

Staff and Learner Welfare Action Plan – Supporting Information

September 2026



Introduction

Important information

Where Medr uses the term '**must**', it indicates a specific legal requirement or regulatory requirement. Providers must comply with these requirements.

Where Medr uses the term '**should**', it refers to actions or practices that are strongly encouraged but not legally required in the Conditions of Registration or Funding. However, Medr expects governing bodies (or equivalent) to take such guidance into account. Medr will consider the extent to which a provider has given due regard to '**should**' provisions when assessing provider risk.

1. In accordance with the [Tertiary Education and Research \(Wales\) Act 2022](#) and Medr's [regulatory framework](#) requirements, a provider registered with or funded by Medr must have in place effective arrangements to support and promote learner and staff welfare.
2. These arrangements form an initial and ongoing condition of registration and a condition of funding, reflecting the requirements set out under Sections 27, 31 and 108 of the Act.
3. Providers must also comply with other relevant statutory duties and frameworks.
4. To comply with this condition, providers must:
 - i. take account of requirements set out in the [staff and learner welfare funding and regulatory supplementary detail on requirements](#) (or any subsequent revisions);
 - ii. align with relevant legal and statutory duties, as this condition does not replace or remove providers' existing legal duties or statutory obligations; and
 - iii. take account of relevant information, guidance and advice published by Medr.
5. During 2026/27, providers must take account of the following requirements set out in the staff and learner welfare funding and regulatory supplementary detail, which includes:
 - i. in 2026, conduct a staff and learner welfare self-evaluation (ongoing annual requirement);
 - ii. by 30 November 2026, submit a two-year welfare action plan (covering 2026/27 to 2027/28);
 - iii. during 2027, conduct a welfare self-evaluation (ongoing annual requirement); and
 - iv. by December 2027, submit the first annual assurance and compliance return (ongoing annual requirement) which is expected to include:
 - a. updates and amendments to the provider's action plan;
 - b. updates and amendments to risks and issues outlined by the provider; and
 - c. updates and amendments to the provider's policies and procedures.

Important information

All Work-Based Learning (WBL) providers are required to submit a welfare action plan by 1 August 2027. Providers must seek their own assurance that effective arrangements are in place to support and promote staff and learner welfare through any sub-contractor or consortium arrangements. Where a subcontractor or consortium partner is required to submit its own staff and learner welfare action plan this should take this into account.

Further Education (FE) providers delivering WBL may choose to either incorporate their WBL provision within the welfare action plan submitted in November 2026, or provide an update to their welfare action plan through the annual assurance process, which is due in December 2027.

6. This supporting information should be applied in conjunction with Medr's regulatory framework, and any related supporting regulatory documentation.
7. Medr expects providers to engage with us at the earliest opportunity where a risk to compliance, learner interest, or public confidence arises. Our approach is rooted in a "no surprises" principle: the earlier an issue is raised, the greater the opportunity to resolve it collaboratively and proportionately. There, of course, may be exceptions to this, where events or changes cannot be reasonably foreseen.
8. Providers are responsible for determining whether an event or matter constitutes a Reportable Event and should be reported to Medr. Reportable Events include both serious incidents and notifiable events and should be reported promptly where they may affect a provider's compliance with ongoing conditions of registration or funding.
9. In making this judgement, providers should consider the nature, severity and potential impact of the event on learners, governance, regulatory compliance, or the provider's ability to meet its obligations. Where there is uncertainty, providers should adopt a cautious approach and seek advice, recognising that Reportable Events form part of Medr's ongoing monitoring and assessment of compliance.

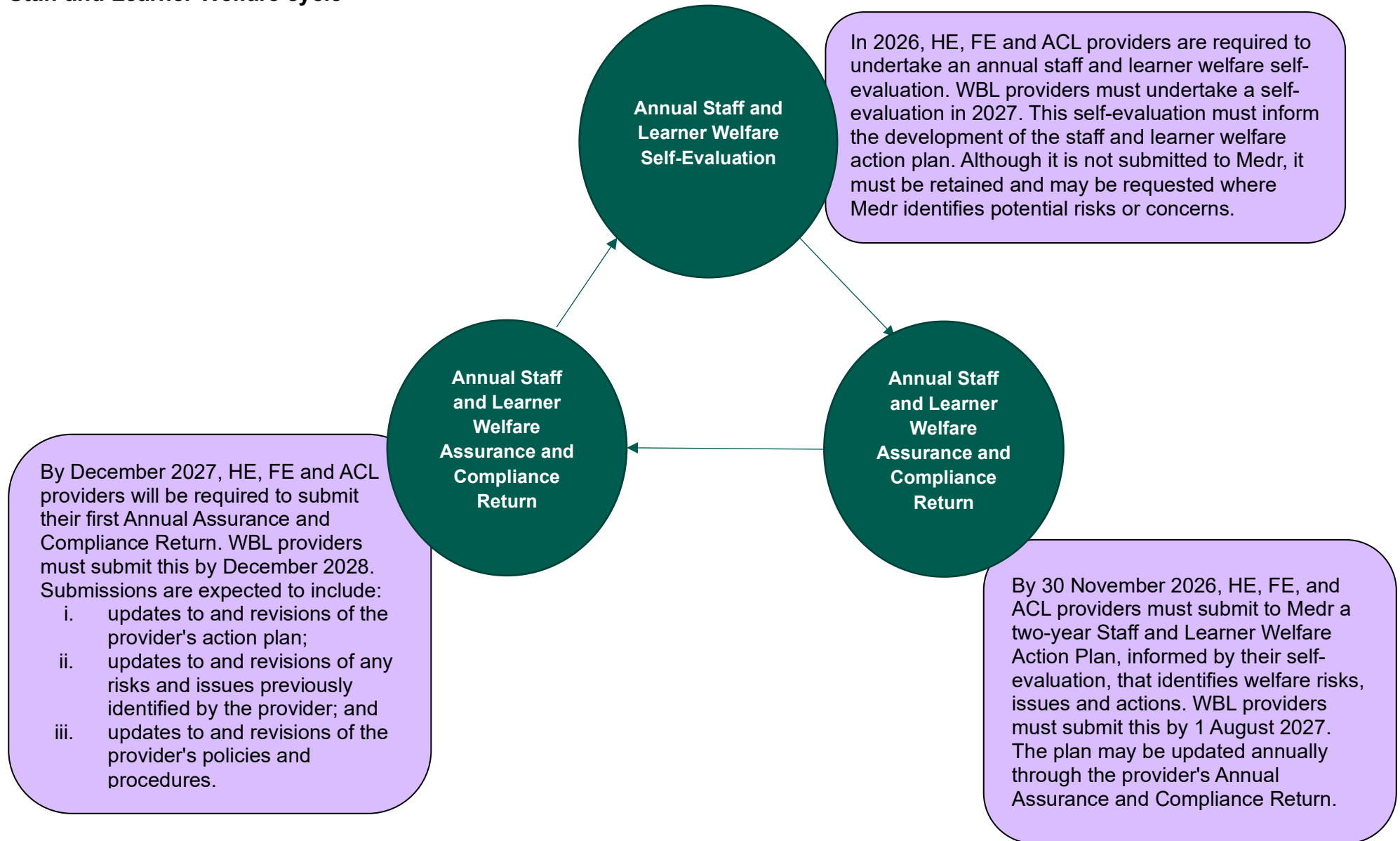
Engaging learners and learners' representative bodies

10. In line with the [Learner Engagement Code](#), providers must engage learners in their decision making, including decisions relating to learner welfare policies and actions.
11. Providers must additionally work with learner representative bodies (where they exist) on fulfilling the requirements of this condition as it relates to learner welfare.

Involving and working with staff and trade unions

12. Medr has a statutory duty to promote collaboration. Tertiary providers should therefore involve staff in discussions about Medr's regulatory Condition for Staff and Learner Welfare and, work with trade unions (where appropriate) on fulfilling the requirements of the condition as it relates to staff welfare.

Staff and Learner Welfare cycle



Welfare self-evaluation

13. During 2026, providers should use existing self-assessment tools and guidance to support their self-evaluation. Examples include, but are not limited to:
 - i. **Higher Education examples:**
 - a. [Universities UK \(UUK\) Stepchange framework](#) and [self-assessment](#); and
 - b. [UUK Suicide Safer framework assessment tool](#).
 - ii. **Other non-sector specific self-assessment examples:**
 - c. the Welsh Government [NEST self-assessment and implementation tool](#);
 - d. [Trauma and ACE \(TrACE\) Informed Organisations Toolkit](#); and
 - e. [Anti-racist Organisation Maturity Matrix](#).
14. In 2027, providers should use the following self-assessment tools and guidance:
 - i. **Higher Education examples:**
 - a. [Violence Against Women, Domestic Abuse and Sexual Violence \(VAWDASV\) self-assessment](#).
 - ii. **Other non-sector specific self-assessment examples:**
 - b. the [self-evaluation principles](#) that have been developed by the Quality Assurance Agency for Higher Education (QAA) and Estyn; and
 - c. Medr's [Common Mental Health and Wellbeing Framework](#).

Welfare action plan

15. The two-year (2026/27 to 2027/28) staff and learner welfare action plan must be informed by the provider's welfare self-evaluation. Providers should use self-evaluation findings to identify strengths, risks, issues and priorities for ongoing development. The welfare action plan should demonstrate how identified risks, issues and priorities will be addressed through a proportionate programme of activity within the two-year period.
16. The supporting information below is intended to assist tertiary education providers in completing the welfare action plan template.

Section one: Provider details

17. In this section, providers should provide the name, role, and contact details of the individual Medr should contact in relation to the action plan.

Section two: Assurance

18. In 2026, all providers must complete the staff and learner welfare initial assurance statement, answering 'Yes' or 'No' to the eight compliance questions set out in the staff and learner welfare action plan template, and providing additional information where requested.
19. The initial assurance statement must be signed by the Accountable Officer and the Chair of the Governing Body (or equivalent).

Sections three and six: Staff and learner policies and procedures

Part A: Staff and learner policies and procedures (current)

20. Providers must list all staff and learner welfare policies and procedures which formed part of the provider self-evaluation and have been formally approved by the governing body, board, senior leadership team, or equivalent authority.
21. Staff and learner welfare policies should demonstrate how the provider promotes and supports staff and learner welfare, as defined within the Staff and Learner Welfare condition.
22. Staff and learner welfare arrangements include policies and procedures that promote and support staff and learner wellbeing and safety.
23. Wellbeing is defined as emotional wellbeing and mental health, and safety is defined as freedom from harms including harassment, misconduct (as it relates to staff and learner welfare), violence, sexual violence, sexual harassment, and hate crime. Further information is provided in **Annex A** of this document.

Part B: Staff and learner policies and procedures (to be developed or reviewed)

24. Providers must list all staff or learner welfare policies and procedures that are planned for development, update, or formal review during the two-year period. This should reflect identified priorities arising from the self-evaluation process, staff and learner involvement, regulatory changes, sector developments, or organisational strategy.
25. For each policy or procedure, provide:
 - i. the name of policy and/or procedure;
 - ii. development or review start date;
 - iii. development or review completion date; and
 - iv. the department responsible for the review.
26. When planning staff and learner policy reviews, providers must:
 - i. ensure policies selected for review address areas where staff and learner welfare outcomes could be strengthened, or where existing arrangements no longer reflect current practice, legislation, or organisational priorities;
 - ii. consider equality, diversity and inclusion impacts informed by equality impact assessment;
 - iii. ensure the principles of the Learner Engagement Code are adhered to;
 - iv. use staff and learner welfare data to identify gaps and inform improvements;
 - v. establish clear review timelines and accountability arrangements; and
 - vi. ensure governing body oversight where required by internal governance arrangements.
27. When planning staff policy reviews, providers should also involve staff, work with trade unions (where appropriate), and relevant representative groups.

Sections four and seven: Staff and learner risks and issues

General principles

28. Risks and issues are related but distinct. A risk describes a potential future event or circumstance that may affect staff or learner welfare. An issue describes a problem that is already occurring. In some cases, a risk becomes an issue, and an existing issue may give rise to one or more future risks. Where appropriate, providers may record both an issue and a related risk, provided the entries describe different aspects of the matter. The issue should focus on the current situation and its management, while the risk should focus on the potential future consequences should controls prove ineffective or lead to additional risks.
29. When recording risks and issues, providers should:
- base entries on evidence and approved self-evaluation findings;
 - record both preventative and reactive controls;
 - assign a named accountable owner;
 - review risks and issues regularly;
 - escalate significant concerns through governance arrangements;
 - ensure staff voices, survey findings and incident data inform assessments;
 - maintain confidentiality where individual cases are involved; and
 - monitor trends relating to wellbeing, harassment, violence, misconduct and hate incidents throughout the 2026–2028 period.

Part A: Staff and learner risks

30. A risk is a potential future event or circumstance that could affect staff or learner welfare.
31. A staff or learner welfare risk should:
- describe a potential future event or circumstance, not an existing circumstance;
 - be expressed as what could happen if controls fail or are insufficient;
 - focus on risks with medium or higher inherent likelihood and impact before controls are considered;
 - be informed by evidence and the provider's welfare self-evaluation; and
 - be reviewed regularly through governance and safeguarding arrangements.
32. Information on completing each field of the template is given below.

Risk ID number	Provide a unique reference number. <i>Example: RSW-001.</i>
Risk category	Select the relevant categories for the risk within the definition of staff and learner welfare – risks may fall into several categories. Information for categorisation can be found in Table 1 of Annex A .
Risk description (inherent risk)	Describe the risk to staff or learner welfare. The description should clearly state what could happen, who may be affected, and the potential impact.

A useful format to follow is:

“There is a risk that [event or circumstance] may occur because of [cause], resulting in [impact on staff welfare and organisational outcomes].”

The risk description must include an assessment of the ‘likelihood’ and ‘impact’, making use of the provider’s existing risk matrix.

Likelihood assesses the probability of risk occurrence, taking account of current circumstances and evidence, including data. Impact assesses the potential consequences should the risk occur.

Example

An example risk matrix has been included for illustrative purposes only. Providers must apply their own organisational risk matrix.

	Likelihood	Impact
Score	Description	Description
1	Rare	Insignificant
2	Unlikely	Minor
3	Possible	Moderate
4	Likely	Major
5	Almost certain	Severe

Calculate the risk score using the providers likelihood and impact-matrix. The score should reflect the current level of risk before any planned mitigation is applied (the inherent risk).

Overall risk score = Likelihood x Impact

Likelihood	5	M	M	H	H	H
	4	L	M	M	H	H
	3	L	L	M	M	H
	2	L	L	L	M	M
	1	L	L	L	L	M
		1	2	3	4	5
		Impact				

Mitigation/control measures (in place)

Describe the measures that are already in place, that reduce either the likelihood or impact of the risk. This may include policies, processes, monitoring arrangements, or resources currently in use.

Mitigation/control measures to be established

Identify specific actions that will further reduce the risk. Actions should be realistic, measurable, and clearly linked to the risk.

Residual risk	Estimate the remaining level or risk following the implementation of planned mitigation actions. This should reflect the anticipated future position, rather than the current risk level.
Risk status	Indicate the status of the risk, which notes the current position of the risk and whether it is likely to change over time.
Risk owner	Assign the risk to the individual with sufficient authority and accountability to manage and oversee the risk. The risk owner is responsible for ensuring controls and actions remain effective.
Escalation route	The risk escalation route ensures that any identified risks are reviewed and addressed at the appropriate level of governance. Please follow your provider risk escalation policy and process and governance arrangements.
Last review date	Specify when the risk was last reviewed. Please use format DD/MM/YYYY.
Next review date	Specify when the risk will next be reviewed. Review frequency should be proportionate to the risk's significance and likelihood of change. Please use format DD/MM/YYYY.

Example - Staff risk

1.	Risk ID number	Example Staff Risk 001		
	Risk category	☒ Emotional wellbeing ☐ Mental health ☐ Misconduct ☐ Harassment ☐ Violence ☒ Sexual violence or sexual harassment ☐ Hate crime		
	Risk description (inherent risk)	Using its governing body approved 5x5 risk matrix, Provider X assessed the following inherent risk as possible likelihood and major impact resulting in an overall risk rating of High. Staff involved in receiving disclosures, investigating cases, supporting learners, or managing cases relating to sexual violence and sexual misconduct may experience trauma, emotional distress, stress-related illness, burnout, or reduced wellbeing. This may lead to sickness absence, reduced effectiveness in managing cases, staff turnover, and potential impacts on learner support and safeguarding outcomes.		
	Mitigation or control measures (in place)	Provider X has in place the following support for staff: a) Employee Assistance Programme providing confidential counselling. b) Occupational Health referrals for wellbeing concerns.		
	Mitigation or control measures to be established	Follow up actions to be implemented: a) Introduce quarterly wellbeing check-ins for staff dealing with sexual misconduct cases, HR Director, Dec 2026. b) Deliver specialist training on trauma-informed supervision to all line managers, HR Director, Feb 2027. c) Establish formal post-incident debrief process, Safeguarding Lead, Nov 2026.		
	Residual risk	Following implementation and evidence of effectiveness of the additional control measures, the likelihood is expected to reduce from 'Possible' to 'Unlikely', while the impact remains 'Major', resulting in a residual risk of Moderate. Until the effectiveness of the controls has been demonstrated through monitoring and review, the risk will continue to be managed at its current High rating.		
	Risk owner	Director of Human Resources	Escalation route	Safeguarding and Welfare Committee
	Risk status	☐ New ☒ Open ☐ Stable ☐ Increasing ☐ Decreasing ☐ Escalated ☐ Closed	Last review date	01/09/2026
			Next review date	01/12/2026

Example - Learner risk

1.	Risk ID number	Example Learner Risk 001
	Risk category	☒ Emotional wellbeing ☒ Mental health ☐ Misconduct ☐ Harassment ☐ Violence ☐ Sexual violence or sexual harassment ☐ Hate crime
	Risk description (Inherent risk)	Using its governing body approved 5x5 risk matrix, Provider X assessed the following inherent risk as possible likelihood and major impact, resulting in an overall risk rating of High. There is a risk that learners may experience significant mental health and emotional wellbeing challenges because of academic pressures, financial hardship and insufficient early identification of emerging concerns. This may result in reduced engagement, poor attendance, lower achievement, increased withdrawals, safeguarding concerns, and inverse impacts on learner outcomes and provider performance.
	Mitigation/control measures (in place)	Provider X has in place the following support for learners: a) Learner welfare and safeguarding policies. b) Designated Safeguarding Lead (DSL) and Deputy DSL arrangements. c) Trained safeguarding staff and welfare support teams. d) Mental health and wellbeing referral pathways. e) Personal tutor and learner review processes. f) Attendance monitoring and early intervention procedures. g) Learner induction covering support services and reporting mechanisms. h) Access to counselling, wellbeing resources, and external specialist services. i) Safeguarding and wellbeing reporting system. j) Regular review of welfare data through safeguarding and quality committees. k) Staff training on recognising and responding to wellbeing concerns.
	Mitigation/control measures to be established	Follow-up actions to be implemented: a) Increase learner awareness campaigns regarding available support services. Marketing and Learner Services Team, 31/10/2026. b) Deliver additional mental health awareness training for teaching and support staff. HR Manager, 31/01/2027. c) Strengthen links with local mental health and support agencies to improve referral capacity. Safeguarding Lead, 31/12/2026.
	Residual risk	Following implementation and evidence of effectiveness of the additional control measures, the likelihood is expected to remain as 'Possible', while the impact decreases to Moderate, resulting in a residual risk of Medium. Until the effectiveness of the controls has been demonstrated through monitoring and review, the risk will continue to be managed at its current High rating.

	Risk owner	Head of Student Support Services	Escalation route	Senior Leadership Team Audit and Risk Committee Governing Body/Board of Directors
	Risk status	☐ New ☒ Open ☒ Stable ☐ Increasing ☐ Decreasing ☐ Escalated ☐ Closed	Last review date	19/08/2026
			Next review date	19/11/2026

Part B: Staff and learner issues

33. An issue is a current problem that is already occurring and requires management action. Unlike a risk, an issue is happening now, rather than potentially happening in the future.
34. Providers must identify and include issues associated with supporting and promoting staff and learner welfare. Staff and learner welfare 'arrangements' include policies, procedures, and services that promote and support staff wellbeing and safety.
35. Information on completing each field of the template is given below.

Issue ID number	Provide a unique reference number. <i>Example: ISW-001.</i>
Issue category	Select the relevant categories for the issue within the definition of staff and learner welfare – issues may fall into several categories. Information for categorisation can be found in Table 1 of Annex A .
Issue description	Describe the issue to staff or learner welfare, including what is happening now, who is affected, and the impact on those affected.
Management/ resolution measures (in place)	Describe the measures that are already in place to manage and resolve the issue. This may include policies, processes, monitoring arrangements, or resources currently in use.
Management/ resolution measures to be established	Identify and describe measures that will be put in place to manage and resolve the issue over the course of the two-year period, including how these will be measured and reviewed. Actions should be realistic, measurable, and clearly linked to the specific issue.
Issue owner	Assign the issue to the individual with sufficient authority and accountability to manage and oversee the risk. The issue owner is responsible for ensuring management of the issue remains effective and that the issue is subsequently resolved and monitored for resurgence.
Date identified	Specify when the issue was identified. Please use format DD/MM/YYYY.
Issue status	Indicate the status of the issue, which notes the current position of the issue, and state whether it is likely to change over time.

Example - Staff issue

1.	Issue ID number	Example Staff Issue 001		
	Issue category	☒ Emotional wellbeing ☐ Mental health ☐ Misconduct ☐ Harassment ☐ Violence ☐ Sexual violence or sexual harassment ☐ Hate crime		
	Issue description	The 2026 staff survey Provider X identified that 56% of tutors reported work related stress, compared with 41% in the previous year. Three stress-related absences were recorded during the previous quarter If left unmanaged, the issue could lead to increased sickness absence, reduced staff engagement, recruitment and retention challenges, and a decline in service quality.		
	Management/resolution measures (in place)	Provider X has the following arrangements in place: a) Employee Assistance Programme (EAP) and occupational health support in place.		
	Management/resolution measures to be established	Follow-up actions to be implemented: a) Introduce quarterly wellbeing pulse surveys from July 2026, with results reported to SLT within four weeks of each survey and action plans developed for areas of concern. b) Deliver stress-management and mental health awareness training to 100% of line managers by December 2028. c) Establish a Tutor Wellbeing Working Group to provide a forum for discussion, feedback, and co-creation of solutions.		
		<u>Success measures</u> - Reduce tutors reporting work related stress reduces from 58% to below 40% by June 2028. - Reduce stress-related absence by 15% over the period of the action plan. - Increased participation in wellbeing initiatives and support services.		
		<u>Review arrangements</u> Progress will be reviewed quarterly by the Director of People and Culture and reported to the Senior Leadership Team. Significant increases in absence, turnover, or wellbeing concerns will be escalated immediately through the organisational governance process.		
	Issue owner	Director of People and Culture		
	Date identified	15/05/2026	Issue status	☒ Open ☒ In progress

				☐ Solved ☐ Closed Work related stress mitigation actions underway. Success measures have not yet been achieved.
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Example - Learner issue

1.	Issue ID number	Example Learner Issue 001
	Issue category	☐ Emotional wellbeing ☐ Mental health ☐ Misconduct ☐ Harassment ☐ Violence ☒ Sexual violence or sexual harassment ☐ Hate crime
	Issue description	During the 2026 learner voice survey and safeguarding reporting period, a number of learners reported experiencing unwanted sexual comments, inappropriate messages through social media and learning platforms, and behaviour of a sexual nature from peers that made them feel uncomfortable, intimidated, or unsafe. Three formal safeguarding concerns relating to sexual harassment were recorded during the previous academic year. Qualitative feedback from learners indicated that some individuals were unclear about reporting procedures and lacked confidence that concerns would be addressed promptly. Sexual harassment can have a significant impact on learner wellbeing, attendance, engagement, achievement, and sense of belonging. If left unmanaged, the issue could result in increased safeguarding concerns, poorer learner outcomes, reduced confidence in provider processes, and reputational risk for the organisation.
	Management/resolution measures (in place)	Provider X has the following arrangements in place: a) Student Code of Conduct and Safeguarding Policy clearly prohibit sexual harassment and inappropriate behaviour. b) Designated Safeguarding Leads (DSLs) and safeguarding reporting mechanisms are in place, including confidential reporting routes. c) Mandatory safeguarding and professional boundaries training is provided to staff. d) Learners receive induction information on respectful behaviour, reporting concerns, and available support services.
	Management/resolution measures to be established	Follow-up actions to be implemented: a) Deliver annual awareness sessions for all learners covering consent, respectful relationships, bystander intervention, and reporting procedures. b) Review and strengthen learner reporting mechanisms to ensure concerns can be raised confidentially, easily, and safely. c) Introduce targeted campaigns throughout the academic year promoting a culture of dignity, respect, and zero tolerance of sexual harassment. d) Provide enhanced training for all staff on recognising, responding to, recording, and escalating sexual harassment concerns.

			e) Establish a Learner Safety and Respect Working Group to review themes, identify emerging risks, and co-produce solutions with learners. f) Undertake termly analysis of safeguarding data relating to sexual harassment and report findings to the Senior Leadership Team. <u>Success measures</u> a) Increase learner awareness of reporting routes to at least 90% by July 2028, as measured through learner surveys. b) Achieve 100% staff completion of sexual harassment awareness and safeguarding training by December 2027. c) Increased reporting of concerns in the short term, demonstrating improved confidence in reporting mechanisms. <u>Review measures</u> Progress will be reviewed quarterly by the Designated Safeguarding Lead and Director of Student Services, and reported to the Senior Leadership Team. Serious incidents will be escalated immediately in line with safeguarding procedures and organisational governance arrangements. Annual learner survey results and safeguarding data will be used to evaluate the effectiveness of actions and identify any additional interventions required.
	Issue owner		Director of Student Services/Designated Safeguarding Lead
	Date identified		15/05/2026
	Issue status		☒ Open ☐ In progress ☐ Solved ☐ Closed Existing safeguarding measures are in place and additional prevention and awareness actions are being implemented. Success measures have not yet been achieved and progress will continue to be monitored through safeguarding and learner experience reporting process.

Sections five and eight: Staff and learner actions

36. These sections request information on actions that are planned, or that will be taken, to promote and support staff and learner welfare over the two-year period.
37. Actions should be informed by the provider's self-evaluation findings, identified welfare risks, and key issues to be addressed throughout the two-year action plan.
38. To reduce burden and duplication to higher and further education providers, from 2026/27, Medr will no longer require separate wellbeing funding action plans. Instead, providers' planned investment will form part of the two-year welfare action plan. It is therefore essential that all Medr-funded activities, training, services, and resources that support staff and learner welfare are included within the welfare action plan template using the appropriate section relating to funding. Not all actions are expected to arise from a recorded risk or issue where they originate from self-evaluation findings and existing Medr-funded wellbeing provision.
39. Any amendments to Medr-funded activities, training, services, or resources will be managed through the annual assurance process.
40. Information on completing each field of the template is given below. Providers should additionally:
 - i. keep descriptions factual and concise;
 - ii. maintain focus on how actions improve staff and learner wellbeing, safety, inclusion or support;
 - iii. ensure specific information provided (including dates, funding details, and sector information) is accurate;
 - iv. use consistent evidence from welfare self-evaluations and risk assessments to demonstrate strategic alignment across the provider; and
 - v. retain supporting documentation and reportable information where actions are funded through Medr investment (e.g., Higher Education Wellbeing and Mental Health Fund or Further Education Learner Support and Wellbeing Fund allocations).

Action title	Enter the name of the action. In some cases, the action may be broad, such as 'Tutor work related stress reduction initiative', while in others it may be more specific, such as 'Deliver Mental Health First Aid Training'. Providers should use their judgement to determine the most appropriate and descriptive action title.
Type of action	Specify the type of action, which may relate to the provision of activities, training, services, resources, or any combination of these. Providers can select one or more options as applicable.
Action owner	Assign the action to the individual with sufficient authority and accountability to manage the action. The action owner is responsible for ensuring the action is implemented, monitored and evaluated.
Action description	Describe the action that will be taken. Provide a concise summary outlining: i. what the activity, training, service or resource involves;

	ii. intended purpose and expected benefits; iii. the staff or learner groups it supports; iv. the names or titles of specific interventions and/or training provision; v. any staff or staff time that forms a part of the action; and vi. the relevant education sector(s) where the provider covers multiple provision types, such as: a. further education (FE); b. higher education (HE); c. adult and community learning (ACL); or d. apprenticeships or work-based learning, indicating multi-sector actions where applicable. The description field can be used to group related activities, training, services, and resources under a single action (see staff and learner examples below). If adopting this approach, please ensure that any activities, training, services or resources funded through Medr's HE Wellbeing and Mental Health Fund or FE Learner Support and Wellbeing Fund are clearly identified within the final section of the template. Some actions may be relevant to both staff and learners (for example, staff wellbeing awareness training may additionally have indirect positive outcomes for learners). In these cases, actions should not be duplicated across the staff and learner templates, but providers should exercise their judgement when deciding which template is most appropriate for recording the action. Please ensure the description does not exceed the maximum word count of 200 words.
Alignment with self-evaluation	Indicate whether the action responds to findings from the provider's welfare self-evaluation.
Alignment with identified risks and/or issues	Indicate whether the action addresses welfare risks, issues, mitigations, or controls identified within the welfare risk and issues sections of the action plan.
Wellbeing and safety outcomes	Indicate whether the action directly supports wellbeing and safety outcomes.
Action start/end dates	Record start/end dates of the activity (if applicable). Please use the format DD/MM/YYYY for both fields.
Access within franchise/partner organisations (HE and FE templates only)	Indicate whether the action is fully, or partially, accessible to staff or learners within franchise or partner organisations (if such arrangements exist within the provider). Where part(s) of an action are accessible, please specify which part(s).
Availability in Welsh language	Indicate whether the action is fully, or partially, accessible through the medium of Welsh. Where part(s) of an action are available in Welsh, please specify which part(s).

Access for postgraduate learners (Higher Education learners only)	Indicate whether the action is fully, or partially, accessible to Postgraduate learners (taught or research). Where part(s) of an action are accessible to Postgraduate learners, please specify which part(s).
Access for international learners (Higher Education learners only)	Indicate whether the action is fully, or partially, accessible to international learners. Where part(s) of an action are accessible to international learners, please specify which part(s).
Anticipated outcome and metrics	Describe the anticipated outcome of the action, including as this relates to: i. addressing gaps identified within the provider's welfare self-evaluation; ii. addressing identified risks and issues, or applying controls or mitigations to these; and iii. supporting wellbeing and safety outcomes. Describe how the impact of the action will be measured and monitored, and how the provider has defined 'success' in the context of the action.
Use of Medr investment (HE and FE templates only)	Specify whether the action is fully or partially funded through Medr's HE Wellbeing and Mental Health Fund or FE Learner Support and Wellbeing Fund (where applicable). Where part(s) of an action are funded by Medr's investment, please specify which part(s), and the amount of funding used for each part.

Example – Staff action (Higher and Further Education)

1.	Action title	Tutor work related stress reduction initiative		
	Type of action	☐ Activity ☒ Service ☒ Training ☐ Resource	Action owner	Director of Human Resources
	Brief description of action	<i>(Maximum 200 words)</i> In response to findings from the 2026 Staff and Learner Welfare Self-Evaluation, where tutor work related stress was identified as an ongoing issue, we are implementing the following recommendations: <u>Training</u> a) Deliver stress-management and mental health awareness training to 100% of line managers by December 2028. <u>Activity</u> a) Establish a Tutor Wellbeing Working Group to provide a forum for discussion, feedback and co-creation of solutions. b) Introduce quarterly wellbeing pulse surveys from July 2026, with results reported to SLT within four weeks of each survey and action plans developed for individual areas of concern.		
	Does the action respond to the welfare self-evaluation?	☒ Yes ☐ No ☐ Not applicable	Does the action respond to the welfare risk mitigations and controls identified in the welfare risk matrix or issues log?	☒ Yes ☐ No ☐ Not applicable
	Does the action specifically support or promote wellbeing or safety of staff?	☒ Emotional wellbeing ☒ Mental health ☐ Misconduct ☐ Harassment ☐ Violence ☐ Sexual violence or sexual harassment ☐ Hate crime		
	Action start date	01/09/2026	Action end date	30/12/2028

Will the action (or its outputs) be accessed by staff at franchise/partner organisations?	☐ Yes ☒ No ☐ Not applicable ☐ Partially – <i>please specify below:</i>	Will the action (or its outputs) be accessible through the medium of Welsh?	☐ Yes ☐ No ☐ Not applicable ☒ Partially – <i>please specify below:</i> Stress-management and mental health awareness training is offered in English and Welsh.
Anticipated outcome and impact of the action, and how this will be measured	The anticipated outcomes include: Stress-management and mental health awareness training delivered to 100% of line managers by December 2028. Tutor Wellbeing Working Group established by March 2027 Quarterly wellbeing pulse surveys introduced from July 2026, Success measures include: i. Reduce tutors reporting work related stress from 58% to below 40% by June 2028. ii. Reduce stress-related absence by 15% over the period of the action plan. iii. Increased participation in wellbeing initiatives and support services.		
Is the action funded by Medr's HE Wellbeing and Mental Health (WBMH) funding or FE Learner Support and Wellbeing funding?	☐ Fully funded ☒ Partially funded ☐ No <i>If fully or partially funded, please specify the amount of funding to be utilised.</i> £25,000 of Medr investment will be used to deliver stress-management and mental health awareness training.		

Example – Staff action (ACL and WBL)

1.	Action title	Trauma-informed training		
	Type of action	☐ Activity ☐ Service ☒ Training ☐ Resource	Action owner	Service Manager
	Brief description of action	(Maximum 200 words) In response to findings from Provider X's 2026 Staff and Learner Welfare self-evaluation and risk assessment, it was identified that hourly paid tutors involved in receiving disclosures and supporting learners relating to sexual violence and sexual misconduct may experience trauma, emotional distress, stress-related illness, burnout or reduced wellbeing. This may lead to sickness absence and potential impacts on learner support and safeguarding outcomes. <u>Training</u> Deliver specialist training trauma-informed training to 100% of tutors, including hourly paid tutors. Trauma-informed practices are essential for supporting staff in managing their own wellbeing.		
	Does the action respond to the welfare self-evaluation?	☒ Yes ☐ No ☐ Not applicable	Does the action respond to the welfare risk mitigations and controls identified in the welfare risk matrix or issues log?	☒ Yes ☐ No ☐ Not applicable
	Does the action specifically support or promote wellbeing or safety of staff?	☒ Emotional wellbeing ☒ Mental health ☐ Misconduct ☐ Harassment ☐ Violence ☒ Sexual violence or sexual harassment ☐ Hate crime		
	Action start date	01/09/2026	Action end date	01/02/2027
	Will the action (or its outputs) be accessible through the medium of Welsh?	☒ Yes ☐ No ☐ Not applicable ☐ Partially – <i>please specify below:</i>		

	Anticipated outcome and impact of the action, and how this will be measured	100% of tutors, including hourly paid tutors will be trained in trauma-informed practice, to support staff in managing their own wellbeing. Staff feel more confident in handling disclosures and managing their own wellbeing.
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Example – Learner action (Higher and Further Education)

1.	Action title	Student Support Service		
	Type of action	☒ Activity ☒ Service ☒ Training ☒ Resource	Action owner	Director of Student Services
	Brief description of action	(Maximum 200 words) The Student Support service provides coordinated wellbeing, safeguarding and mental health support to learners. The service combines specialist staff support, preventative wellbeing activities, digital safety tools and learner training programmes to improve wellbeing, resilience, and access to support. The service aims to improve learner wellbeing, reduce barriers to participation, enhance personal safety, increase awareness of mental health concerns, and support early intervention. The service supports all Higher Education learners, with targeted provision for PGR students, vulnerable learners, learners experiencing financial hardship, and learners requiring wellbeing support. Our student support service is made up of the following: <u>Activities</u> a) Campus-wide physical activity sessions b) PGR Wellbeing programme <u>Training for learners</u> a) Suicide Prevention training b) Bystander training <u>Resources</u> a) 3x FTE Wellbeing officers b) Vouchers to support period and personal hygiene poverty c) Wellbeing app subscription		
	Does the action respond to the welfare self-evaluation?	☒ Yes ☐ No ☐ Not applicable	Does the action respond to the welfare risk mitigations and controls identified in the welfare risk matrix or issues log?	☒ Yes ☐ No ☐ Not applicable

Does the action specifically support or promote wellbeing or safety of learners?	☒ Emotional wellbeing ☒ Mental health ☐ Misconduct ☐ Harassment ☐ Violence ☐ Sexual violence or sexual harassment ☐ Hate crime		
Action start date	01/09/2026	Action end date	30/12/2028
Will the action (or its outputs) be accessed by learners at franchise/partner organisations?	☐ Yes ☒ No ☐ Not applicable ☐ Partially – <i>please specify below:</i>	Will the action (or its outputs) be accessible through the medium of Welsh?	☐ Yes ☐ No ☐ Not applicable ☐ Partially – <i>please specify below:</i>
Will the action (or its outputs) be accessed by postgraduate learners? (HE template only)	☒ Yes ☐ No ☐ Not applicable ☐ Partially – <i>please specify below:</i>	Will the action (or its outputs) be accessed by international learners? (HE template only)	☒ Yes ☐ No ☐ Not applicable ☐ Partially – <i>please specify below:</i>
Anticipated outcome and impact of the action, and how this will be measured	The service seeks to support learner wellbeing, increase awareness of support services, strengthen suicide prevention arrangements and enhance learner safety. Success will be measured through service utilisation data, learner satisfaction surveys, attendance at wellbeing activities, wellbeing app usage statistics, training completion rates and annual wellbeing survey results. Outcomes will include increased confidence in accessing support, reduced reports of unmet wellbeing needs and improved learner retention and engagement.		
Is the action funded by Medr's HE Wellbeing and Mental Health (WBMH) funding or FE Learner Support and Wellbeing funding?	☒ Fully funded ☐ Partially funded ☐ No <i>If fully or partially funded, please specify the amount of funding to be utilised.</i> The Student Support Service is fully funded using Medr's HE Wellbeing and Mental Health (WBMH) funding in 2026/27 and is likely to need the same level of funding in 2027/28. 2026/27 investment £180,000.		

Example – Learner action (ACL and WBL)

1.	Action title	Mental health awareness training for tutors to support learners		
	Type of action	☐ Activity ☐ Service ☒ Training ☐ Resource	Action owner	Employment, Education, and Skills Manager
	Brief description of action	(Maximum 200 words) Findings from Provider X's 2026 Staff and Learner Welfare self-evaluation and risk assessment indicated a growing number of learners disclosing wellbeing concerns over the preceding two years. The evaluation further identified a workforce development need, with 30% of part-time tutors being new to the organisation and not yet trained in mental health awareness, reducing their capacity to recognise and respond appropriately to learner wellbeing concerns. <u>Training</u> Deliver mental health awareness training to 100% of tutors including hourly paid tutors.		
	Does the action respond to the welfare self-evaluation?	☒ Yes ☐ No ☐ Not applicable	Does the action respond to the welfare risk mitigations and controls identified in the welfare risk matrix or issues log?	☒ Yes ☐ No ☐ Not applicable
	Does the action specifically support or promote wellbeing or safety of learners?	☒ Emotional wellbeing ☒ Mental health ☐ Misconduct ☐ Harassment ☐ Violence ☐ Sexual violence or sexual harassment ☐ Hate crime		
	Action start date	01/09/2026	Action end date	31/08/2027
	Will the action (or its outputs) be accessible through the medium of Welsh?	☐ Yes ☒ No ☐ Not applicable ☐ Partially – <i>please specify below:</i>		
	Anticipated outcome and impact of the action, and how this will be measured	100% of tutors complete mental health awareness training, with tutors feeling more confident in recognising and responding appropriately to learner wellbeing concerns.		

Annex A

Table 1

Category	When to Select
Emotional wellbeing	Emotional wellbeing in tertiary education is the capacity of individuals to manage their emotions, cope with educational and social pressures, build positive relationships, and maintain a sense of purpose and belonging. It encompasses both individual resilience and the provider support systems that promote mental health and emotional balance.
Mental health	A state of mental wellbeing that enables people to cope with the stresses of life, realise their abilities, learn well and work well, and contribute to their community. It is an integral component of health and wellbeing that underpins our individual and collective abilities to make decisions, build relationships and shape the world we live in. Mental health is a basic human right, and it is crucial to personal, community and socio-economic development. People with poor mental health can have a mental health condition but this is not always or necessarily the case.
Misconduct (as it relates to staff and learner welfare)	Refers to behaviour by learners or staff that is not academic related and breaches organisational codes of conduct, policies, or legal standards. It can include harassment (including sexual harassment), violence (including sexual violence), discrimination, or criminal behaviour.
Harassment	Harassment has the meaning given in section 26 of the Equality Act 2010, Section 1 of the Protection from Harassment Act 1997. For sexual harassment please see 'Sexual violence and Sexual Harassment' below.
Violence	Violence in this context includes actions that cause harm or threaten harm to another person fall under the Offences Against the Person Act 1861, the Public Order Act 1986, and other statutes. For sexual violence please see 'Sexual violence and Sexual Harassment' below.
Sexual violence and sexual harassment	Harassment has the meaning given in section 26 of the Equality Act 2010, Section 1 of the Protection from Harassment Act 1997 and Section 24 of the VAWDASV (Wales) Act 2015. It also includes gender-based violence and sexual violence as interpreted in section 24 of the Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015. This includes violence between learners, staff, or third parties, and can occur on campus; virtual campuses; and provider-leased, occupied or owned accommodation, or during on or off-site activities under the supervision of the provider.
Hate crime	Any criminal offence which is perceived by the victim or any other person, to be motivated by hostility or prejudice, based on a person's disability or perceived disability; race or perceived race; or religion or perceived religion; or sexual orientation or perceived sexual orientation or transgender identity or perceived transgender identity. This reflects the

definition currently used by the police and the Crown Prosecution Service. As this agreed definition may be updated from time to time, providers should refer to the most recent CPS or police guidance when applying this definition in practice.

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