

Responding to Service User Experience to Improve Services

NHS Organisation	HDUHB
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The NHS Framework for Assuring Service User Experience explains the importance of gaining service user experience feedback in a variety of ways using the four quadrant model (real time, retrospective, proactive/reactive and balancing). It outlines three domains to support the use and design of feedback methods and is intended to guide and complement service user (patient) feedback strategies in all NHS Wales organisations. NHS organisations are required to evidence that service user experience feedback is gathered and acted upon in all care settings (as applicable).

Reporting Schedule: Evidence of how NHS organisations are responding to service user experience feedback to improve/redesign their services is to be reported annually. This form is to be submitted on 30 September to cover the period April 2019 to March 2020. **Return form to:** hss.performance@gov.wales

	What has your organisation done to encourage feedback from service users on their experience of your services?	What has your organisation done to respond to service user feedback to improve/redesign your services? Please provide examples of improvements.	How have you communicated improvements to your service users? e.g. 'you said, we did' notice boards, social media, posters
Prevention Services and Health Promotion. This includes Screening Services	Twilight Sanctuary Llanelli Mind held focus group with service users for feedback on the Initial Contact and Evaluation forms of the service.	Useful feedback was received, for example one service user made a helpful suggestion to include information on medication, which was included on the form.	Feedback was provided to Llanelli Mind who updated service users accordingly An information video was produced, including service users
	Education Programme for Patients (EPP) , in response to feedback and ongoing communication with patients, the team provide a range of free self-management health and wellbeing programmes for people living with a health conditions or for those who care for someone with a health condition.	These programmes are currently being delivered virtually. We hope to recommence face to face programmes in January 2021. Programmes delivered via EPP and the self-management team are listed below:	

		<ul style="list-style-type: none"> • 5 Ways to Wellbeing • Health and Wellbeing for Carers • COPD • Motor Neuron Disease • Foodwise for Life • X-Pert Diabetes • Cancer: Thriving and Surviving • Foundation Pain Management • Confidence With Continence • Healthy Footsteps (winner of an NHS Award 2019 delivering higher value health and care) • STANCE (Diabetes programme) • Living with Lymphoedema • Know your risk • Diabetes self-management programme <p>Generic support self-management programmes and one specifically for people who are still in work</p>	
<p>Primary Care/Community Care</p>	<p>Primary Care Practitioner – Pembrokeshire - Invited service users to attend the project group, who have been instrumental in how we administer the project and ensure we capture the correct feedback.</p> <p>Fundamentals of Care Audits Surveys completed.</p>	<p>The results are analysed by the CLN s and team feedback is given and areas of good practice/areas of improvement identified and action plans put in place.</p>	<p>A poster was developed to advertise this to the wider community.</p>

	<p>Community care planning is also considered in partnership with patients/families and carers and outcomes reviewed, again to identify areas of good practice/improvement that might enhance the patient journey.</p> <p>Leg Ulcer Clinic - information giving is a fundamental part of the care planned in the Community Leg Care Clinics as the joint working between nurse and patient is fundamental to the improved healing rates we have seen since starting this service.</p>	<p>Feedback from the clinics is also received and considered by the Special Interest TVN Nurses and used to improve the service.</p>	
<p>Planned Care</p>		<p>This feedback is used to improve services and the patient experience.</p> <p>Patient's stories on new service initiatives used to inform future service improvements.</p> <p>Linking with Welsh Risk pool for learning.</p> <p>Include patient representation in service group and stakeholder panels.</p> <p>Identifying Carers and signposting to relevant primary care service to identify carer responsibilities as requested from patient feedback.</p>	<p>"We asked, you said, we did" notice boards in departments</p> <p>Notice boards with information requested from patients displayed in departments.</p> <p>Fundamentals of care notice boards displayed in departments.</p> <p>Anonymised Thank you cards from patients are displayed within departments.</p> <p>use of digital technologies to communicate patient information via Health Board social media and internet site.</p>

		<p>Provide Digital translation services through the use of online technologies within departments.</p> <p>Discuss questionnaire outcomes in quarterly department meeting and action any service improvements.</p> <p>Discuss relevant patient experience in Senior Nurse Management Team meeting, Nursing Band 7 Scrutiny meeting and the Quality, Safety and Assurance meetings to identify trends and develop a directorate wide response.</p>	<p>Investment in digital equipment to aid patient communications.</p> <p>Promotional stands across acute sites to promote services.</p> <p>Provide audit outcomes to patients who volunteered for feedback.</p>
<p>Planned Care</p>	<p><u>Gorwelion 24/7 CMHC</u> There is a service user, carer representative and CHC member who sit on the project group and feed into the development of the project.</p> <p><u>Pet Therapy</u> Pet Therapy was introduced to patients in South Pembrokeshire Hospital. The feedback collated from patients demonstrated the positive effect that the Pet Therapy had.</p> <p><u>Maternity Services - Anthropology Students</u> Anthropology students from Lampeter University undertook interviews with expectant mums and families across all sites.</p>	<p>Feedback to these groups is completed by way of regular meetings & minutes communicating in the following meetings</p> <p>Pet Therapy has been extended to Withybush General Hospital. (Pre-Covid).</p> <p>Reports to be presented to Listening and Learning Sub-Committee and Directorate Governance arrangements.</p>	

	<p><u>Phlebotomy Services, Prince Philip Hospital</u></p> <p>Due to a significantly high volume of patients accessing the phlebotomy services on a daily basis and increased waiting times. In conjunction with the service - the PALS team engaged with patients and collated feedback over several weeks.</p>	<p>Improvements were made to the environment with new notice boards and information. Hospital management engaged with GMS contracts and worked with GP colleagues to reduce the number of patients accessing the hospital phlebotomy service.</p>	
<p>Emergency & Unscheduled Care</p>	<p>Paediatrics – age appropriate questionnaires for children and parent/carers have been developed, for 3 sites for acute paediatrics and Paediatrics in the outpatient setting. Use of paper and QR codes.</p> <p>Friends and family test was introduced in Paediatrics.</p> <p>Voices of Children and Young People group has been established to engage and seek user feedback – also on an ongoing basis to assist with the development of our Children’s Charter from feedback including the completion of surveys.</p> <p>Peer Mentor Working in conjunction in the 136 suite/place of safety in Gorwelion. We have written to 30+ service users for their input and currently completing the evaluation based on the responses.</p>	<p>The feedback collated from surveys has been formatted and will be shared with service users – Awaiting a page new on intranet (graffiti board) to share the feedback.</p> <p>The planned engagement and collation of feedback programme has been placed on hold – existing data has been incorporated into the charter and real time feedback actioned by the Directorate.</p>	<p>Ward boards are in place.</p> <p>You said – we do this - for Paediatrics on ‘tops and pants’.</p> <p>For staff – Acute paediatric newsletters , play service newsletter</p> <p>Peer Mentor – the information has been provided and we are recruiting new Peer Mentors based on the feedback provided.</p>
<p>Emergency & Unscheduled Care</p>	<p>Cardiology:</p> <p>Posters displayed in clinical and cardiology out-patient areas signposting service users to feedback on their experience of services;</p> <p>Service User ‘Comment Boxes’ in key cardiology out-patient areas;</p> <p>Regular Service User Satisfaction questionnaire used in Cardiac Rehabilitation and Community Cardiology Service;</p>	<p>A number of concerns have been received in 2019/20 with respect to delays from referral to clinic appointment – as a cardiology service we have developed a ‘Patient Hot Line’ for contact and resolution of concerns;</p>	<p>We recognise we need to do more to showcase our cardiology service improvements to Service Users.</p>

	<p>Adoption of a culture which encourages patients to express any negative feedback through the Health Board ‘concerns’ process – concerns are dealt with directly by Cardiology Service Delivery Manager and Service Support Manager.</p> <p><u>Intensive Care Patient Support Group – Glangwili General Hospital</u></p> <p>Staff on the ICU in GGH have created an ICU patient support group – which meets bi-monthly, the group is attended by patients and their families and their feedback is shared to help others.</p>	<p>Concerns and complaints have been received in 2019/20 with respect to the absence of certain clinical treatment in BGH and WGH and perceived post-code health lottery within HDUHB – The service has developed a Permanent Pacemaker Service in both BGH and WGH.</p> <p>Based on the feedback received from patients - speakers are invited to give advice and guidance at the meetings for example; physiotherapists, dieticians etc.</p>	
<p>Mental Health & Learning Disabilities</p>	<p>Direct feedback verbally</p> <p>Feedback received Twitter account where relatives have seen activities being carried out on the wards and comment.</p> <p>Thank you cards to the ward expressing their gratitude for the high level of care their loved ones received and the professionalism of all staff involved in the care and support provided to the relative (Carers groups) These cards are anonymously displayed on a board in the ward for future relatives and service users to see when they are admitted.</p> <p>“Rate the nhs” Health Board compliments link which is situated in the nursing office so any member of staff can upload any feedback received to the link</p> <p>Questionnaires are periodically sent to relatives/service users at the point of discharge for feedback.</p> <p>Qualified nurses also make a copy of any feedback which goes towards their revalidation (adhering to patient confidentiality).</p>		

Fundamentals of Care annual audit with service user/relative questionnaires.

Veterans

Service user experience questions are asked after the completion of: Telephone triage and telephone assessment

For veterans who complete treatment they are asked to complete an extensive service experience questionnaire.

Data is collected on Attend Anywhere (AA) and Walk and talk therapy sessions (W&T) via informal feedback from clients.

Informal feedback on 6 and 12 month follow up appointments is also obtained.

Questionnaires are sent to veterans who did not complete their course of treatment to obtain their feedback on why.

Throughout the course of treatment/at the end of individual therapy sessions, we ask for feedback on the session.

With the support of West Wales Action for Mental Health – a focus group of local veterans has been held, who looked and commented on the Veterans NHS Service Wales (VNHSW) website.

Working with West Wales Action for Mental Health (WWAMH) on a Job Description/Personal Specification for a veteran representative to work closely with VNHSW in HD re service development and improvement.

We asked our partners Change Step to obtain service user feedback in response to social media video/podcast produced by Veterans NHS Service Wales (VNHSW) and for ideas on what additional podcasts they would like in future.

	<p><u>Specialist Child and Adolescent Mental Health Services (SCAMHS)</u></p> <p>Questionnaires have been developed for 9 – 11 year olds, 12 – 18 year olds and for Parents/Carers.</p> <p>Qualitative data is captured in Goal Based Outcome (GBO) post intervention.</p> <p>Young Peoples Forum co-production “Future Minds”</p> <p><u>Integrated Psychological Therapy Service (IPTS)</u></p> <p><u>Joint work with service user on developing the IPTS Operational</u> procedure, the equality impact assessment, and the service information support.</p> <p>Psychologist has designed a feedback form that can be used for all current therapy delivery during COIVD, so AA, W&T and F2F. It was completed to assess if the new ways of working were actually delivering what we needed them to. The form is more a staff feedback but clients are able to give opinions in the comments part. When setting up AA we also had specific patient feedback forms that we used for phase one and onwards. These have been used by the Health Board to continue the roll out of the system as they supported and highlighted some of the challenges that clients were having with the system, things like infrastructure, a safe space, IT hardware access etc. Recorded session with clients were undertaken capturing feedback on the system.</p>		
<p>Patient Transport</p>	<p>Both the service and our primary provider (WAST) regularly attend Community Health Council meetings to provide updates on service developments and listen to feedback</p> <p>Our primary provider (WAST) undertake routine surveys of patient satisfaction with the non-emergency patient transport services that are delivered. The outcome of these surveys are shared with our Health Board and the Emergency Ambulance Service’s Commissioner for consideration and action if appropriate.</p>	<p>Changes to private provider contracts for NEPTS service were made due to complaints about the quality of the services communicated to us by patients.</p> <p>The same volunteer drivers are utilised wherever possible for patients when having multiple journeys, as feedback shows patients are more comfortable</p>	<p>Generally by sending written feedback directly to those who have raised comments or by updating the Community Health Council’s on progress. We do not have any generic method for widely sharing any changes that have come about with patient currently.</p>

	<p>Patient Transport (Mental Health) a Community Health Council representative sits on the Patient Transport Group.</p> <p><u>Tenby Cottage Hospital – Patient Parking</u> The PALS team undertook surveys with service users of Tenby Cottage Hospital as patient car parking spaces were not always available. Based on feedback it was noted that non attendees to the hospital were parking on a daily basis.</p>	<p>having the same drivers where possible. We have sought to more widely communicate how the Non-Emergency Patient Transport service can be accessed following a complaint that a patient had difficulty finding information regarding the service.</p> <p>Feedback to these groups is completed by way of regular meetings & minutes communicating in the following meetings.</p> <p>New Signage and posters were installed to promote the importance of the car parking spaces for patients attending the hospital.</p>	
<p>Corporate</p>	<p><u>HDUHBs Library of Patient Stories</u> Patient stories are shared in a number of internal training sessions to clinical and non-clinical staff and also at stakeholder forums, at Executive Board on a monthly basis – patient stories are thought provoking to those listening and aspires improvements and changes. Investment has been made for new equipment and software for the recording of patient stories.</p> <p>Bespoke Surveys are supported by the Patient Experience Team both in paper and electronic formats.</p>	<p>Feedback from patient stories are also transcribed into documents for staff learning and development.</p> <p>Reported directly to Welsh Government.</p>	<p>Board Reports (which are available in the public domain). Notice Boards.</p>

	<p>The completion of NHS questionnaires is undertaken with patients by the Patient Experience Team.</p> <p><u>Patient Advice and Liaison Service (PALS) Team</u></p> <p>Proactively engage with patients to glean feedback on a daily basis. The PALS team have created a branding with the introduction of a uniform for staff, produced new leaflets and posters, procured banners which are used to promote the service and patient feedback mechanisms. All feedback is recorded in Datix - Patient Experience module – all activity is reported to Improving Patient Experience Committee and Board.</p> <p>The production of patient information/leaflets is supported by the PALS Team taking into consideration the feedback from the HBs Readers panel.</p> <p>Patient experience mechanisms are regularly promoted through Global emails and on the Health Boards Intranet/Internet sites and on social media platforms.</p> <p><u>Patient Experience Week 2019</u></p> <p>The PALS and Engagement Teams promoted - across all hospitals and community settings the mechanisms that enables patients to provide their feedback which were promoted with live feeds through twitter and face book.</p> <p>The team regularly update hospital and community hospital notice boards - promoting patient feedback mechanisms with bilingual posters and leaflets.</p>	<p>Real time remedial actions undertaken as a result of patient feedback through facilitation – for example patient meal suggestions - comments are reported to Hotel Services for improvements on meal choices. Protected mealtimes for patients have been introduced and red trays for dementia patients.</p>	
<p>Corporate</p>	<p><u>Friends and Family Test (FFT)</u> has been installed and a training programme completed across all departments in Hywel Dda.</p>	<p>The feedback is immediately available to wards/clinics/departments. Examples of feedback and voice messages are reported to Board as part of the Patient Experience</p>	

Patients Charter

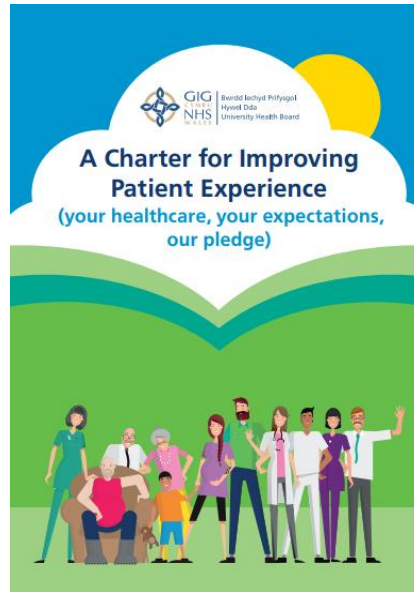
The Health Board approved the Improving Patient Experience Charter which was co-produced with patients, carers and several stakeholders groups across the counties.

The Engagement Team supported the Patient Experience Team to develop a patient experience charter setting out clearly what patients, families and carers can expect when receiving services from the Health Board.

The charter was developed following engagement with, and feedback from, patients and our communities on what matters to them when accessing care and treatment to enable a positive experience to be achieved every time.

Engagement activities included:

- Patient experience charter focus group of Siarad Iechyd/Talking Health members
- Staff workshop at the Health Board's Nursing and Midwifery Conference
- Merched y Wawr, Aberystwyth Focus Group
- Patient Experience Week - engagement with patients, the public and frontline staff in all hospital sites, including community facilities
- Carers' Week events – engagement team members attended two events with stands, inviting participants to contribute to the development of the charter
- Four sessions with People First learning disability groups
- Incorporating information from work already undertaken on the Learning Disability and Young Carers' charters



monthly report. Service improvements based on feedback have included improving signage, lighting and procuring of replacement furniture.

Responses facilitated and processed via Care Opinion.

Formal launch to take place in 2021 (delayed due to COVID)

Information is shared on designated Carer notice boards. Carer Information shared on global emails.

The team collated and compiled the feedback to enable the Patient Experience Team to produce a charter encompassing the aspects of the patient and family experience that should always occur when patients interact with healthcare professionals and the health care delivery system.

Care Opinion – information from the national website for feedback is utilised and incorporated into Board reports.

Feedback Terminals – Accident and Emergency

Feedback terminals namely Happy or Not were installed into Accident and Emergency departments. The feedback is reported in real time to both HDUHB and Welsh Government (pre-COVID).

Carer Leads

Carer lead roles have been introduced to the HB working in partnership with the third sector. The carer leads work closely with the PALS service and collate patient/carer feedback.

Siarad Iechyd / Talking Health (SI/TH)

SI/TH members receive up-to-date information about the Health Board and opportunities to influence and shape services. Members are provided with opportunities to become involved in various activities by subscribing to/ commenting on:

Questionnaires/Surveys, Readers' Panel, Focus Groups, Local and national consultation documents.

Siarad Iechyd/Talking Health Members also received information about:

Developing Trauma Services in Hywel Dda University Health Board Document and an invitation to attend public drop-in events in each county

-Ap0- Healthier Mid and West Wales Summary Document
Cross Hands Health and Wellbeing drop-in events
Llandovery Hospital drop-in event

Engaging with Our Communities (Carmarthenshire) drop-in events in Tumble and Cwmaman to have conversations about local services and carry out a community asset-mapping exercises
Mid Wales Joint Committee - Spring Engagement Events

Questionnaires/Surveys

Members can choose to comment on questionnaires or surveys to share their views by either completing a paper copy or online via Survey Monkey. Members willing to undertake surveys provided their views on:

Developing Trauma Services in Hywel Dda University Health Board survey.

Hywel Dda Community Health Council Audiology Survey
Engaging with Our Communities (Carmarthenshire) Health and Wellbeing Survey

Focus Groups

Siarad Iechyd/Talking Health members are invited to attend focus groups to share their views and opinions on a specific topic. During 2019/20, members have participated in a focus group to look at developing a patient's charter for Hywel Dda University Health Board including an additional focus group with a community group held in the Welsh language only, a first for the Health Board.

When members are unable to attend a focus group they are provided with a copy of information / comments sheet so questions, comments are fed into the discussion and feedback is provided on these.

Readers' Panel

Members can choose to sign up to the Readers' Panel to comment on how to improve the Health Board's and partners' written

information, such as leaflets, to make sure the publications are clear and easy for patients and the public to understand. Members have reviewed leaflets including:

Cognitive Behavioural Therapy (CBT) Training course for the management of hot flushes and night sweats
Child Protection Medical – Tests Information for Parents
Child Protection Medical - Information for Parents
Antibiotic Resistance Patient Information Leaflet
Patient Experience Charter

Stakeholder Reference Group (SRG)

The purpose of the Stakeholder Reference Group (SRG) is to provide:

Early engagement and involvement in the planning of the Health Board's overall strategic direction.

Advice to the Health Board on specific service improvement proposals before going to formal consultation.

Feedback to the Health Board regarding the impact of its operations on the communities it services.

The membership is drawn from within the area served by the Health Board and ensures involvement from a range of bodies and groups operating within that area.

During 2019/20, SRG members were provided with opportunities to comment on and make recommendation to Hywel Dda Health Board on the following;

Transformation Fund Bids, Transformation Programme,
Transformation Programme, A Healthier Mid and West Wales
Developing Trauma Services in Hywel Dda University Health Board
Winter Plan 2019/20

Members received presentations from the following groups and organisations;

West Wales Care Partnership Regional Young Carers Group highlighting their work with young carers across the region. Education Programme for Patients (EPP Cymru) informed of the range of self-management health and wellbeing courses and workshops available to people with chronic conditions in West Wales.

The Strategic Partnerships, Diversity and Inclusion Team informed how the organisation was supporting vulnerable groups and supporting unpaid carers in Hywel Dda.

Welsh Ambulance Service NHS Trust informed on pressures the service were experiencing and updates on their achievements. Patient Experience within Hywel Dda.

SRG members were also provided with updates, information and offered the opportunity to comment on the following;

Engaging with Children and Young People, Development of a Children's Board, The Patient Experience Charter, Regional Engagement Partnership Group, Development of Engagement Tools, Update on Engagement Activities within Hywel Dda, Transforming Mental Health Services, Hywel Dda Community Health Council and Hywel Dda University Health Board Framework for Continuous Engagement and Consolation.

Over the past year the SRG has also engaged with Carmarthenshire, Ceredigion and Pembrokeshire youth forums to look at ways to strengthen how they work with young people. This will ensure that young people's voices are heard to shape health, care and wellbeing services.

Regional Engagement Group – Community of Practice

A Regional Engagement Group – Developing a Community of Practice is a group of committed officers from statutory and third sector organisations across West Wales with expertise and a particular interest in engagement. The group was developed

following a multi-agency workshop which identified opportunities to work more effectively together.

The Regional Engagement Group came together with a specific interest in designing, developing and delivering citizen engagement differently in the future through working together to deliver more effective and efficient engagement, while making the best use of existing resources and avoiding duplication. Integral to this was the development of a digital engagement approach.

Capital Planning

Cross Hands



The Engagement Team has undertaken a further three public drop-in sessions in the Cross Hands area, in addition to sessions held earlier in the year, to raise awareness of the plans for the new Integrated Care Centre, and invite comments and input into what local residents would like to see at the new centre. The feedback from these sessions is continuing to inform the ongoing planning work.

Withybush Ward 10 -

The work on Ward 10 started in April 2019. The team supported the



Ward 10 Project Group to carry out some engagement activities

around areas open to influence on the refurbishment. The Ward 10 Stakeholder Group - comprising fundraisers, charity representatives, local Community Health Council members and staff - and wider ward staff were presented with mood boards comprising colour palettes and material swatches to choose their preferred scheme for the refurbished ward. As the building work neared completion, stakeholder group members and ward staff were given the opportunity to choose artwork and photographs to decorate the walls of the ward, corridors, day room and offices

A shortlist of 30 photographs was further circulated for stakeholders and staff to choose their final favourites. A on line survey tool poll was set up to enable stakeholders unable to attend meetings to make their choices online. Ward site visits were also arranged to enable the principle fundraiser, other stakeholders and staff to decide where to site each photograph. These were very much appreciated by all who attended.

Carmarthenshire

The Engagement Team is working with community development officers and the locality teams across Carmarthenshire to develop a community assets-based approach to identifying what community's value and need more support in achieving.

Preliminary engagement work was undertaken talking to people in The Hwb, Ammanford, and staff at Amman Valley Hospital. Public drop-in events involving Health Board, locality authority and third sector staff were then held in Tumble and Glanamau for people to tell us what they valued about their community and what they felt was missing.

Following the advice of the local community development officer Llanelli Urban Town Council, the engagement team delivered workshops with representative community groups – Llanelli Community Partnership and Street Buddies, covering the urban and more rural parts of the district – to hear the view of more seldom heard stakeholders.

The findings of these meetings have been compiled into a report to help inform the direction of future transformation work in the county.

The Engagement Team also ran a public drop-in event in Llandovery to address local people's concerns about the future of the community hospital. The event was attended by more than 550 people. In addition to enabling people to discuss their concerns, participants were encouraged to talk about what was important to them in their community and what opportunities there were to make improvements to services.

Ferryside – primary care

Support to develop an agreed approach to engaging with patients in partnership with the CHC.

Gluten free subsidy card

Support to ensure the views of patients are used to inform Gluten free foods subsidy card rollout.

Phlebotomy

Working with the service and CHC to develop a survey to identify the potential impacts of making changes to a service.

Women and Children's Services

Expert advice on the engagement process that will need to be followed around Withybush Hospital's Paediatric Ambulatory Care Unit (PACU). Support to develop a questionnaire to gather the current views on the PACU service.

On Line Survey Tool Management

Management of the corporate on line survey tool account together with providing expert advice and guidance around survey design and development.

During 2019/20, the team provided support with the following surveys:

- Feedback evaluation from Whole System Patient Flow – Quality Improvement and Service Transformation Team
- Pet Competition 2019 – Health Board Charities Team

A feedback report has been compiled by the Engagement Team. This report will be considered by the Health Board to inform the future development of Llandovery Hospital into a vibrant resource for the community.

	<ul style="list-style-type: none">• Developing Trauma Services in Hywel Dda UHB• Diabetes Survey – Diabetes Service• Certification of Eligibility for Specialist Registration/General Practice Registration – Directorate Support and Revalidation Manager• CHC Audiology Survey• Knowledge and Confidence in Dementia – Older Adult Psychology• Health and Care standards (Fundamental of Care) - Staff Feedback – Nursing Practice• Withybush Hospital Ward 10 Artwork – Withybush Ward 10 Project Group• ‘The Big Thank You’ and ‘Your NHS Experience’ surveys – Patient Experience Team• Frailty Survey – Quality Improvement and Service Transformation Team• Covid 19 staff survey - Research and Development Team <p><u>Pharmaceutical Needs Assessment (PNA)</u> Support and advice on engagement in the development of a Pharmaceutical Needs Assessment (PNA).</p> <p><u>Eisteddfod Tregaron 2020</u> Support and advice to prepare a Health Board stand at the National Eisteddfod 2020 in Tregaron.</p>		
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