



CYFARFOD BWRDD PRIFYSGOL IECHYD UNIVERSITY HEALTH BOARD MEETING

DYDDIAD Y CYFARFOD: DATE OF MEETING:	30 September 2021
TEITL YR ADRODDIAD: TITLE OF REPORT:	Improving Patient Experience
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Mandy Rayani, Director of Nursing, Quality & Patient Experience
SWYDDOG ADRODD: REPORTING OFFICER:	Louise O'Connor, Assistant Director, Legal Services / Patient Experience

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA SBAR REPORT

Sefyllfa / Situation

The attached report provides a summary of patient experience feedback and activity for the period ending 31st August 2021.

Cefndir / Background

The Board is asked to note progress made in supporting the improvement of family and service user experience, and the current position in relation to feedback, including complaints.

Asesiad / Assessment

Patient and service user feedback is received into the UHB through a variety of routes: Friend and Family Test; compliments (formal letters received by the Chief Executive, Chair and the Big Thank You initiative); concerns and complaints, Patient Advice and Liaison Service (PALS) feedback; local surveys; the all Wales NHS survey and via social media.

The main areas of activity and progress for the Patient Experience Team are summarised in the report.

The Board is asked to note that, due to the short time period since receiving the patient experience feedback and the production of this report, comments have been sought from the services involved, and responses will be included in the next Board report.

For the period a total of 760 (697 previous period) concerns were received into the patient support contact centre including enquiries; 253 were complaints requiring investigation under the putting things right process. This represents an increase in the number of concerns and complaints received from the previous period.

Public Services Ombudsman – one final report has been received, which was partly upheld to a limited extent relating to availability of wax bath therapy in Physiotherapy services. All final reports are presented to the Listening and Learning Sub-Committee.

No concerns have been raised in relation to compliance with timescales and agreed actions at this time.

The predominant themes received from complaints and patient experience feedback continue to be around waiting times/waiting lists and accessing accident and emergency services.

Communication with patients waiting for treatment is a priority for the UHB, and is being addressed as a matter of urgency as well as looking at alternative ways of providing surgeries to manage our waiting times and lists.

Argymhelliad / Recommendation

The Board is asked to receive the Improving Patient Experience report, which highlights to patients and to the public the main themes arising from patient feedback.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Risk 581 Health Board wide risk of not learning from events in a timely manner (current score 8).
Safon(au) Gofal ac Iechyd: Health and Care Standard(s): Hyperlink to NHS Wales Health & Care Standards	6.3 Listening and Learning from Feedback
Amcanion Strategol y BIP: UHB Strategic Objectives: Hyperlink to HDdUHB Strategic Objectives	All Strategic Objectives are applicable Choose an item.
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	8. Transform our communities through collaboration with people, communities and partners

Gwybodaeth Ychwanegol:

Further Information:

Ar sail tystiolaeth: Evidence Base:	NHS (Concerns, Complaints and Redress Arrangements) (Wales) 2011
Rhestr Termiau: Glossary of Terms:	Included within the main body of the report
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Not applicable

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	All concerns have a potential financial implication: whether this is by way of financial redress, following an admission of qualifying liability, or an ex-gratia payment for poor management of a process; or an award made by the Ombudsman following review of a concern.
Ansawdd / Gofal Claf: Quality / Patient Care:	Improving the patient experience and outcomes for patients is a key priority for the UHB. All concerns received from patients, public and staff alike are taken seriously and investigated in accordance with the procedures. Information from concerns raised, highlights a number of clinical and service risks which should be reflected in Directorate Risk Registers. All Directorates are required to have in place arrangements for ensuring lessons are learnt as a result of investigation findings regarding concerns and that appropriate action is taken to improve patient care.
Gweithlu: Workforce:	The 'Putting Things Right' process is designed to support staff involved in concerns and incidents. All managerial staff have a responsibility to ensure staff are appropriately supported and receive appropriate advice throughout the process. The success of the process is dependent upon the commitment and support from staff across the organisation, not only as part of the investigation process and transparency arrangements, but in the encouragement of patients and their families to provide feedback, both positive and negative, to support organisational learning.
Risg: Risk:	Information from concerns raised highlights a number of clinical and service risks which should be reflected in Directorate and Corporate Risk Registers. There are financial and reputational risks associated with complaints that are upheld or not managed in accordance with the Regulations. The UHB also has a duty to consider redress as part of the management of concerns, which carries financial risks associated with obtaining expert reports and redress packages.
Cyfreithiol: Legal:	The UHB has a duty under the Concerns and Redress Regulations to consider redress where this is deemed to be a qualifying liability. The Regulations also incorporate formal claims, including clinical negligence and personal injury claims.
Enw Da: Reputational:	There are ongoing reputational risks for the UHB in relation to media, press and social media regarding any concerns, and outcomes from published Ombudsman Reports and any external investigations/inquiries.
Gyfrinachedd: Privacy:	Only relevant information is reviewed as part of the concerns process and this is carried out with the explicit consent of the patient or authorised representative.

	Information is recorded and treated sensitively and only shared with individuals relevant to the investigation process.
Cydraddoldeb: Equality:	<p>The process is established to learn from concerns: it is designed to ensure that it is fully accessible to patients and their families. The aim is to involve patients throughout the process and to offer meetings with relevant clinicians, with the required support depending upon individual needs.</p> <p>Advocacy is offered in the form of Community Health Council (CHC) advocates, and specialist advocacy is also arranged where necessary, e.g. in the areas of Mental Health, Learning Disability or Children/Young People's Services.</p> <p>Concerns literature is accessible in a range of languages and formats and translation services are available, as required.</p>

IMPROVING PATIENT EXPERIENCE REPORT

July – August 2021



1. Introduction

Service user feedback is important to monitor the experience of those who use our services and through this, the quality of care that they receive. This allows us to identify where services need to improve and to share good practice when experiences are positive. The following information demonstrates how we are continuing to increase the capture of service user feedback by providing various ways in which this can be provided. Most importantly, service users should feel that there has been a valuable purpose to them providing their feedback. It is our priority to act on all feedback received as part of our culture of improvement.

The Patient Experience Team receives feedback from all areas across the organisation, we will be strengthening our relationships with our colleagues in community care and primary care, following the commencement of our next cohort of experience apprentices who will be starting in September.

2. Patient/Staff Story Feedback

There has been a significant increase in requests for support in capturing the voice of the patient from a variety of services and directorates.

Neil's Story - Long COVID

Please click on the below image to hear this patient's experience of the support received in the community, to help him manage the symptoms of long-COVID.

Covid - 19 recovery



This story has been shared with the therapy teams to ensure that there is reflection on good practice and has also been shared with the Listening and Learning Sub-Committee.

My Friend Alexa Loan Scheme

The Amazon Alexa device, known simply as 'Alexa' is a virtual assistant that can play music, obtain information, news and weather in response to a voice command. Alexa is a cloud based voice service, and responds to simple questions. Alexa is designed to make life easier, by letting people voice-control aspects of their day.

A pilot project was initiated by the Connecting Communities Programme, supported by the Primary Care Cluster Project. Four Alexa devices were piloted through the Dementia Supportive Communities Project with great success.

This aim of the project was to help and provide support for people who are socially isolated, with complex health needs that restrict movement from a bed/chair, and those living with dementia, Stroke and Parkinsons.

The video below provided by the Connecting Community Project shares the story of a patient who has a diagnosis of dementia. The patient liked listening to music and it was suggested that listening to soothing music at night might help her relax. The patient liked the idea but explained that once she was in bed she wouldn't want to get out and switch off the radio. An Alexa was suggested and it was explained that she could ask it to start and stop without getting out of bed.

The patient has an Alexa on loan and her feedback has been very positive: " I have company now and when I am lying in bed, I ask Alexa to play my music and when I am about to drop off to sleep, from under the covers I shout stop Alexa and I always say goodnight Alexa and you know she says good night to me. I haven't had anyone to say good night to for a very long time and having Alexa reply good night is so lovely.

The patient recalls one particular occasion and described: "I was feeling very lonely and sad on this day and I said aloud I wish I had a friend and Alexa replied 'I will be your friend' I laughed and laughed, and I thought wait until I tell Cherry"

<https://youtu.be/F3lBmYG0Tyg>

It is planned to roll out this project further with a full evaluation plan.

3. Compliments

Compliments received during the period July and August 2021

Compliments are captured within the Health Board via a number of mechanisms. The recently implemented system has captured over 120 compliments that would have previously been unreported. The new mechanism also captures the sentiment and Health Board values that are expressed in the compliment.

Communication, understanding and listening are the top reported sentiments within the compliments.

Below is a small selection of the compliments which show how staff are providing positive patient experiences by demonstrating the Health Board values. Receiving recognition of this from patients and their relatives or carers, is appreciated by everyone involved, and it is so important to share and learn from what is working well. These are now being communicated back to staff via a number of methods including the recently implemented the "Feel Good Friday" initiative which shares compliments with all staff across the Health Board.

"Thank you to for taking the time to explain to me details of my disease and the treatments available. The team showed compassion and care and you shared your knowledge and promoted self-management. Thank you"

Prince Philip - Rheumatology Department

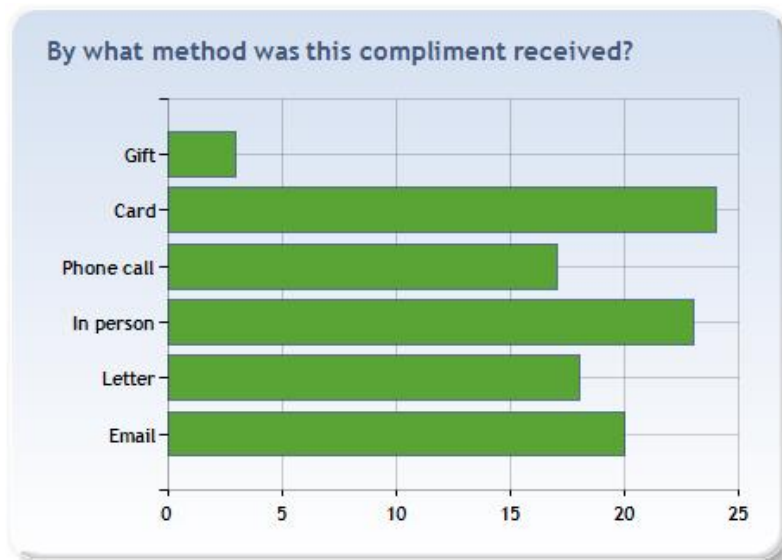
"This is just a small token gesture to demonstrate the truly positive impact Nicola has had on not only my life but also my families. I was finding COVID restrictions after the birth of my son incredibly isolating. Nicola arrived at our house with the most positive understanding empathetic attitude which instantly put not only myself but also my husband at ease. Week after week she taught me how to manage emotionally through a set weekly course. However it often was what Nicola did or said beyond the programme during her visits that really had such a profound effect on me."

Mental Health Team – Perinatal Services

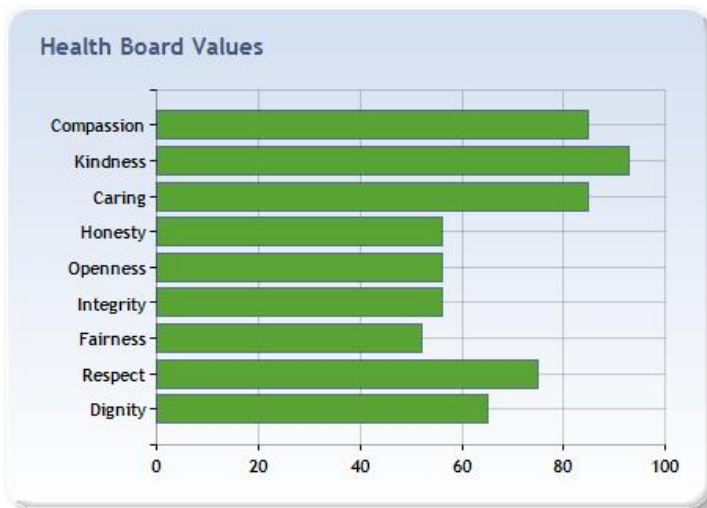
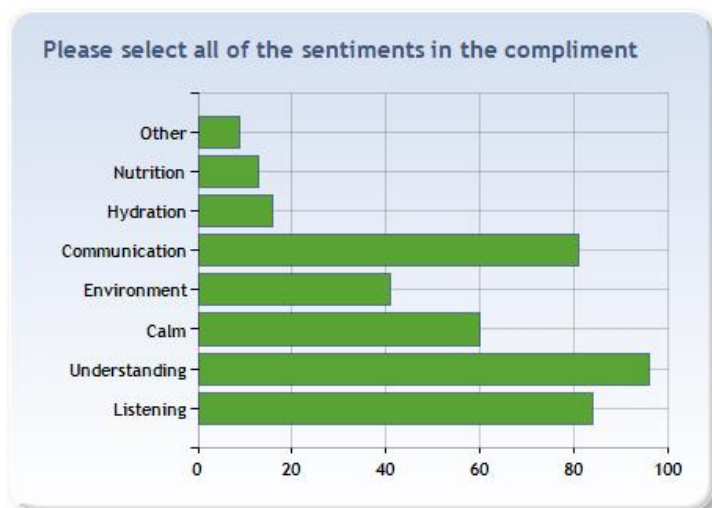
Just to say a Big Thank you to all of you in this department who were so very kind to me . . . and the other gynaecologists who seen to me and for holding my hand each time and the laughs we all had. Not forgetting the office girls, especially Sharon. Lots of love.

Withybush General Hospital – Colposcopy

The additional information from the compliments that have been received are reported as below. Card, email and in person are the top three methods by which compliments are received.



Understanding and listening are the two greatest sentiments that are expressed and the health board values of compassion, kindness and caring are the values the compliments are most aligned to.



In addition to the above, during the period, the Health Board also received compliments direct to the patient Experience team. Here are a few examples:

"Dr Vel was very friendly, considerate and made me feel at ease with my treatment and the time I spent on the ward. Dr Vel is my hero and I'll never forget you. You're such a clever man and I am in awe of you. I am eternally thankful for everything you've done for me. You are a true gentleman and a wonderful doctor."

Withybush General Hospital – Ward 8

"Each and every team member was reassuring, helpful, informative, industrious and skilful. Reception staff, nurses and medics were friendly and able to calm my fears. Having been petrified before my visit, I found the experience was made comfortable, almost painless and anxiety-free. I was almost reluctant to leave. Before the day, I also had considerable help, kindness and encouragement from your staff who arranged the procedure, as well as from the COVID test team. Please pass on my deep thanks and admiration to all concerned."

Withybush General Hospital - Outpatients

"Staff were amazing and she had never experienced anything like it. Everyone was so kind and accommodating and everyone was just wonderful. She was totally blown away by all the support and it was such a positive experience during a negative time."

Prince Philip Hospital – Ward 9

"The Patient advised that he and the family are forever grateful to Professor Keir Lewis. They are thankful for his help in the diagnosis and all the care he has given her over the years during treatment and support."

Prince Philip Hospital – Ward 1

"A patient wants to say a big thank you for the treatment they have had over the last fifteen years and that they are eternally grateful. The hygiene, concentration and care has been exemplary. All staff have been so friendly. Thank you for saving their eyesight."

Bronglais General Hospital – North Road Surgery

The Big Thank You Compliments

During the period, "Big Thank You" nominations were received and Patient Experience Certificates of Appreciation were presented to individuals and teams who we have received feedback about.

We continue to encourage service users and their carers or family to let us know when someone has made a difference to the experience of the care they have received. We are pleased to see an increase in these compliments.



Glangwili Hospital – Emergency Department

"The team were so friendly, calm and extremely efficient when I needed to see them when on holiday in Wales"



Glangwili Hospital – Tysul Ward

The staff on the ward were extremely caring and compassionate at all times in what must be incredibly testing working conditions. Thank you.

"The team were so friendly and calm and extremely efficient when I needed to see them whilst on holiday in Wales" – **Glangwili Emergency Department**

"They were very kind and caring and put me at ease with their general conversation whilst also ensuring that I was aware of what was going on and that I was comfortable. It was a very positive experience - thank you" –

Bronglais Outpatients

"They were kind and compassionate and made me feel like a human being. They took time to explain and answer questions. I have never met so many genuinely kind-hearted people all in one place. Everyone - nurses, anaesthetists, surgical team, recovery room staff, porters, cleaners, and the people who brought food - absolutely everyone I met during my stay showed immense kindness, and I am so very grateful to every one of them. – **Prince Phillip Ward 7**

"They were very kind and caring and put me at ease with their general conversation whilst also ensuring that I was aware of what was going on and that I was comfortable. It was a very positive experience - thank you" –

Bronglais Outpatients

4. Patient Feedback System – Friends and Family Test (FFT)

The Patient Feedback System Friends and Family Test is available across the Health Board, and automatically contacts patients within 48 hours of attending an appointment or being discharged from Hospital.

During the period a total of 32,377 patients who have either attended A&E, an outpatient consultation or have been discharged from an in-patient environment have been contacted electronically requesting their feedback from the Patient Feedback (FFT) system.

91.5% of the responses have a positive rating, 7% of responders rated their experience as negative (the remainder did not provide a rating). Over 5,161 were not surveyed as they had already been surveyed at least once in the last 3 months.

The table below is generated from the Healthcare Communications system, this indicates a red alert in three areas, including the Emergency Department, Inpatient setting and Paediatrics due to a reduction in score from the previous report; however these are marginal decreases and should be considered in context of the activity within these areas. The format of this report will be amended when we move to the new Civica system.

Department	01/01/2021	01/02/2021	01/03/2021	01/04/2021	01/05/2021	01/06/2021	01/07/2021	01/08/2021
Emergency Department	92.02%	↓ 88.70%	↓ 86.60%	↓ 84.83%	↓ 83.56%	↓ 82.26%	↑ 82.90%	↓ 81.90%
Inpatients	86.73%	↑ 89.23%	↓ 87.65%	↓ 85.43%	↑ 90.13%	↓ 88.95%	↓ 86.39%	↓ 86.17%
Outpatients	95.31%	↓ 93.37%	↓ 89.63%	↑ 89.80%	↑ 90.76%	↓ 89.12%	↑ 91.95%	↑ 92.89%
Day Case	95.12%	↓ 91.38%	↑ 98.90%	↓ 97.44%	↑ 99.17%	↓ 98.29%	↓ 97.39%	↑ 98.25%
Paediatrics	87.50%	↑ 88.24%	↑ 95.24%	↓ 92.31%	↓ 87.50%	↑ 90.00%	↑ 95.65%	↓ 84.21%

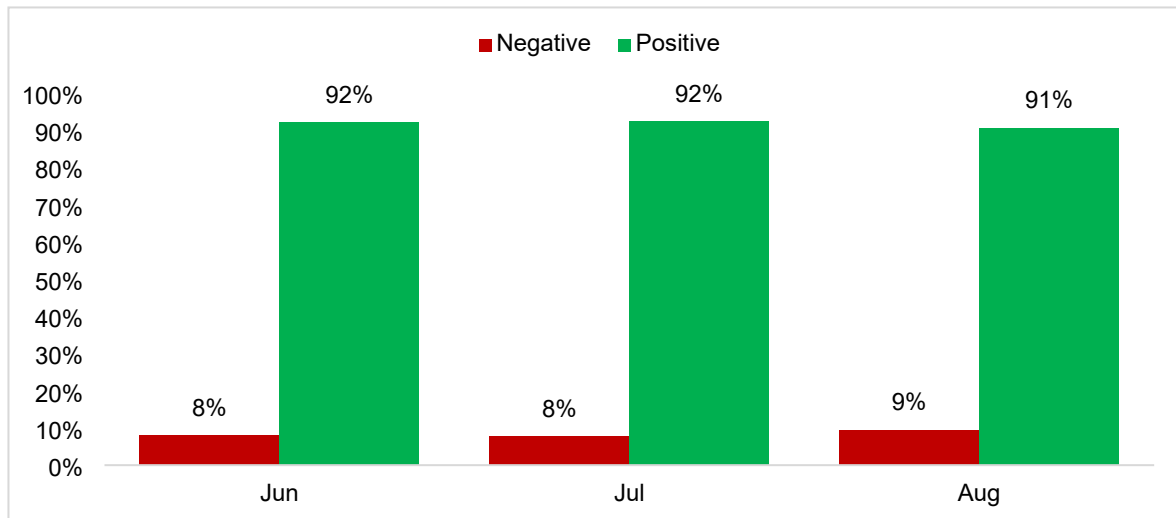
Outpatient areas have seen a consistent improvement over the period. The volatility in paediatric areas is driven by low volumes of patient activity.

There has also been a reduction in the rating regarding emergency departments, particularly Glangwili Hospital Emergency Department, when positive feedback has been around 70%. The emergency departments continue to experience significantly high demand currently with unprecedented levels of pressure. Work is ongoing with the Patient Experience Team, to look at how additional support can be provided within these during these times.

Further analysis will be undertaken by the team to determine any specific issues that can be addressed by the service.

The table below identifies that for the period June to August, the overall Health Board feedback was 91.5% which has been at a constant level for the past 3 months.

Overall Health Board Positive and Negative Percentage

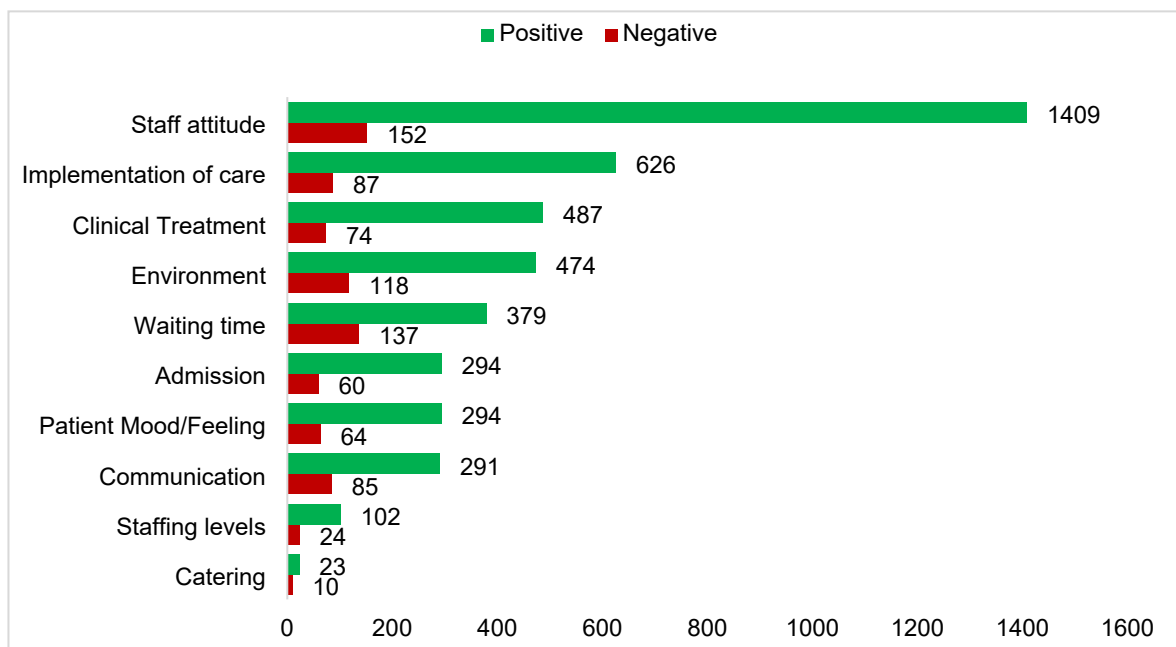


Top 10 themes

The table below identifies the top 10 themes within the feedback received.

Staff attitude and behaviour is the main area of feedback, followed by care and treatment and environment of care.

This information is also provided by specialty and the number of feedback notifications received.



Rating by acute sites

Hospital and Department	Average Of positive Feedback	Total number of feedback
⊞ Glangwili General Hospital	74%	1079
⊞ Withybush General Hospital	80%	762
⊞ Prince Philip Hospital	88%	933
⊞ Bronglais General Hospital	88%	782
Grand Total	81%	3556

Acute sites by speciality

Withybush General Hospital

Hospital and Department	Average Of positive Feedback	Total number of feedback
⊞ Withybush General Hospital	80%	762
Accident & Emergency Department	75%	474
Anticoagulation Service	100%	5
Breast	100%	2
Cardiology	100%	11
Colorectal	100%	7
Dermatology	79%	13
Diabetic Medicine	64%	2
ENT	100%	15
Gastroenterology	100%	17
General Medicine	65%	23
General Surgery	100%	36
Geriatric Medicine	100%	3
Gynaecology	100%	6
Ophthalmology	100%	40
Paediatrics	100%	2
Pain Management	100%	2
Stroke Medicine	100%	7
Trauma & Orthopaedics	94%	83
Urology	66%	10
Vascular	100%	4
Grand Total	80%	762

Glangwili General Hospital

Hospital and Department	Average Of positive Feedback	Total number of feedback
⊞ Glangwili General Hospital	74%	1079
Accident & Emergency Department	64%	441
Cardiology	89%	18
Clinical Haematology	100%	1
Colorectal	88%	26
Diabetic Medicine	100%	6
Endocrinology	100%	2
ENT	90%	80
Gastroenterology	100%	19
General Medicine	87%	63
General Surgery	91%	33
Geriatric Medicine	68%	4
Gynaecology	78%	56
Medical Oncology	0%	0
Nephrology	100%	13
Neurology	100%	12
Ophthalmology	91%	107
Paediatrics	79%	30
Respiratory Medicine	100%	9
Stroke Medicine	79%	11
Trauma & Orthopaedics	79%	81
Urology	80%	55
Vascular	100%	12
Grand Total	74%	1079

Bronglais General Hospital

Hospital and Department	Average Of positive Feedback	Total number of feedback
⊞ Bronglais General Hospital	88%	782
Accident & Emergency Department	84%	396
Breast	81%	36
Cardiology	100%	31
Clinical Haematology	100%	5
Colorectal	100%	9
Diabetic Medicine	100%	4
Endocrinology	100%	7
Gastroenterology	100%	28
General Medicine	100%	28
General Surgery	85%	38
Geriatric Medicine	100%	13
Gynaecology	89%	27
Medical Oncology	100%	8
Midwifery	100%	4
Nephrology	100%	7
Obstetrics	76%	10
Ophthalmology	100%	16
Paediatrics	100%	11
Respiratory Medicine	77%	11
Stroke Medicine	100%	7
Trauma & Orthopaedics	93%	76
Urology	100%	10
Grand Total	88%	782

Prince Philip Hospital

Hospital and Department	Average Of positive Feedback	Total number of feedback
⊞ Prince Philip Hospital	88%	933
Breast	100%	35
Cardiology	100%	16
Chemical Pathology	100%	1
Clinical Haematology	73%	7
Colorectal	100%	1
Dermatology	89%	103
Endocrinology	100%	1
ENT	100%	15
Gastroenterology	100%	21
General Medicine	91%	78
General Surgery	100%	4
Geriatric Medicine	100%	18
Gynaecology	100%	19
Minor Injuries Unit	81%	376
Neurology	100%	6
Obstetrics	100%	4
Ophthalmology	100%	49
Pain Management	100%	3
Respiratory Medicine	100%	26
Rheumatology	78%	16
Stroke Medicine	100%	1
Trauma & Orthopaedics	100%	79
Urology	89%	50
Vascular	100%	4
Grand Total	88%	933

Glangwili Hospital received a lower than average percentage score compared to the other three acute sites, due to the Accident and Emergency department and area of geriatric medicine receiving lower scores during this period.

Of the services shown Ophthalmology has the highest overall performance for all acute sites with all achieving above average feedback of 91% and above.

The main themes of positive feedback relate to our staff and the kindness, compassion and professionalism that they demonstrate in the care they deliver. Examples of this type of feedback are below:

The staff were friendly, professional and aware of dangers such as COVID. Made me feel that they cared. They also appeared to be very knowledgeable and capable. I felt safe.

Withybush - Outpatient Department – Dermatology

I cannot praise the staff on ward 4 enough they went beyond their call of duties of nursing nothing was too much trouble although they were stretched on numbers. From the surgeons to the cleaners they all had wings growing out of their backs, please let the chief executives know , cannot praise them enough also to the care they gave my family during my stay.

Withybush - Ward 4 – Colorectal

I have every confidence in the person I see and always gets back to me promptly if I have anything of concern. I cannot speak highly enough about Mr Andrew Lawton.

Withybush - Outpatient Department

I recently had a procedure carried out by Mr Cheema and his team, Mr Cheema was an absolute gentleman and his Ward team and the Theatre staff were absolutely fantastic. I have nothing but praise for them all. A huge Thank you to them all.

Glangwili - Tysul Ward – Ophthalmology

I received excellent attention and care when I attended the department feeling very unwell due to a problem with circulation and suspected deep vein thrombosis. I was treated with extreme kindness and reassuring expertise from Dr Kelly and all members of the team. I am extremely grateful but moreover wish to stress that the kindness and care taken was exemplary. I would hope that my comments will be passed on.
Thank You.

**Withybush - Same Day
Emergency Care Unit**

First all the staff are interested in my child. They were very kind and helpful. They did not only provide treatment but also made us feel happy. For instance, they gave toys, games to us. We feel more comfortable in hospital. I really appreciated them for their behaviours and service. Thank you.

Glangwili - Cilgerran Ward

Professor Keir was marvellous very informative about my condition and explained things very well to me.

**Prince Philip - Outpatient Department - Respiratory
Medicine**

The level of expertise both in the A&E environment and CDU was exemplary, the cleanliness of the ward and A&E was outstanding, the care taken with COVID social distancing was a again outstanding with regular lateral flow tests, to ensure staff and patient safety, I personally has no idea this level of service and expertise was available in in Glangwili.

**Glangwili - Ambulatory Care Unit -
General Medicine**

Efficient, friendly and caring staff. The consultant (Dr S J Evans) was fantastic as usual. Caring attitude. Willing to listen and always willing to do her best to provide the highest standard of care. This lady is an asset to the service. Thank you.

**Prince Philip - Outpatient Department –
Rheumatology**

Great service and very kind welcome at reception. Waiting area clean and tidy and very quick to go in to see doctor. Doctor Harris was great and thorough and explained everything in a manner I understood and was great with my little boy. Felt at ease to ask questions and got the answers I needed. Fantastic service all round. Hospital was well laid out with regulations put in place and very simple and easy to understand. Best experience I've had so far in Bronglais hospital.

Bronglais - Outpatient Department - General Surgery

I was extremely scared about going in and had a huge panic attack. The sister who called me in, took me aside and sat me down for a chat. I have to say she was an absolute diamond from the second I saw her, all the way through the procedure until I left. If it wasn't for her, I wouldn't have gone through with it if it wasn't for her. The gynaecologist was lovely too, incredible caring and tried to be as gentle as he could.

Bronglais - Rhiannon Ward – Gynaecology

Staff are always professional and friendly even when working under high pressure. My mother has received exceptional treatment. We are very grateful to Professor Lewis and his team and all the staff at Prince Philip Hospital.

Prince Philip - Outpatient Department - Respiratory Medicine

I saw a lovely junior Dr at the ENT department on Friday 2nd July. He was so kind and instantly put me at ease. He was very gentle and explained every single thing he was doing which was very appreciated. I left my appointment feeling very reassured.

Glangwili - Outpatient Department – ENT

Knowledgeable brilliant staff who put me at ease and explained everything about my expected recovery. Claire especially was gentle and kind and just wonderful. I was so grateful that my two visits had been so positive under the circumstances. The department is very lucky with staff like Nia and Claire.

Prince Philip - Minor Injuries Unit

I felt very safe on entering the hospital. There was plenty of staff on hand to help show patients around. Nurses that saw to me were very caring and kept me up to date with what was being done. The Doctor I saw was very helpful with his explanations when answering my questions. I was very pleased with my visit.

Prince Philip - Outpatient Department – Ophthalmology

In relation to what has not been working so well, patients remain concerned about the delay in being seen, staff attitude and poor processes. Examples of this feedback received are as follows:

The teams involved are alerted to this feedback on a real time basis. Responses from these service areas to the below feedback will be provided in the next report.

The waiting time was horrendous, I only needed an x ray which literally took 5mins after waiting nearly 5 hours - I think the department could work better if they had a different system. The staff were all very pleasant and accommodating. There were a number of elderly people who waited a long time and then walked out which I totally understand.

Withybush - Emergency Department

I don't believe that the waiting time is unavoidable. We expect to wait a reasonable amount of time and understand that some cases take priority but why can't Triage authorise an X-ray for example. They knew it was needed and yet I had to wait another 5 1/2 hours just to get an X-ray authorised by a doctor. When I arrived I explained I had already waited 7.5 hours for an ambulance but that was not taken into account. It was 17 hours before I was even examined. It's no wonder A&E is always overflowing.

Glangwili - Emergency Department

Every time I have visited Bronglais I have got lost. As I am now less mobile making unnecessary detours is very painful. The maps make little sense, the colour coding less sense. I hope I never have to visit again

Bronglais - Outpatient Department – Breast

I arrived at reception approximately 10 minutes before my appointment time and I was asked to wait by main entrance. There was no seating available as all chairs taken. I was called in to clinic after 10 mins and asked relevant COVID screening questions, then taken to a seat in clinic waiting room. I was informed there was one patient ahead of me. I sat there for what seemed a very long time. Finally a member of staff asked the people in clinic if they were waiting for gynae. Several were, when I checked the time it was already 45 mins late from my Appointment time. I waited in discomfort at least another 15 minutes, they should keep patients updated when there is a delay.

Glangwili - Outpatient Department – Gynaecology

I went to be fitted for an orthopaedic device but the practitioner was not familiar with this particular device and did not know what to do. After taking time off work and making an additional journey I now have to go back on Thursday to see an alternative practitioner. It doesn't inspire confidence.

Prince Philip - Minor Injuries Unit

The Patient Experience Team continue to work on our new Patient Feedback System with the new Once for Wales programme, the aim being to have no disruption to the collection of our valuable experience feedback. As stated in our previous report the new system offers significant enhancements over our current system and will strengthen the real time delivery of feedback direct to our frontline teams.

The new All Wales Paediatric surveys have already been shared with CIVICA and we hope to start seeing the first data in the system during October 2021.

The team received administration training on the new system at the beginning of September 2021 and are progressing with the transition.

5. All Wales Experience questionnaire

Hospital and Department	Responses	Using a scale of 0 – 10 where 0 is very bad and 10 is excellent, how would you rate your overall experience
Wylabush	331	7.9
Adult Clinical Decisions Unit	5	5.0
Ambulatory Care Unit	1	10.0
Antenatal Unit	1	3.0
Cardio-Respiratory Department	1	4.0
Child Health Department	2	4.0
Day Surgery Unit	1	10.0
Discharge Lounge	1	10.0
Emergency Department	48	5.8
Gynaecology Care Suite	1	10.0
Haematology & Oncology Day Unit	2	0.0
Medical Day Unit	2	5.0
Midwife Led Unit	1	0.0
Other	3	7.0
Outpatients A	10	6.7
Outpatients B	27	8.0
Pre-Assessment	1	3.0
Puffin Ward (Paediatric Ambulatory Care Unit)	13	8.1
Radiology	1	10.0
Rheumatology	37	9.5
Ward 1	33	8.1
Ward 10	21	9.0
Ward 11 (Acute Stroke Unit)	29	9.4
Ward 3	30	8.8
Ward 4	4	8.5
Ward 7	18	8.8
Ward 8 (Coronary Care Unit)	29	8.1
Ward 9	4	9.8
Ward 9 (Frailty Unit)	5	6.4

Hospital and Department	Responses	Using a scale of 0 – 10 where 0 is very bad and 10 is excellent, how would you rate your overall experience
Glangwili	245	7.4
Antenatal Day Assessment	1	0.0
Antenatal Ward	1	7.0
Cadog Ward	1	0.0
Cilgerran Ward (Children's Ward)	2	8.0
Cleddau Ward	11	7.4
Clinical Decisions Unit	4	2.0
Coronary Care Unit	1	10.0
Day Surgical Unit	2	4.5
Day Theatre	1	10.0
Derwen Ward	6	3.2
Dewi Ward	8	7.8
Dinefwr Ward	1	3.0
Emergency Department	32	4.9
Gwenllian (Acute Stroke Unit)	1	10.0
Intensive Care Unit	2	8.5
Labour Ward	1	0.0
Merlin Ward (Eye Unit)	85	8.9
Morlais Ward	1	0.0
Other	26	7.0
Outpatients Department	8	5.8
Padarn Ward	9	9.6
Paediatric Ambulatory Care Unit	2	5.5
Picton Ward	2	5.0
Plaster Room	1	8.0
Priory Day Hospital	1	10.0
Radiology	1	1.0
Rapid Access Clinic - Gynaecology	4	8.8
Short Stay Unit	1	9.0
Steffan Ward	2	9.5
Surgical Assessment	1	10.0
Teifi Ward	5	8.0
Towy Ward	17	8.6
Tysul Ward (Eye Unit)	3	10.0
Ultrasound	1	0.0

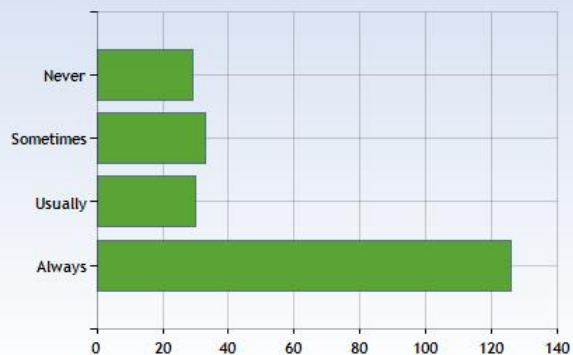
Hospital and Department	Responses	Using a scale of 0 – 10 where 0 is very bad and 10 is excellent, how would you rate your overall experience
Bronglais	160	7.8
Angharad (Children's Ward)	1	10.0
Audiology	1	10.0
Cardio-Respiratory	1	10.0
Ceredig Ward	36	8.9
Clinical Decisions Unit	1	10.0
Day Surgery Unit	2	4.0
Dyfi Ward	1	1.0
Emergency Department	19	5.9
Endoscopy	3	7.3
Enlli Ward	1	0.0
Gwenllian Maternity Unit	2	6.5
ITU	1	10.0
Leri Ward	1	10.0
Lung Function	1	0.0
Meurig Ward	28	8.2
Minor Injuries Unit	2	7.5
Other	6	3.2
Outpatients	8	7.1
Paediatric Ambulatory Care Unit	1	10.0
Rhiannon Ward	8	9.8
Y Banwy Unit	8	7.9
Ystwyth Ward	28	8.4

Hospital and Department	Responses	Using a scale of 0 – 10 where 0 is very bad and 10 is excellent, how would you rate your overall experience
Prince Philip	60	7.2
Acute Medical Assessment Unit	2	10.0
Breast Care Unit	4	7.8
Day Care Unit	2	9.0
Lung Disfunction Unit	1	10.0
Minor Injuries Unit	11	7.9
Other	6	5.5
Outpatients	14	6.9
Rheumatology	1	2.0
Short Stay Unit	1	10.0
Ultrasound	2	5.0
Ward 3	2	7.5
Ward 4	2	10.0
Ward 5	2	0.0
Ward 6	3	5.7
Ward 7	2	8.0
Ward 9 (Rehabilitation & Assessment Unit)	5	9.8

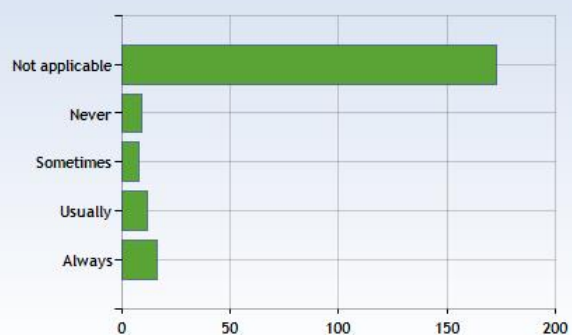
During the period, almost all surveys were collected using the electronic patient experience system (Envoy).

Individual feedback is brought to the attention of the ward or service area at the time of the survey, to enable any immediate action to be addressed. Currently, the way in which the surveys are collected across the organisation is not as consistent across all areas as we would like. This makes it difficult to identify any specific 'hot spot' areas which have continuing themes or trends, due to some areas submitting a lower number of surveys. However we anticipate that our new service user feedback system will greatly improve this. The survey responses are summarised below:

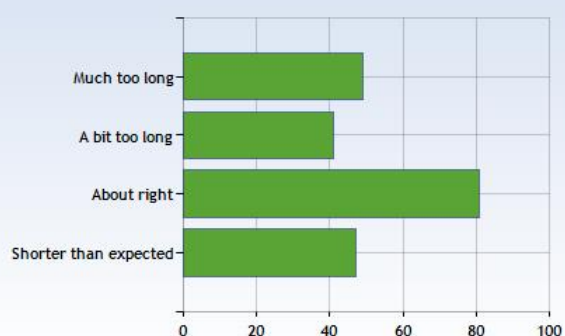
1. Did you feel that you were listened to?



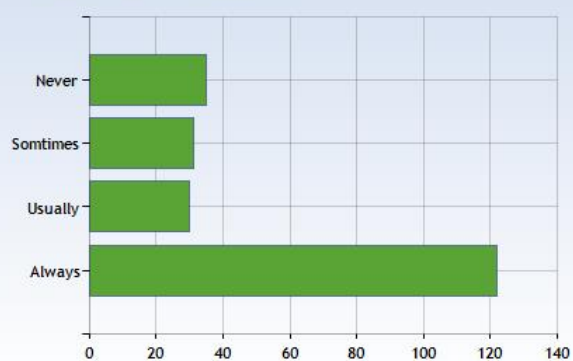
2. Were you able to speak in Welsh to staff if you needed to?



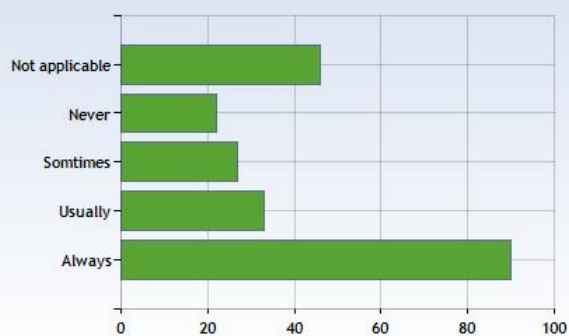
3. From the time you realised you needed to use this service, was the time you waited:



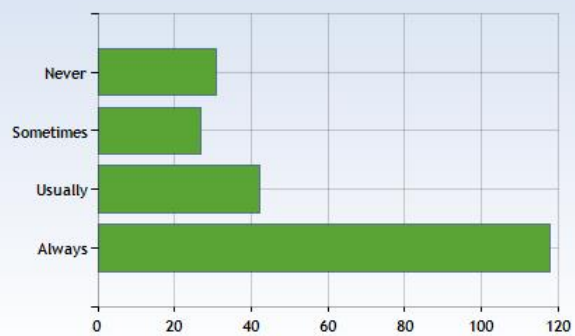
4. Did you feel well cared for?



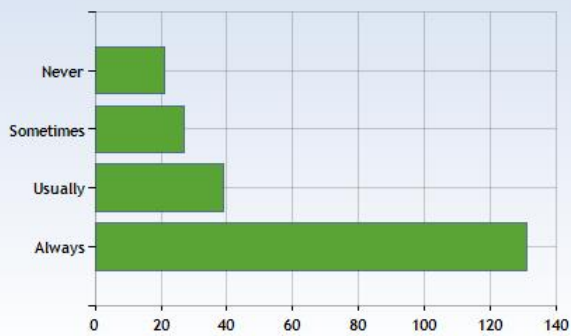
5. If you asked for assistance, did you get it when you needed it?



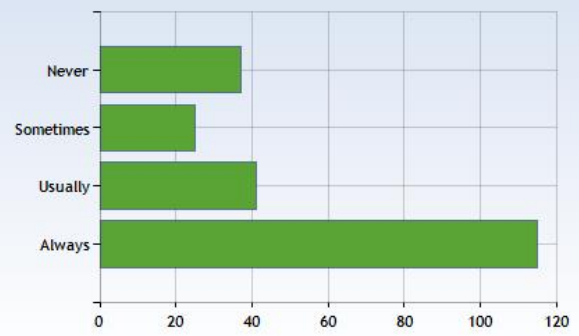
6. Did you feel you understood what was happening in your care?



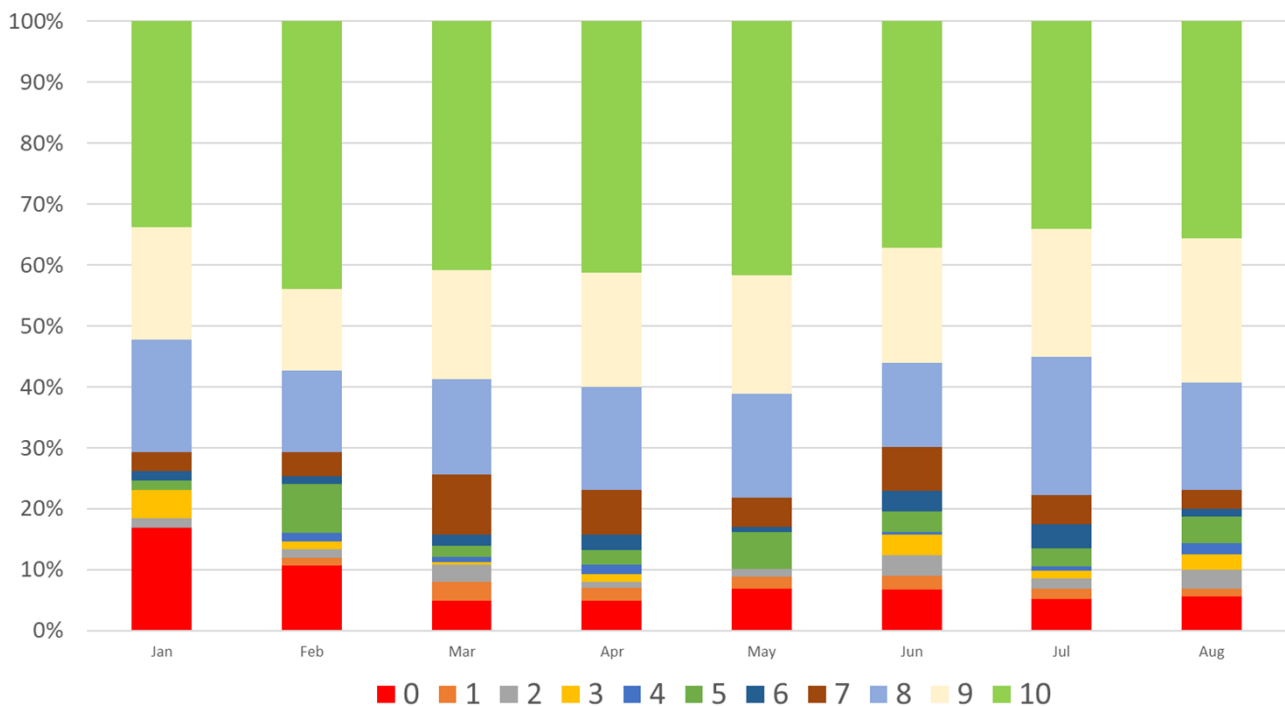
7. Were things explained to you in a way that you could understand?



8. Were you involved as much as you wanted to be in decisions about your care?



Using a scale of 0 – 10 where 0 is very bad and 10 is excellent, how would you rate your experience



During the period the responses to question nine, how do you rate your overall experience, the information presented a very polarised position, with a large proportion rating as excellent and similar proportion as rating their experience as very bad.

A sample of responses to the qualitative questions 10 and 11 are shown below:

Q 10. Was there anything particularly good about your experience that you would like to tell us about?

- All staff in minor injuries A/E were kind and friendly and I would like to thank them all very much. Jo the ENP that attended to me was very professional, competent and caring. I experienced very little waiting time.
- Daughter arrived with a broken arm on Friday at the start of our holiday, the speed and quality of care she received made the whole experience a lot less traumatic and allowed us to continue our holiday. I only wish our own local hospital offered the same level as care as you and your staff do, they were so considerate.

- I phoned 111 and spoke to Lauren (call handler) who was very pleasant. I had a call back from Rachel (clinical advisor) who was very caring and listened to all the information I gave her. Finally, I received a call from Dr Archer GPOOH in Withybush, a very good experience, genuinely concerned following the information I gave him about my previous symptoms with my current ailment and the disposition following the last time it was aggravated. Explained the treatment regime he had in mind and gave clear & concise follow-up details should it worsen. I'm very grateful to him.
- All you want as a patient is to be taken seriously and your condition and treatment, to be dealt with in an understanding and patient manner. You want as much information as you are able to translate into a decision, which will affect your long and short term quality of life. I feel that the staff I have encountered have offered all of the above and their dedication and support should be applauded.
- Every Department I visited & was treated by which was MRI scan, Endoscopy Department, Gynaecology Clinic & Gynaecology Care Suite for surgery on Endometrial Cancer were excellent. I was at all times well informed and received such excellent and caring treatment from every department. All staff I came into contact with in managing my condition which included the Surgeon (Mr R Husicka), Consultant (Mr D Sanyal, Gynaecology Care Suite), Mr J Mathias (Endoscopy Unit) & Anaesthetist and all the Nurses are a true credit to your health board and I thank and appreciate all their care and kindness.
- Being listened - the Nurse I saw Jessica McGlynn was very understanding and patient. Follow up phone call next day which was appreciated.
- The sister on the ward was extremely supportive in arranging follow on care that I would not have received without her help
- The paediatric consultants we have had in Withybush have been absolutely fantastic, always there when I need them regardless of the fact they've a million and one things to do. I absolutely cannot fault them.
- Care from the Welsh Ambulance service was excellent Also care from A & E department and ward nursing at Glangwili hospital was best they could offer, given the information they had to work with.
- The Consultant I dealt with in ENT was very good in the way he explained what & why things were happening.
- I am petrified of needles blood etc and they were so patient with me and so gentle and caring.
- I was treated and cared for by Dr Ian Rees at PPH. My GP Dr Kinnear (Penygroes surgery) fast tracked the referral to Dr Rees and I was seen in a very quick manner, Dr Rees telephoned me and arranged for me to have the tests and treatment I needed very promptly. He re-assured me when I was very anxious about my health and managed to find the root cause of my issue which I was then re-assured and made a full recovery. He and his team called and wrote to me and I am very grateful for this care given to me during this time which was at the height of the pandemic (Summer 2020).
- The consultant that was dealing with my case (Miss Louisa Banks) explained in language I understood & very detailed in what the procedures would entail.

Q11. Was there anything that we could change to improve your experience?

- 4.5 hours for ambulance to arrive taken home from hospital by Red Cross and left alone unable to stand, walk or get to toilet. Spoken to Delta Wellbeing, Social Services, Occupational Therapy, GP none of which are able to help, told to dial 999 Been sat in chair for 24hrs.
- In both A&E and the fracture clinic, no one introduced themselves. This was in stark contrast to my experience a few days earlier in an English NHS Trust, where everyone,

the triage nurse, Dr., Radiographer, staff nurse, all started the conversation by telling me their name and role. As a patient I found this very reassuring and felt that I was treated as a person and not just a number.

- Messages weren't replied to; I was left for weeks not knowing an important blood test result, which monitored any cancer recurrence. In my email I was understanding of the difficult working situation for everyone in the pandemic. I do feel messages could have been responded to; something was missing in the level of communication necessary between colleagues and no-one seemed to be aware of the gap or took responsibility for ensuring that I was kept informed in a timely way.
- Considering I didn't know what was wrong or happening I feel some staff would have been kinder and more understanding about my confusion. Did not like stripping off in ambulance for ECG in front of 2 men.
- Epilepsy in Pembrokeshire- I'm sure this isn't the first time this has issue has been raised, but our lack of epilepsy nurse in the county is putting families in a really difficult position. While the consultants are great, we have absolutely no middle man. No one to help ensure our schools are trained, or put together suitable care plans to not only ensure our child's safety while in school but also to ensure her education is not suffering due to her condition.
- Nurses need retraining on every aspect it's frightening experience having someone else's name band placed on your arm and nearly having that person's treatment could have killed me so nurses need retraining. An understanding of all medical backgrounds
- Tell patients when they enter the A&E how long they are likely to wait. Manage expectations. We are not mind readers as patients we don't know what's happening behind the scenes. For example it might look quiet in the waiting room but busy in the department. We don't know these facts. Please share this info so we can be in the picture.
- Very frightening experience while being on your own due to covid and a poor old lady was cold and hungry. Numerous times I asked for a blanket for her but no one brought one. She finally had one 2 hours later. She was already there 8 hours. No water given or offered (she had no money to buy one). Water is a basic necessity in life and should be provided without fail. I had to go and get her water and tea even though I have a slipped disc and couldn't walk!

The following describes the actions taken by services in response to the comments received during the previous reporting period.

You Said (comment received)	We Did (response from service)
Waiting times in A&E were too long. The environment is uncomfortable, such as hard seating. There is poor communication around waiting times. Staff sometimes do not introduce themselves and can appear rude and abrupt.	Please refer to section 10 below on Learning from Events.
Staff in A&E require more training on mental health and learning disabilities.	All staff employed in the Accident and Emergency Department have been reminded that patients with mental impairment and/or learning difficulties require reasonable adjustments to be made when being assessed. There is a teaching regime already in place for doctors in the Emergency Department, and there is a current plan of commencing a wider training programme for staff, so that as nursing/HCSW act as advocates and have the knowledge and understanding required.

An information sheet on after care would be helpful following surgery.	Patient information is an important part of care and treatment, it is recognised that knowing what to expect following treatment can be reassuring and help to manage any concerns. Information leaflets are available across all services of the Health Board and the provision of this information is being reviewed by the Patient Experience Team to ensure this is fully accessible to all patients and carers throughout their treatment journey.
Improvements needed for booking transport. The phone line is engaged or has long queues. It is particularly difficult for disabled patients who cannot attend without suitable transport.	This feedback has been provided to the Patient Transport Team. The demand for patient transport is currently very high, and the service is aware of the impact this is having on the phone lines on availability of transport. This is currently being reviewed to identify ways in which access can be improved.
Patients should be able to book their own appointment on line. Changes to appointments should be done via text or phone rather than letter.	This is being considered as part of the digital transformation programme within the Health Board.

When the transition to the new once for Wales Service User Feedback System is achieved, all ward and department managers will also receive alerts to specific feedback key words.



Paediatric Feedback for 2021

The voices of children and young people are a vital part of improving our patient experience work.

During June and July, the number for each of the paediatric questionnaires have decreased to 22 with 13 responses in parents/carer/ relatives survey; 1 response in the 12 to 16 year old survey and 8 responses in 4 to 11 year old survey. There are fewer patients visiting the acute paediatric wards. The Patient Experience Team will be increasing their presence on the wards to support patient feedback and service will be one of the first to receive the new Civica system. Here are some of the comments about the paediatric wards across the Hywel Dda Health Board:

“Staff were supportive and made my son’s stay as comfortable as possible. My son has ASD and staff were really helpful and supportive of his additional needs” –
Cilderran Ward.

“The helpful and super friendly doctors and nurses and all the games I was allowed to borrow and play with” – **Angharad Ward, Bronllais General Hospital**

The Patient Experience team continue to be involved with the development of the Children's Charter. John Page, Patient Experience Apprentice, attended the Board Seminar on Thursday 19th August 2021 to present the Children's and Young People's Charter to Board Members with representatives from the Children and Young People Steering Group. The Charter is based around the United Nations Convention of the Rights of the Child. The team has worked with Dyfed Powys Police and Mid and West Fire Service on design and layout of the Charter. After the presentation, there were discussions among board members on what might be changed/improved and ideas for an internal launch in 2021/2022.



To learn more about your rights and the 42 articles spoken about here, follow this QR code

www.childcomwales.org.uk

Our Children's Charter

Children have all the rights listed in the United Nations Convention on the Rights of the Child.

Here are just a few that we support through our work...



Have rights!

Anyone under the age of 18 has these rights, no matter how young.



Articles 1, 2 & 6

Be listened to

All young people have the right to be listened to and taken seriously.

Articles 12 & 30

Get help and support

If you need any of our services, we will make sure that we are there for you.

Articles 3, 23, 24, 25, 27, 39, 40 & 41

Be respected

We will respect your language, religion, beliefs and family background.

We will treat you as an individual.

Articles 7, 8, 14, 16, & 37



Ask for information

We will answer your questions, honestly and in a way that you can understand.

Article 13, 17



Be safe and protected

We will do everything we can to protect you from harm and to help you feel safe.

Articles 11, 19, 20, 21, 33, 34, 35 & 36



Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board



Gwasenneth Tin ar Aelod
Canolbarth a Gogledd Cymru
Mid and West Wales
Fire and Rescue Service



COMISIYNYDD
HEDDLU A THROSEDD
DYFED-POWYS
POLICE AND CRIME
COMMISSIONER

6. Staff Stories

The Patient Experience Team aims to improve the patient experience through sharing good practice as well as highlighting lessons that need to be learned through patient stories and staff stories.

In August 2021, the team were approached to help support capturing the experience of the Health board Filipino Nurses who celebrated 20 years of working in the Health Board.

Click on the below image to hear their stories.



7. Patient Items

The patient Experience Team continue to support patients by providing wards with patient items. The items were kindly donated by Charitable Funds which include, shampoo, body wash, deodorant, earplugs, eye masks, toothbrushes and toothpaste.

The team have had many messages of gratitude from patients, families and their carers.

“The items are a lovely gesture especially the earplugs. I did not plan to be in A&E so having these items were helpful. My own toiletries were dropped off by my husband a couple of days after being admitted into hospital.



8. Family Liaison Team supporting our community

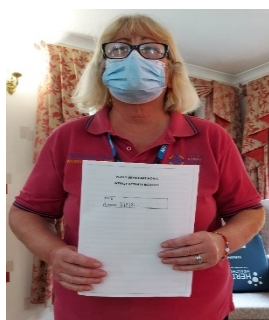


The Family Liaison Officer team had the opportunity to support a care home in the community during July 2021, to maintain contact between residents and their families. An experienced Family Liaison Officer (FLO) Tina Owens arranged times to support the residents.

Tina was identified as being ideal for the role due to her extensive training and experience of working on the Mynydd Mawr rehabilitation Unit at Prince Phillip Hospital. Tina spent 3 weeks at the care home supporting residents and their families and has shared her experience of her time at the home.

Tina helped answer the calls the home was receiving from friends and family, a task familiar to her as a FLO. Tina contacted the residents' friends and families and kept them updated by setting up regular calls for updates on their loved ones or calls were booked in with them.

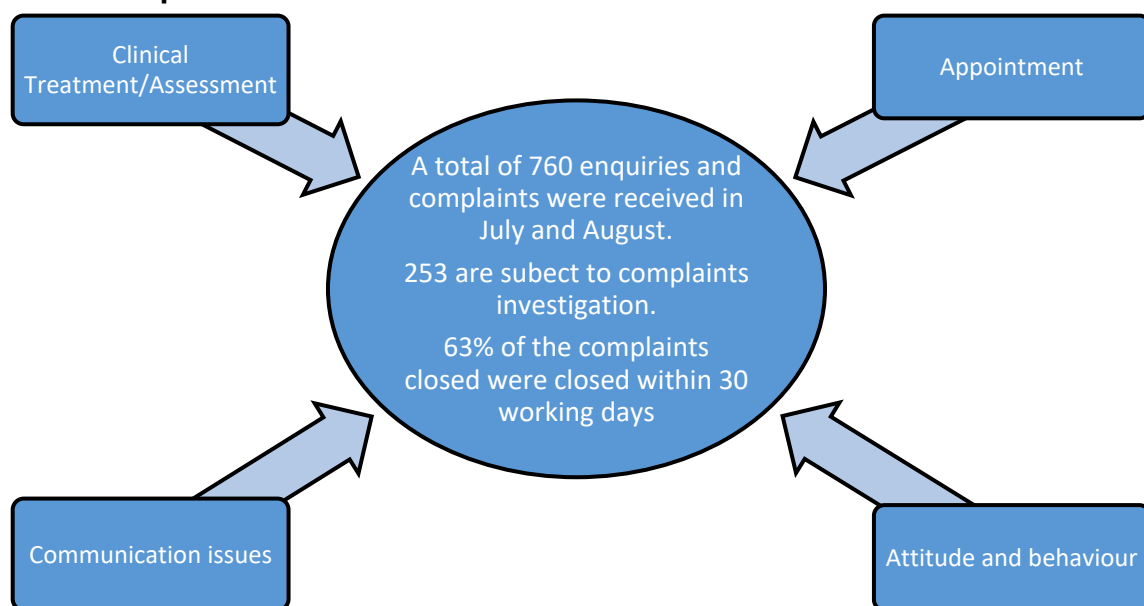
Tina was also able to use her creativity to comfort and entertain the residents by supporting them with memory and picture boards. Tina was able to keep track of residents' activities, ensuring all activity logs were kept up to date so that the team at the home could be informed of how the residents were keeping occupied.



Tina also enjoyed using the environment around her to work with the residents, including mock daily objects like a post box, telephone box and train carriage and use of the sunny garden.

Tina reported that she enjoyed her time in the home and received positive feedback from the care home manager: 'Tina did a fantastic job, has been a massive asset to the team and the residents love her.'

9. Complaints



The top 4 complaint subjects has remained the same since the last report.

	May - Jun	Jul - Aug	Total Count
Top 10 Complaint subjects	Count	Count	
Clinical treatment/Assessment	124	157	281
Appointments	71	93	164
Communication Issues (including Language)	65	85	150
Attitude and Behaviour	40	68	108
Medication	9	28	37
Other	10	23	33
Discharge Issues	11	17	28
Record Keeping	4	9	13
Referral	4	7	11

The specialties receiving higher number of complaints during July and August 2021 is also the same as the previous period and is linked to higher numbers of patient activity in these areas.

	May - Jun	Jul - Aug
Accident & Emergency	48	74
General Practice	44	52
Orthopaedics	30	42
Medicine	20	36
Urology	13	30
Community Services	13	25
Dermatology	2	19
Cardiovascular	10	18
Surgery	8	18
Acute care & In-patient Services	4	16
Blood Sciences	6	14

Department	Clinical treatment/ Assessment	Communication Issues (including Language)	Attitude and Behaviour	Appointments	Total
Accident & Emergency	24	10	22		56
General Practice	21	6	10	4	41
Orthopaedics	21	9	1	5	36
Urology	7	5	3	10	25
Community Services	12	3		6	21
Medicine	5	7	3	3	18
Grand Total	90	40	39	28	197

Complaints made about appointments and waiting times are being seen in the following areas dermatology, urology, blood sciences, ophthalmology, ENT and community services.

Please see further information below about how we are addressing these concerns.

Ombudsman

During July and August 2021, one final report was received, which was partly upheld to a limited extent. The case involved physiotherapy services and wax bath therapy not being available for one appointment. The patient received alternative treatment on this occasion. No recommendations were made by the Ombudsman.

10. Learning From Events

The significant themes that we are seeing from our patient experience feedback focus around access to our emergency care services and waiting times to see a doctor within this setting; as well as waiting times to receive appointments and planned procedures. We understand that this is a challenging and concerning time for patients as we continue to see the impact of the ongoing situation of the COVID-19 pandemic and how this has affected our waiting lists and treatment times.

Access to Emergency Care

Like many other Accident and Emergency Departments across the Country, our emergency services are facing significant pressures due to unprecedented levels of demand on our services. This has resulted in longer waiting times within the departments for our patients. We appreciate the impact that this has had patient experiences, particularly in light of the challenges that we continue to face in the light of the COVID-19 pandemic.

Our hospitals are continuing to see patients who have medical emergencies. There are measures in our hospitals designed to keep patients as safe as possible and people are urged to seek urgent medical attention if they need it. We are also looking at how we can support patients further during their time in the emergency department and improve the experience of utilising these services.

Patients have been asked that if they have a non-urgent need, to seek alternatives to A&E such as visiting the 111 symptom checker <https://111.wales.nhs.uk/>, visiting the local community pharmacy or calling their doctor's surgery.

The Triage and Treat service is available at selected pharmacies across Carmarthenshire, Ceredigion and Pembrokeshire. Triage and Treat can help patients who have a low-level injury rather than having to visit a doctor or an A&E department. The service is provided by a pharmacist or a member of the pharmacy team who has had specialist training. The types of injuries that can be treated under the scheme are:

- Minor abrasions, superficial cuts and wounds
- Stings and bites (such as bee or jellyfish)
- Sprains and strains
- Eye complaints such as sand in the eye
- Removal of items from the skin such as a splinter or shell
- Minor burns including sunburn

Epilepsy Services

Patients and their families have raised concerns in relation to the provision of epilepsy services, following the recent resignation of a member of staff. This has led to a temporary change of services. We are fully committed to providing this service and are working hard with our other health board colleagues in the region, to develop a regional model, which will improve access to and waiting times for the service. Under the regional service approach, as well as a creating a stronger collaboration with other Epilepsy services, a review of neurological services is being undertaken this will include a review of the patient pathway and access into the service, as well as the staffing provision. This will allow a more sustainable service to be provided with earlier access to support for our patients and carers. We are undertaking this work as a priority.

In the meantime, patients are encouraged to contact their Community Team for Learning Disabilities (CTLD) in the first instance, where the nurses will continue to act as points of contact for care delivery. We also expect to be able to have in place joint clinics between Learning Disability Psychiatry and Epilepsy Specialist Services by end of September 2021.

Concerns have also been raised about the provision of epilepsy nurses within the Health Board. The Health Board currently employs two part-time epilepsy clinical nurse specialists (CNS) and we are pleased to report that we have also recruited a further Epilepsy CNS post with a special interest in learning disabilities, as well as a Children's Nurse in Epilepsy.

Waiting Times for Planned Care

Currently, we are mindful that NHS bodies across Wales are facing multiple challenges including the impact of staff leave and higher levels of sick leave, self-isolation, delays in discharging patients from hospital, high emergency services demand and an increase in patients with COVID-19 being admitted to hospitals.

Over the course of the pandemic, the Health Board has introduced a number of new ways of working to help see and treat patients across both primary and secondary care, including remote telehealth and telemedicine clinics run by our GPs, and our Waiting List Support Service, which is designed to help manage patients and their care while they wait for their operation or procedure. A significant amount of work in theatres and other care is still continuing. Advice to patients waiting for procedures can be found on our website or by accessing this link [Inpatient and outpatient - Hywel Dda University Health Board \(nhs.wales\)](#)

We are prioritising patient safety at this time but one of the consequences of this is that we are having to temporarily postpone some surgery in the short term, to ensure we can safely care for patients. The rise in cases in our Health Board shows that, whilst hospital admissions are not as high as in previous waves, COVID-19 remains a serious risk to our health and our health service.

Throughout the pandemic, we have communicated with patients on orthopaedic waiting lists to ensure that they are kept in touch with and are aware of what is happening within the service, that we confirm that they still want to receive their surgery and are happy to proceed should they be offered a date. This is being extended to patients waiting for other treatments, not just orthopaedic treatments, such as urology services.

In respect of orthopaedic treatment and planned procedures, the COVID-19 pandemic has significantly impacted on our ability to treat orthopaedic patients and waiting lists have grown substantially as a result. Planned orthopaedic treatments across sites had been re-started and additional resources are required to address the backlog of patients waiting for surgery. It is important that we address our waiting lists by treating patients in line with their clinical urgency and, in line with Royal College Guidance, consultants have reviewed their waiting lists and the clinical priority of their patients. The focus will be on treating those with the most complex needs first.

The Health Board has received monies from Welsh Government to help address orthopaedic waiting times which will be used to contract additional services to treat an additional number of cases. This contract has been awarded with the aim of commencing treatment as soon as arrangements have been finalised.

We are doing all we can to accelerate surgery in the face of all the safety measures needed and our staffing levels. We are looking at building additional, temporary theatres at Prince Philip Hospital, in Llanelli, to increase our ability to undertake planned surgery. We are also working with Swansea Bay Health Board and our staff at Amman Valley Hospital to increase cataract operations.