

Tackling local inequality through Swansea Bay University Health Board's Widening Access work

Overview

Swansea Bay University Health Board serves a population of around 396,000 people across the Swansea and Neath Port Talbot areas. Like many post-industrial regions, it covers an area where pockets of deep deprivation persist alongside pockets of relative affluence.

With a budget of around £1.7bn and a workforce around 14,700 people, the Health Board is one of a handful of local anchor organisations that are well-placed to address these inequalities through its role as a major employer, its spending power, and through working in partnership with local communities, groups and other anchors.

In recent years Swansea Bay has set out to increase this impact by becoming a more “purposeful anchor organisation”, putting its role as an anchor organisation at the heart of its wider strategy to improve population health.

In this case study we showcase some of the impact that this focus has achieved locally by highlighting three initiatives from their Widening Access work - as well as looking at what's next for the Health Board as it looks to continue to maximise its impact as a local anchor in partnership with others.

Workforce at the heart of its anchor mission

Connecting local people with good jobs and training opportunities is one of the most powerful ways that anchors can positively impact the health of local communities. In Swansea, widening access to these opportunities for local people has been a major focus of the Health Boards work in this space.

This work has been led by the Widening Access, Equality and Careers team who offer practical delivery within local communities as an arm of Population Health. Working in partnership with other teams across the Health Board the team has delivered a range of initiatives aimed at improving access to opportunities for local people, particularly those from socio-economically disadvantaged backgrounds, those who are under-represented in the NHS workforce, and people living within local communities experiencing the greatest health inequalities.

Vocational Training programme

One such initiative has been the Health Board's Vocational Training programme. This programme uses long-term work experience as a route into NHS employment for people who might otherwise find it difficult to access stable work, and is specifically targeted at unemployed individuals from diverse or disadvantaged backgrounds

Working in close partnership with the Department for Work and Pensions and Communities for Work Plus, the model offers a 12-week wraparound programme combining real-world NHS work placements, employability support, job coaching and structured reviews. The ultimate goal is to equip participants with the confidence, skills, and qualifications needed to transition into meaningful careers within the NHS.

Those selected to participate in the programme get the opportunity to enter the workplace in a supported and caring way, with pastoral support being provided at every level, from the line manager, through to dedicated mentors and the Vocational Training team.

The support that the surrounding team offers has sometimes extended beyond what would be considered in their remit. Examples of the way they have supported and cared for individuals include but are not limited to:

- Supporting individuals to access support following domestic abuse
- Supporting individuals to access support for addiction including accompany individuals to AA meetings
- Enabling individuals to open bank accounts, register for benefits and access childcare, including driving individuals to appointments

On the 2025/26 programme 37 trainees were accepted onto the Health Board's Vocational Training programme. Of those candidates, 15 went on to secure employment following completion, 9 within the Health Board and 6 with other local employers.

Doing recruitment differently: the Independent Living Skills students

Some of the Health Board's most significant learning has come not from a programme designed in advance, but from a willingness to respond to an opportunity and challenge its own processes along the way.

A group of students from the Independent Living Skills course at Gower College Swansea - a course designed to equip young people with a range of learning needs with the skills to live independently - came to the Health Board on work experience placements. From the outset, these were treated as real, meaningful placements rather than observational visits: the students went through the Health Board's standard values-based interview, were placed into genuine roles within support services, and worked alongside colleagues as part of a team, with good mentors around them and meaningful work to do.

As the placements drew to a close, it became clear that the students had made a real impact in their teams and had the potential to become part of the workforce on a more lasting basis. Rather than letting the placements simply end, colleagues across the Health Board worked together to create a route forward. The Apprentice Academy explored, with Gower College, whether a support-services apprenticeship could be developed that carried over the pastoral and independent-living support the students had been receiving - so that the move into employment did not mean the loss of the structure and the wraparound support that they had benefited from to-date.

Another key shift was to the recruitment process itself. Traditional application-and-interview routes do not work equally well for everyone. Because the students had already completed a work experience placement, the Health Board's recruitment team agreed to consider that placement - in effect, a trial in the role - as a fair alternative to a standard recruitment process. This was not a lowering of the bar: the fairness and justification of the approach were thought through carefully and deliberately. It was a recognition that there is more than one fair way to assess whether someone can do a job.

With the apprenticeships in place, the funding secured, the college on board and recruitment services supportive, the students were able to move from work experience placements onto fixed-term contracts with apprenticeships where they continued to flourish. Asked later what they had valued most, one student said simply that they felt they belonged: that colleagues saw them as themselves, understood that they might need some additional support or think a little differently, and treated them as part of the team.

The Health Board is honest about the limits it has run up against. Its current financial position meant it was not able to convert those apprenticeships into permanent posts at the end - a real constraint many NHS organisations will recognise. But the story has not ended there: the Health Board has stayed in touch with the students, and one has since secured a permanent role elsewhere in the organisation.

What made this work was a willingness to be bold - to ask whether things could be done differently, and to have the internal conversations needed to make that possible.

Apprentice Academy

Another initiative which is focused on supporting the progression of *existing* Health Board staff is the Apprentice Academy. It does so by ensuring that colleagues already within the organisation have equitable access to training and qualifications that enable career development and progression.

This work has been delivered in close collaboration with Workforce Planning colleagues, aligning apprenticeship opportunities with succession planning priorities and addressing hard-to-recruit roles. Apprenticeship pathways have been developed and work with a number of departments including digital, estates and healthcare support

The strategy has had a measurable impact on staff retention, with numerous colleagues successfully progressing into higher-level roles as a direct result of targeted development interventions; linking with the 'apprenticeships for all' principle to ensure that apprenticeship opportunities are included as part of the workforce plan for recruitment and staff development.

Key learnings and reflections

Asked what they would pass on to other organisations wanting to do similar work, the team pointed less to programme design and more to mindset, relationships and culture. Several themes stand out.

Be bold and be brave. The team's most significant successes have come from a willingness to ask whether things could be done differently - and then to have the conversations needed to make that happen. Existing processes, particularly around recruitment, can quietly exclude capable people; by being bold teams can show that other approaches are possible.

Traditional recruitment does not fit everyone. A standard application-and-interview process is not the only fair way to assess whether someone can do a job. The Health Board has shown that a work trial or completed placement can be a fair, robust alternative. The point is not to lower the bar but to recognise that there is more than one legitimate route to identifying suitable individuals for opportunities.

Impact does not depend on a large team. The work described in this case study is delivered by a small team - within it, Vocational Training is run by little more than one full-time post and a part-time post, and the Apprentice Academy by one full-time post and a project officer. The lesson for other organisations is encouraging: meaningful impact is achievable with a small number of dedicated people.

Networks inside the organisation matter as much as programmes. What makes the work possible is a network of like-minded colleagues across the Health Board who understand the difference these opportunities make and are willing to host placements, mentor people and support them pastorally. Support services - catering, domestic services, portering - have been particularly important, both in offering placements and in thinking carefully about the additional needs of the people coming in. Finding and nurturing those internal allies is itself a core part of the work. This is often where having an organization-wide "anchor mission" which staff understand and buy-into can help.

Connect the work to workforce planning. Strong links with workforce planning colleagues allow the team to target the roles where the organisation most needs people - its hard-to-recruit "hotspots" - so that the widening access work and the organisation's own workforce needs pull in the same direction.

Celebrate success. Sharing stories of what the work has achieved is not an optional extra; it is what creates the next set of opportunities. When the team shared one success story on the staff intranet, it directly prompted other parts of the organisation to come forward and offer to host placements. The challenge is finding the time to do so, particularly when the people delivering the work tend to see going above and beyond as simply part of their job.

Looking ahead

Developing a Regional Health Economy to benefit our population

The Swansea Bay UHB Public Health Team are working jointly with Hywel Dda UHB through the Regional Health Economy Subgroup as part of the South-West Wales Regional Joint Committee.

Through a collaborative, population health approach rooted in the Marmot Principles and Social Model for Health and Wellbeing, the group is focusing on sharing and scaling up innovation and proven practices, fostering regional learning, and driving sustainable systems change to maximise impact, investment, and health equity across the region.

A Regional Health Economy Steering Group has been established and workstreams have been established, structured around four themes: people, place, procurement and partnerships. There is already significant activity underway within the Health Board and with our partners to support this work, and we are keen to collaborate further to showcase and scale up good practice across our communities.