

Evaluation report for charitable-funded requests over £10,000

Please complete this form to tell us about the impact that your charitable funded application has had. We're keen to understand how this funding has made a difference to our patients and service users, their families, carers and Hywel Dda staff.

Please read the guidelines available at [Charities - Home \(sharepoint.com\)](https://sharepoint.com).

Please direct any questions to CharitableFundsFinance.HDd@wales.nhs.uk / 01267 283055 / 01827 1655.

Section 1: Applicant

Lead applicant:

Contact name:	Gina Beard
Job title:	Lead Cancer Nurse
Department/Service:	Cancer Services
Directorate:	Planned Care and Specialist Services

Lead director:

Contact name:	James Sheldon
Job title:	Head of Nursing, Planned Care and Specialist Services

Section 2: Application summary

2.1 Title of application:	"Heads Up!" Initiative- Cancer services Hair Loss Support
2.2 Application reference:	
2.3 Date approved by CFSC/CFC:	26 September 2023
2.4 Value of funding approved:	£165,000
2.5 Project start date:	1 January 2024
2.6 Project end date/ estimated completion date:	31 December 2025

Reporting period:

2.7 Please indicate the period this evaluation report relates to?

Mid-term:		End of funding:	<input checked="" type="checkbox"/>
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2.8 Brief description of your application:

In no more than 50 words please tell us what you received approval of charitable funds for.

The Charitable Funds Committee approved £165,000 of cancer services charitable funds to provide an expert, person centred, holistic hair loss support service for patients. This service brings together healthcare professionals and haircare professionals from our local communities to empower patients with the knowledge and products they need to manage their hair loss journey with dignity and choice. The project received additional funding from the external charity Withybush Hospital Cancer Day Unit (WHCDU) Appeal Fund and this covered the Pembrokeshire element of the project with a grant of £49,500, reducing the actual HDUHB Charitable contribution to

Section 3: Evaluation report

3.1 Key achievements:

Please tell us about what has been achieved as a result of the funding awarded and to what extent the aims and objectives (as set out in the application form) have been achieved.

Patient Services

Patients have accessed services within hospital settings, at salons, in their own homes (via outreach) and within the community. Services have included:

- **In - hospital hair loss services:** consultations, hairdressing services, practical sessions (e.g. wearing wig well, headwear), trolley service of free hair loss items (e.g. headwear, eyelashes). On average three in-hospital sessions were provided every week. In person services have been available at Withybush Hospital (WGH), Glangwili Hospital (GGH) and Prince Philip Hospital (PPH). In person services became available to patients at Bronglais Hospital (BGH) in May 2025 with the opening of the newly refurbished Leri Cancer Day Unit.
- **In salons –** Heads Up specially trained local hairdressers have been providing cuts, colours, wig trims and consultations (e.g. scalp cooling hair care adjustment).
- **At home -** outreach services including online sessions, telephone consultations, free packs sent to home and E-consultations, have served those who are not available for an in-hospital service.
- **Signposting** - one key element of the services is being able to signpost patients to appropriate, local support. For example, explaining to them how the wig referral system works and what to expect was a key part of many consultations. Patients who use scalp cooling have had access to scalp cooling booklets and relevant online support. Patients have appreciated reliable and trustworthy signposting.
- **Patient packs** - nurses have reported how supported patients feel to be provided with free, good quality, appropriate hair loss item such as a scarf, eyelashes, wig cap et cetera.

Photos: Patients attended hair loss workshops (patient consent gained for photographs) and the Heads Up hair loss trolley makes its way round hospitals every week. Supplying patients with practical ideas, a trained expert hairdresser to talk to and free hair loss packs.



Cultivating the hairdressing community to deliver supportive free hairdressing services

Hairdressers have attended community events, in hospitals and at education sessions to upscale their knowledge in Chemotherapy Induced Alopecia and related hairdressing services. Cultivating the local hairdressing community has been an essential part of making sure that patients can access free, specialist services. The project built a community of 'Head's Up' hairdressers.



Photo: Some of the hairdressers who have attended training at an education event at John Burns Centre, Kidwelly

"Now when a patient comes to me I know that I am providing them with the best advice. I've always wanted to give something back to the community and I am very proud to be a hairdresser involved with Head's Up" (hairdresser feedback)

Healthcare Professional Training

Nurses and healthcare professionals have received training and education around chemo related hair loss



"I didn't know what I didn't know!" (Nurse feedback following education event)

3.2 Impact:

Please focus on the positive changes or effects that have taken place as a result of the

funding awarded and to what extent the anticipated benefits (as set out in the application form) have been achieved.

The following key themes have been seen through patient feedback

- Increased self-esteem - patients felt better able to cope with hair loss after a consultation
- Being heard - patients valued having a trained professional to hear their concerns
- Learning new skills and ideas - learning how to tie a scarf, put on false lashes or adjust hair due to hair thinning have all been a valuable part of the patient experience
- Feeling supported - on a regular basis patients praised the hospital (Health Board) for providing a holistic service that they did not expect
- Patients not limited by personal, financial restraints - patients have been delighted and surprised to receive free headwear items and hairdressing services

Impacting the local community

- Local hairdressers have received training and education improving the availability of good evidence-based support for patients in high street businesses
- Local hairdressers were employed by the service (via host charity “Cancer Haircare”) to provide local expertise and training, supporting the local economy
- Local community has caught the vision and raised the awareness of Heads Up
- Local Knit and Natter Group knit hair loss dolls to provide to patients who need to have conversations about hair loss with children
"These dolls are such a good idea. I could not believe it when the hairdresser gave me one. She also told me that some local ladies had knitted them. Heartwarming moments during hair loss and chemo where not expected" (patient feedback)

Photos:

- **Local hairdressers wear fun wigs to work to raise awareness of Heads Up Service**
- **Local volunteers from Knit and Natter Group**
- **Two local core Heads Up Hairdressers**



Impacting Hair Loss support across the nation

Hywel Dda University Health Board (HDdUHB) is currently the only health board in Wales to provide holistic hair loss support to people experiencing hair loss due to cancer treatment. During 2024 there was an all Wales working group to support a new tender for NHS wig provision. Hywel Dda Lead Cancer Nurse, being part of this working group, introduced the group to the wider patient quality and experience aspects of wig selection and patient support that the Heads Up service highlights and there is now a mandatory training and education session for all Welsh businesses

seeking to achieve the tender for NHS wig supply, impacting the quality of care for patients across the nation.

Inclusion

Reaching individuals who may have specific needs around hair loss support has been a vital part of the project. Nurses, hairdressers and patients were educated and made aware of inclusive approaches. For example:

- free afro fringes, handmade by volunteers
- Availability of Afro wig suppliers
- Education regarding the specific needs of people with afro hair who experience hair loss, use scalp cooling.
- Education around cultural issues around hair loss, bespoke hijabs suitable for women who have lost their hair
- Specific support and education around the issues men may have regarding hair loss, facial hair loss.

Photos:

- **Two of the project hairdressers discuss afro hair wigs and men's services**
- **Hairdressers learning about afro hair wig supply in Wales**
- **Modest headwear such as Hijab's suitable for hair loss**





“I hadn’t ever thought about how people with afro hair might feel if a wig wasn’t offered that included their hair type. I think every hairdresser should do this training.” (Hairdresser feedback)

3.3 Beneficiaries:

Please tell us how many people have benefited as a result of the funding awarded and how you have determined these numbers. Beneficiaries may include patients, service users, patient families/carers, and staff.

Total number of patients (or number of services) receiving specialist hair loss services. Including hairdressing, wig services, consultations, information, support, attending any service related to hair loss. Services might be in person or remote (virtual workshop or consultation) e.g. via help desk (phone call) – 1547

Breakdown

- Co-create & support group sessions (group/ patient input online and in person for co-creation) – **265**
- Outreach and face to face hair loss support packs provided including headwear, lashes, etc. sent via post and distributed by nurses and allocated support network – **1540**
- Patients receiving printed support resources (including sign posting to support network) - **3202**

Total number of patient touchpoints: 5007

- Number of nurses and health care professionals reached with education and training to further support patient– **119**
- Number of hairdressers reached with education and training to offer local hair loss support - **130**

Total number of professionals educated – 249

3.4 Evaluation methods:

Please tell us what methods you have used to measure the effectiveness of the funding awarded.

The Service has been evaluated in the following ways:

- Activity and services are logged onto a weekly log sheet.
- Patients, health care professionals, hairdressers give feedback via feedback forms and consultations.
- Regular review meetings are held with Oncology Senior Nurse Manager and Oncology Coordinator to ensure there are no operational issues, concerns or feedback.
- Workshops and engagement events have been held involving patients, healthcare

professionals and local hairdressers to ensure that as the service is co-created it is responsive to the needs of those it seeks to serve.

- Patients have helped to select new items of headwear for their free packs, given feedback on services and shared their experiences and insights.

“You have helped me so much this year, especially Rhiannon on her visits to the chemo unit at Glangwili Hospital and provided me with headwear. Also Valerie, who phoned me and gave me lots of valuable information about hair care, skin care and nutrition.” (Patient feedback)

[Heads Up Web Site](#)

3.5 Lessons learnt:

Please tell us what lessons have been learnt from the delivery of your funded project in terms of what went well and not so well. Did you have to adapt your delivery, or did you face any unforeseen challenges? If so, how did you adapt or overcome any challenges? Will any lessons be shared with colleagues across the organisation?

The value of user involvement

Heads Up began with a sense of “we could do this better” from the nursing teams in the Cancer Treatment units in HDdUHB. It was important to ensure that our senses were, however, in line with the patients’ thoughts and needs and therefore a baseline patient experience survey was shared with patients, resulting in 66 responses received. The results confirmed that patients did not feel supported with good information during their hair loss journey.

Examples of baseline patient feedback:

“It is very distressing to lose your hair because you stop looking like you, yet another part of you has to let go of. My kids did not want me to cut my hair off. I had no information about how to cover up lashes and eyebrow loss and that has been quite distressing too.”

“I used my own hairdresser and made my own decision to cut my hair shorter. No information was provided. Who would have provided this?”

Throughout the Heads Up Project there has been a continued focus on ensuring we are delivering a service that is in line with what patients need, in addition to what support healthcare professionals and the local hairdressing community need, to best support people experiencing cancer treatment related hair loss. The service was responsive and sought to co-create as it evolved, based on the continued feedback from those who accessed the services available.

Opportunities to spread and scale

The detail and impact of the Heads Up service has been shared with other cancer teams through the clinical networks that exist across the nation. It has also had an impact on the procurement process across Wales, improving the quality of service provided to people accessing wig provision through local businesses who have gone through the NHS tender process.

The value of partnership

The HDdUHB team knew they wanted to provide a better service but did not have the knowledge or expertise to make the change or deliver what was needed. Finding an existing charity that provided this led to the partnership where Hywel Dda Charities was able to fund the local service, with support from the national charity, Cancer Haircare, who were able to deliver the service, expert knowledge base and also an element of match funding. Heads Up also partnered with a local Pembrokeshire Charity, Withybush Cancer Day Unit Appeal, who funded the Pembrokeshire element of the service.

Project challenges

Procurement issues- this was a unique service that required specific procurement management in keeping with NHS contracts, audit etc and there was learning for both the cancer team and the

procurement team in getting this right
Staff sickness - as with all services navigating staff sickness has caused issues. However, whenever Heads Up had to cancel a service, the team swiftly replaced services with other options. Any missed hospital sessions were re-booked into the schedule.
Patients booking and cancelling - providing a hairdressing service in hospital proved to be complex. The combination of room availability, hairdresser and patients being well enough to attend has been problematic. However, Heads Up continued to adapt the services and expand the in-the community hairdressing services that could be more flexible and at a time and location that best worked for the patient
Staffing - recruiting and retaining hairdressers was more complicated than expected. Hairdressers were initially very interested but often have competing priorities due to their own businesses. Some have, upon completing their training and onboarding process, proved to be unreliable and so the service had to put in clear expectations to ensure patients were not let down and received the best possible service.

3.6 Exit strategy (for revenue expenditure requests):

Please tell us if, and how, the funded project will continue or has continued beyond the end of the time-limited period of charitable funding. If this project will not continue, please tell us how the project will or has been brought to a close.

This initiative is above and beyond what the NHS is funded to provide and due to the current financial climate it is not envisaged that the service could be mainstreamed into NHS exchequer funds following the initial two-year funding period. Cancer services are fortunate to receive significant support from patients, their families and our local communities on an annual basis. Having submitted a successful application to Charitable Funds Committee for Phase 2 of Heads Up this has now commenced and will run from January 2026-December 2027.

3.7 Other:

Please provide any other relevant information about your funding award and its delivery that you would like to share with us.

Section 4: Expenditure

4.1 Expenditure breakdown:

Please provide a breakdown of all expenditure associated with the funding awarded that has been incurred to date.

Item/Category	Budget (£)	Actual (£)	% Variance <i>budget vs actual</i>
Year 1 Q1 (including set up)	£115,500 HDUHB Charitable Funds £49,500 External grant (WHCDU Appeal)	39086.76	
Q2		19543.38	
Q3		19543.38	
Q4		21512.25	
Year 2 Q1		21512.25	
Q2		21512.25	
Q3/4 Final Phase 1 invoice		21512.25	
Totals	165,000	164222.52	

4.2 Outstanding expenditure:

For mid-term evaluation reports, please provide a summary of outstanding expenditure and discuss whether predicted future expenditure is on track:

Section 5: Authorisation

5.1 Evaluation report prepared by:

Contact name:	Job title:	Date:
Gina Beard	Lead Cancer Nurse	17 February 2026

5.2 Evaluation report authorised by:

Contact name:	Job title:	Date authorised:
Sara Jones	Service Delivery Manager and Chair of Planned care and Cancer Services Business meeting	26 February 2026

For Charitable Funds Finance Department

Finance review:

I confirm that I have reviewed this report and that the expenditure incurred to date is an accurate reflection of the project spend.

Contact name:	Job title:	Date reviewed:
Jessica Elderfield-Scott	Accounts Assistant	25 February 2026

Please return completed form via email to:

CharitableFundsFinance.HDd@wales.nhs.uk

or via internal mail to:

Charitable Funds Support Officer
Finance Department
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