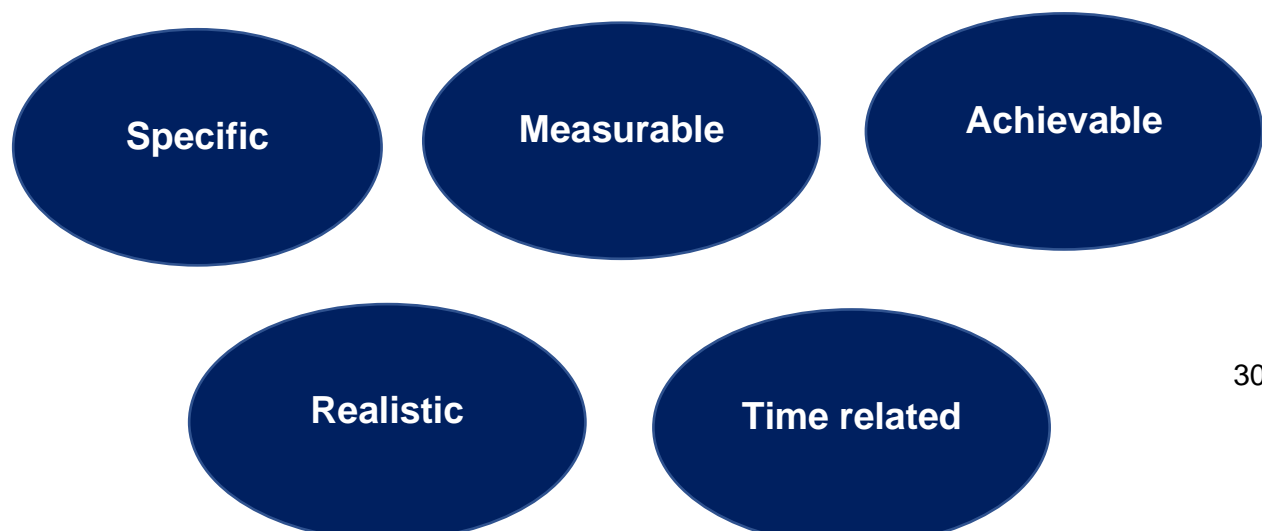
Our commitment to delivering our objectives

Our Strategic Equality Objectives will require commitment and shared ownership from all areas of the Health Board, supported by a learning culture that embraces positive change. Overall responsibility for our Equality Objectives lies with the Board.

This plan is aligned to existing priority areas of work and therefore, should be cost neutral. Any additional funding that becomes available will enhance progress of the objectives identified throughout the health board.

Each of the priority areas will require further detailed planning throughout 2024-2028 and will need to be flexible to account for legislative change and changes within our population.

We are actively committed to adopting a 'co-production' approach to how we develop plans to achieving our equality objectives. This will have oversight by the Equality and Human Rights Strategic Forum and will align to strategic intent and will be SMART:



Progress of our Strategic Equality Plan will be reported through:

- BCUHB Equality and Human Rights Strategic Forum quarterly.
- Welsh Government bi-annually.
- Equality Annual Report – published on our website.

Appendices

1: Equality related legislation and strategic drivers information

2: Demographic information

3: Strategic Equality Plan Engagement information

4: North Wales Public Sector Equality Network – Shared Objectives

Appendix 1: Equality Legislation and Strategic Context

The Equality Act 2010

The Equality Act 2010 protects people and groups from unfavourable treatment and makes it unlawful to discriminate, harass or victimise people because of a reason related to their protected characteristic.

The Public Sector Equality Duty

Section 149 of the Equality Act 2010 requires us to demonstrate compliance with the Public Sector Equality Duty (PSED), which places a statutory duty on the Health Board to:

- Eliminate unlawful discrimination, harassment, and victimisation;
- Advance equality of opportunity between persons who share a relevant protected characteristic and those who do not;
- Foster good relations between those who share a relevant protected characteristic and those who do not.

The Health Board also has a specific duty under the PSED to undertake the following actions:

- Publish information to demonstrate compliance with the Equality Duties, at least annually
- Set equality objectives, at least every 4 years.

The Socio-economic Duty

The Socio-economic Duty was introduced by the Welsh Government on 31st March 2021, implementing a previously dormant section of the Equality Act (2010). Its aim is to deliver better outcomes for those who experience socio-economic disadvantage. It further enhances current equality legislation and the Wellbeing of Future Generations (Wales) Act 2015 and Social Services and Wellbeing (Wales) Act 2014. The Socio-economic Duty places a requirement on the Health Board that when taking strategic decisions, the Health Board has due regard for the need to reduce inequalities of outcome that result from socio-economic disadvantage.

Welsh Language (Wales) Measure 2011

The Welsh Language (Wales) Measure 2011 includes the provision required for the Welsh language. This measure works towards ensuring that the Welsh language is treated no less favourably than the English language.

Wellbeing of Future Generations (Wales) Act 2015

The Well-being of Future Generations (Wales) Act gives us the opportunity to think differently and to give new emphasis to improving the well-being of both current and future generations. The Well-being of Future Generations Act requires us to think more about the long-term, work better with people, communities and organisations, seek to prevent problems and take a more joined-up approach. This Act puts in place seven well-being goals, and we need to maximise our contribution to all seven.

We need to change the way we work, ensuring we adopt the sustainable development principle defined within the Well-being of Future Generations Act – this means taking action to improve economic, social, environmental

and cultural well-being, aimed at achieving the seven goals. These are the five ways of working we need to think about when working towards this.



We have sought to reflect the 5 ways of working in developing our Strategic Equality Plan. One of our duties under the Well-being of Future Generations Act is to set wellbeing objectives for the Health Board. The Health Board have identified the following seven well-being objectives with partners and stakeholders:

- ✓ To improve physical, emotional and mental health and wellbeing for all
- ✓ To target our resources to those with the greatest needs and reduce inequalities
- ✓ To support children to have the best start in life
- ✓ To work in partnership to support people – individuals, families, carers, communities - to achieve their own well-being
- ✓ To improve the safety and quality of all services

- ✓ To respect people and their dignity
- ✓ To listen to people and learn from their experiences

The Human Rights Act 1998

The Human Rights Act 1998 sets out universal standards to ensure that a person's basic needs are recognised and met. Public Bodies have a mandated duty to ensure they have arrangements in place to comply with the Human Rights Act 1998. It is unlawful for a healthcare organisation to act in any way that is incompatible with the Human Rights Act 1998. In practice, this means we must treat individuals with Fairness, Respect, Equality, Dignity and Autonomy. These are known as the FREDa principles.

All Wales Standard for Accessible Communication

An All Wales Standard for Accessible Communication and Information for People with Sensory Loss produced by Welsh Government (2013) sets out the level of service people with sensory loss should expect to be met when they access health care. These standards apply to adults, young people and children.

Armed Forces Act 2021

The covenant aims to prevent service personnel and veterans and their families being disadvantaged when accessing public services. This introduced a statutory duty to have "due regard" to the principles of the Armed Forces Covenant.

Welsh Government - Anti-racist Wales Action Plan

In June 2022, the Welsh Government published the "Anti-racist Wales Action

Plan¹⁴". This action plan places a responsibility on public bodies to report demonstrable progress in areas detailed in specific actions. Health is part of the plan, and BCUHB will be undertaking the actions contained within five Health priority action areas:

1. Leadership
2. Workforce
3. Data
4. Access to services
5. Health Inequalities

Welsh Government – LGBTQ+ Action Plan

On the 7th February 2023, the Welsh Government published the LGBTQ+ Action Plan. The Welsh Government has said that it “wants to make Wales the most LGBTQ+ friendly nation in Europe” with the stated aim “to show our clear commitment to respecting, protecting, and fulfilling the human rights of all LGBTQ+ people in Wales”. Health is one of the component parts of the plan. The plan aims to support LGBTQ+ people in Wales to live their fullest life: to be healthy, to be happy, and to feel safe. The plan sets out an overarching vision to improve the lives of and outcomes for, LGBTQ+ people. It includes a wide range of policy-specific actions relating to human rights, education, improving safety, housing, health and social care, sport, culture, and promoting community cohesion.

BCUHB will be undertaking the actions contained within the health related actions, which are as follows:

- Understand and improve the experience of LGBTQ+ people in the health and social care sectors.
- Ensure maternity and fertility services are accessible and straightforward

¹⁴ Anti-racist Wales Action Plan | GOV.WALES

to use for LGBTQ+ people.

- Ensure the development of the new mental health strategy takes account of LGBTQ+ people.
- Publish and act on a new HIV Action Plan and overcome barriers to LGBTQ+ people accessing sexual health services.
- Review the Gender Identity Development pathway for young people in Wales.
- Continue to develop the Wales Gender Service.
- Improve the data recording and change processes for maintaining trans, non-binary and intersex people's medical records.

BCUHB Living Healthier Staying Well (LHSW)

Living Healthier Staying Well (LHSW) is the Health Board's long term strategy that describes how health, wellbeing and healthcare in north Wales will look in the future and how we are working towards this. We will:

- Improve health and reduce health inequalities
- Deliver care closer to home
- Deliver the best care when your health needs are more serious
- Improve mental health and wellbeing
- Support all children and young people to have the best start in life
- Support people to age healthily

Further information is available via:

bcuhb.nhs.wales/lhsw/living-healthier-staying-well1/living-healthier-staying-well-strategy/

Appendix 2: Demographic information

Across North Wales, Flintshire has the largest population (156,100) followed by Wrexham (135,957). Anglesey has the smallest population at 70,043. (source Nomis 2022).

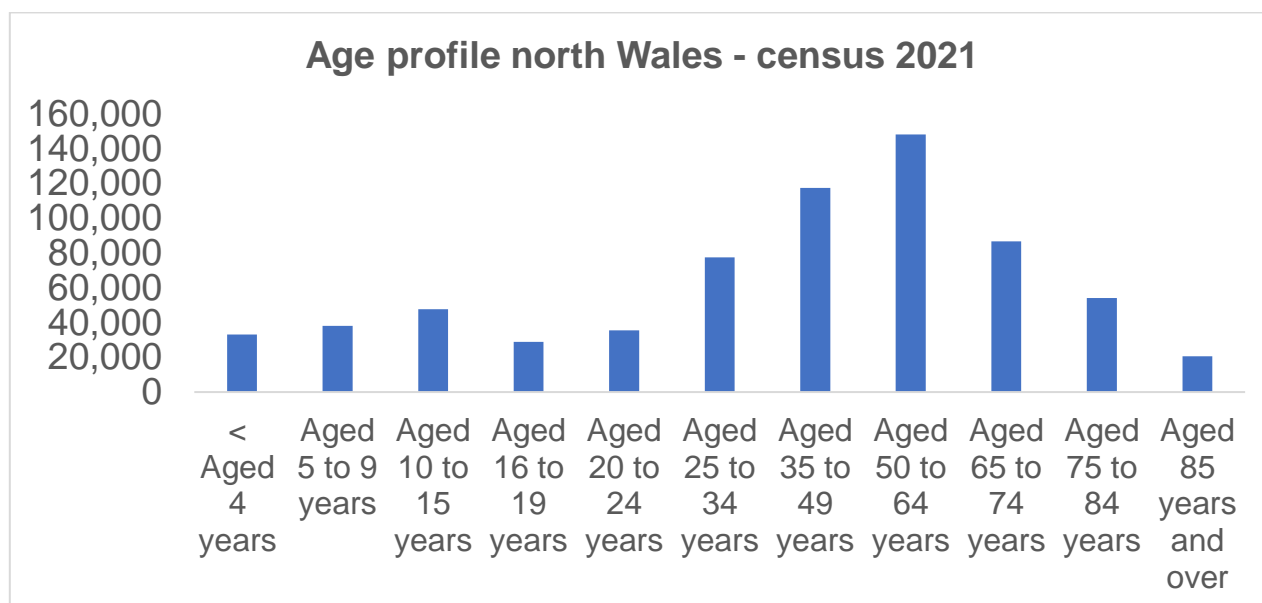
Equality related data about north Wales from Census 2021:

Age:

Table showing population numbers for each age group:

	BCUHB area	Wales
Aged 4 years and under	32,980	155,086
Aged 5 to 9 years	38,019	175,925
Aged 10 to 15 years	47,668	217,067
Aged 16 to 19 years	28,863	141,405
Aged 20 to 24 years	35,534	187,675
Aged 25 to 34 years	77,305	382,674
Aged 35 to 49 years	117,357	547,659
Aged 50 to 64 years	147,975	637,958
Aged 65 to 74 years	86,581	358,977
Aged 75 to 84 years	54,102	220,491
Aged 85 years and over	20,525	82,575
Total: All usual residents	686,909	3,107,492

Source: 2021 Census

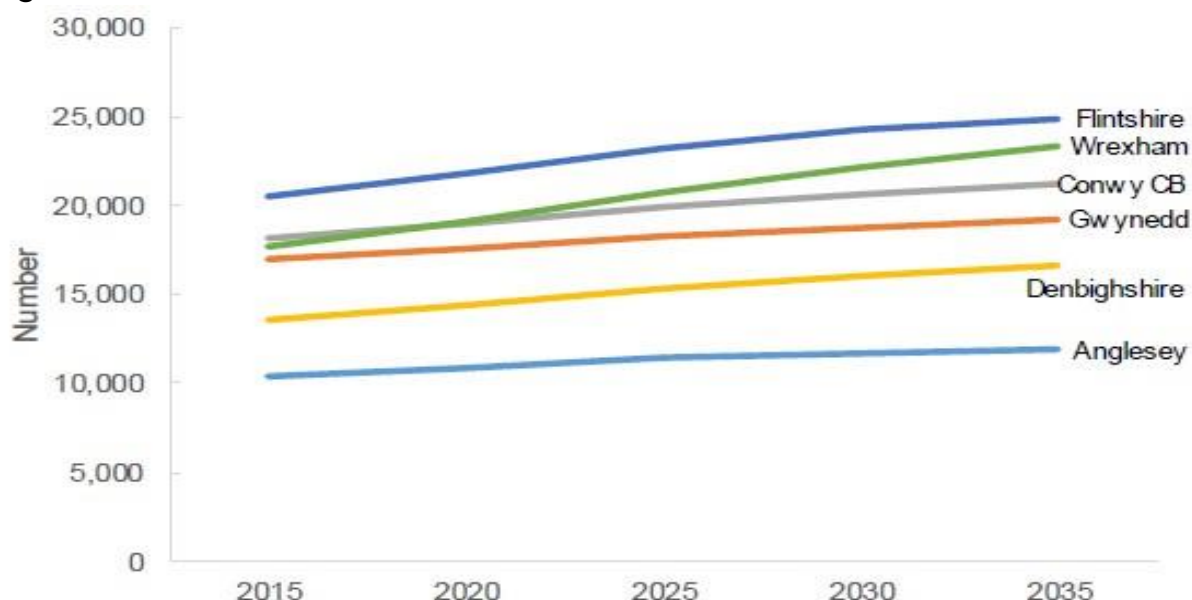


There are variations across age, Flintshire and Wrexham have a younger population with 19% of the population aged 15 years and under, and Anglesey and Conwy have an older population with 26% and 28% respectively aged 65 and over. Conwy also has the greatest percentage of people aged 85 and above at 4% of the population.

Disability / long term conditions and impairments

72,235 people - 10.5% of the population as defined under the Equality Act
10.3% of the population who provide more than 19 hours of care per week

Chart showing predicted number of people aged 18 and over with a limiting long-term illness, 2014 to 2035¹⁵



Gender identity

Table showing Gender identity – census 2021:

Gender identity	BCHUB area		Wales	
	number	%	number	%
Total: All usual residents aged 16 years and over	568,240	100.0	2,559,416	100.0

¹⁵ North Wales population assessment 2017

Gender identity the same as sex registered at birth	527,157	92.8	2,387,304	93.3
Gender identity different from sex registered at birth but no specific identity given	706	0.1	4,015	0.2
Trans woman	360	0.1	1,888	0.1
Trans man	343	0.1	1,922	0.1
Non-binary	254	0.0	1,548	0.1
All other gender identities	167	0.0	897	0.0
Not answered	39,253	6.9	161,842	6.3

Summary from census:

- The 2021 census was the first time that gender identity was included (as a voluntary question for people aged 16 and over). 94.0% of respondents answered. This shows that there are 262,000 people living in England and Wales in March 2021 who identified with a gender different from their sex registered at birth.
- Across north Wales, 703 people answered they were transgender, and 254 answered they were Non Binary. 39,253 did not respond to this question.
- Stonewall ¹⁶ had previously estimate 1% of the population might identify as Trans, including people who identify as non-binary.
- Across North Wales, this would mean approximately 7000 people are Trans. Census notes that 1830 have declared that there gender is different from the sex registered at birth however the significant number of people who didn't answer (39,253) may skew the real number of trans / non binary.

Caution should be taken with LGBTQ+ census data as this is considered as significantly under estimated.

¹⁶ ¹⁶ [Student Frequently Asked Questions \(FAQs\) | Stonewall](#)

Ethnicity

Table showing ethnicity by local authority, health board and Wales, Census 2022¹⁷

Ethnic group	BCUHB area		Wales	
	number	%	number	%
Asian, Asian British or Asian Welsh	9,400	1.4	89,028	2.9
Black, Black British, Black Welsh, Caribbean or African	2,326	0.3	27,554	0.9
Mixed or Multiple ethnic groups	7,241	1.1	48,598	1.6
White	665,147	96.8	2,915,848	93.8
Other ethnic group	2,802	0.4	26,466	0.9
Total: All usual residents	686,916	100.0	3,107,494	100.0

More detailed breakdowns are available on NOMIS.

Religion

Table showing religion at local authority and Wales level – census 2021¹⁸

Religion	BCUHB area		Wales	
	number	%	number	%
Total: All usual residents	686,910	100.0	3,107,494	100
No religion	286,722	41.7	1,446,398	46.5
Christian	341,972	49.8	1,354,773	43.6
Buddhist	2,076	0.3	10,075	0.3
Hindu	1,433	0.2	12,242	0.4
Jewish	311	0.0	2,044	0.1
Muslim	5,326	0.8	66,947	2.2
Sikh	248	0.0	4,048	0.1
Other religion	3,141	0.5	15,926	0.5
Not answered	45,681	6.7%	195,041	6.3

¹⁷ Nomis census 2021

¹⁸ Nomis KS209EW - Religion

Sex / Gender

Table showing gender (sometimes referred to as sex) – across North Wales from Census 2021¹⁹.

Area	All persons		Female		Male	
	number	%	number	%	number	%
BCUHB area	686,909	100.0	350,752	50.1	336,157	48.9
Wales	3,107,494	100.0	1,586,490	51.1	1,521,004	48.9

Sexual Orientation

Table showing sexual orientation from Census 2021:

Sexual orientation	BCUHB area		Wales	
	number	%	number	%
Total - people 16 years and over	568,242	100.0	2,559,414	100.0
Straight or Heterosexual	507,770	89.4	2,288,630	89.4
Gay or Lesbian	7,282	1.3	38,101	1.5
Bisexual	5,725	1.0	31,814	1.2
Pansexual	836	0.1	4,534	0.2
Asexual	269	0.0	1,558	0.1
Queer	88	0.0	583	0.0
All other sexual orientations	59	0.0	273	0.0
Not answered	46,213	8.1	193,921	7.6

The census 2021 included sexual orientation as a voluntary question. It highlights that 3% of the population in Wales disclosed they were Lay, Bi, Pansexual, Asexual, Queer or other. 7.6 did not answer. 89.4% answered they are heterosexual. This closely mirrors the population in North Wales.

¹⁹ Nomis - Official Census and Labour Market Statistics - Nomis - Official Census and Labour Market Statistics (nomisweb.co.uk)

Across North Wales, there is some small variations with slightly higher rates of heterosexual people in Flintshire (90.5%) and Isle of Anglesey (90.0%).

Caution should be taken with the disclosure data as a high number of people (8.1%) in North Wales did not answer the voluntary question. This may skew the actual numbers. Stonewall ²⁰estimate that the real figure of LGB people is between 5-7%. This would mean that approximately, 35,000 to 49,000 in North Wales are LGB.

Welsh speakers



North Wales is home to more Welsh-language speakers than elsewhere in Wales. The highest percentages of people (across Wales) aged three years or older able to speak Welsh were in north-west Wales, with 64.4% in Gwynedd, and 55.8% in Anglesey.

On Census Day, 21 March 2021, an estimated 538,300 usual residents in Wales aged three years or older reported being able to speak Welsh, or 17.8% of the population. This is a decrease of around 23,700 people since Census 2011, and 1.2 percentage points lower than Census 2011.

North Wales is home to more Welsh-language speakers than elsewhere in Wales. The highest percentages of people (across Wales) aged three years or older able to speak Welsh were in north-west Wales, with 64.4% in Gwynedd, and 55.8% in the Isle of Anglesey.

Table showing Ability to speak Welsh by local authority and Wales 2018-2019 (reviewed 20/02/23 awaiting census 2021 release)

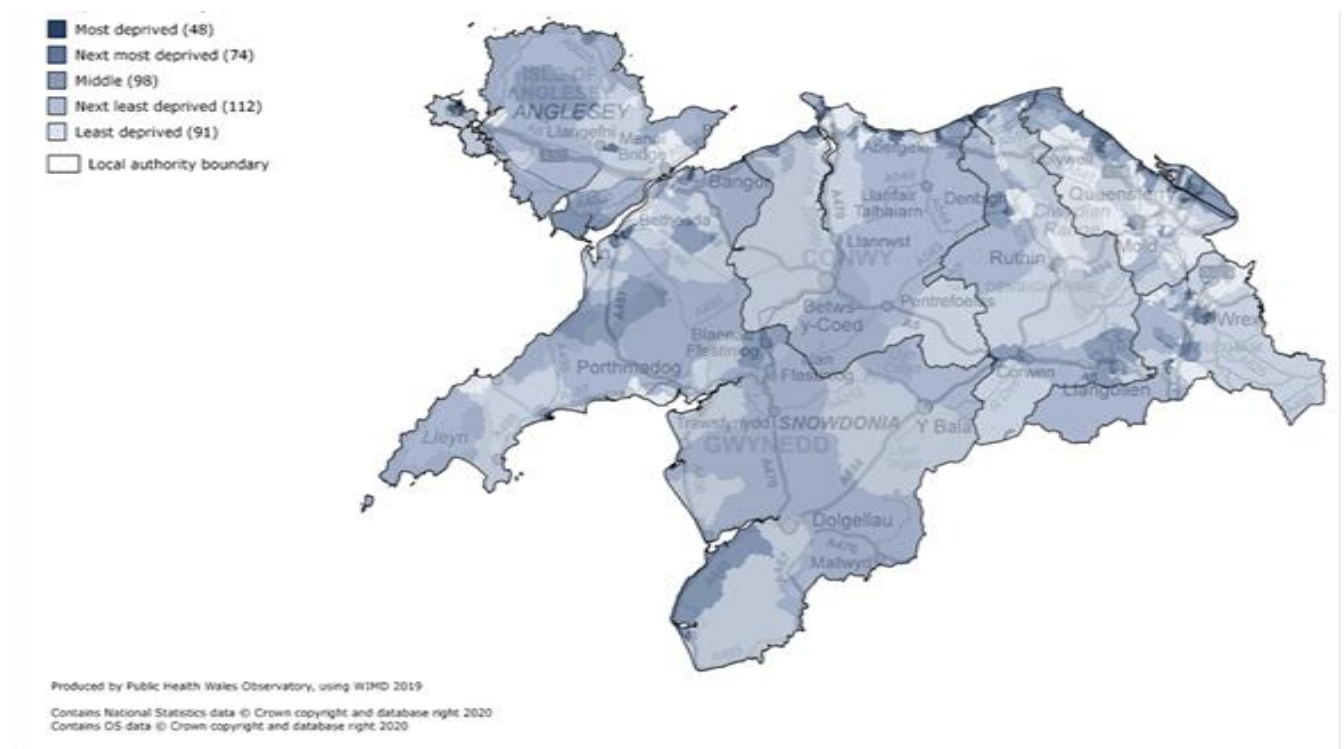
²⁰ [Student Frequently Asked Questions \(FAQs\) | Stonewall](#)

	Percentage of adults (16+) that speak Welsh	Percentage of adults (16+) that cannot speak Welsh	Percentage of adults (16+) that have some Welsh speaking ability
Conwy	37.05	49.57	13.38
Denbighshire	30.17	57.89	11.95
Flintshire	10.74	74.73	14.53
Gwynedd	65.95	21.25	12.80
Isle of Anglesey	52.91	32.97	14.12
Wrexham	13.63	72.82	13.55
Wales	18.10	67.34	14.56

Deprivation information:

Lower Super Output Areas by fifths of deprivation, Overall Welsh Index of Multiple Deprivation, North Wales, 2019

Map showing Lower Super Output Areas by fifths of deprivation, Overall Welsh Index of Multiple Deprivation, North Wales, 2019²¹



²¹ Source: WIMD - Explore (gov.wales)

Health inequalities:

Data sets for 2018-2020²².

	Male	Female	Gender gap
UK	79.2 years	82.9 years	3.7 years
Wales	78.3 years	82.1 years	3.8 years
BCUHB	78.8 years	82.3 years	3.5 years

Table showing percentage of adults (age 16 and over) General Health at local authority²³.

Area	Very good health	Good health	Fair health	Bad health	Very bad health
Conwy	48.2	32.6	13.5	4.4	1.3
Denbighshire	47.0	32.4	14.1	4.9	1.6
Flintshire	48.3	33.3	13.0	4.2	1.3
Gwynedd	51.5	31.2	12.4	3.7	1.0
Isle of Anglesey	50.7	31.2	13.1	3.9	1.1
Wrexham	45.5	34.2	14.2	4.8	1.3
BCUHB	48.3	32.7	13.4	4.3	1.3
Wales	46.6	32.5	14.1	5.1	1.6

Overall, the north Wales population compares well to Wales in terms of general health status and being limited by a health condition or impairment. As can be seen from the table below, all Local Authority areas are above the Wales baseline for very good / good health. The area for people reporting

²² publichealthwales.shinyapps.io/PHWO_HealthExpectanciesWales_2022/

²³ TS037ASP NOMIS 2021 Nomis - Official Census and Labour Market Statistics - Nomis - Official Census and Labour Market Statistics (nomisweb.co.uk)

highest levels of poor health are in Denbighshire and Wrexham, across the Health Board, these areas have the highest levels of deprivation.

Hate crime 2022-2023:

Police Force Area	Race	Religion	Sexual orientation	Disability	Transgender
Wales	3,727	287	1,225	849	302
North Wales	862	57	279	170	61

Police Force Area	Total number of motivating factors	Total number of offences
Wales	6,390	6,041
North Wales	1,429	1,346

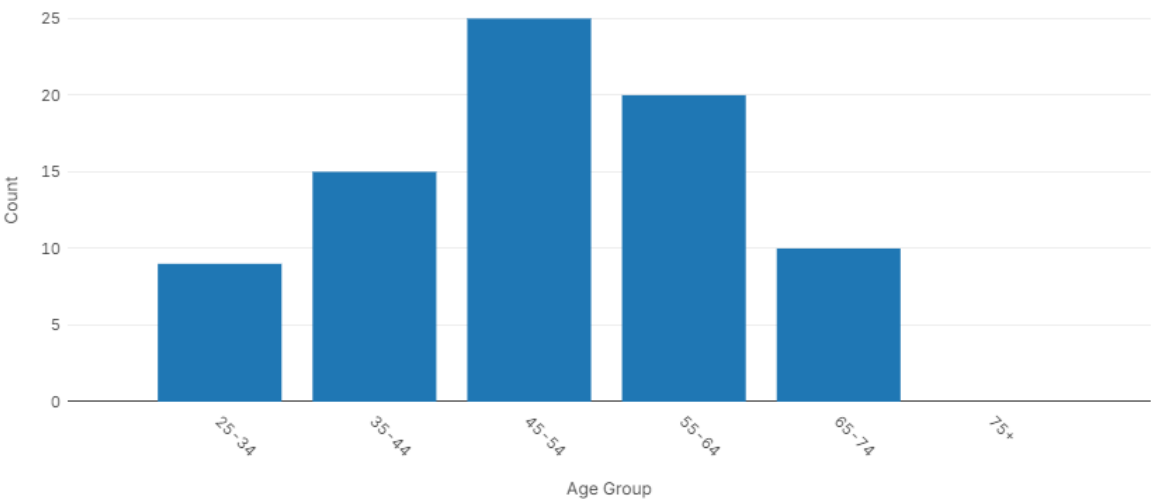
Further detailed information on hate crime statistics and trends is found at [Hate crime, England and Wales, 2020 to 2021 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/statistics/hate-crime-statistics)

Appendix 3: Strategic Equality Plan Engagement

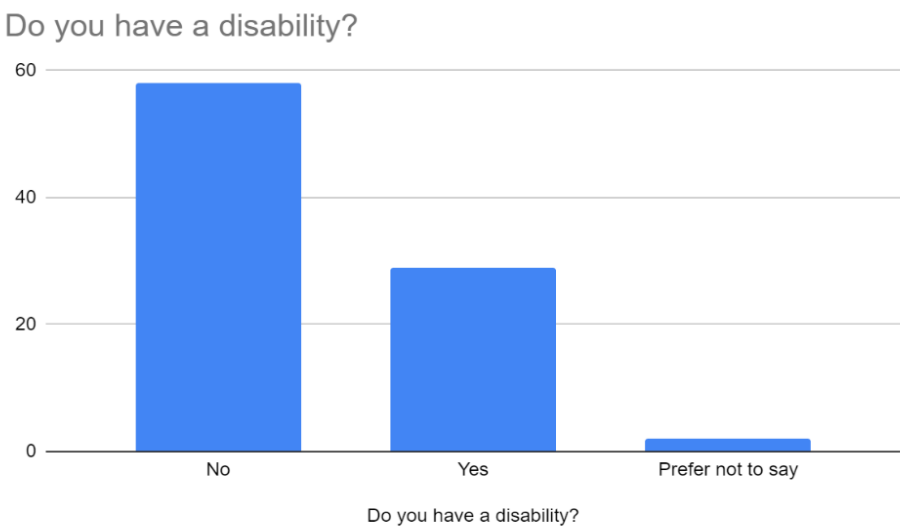
90 people took part in the survey.

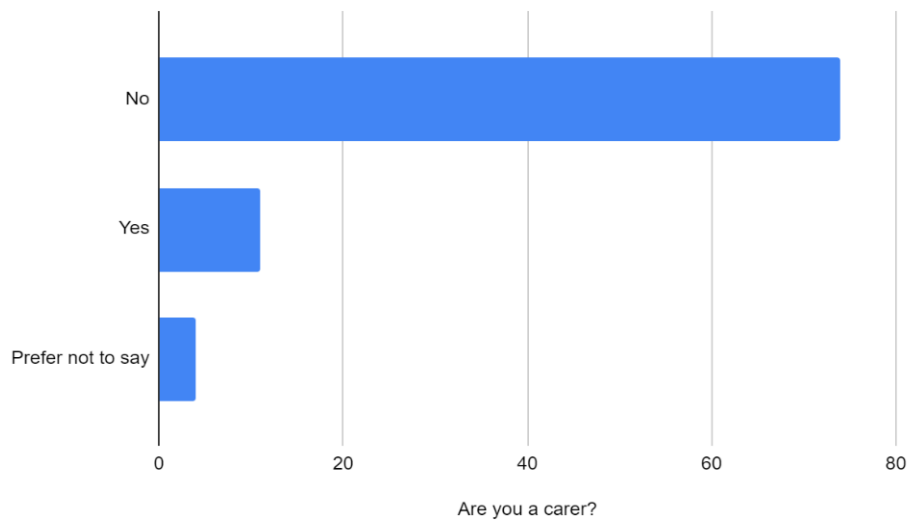
In terms of the demography of those taking part:

Age:

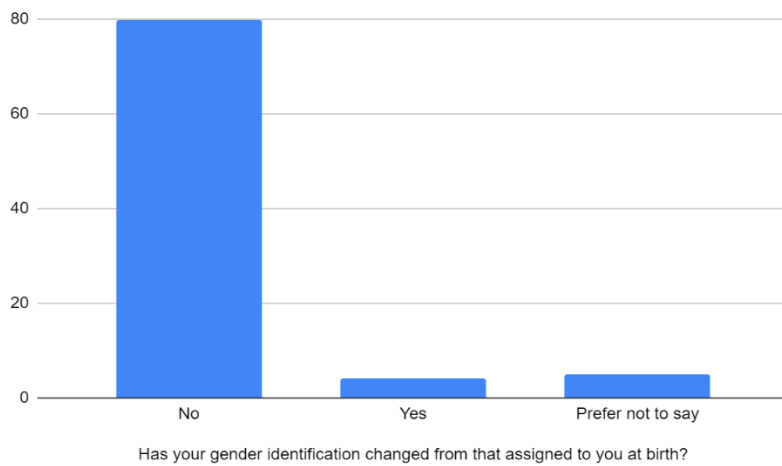


Disability and Carers:

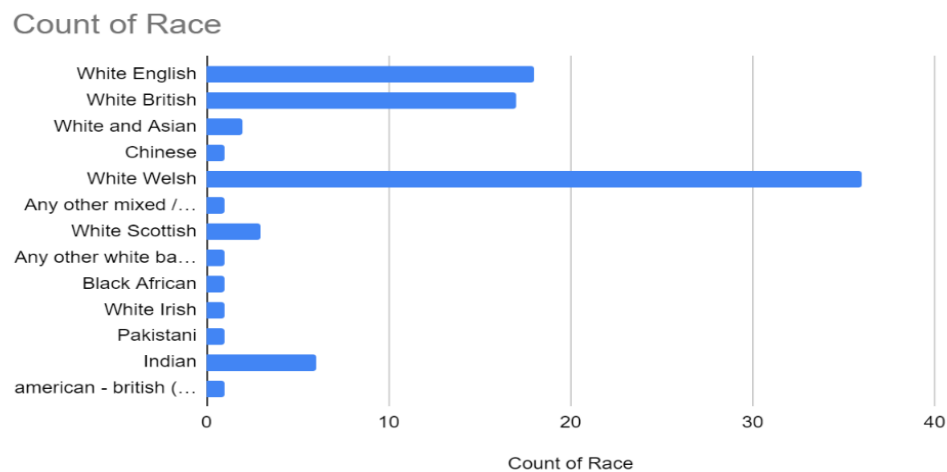




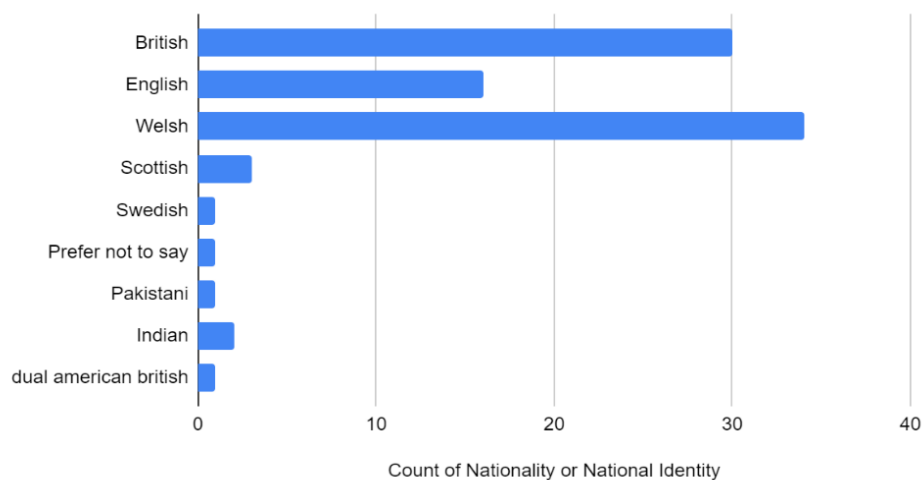
Gender Reassignment:



Race including nationality:

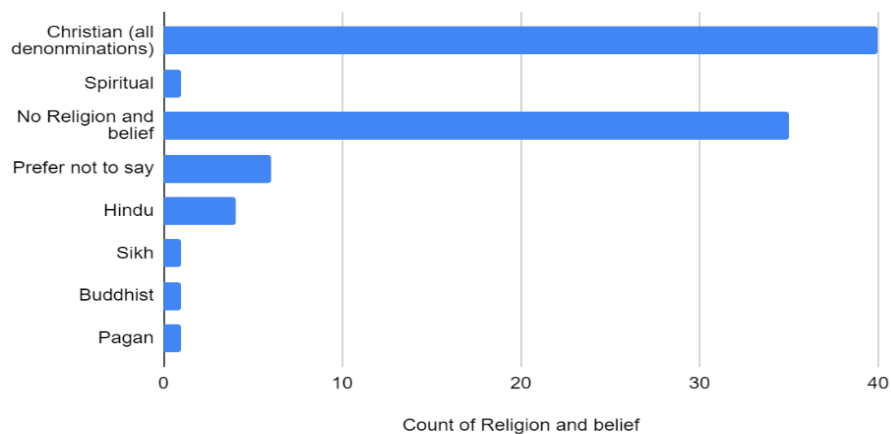


Count of Nationality or National Identity



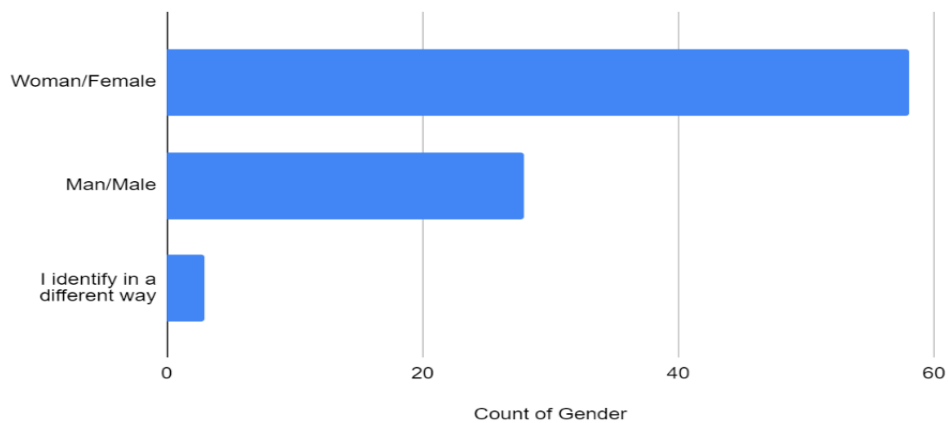
Religion or Belief:

Count of Religion and belief

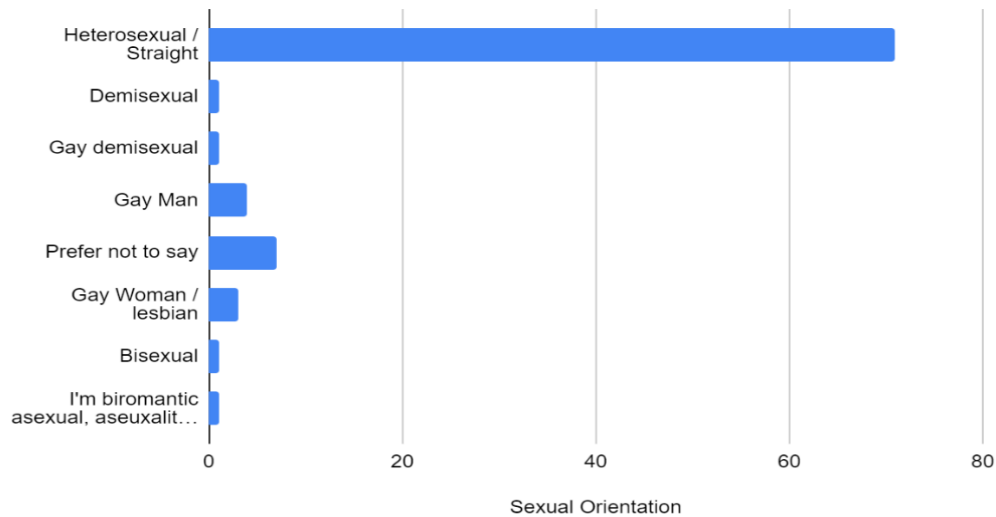


Sex/Gender:

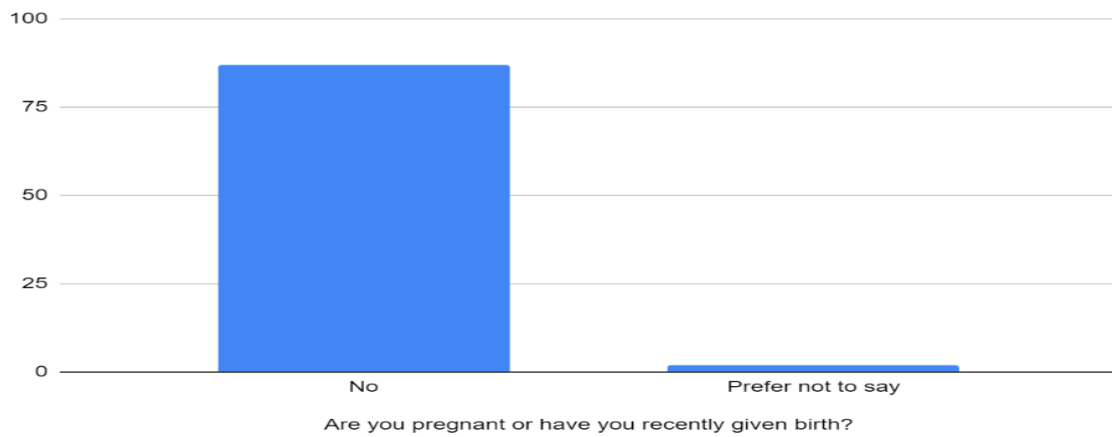
Count of Gender



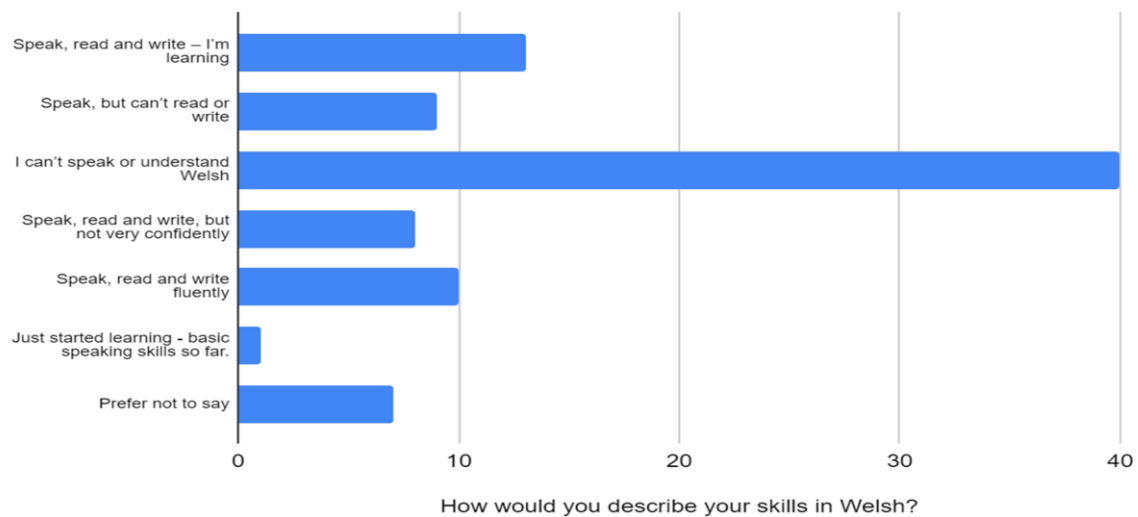
Sexual orientation:



Pregnancy and Maternity:



Welsh Language:



Breakdown of responses into main themes from survey and face to face engagement.

Key	Theme	Total
1	Access	51
2	Communications	35
3	Staffing Levels	22
4	Behaviour	20
5	Cultural Competency/Intersectionality	18
6	Care Closer to Home`	16
7	Lack of confidence in services	15
8	Digital	15
9	Autonomy	11
10	Social Model	11
11	Facilities	9
12	Governance	9
13	Partner Organisations	8
14	Inclusive Specialised Services	4
15	Early Intervention	4
16	Parking	2
17	Trust	13

Establishment of Key Priorities

Objective Identified	Links to themes
Objective A: Achieving equity by working in partnership – ‘nothing about you without you’	2,5,7,8,9,10,13 and 17
Objective B: Achieving equity by providing high quality inclusive services	1 to 11 14 to 17
Objective C: Achieving equity by through Governance and Accountability	7,12,13 and 17

Objective D: Achieving equity by being a kind and compassionate organisation	2,4,5,9 and 17
Objective E: Achieving equity by innovation	1,2,6,8,9,11,13, and 15

Appendix 4: North Wales Public Sector Equality Network – Shared Objectives



The North Wales Public Sector Equality Network is represented by Health, Local Authority and Public Sector organisations. The objectives below were identified following a shared consultation survey across north Wales.

The partnership have agreed a shared set of objectives that focus on the key areas of:

Education.

Employment and Pay.

Living Standards.

Health, Wellbeing and Social Care.

Personal Security and Access to Justice.

Participation and Diversity in Decision Making.

Socio-economic Disadvantage and Minimising Inequality of Outcome.

Together the network will establish an action plan to progress the objectives identified, working together, sharing expertise and resources. Not all of the objectives will apply to every organisation in the network, so each organisation will identify objectives that are relevant for them to work collaboratively. Below is the full list of objectives identified.

Progress on these shared objectives will be incorporated into each organisations annual equality reports.

Objective 1: Outcomes in education learning and wellbeing are improved	
Priority Areas - Education	
1.1 All children and young people attend schools regularly and achieve their learning potential.	This area is not applicable to the health board.
1.2 Children and young people educated in childcare settings through to early education achieve their learning potential.	This area is not applicable to the health board.
1.3 Children and young people are safe and feel safe at school, have equal opportunities and are encouraged to live a healthy lifestyle.	The health board supports this objective through it's public health team support.
1.4 To support young people to become positive role models	The health board supports this objective through public health

within their communities and society.	initiatives.
1.5 To support everyone under the age of 25 to access an offer to work, education, training, or self-employment.	The health board supports this objective through workforce plans to develop the future workforce.

Objective 2: We will take action to ensure we are an equal opportunities employer and reduce pay gaps	
Priority Areas - Employment and Pay	
2.1 Address disability, ethnicity and gender pay differences.	The health board supports this objective though their own objectives.
2.2 Review our flexible working practices to ensure equal opportunities at all levels.	The health board supports this objective though their own objectives.
2.3 Ensure effective policies to prevent and respond to sexual harassment and other forms of harassment.	The health board supports this objective working in partnership with the network and local partners and stakeholders.
2.4 Increase the number of disabled people in work.	The health board supports this objective working in partnership with the network and local partners and stakeholders.
2.5 Reduce gender segregation (the unequal distribution of men	The health board supports this objective though their own

and women working in traditionally gender specific roles).	objectives.
2.6 Improve participation of women, ethnic minorities and disabled people across apprenticeships.	The health board supports this objective working in partnership with the network and local partners and stakeholders.
2.7 Consider the use of positive action measures in recruitment campaigns where specific groups are under-represented.	The health board supports this objective though their own objectives.
2.8 Implement a programme of anti-racism and anti-discrimination within the organisation promoting the value of positive relationships, diversity and inclusion.	The health board supports this objective though their own objectives.
2.9 Address the barriers to employment for diverse communities.	The health board supports this objective working in partnership with the network and local partners and stakeholders.

Objective 3: We will take action to improve the Living Standards of people disadvantaged by their protected characteristics	
Priority Areas - Living Standards	
3.1 Take action to address disproportionate negative impact on people with different protected characteristics.	The health board supports this objective though their own objectives.

3.2 Support disabled people and older people's right to independent living including adequate accessible and adaptable housing and related support.	The health board supports this objective working in partnership with the network and local partners and stakeholders.
3.3 Better engagement with disabled people when renovating and designing buildings to ensure full accessibility.	The health board supports this objective working in partnership with the network and local partners and stakeholders.
3.4 Improve access to services for Gypsy Travellers and improve engagement to develop trust.	The health board supports this objective through it's public health team support.
3.5 Ensure that asylum, homelessness and housing services are inclusive of the specific needs of minority groups including disabled people, ethnic minority people and LGBTQ+ people.	The health board supports this objective through it's public health team support as well as working in partnership with the network and local partners and stakeholders.

Objective 4: We will improve Health, Wellbeing and Social Care outcomes	
Priority Areas - Health Wellbeing and Social Care	
4.1 Ensure health and wellbeing needs of carers are met.	The health board supports this objective through it's own objectives as well as working in partnership with the network and local partners and stakeholders.

4.2 Increase uptake rates of people with learning disabilities taking up annual health checks .	The health board supports this objective through it's public health team support as well as working in partnership with the network and local partners and stakeholders.
4.3 Suicide prevention plan Talk to Me 2 is fully evaluated and new action plan to reduce suicide in middle aged men in Wales.	The health board supports this objective through it's own objectives as well as working in partnership with the network and local partners and stakeholders.
4.4 Evaluate progress on mental health to ensure we are meeting the needs of people with different protected characteristics.	The health board supports this objective through it's public health team support as well as working in partnership with the network and local partners and stakeholders.
4.5 Use Social Model of Disability principles in policy and decision making.	The health board supports this objective though their own objectives.
4.6 Implement specific awareness and support for people with neurological conditions.	The health board supports this objective though their own objectives.
4.7 Address barriers to exercise and wellbeing.	The health board supports this objective though their own objectives.
4.8 Increase confidence and support Social Care and other staff to highlight and address racist and other discriminatory behaviour	The health board supports this objective working in partnership with the network and local partners and stakeholders.

experienced whilst undertaking their role.	
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Objective 5: We will improve Personal Security and Access to Justice	
Priority Areas - Personal Security and Access to Justice	
5.1 Work with our North Wales partners to increase awareness of Hate Crime and increase confidence in reporting.	The health board supports this objective working in partnership with the network and local partners and stakeholders.
5.2 Work with North Wales partners to reduce incidents of Violence Against Women, Domestic Abuse and Sexual Violence (VAWDASV).	The health board supports this objective working in partnership with the network and local partners and stakeholders.
5.3 Improve awareness of personal safety and safeguarding responsibilities.	The health board supports this objective working in partnership with the network and local partners and stakeholders.

Objective 6: Increase Access to Participation and improve diversity in decision making	
Priority Areas - Participation and diversity in decision making	
6.1 Increase awareness of the importance of diversity in political representation and decision making bodies.	This area is not applicable to the health board.
6.2 Ensure engagement is inclusive to provide a sense of belonging and community.	The health board supports this objective working in partnership with the network and local partners and

	stakeholders.
6.3 Access to services should be supported by appropriate language support including Welsh, BSL and other languages.	The health board supports this objective though their own objectives.
6.4 Improve access to services by ensuring an offer of alternative means to technology to prevent digital exclusion.	The health board supports this objective though their own objectives.

Objective 7: Tackle socio-economic disadvantage by offering inclusive services to minimise inequalities of outcome	
Priority Areas - Socio-economic disadvantage and minimising inequalities of outcome	
Increase awareness of the links between poverty and ill health with different protected characteristics.	The health board supports this objective though their own objectives.
Work with North Wales Partners to address anti-social behaviour.	The health board supports this objective working in partnership with the network and local partners and stakeholders.
Remove barriers experienced by people due to socio-economic disadvantage.	The health board supports this objective though their own objectives as well as well as working in partnership with the network and local partners and stakeholders.

<p>Increase support for children and young people living in poverty to improve outcomes.</p>	<p>The health board supports this objective working in partnership with the network and local partners and stakeholders.</p>
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