



## CYFARFOD BWRDD PRIFYSGOL IECHYD UNIVERSITY HEALTH BOARD MEETING

|  |  |
|--|--|
| <b>DYDDIAD Y CYFARFOD:<br/>DATE OF MEETING:</b>  | 24 November 2022   |
| <b>TEITL YR ADRODDIAD:<br/>TITLE OF REPORT:</b>  | Improving Patient Experience   |
| <b>CYFARWYDDWR ARWEINIOL:<br/>LEAD DIRECTOR:</b> | Mandy Rayani, Director of Nursing, Quality & Patient Experience          |
| <b>SWYDDOG ADRODD:<br/>REPORTING OFFICER:</b>    | 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 months of August and September 2022.

#### 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.

This report covers the period 1<sup>st</sup> August 2022 to 30<sup>th</sup> September 2022 and sets out the feedback we have received from patients, carers and families and actions taken to make improvements in line with our 'Improving Experience Charter'.

#### Asesiad / Assessment

Patient and service user feedback is received into the UHB through a variety of routes: Friends and Family Test (FFT); compliments, 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.

For the period, a total of 97 compliments and 32 'Big Thank You' nominations were received. 7695 patients left feedback on our Friends and Family system, with 93% leaving a positive recommendation (84% previous period). 426 patients completed the All Wales Patient Experience Questionnaire; the overall patient experience score provided from these surveys returned a 92.24% positive rating, the average score for 2021/22 being 92%.

430 (427 previous) complaints/concerns were received by the Patient Support Services Team, 95 were responded to as early resolution cases which is less than the previous period, due to

the challenges of responding to these concerns within two working days; 555 enquiries were responded to (396 previous period); 335 required investigation under the putting things right complaint process. 67% of the cases received were responded to within 30 working days.

The main themes arising from the complaints were cancelled appointments, clinical treatment (such as delay in diagnosis); discharge arrangements and attitude and behaviour.

Recognising that many patients are concerned about their appointments and timescales for procedures, the Waiting List Support Service was established to provide communication, support and advice to patients during their waiting time. More detail about this service and examples of patient feedback/stories are included within the report.

There were no new investigations commenced by the Public Services Ombudsman for Wales during the period. Two final reports were received, both being partly upheld. There were also 5 early resolution agreements. Key themes from the final reports were the quality of clinical records - failure to accurately record all aspects of treatment and care; lack of adequate nutritional care, nutrition and feeding not appropriately coordinated and communication between clinical staff and families. The lessons learnt from these reports and progress with the action plans are considered by the Listening & Learning Sub-Committee.

Examples of lessons learnt and how the Health Board is addressing these are included within the attached report.

The Arts in Health programme is progressing well, with great success from a patient, community and staff perspective. The programme has now been established for a year and the annual report for 2021/22 is appended.

### 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, together with the HDdUHB Arts in Health Programme Annual Report 2021/22.

| <b>Amcanion: (rhaid cwblhau)</b>   |   |
|--|---|
| <b>Objectives: (must be completed)</b>   |   |
| Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol:<br>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:<br>Health and Care Standard(s):                                 | 6.3 Listening and Learning from Feedback  |
| Amcanion Strategol y BIP:<br>UHB Strategic Objectives:                                     | All Strategic Objectives are applicable   |
| Amcanion Cynllunio<br>Planning Objectives  | All Planning Objectives Apply   |

|   |  |
|---|--|
| Amcanion Llesiant BIP:<br>UHB Well-being Objectives:<br><a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019</a>             | 2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS<br>8. Transform our communities through collaboration with people, communities and partners |
| <b>Gwybodaeth Ychwanegol:<br/>Further Information:</b>  |  |
| Ar sail tystiolaeth:<br>Evidence Base:  | NHS (Concerns, Complaints and Redress Arrangements) (Wales) 2011   |
| Rhestr Termau:<br>Glossary of Terms:  | Included within the main body of the report  |
| Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol:<br>Parties / Committees consulted prior to University Health Board: | Not applicable   |

|   |  |
|---|--|
| <b>Effaith: (rhaid cwblhau)<br/>Impact: (must be completed)</b> |  |
| <b>Ariannol / Gwerth am Arian:<br/>Financial / Service:</b>     | 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.   |
| <b>Ansawdd / Gofal Claf:<br/>Quality / Patient Care:</b>        | 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.<br>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. |
| <b>Gweithlu:<br/>Workforce:</b>                                 | 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.          |

|                                    |  |
|------------------------------------|--|
| <b>Risg:<br/>Risk:</b>             | <p>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.</p>  |
| <b>Cyfreithiol:<br/>Legal:</b>     | <p>The UHB has a duty under the Concerns and Redress Regulations to consider redress where this is deemed to be a qualifying liability.<br/>The Regulations also incorporate formal claims, including clinical negligence and personal injury claims.</p>  |
| <b>Enw Da:<br/>Reputational:</b>   | <p>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.</p>  |
| <b>Gyfrinachedd:<br/>Privacy:</b>  | <p>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.</p>  |
| <b>Cydraddoldeb:<br/>Equality:</b> | <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.<br/>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.<br/>Concerns literature is accessible in a range of languages and formats and translation services are available, as required.</p> |



**GIG**  
CYMRU  
**NHS**  
WALES

Bwrdd Iechyd Prifysgol  
Hywel Dda  
University Health Board

**Patient Experience Team**  
**Tîm Profiad Y Claf**

# IMPROVING PATIENT EXPERIENCE REPORT

## August- September 2022



# A Charter for Improving Experience - your healthcare, your expectations, our pledge

## **WE WILL ALWAYS:**

**Treat you with dignity, respect and kindness.**

**Communicate with you in a way which meets your individual, language and communication needs.**

**Keep you informed and involved in decisions about your health and care services, and take into account your wishes and needs.**

**Provide safe and effective care, in the most appropriate and clean environment.**

**Ensure that your information is kept secure and confidential.**

**Support and encourage you to share your experiences of health care, both good and bad, to help us improve the way we do things.**

# Introduction

Service user feedback is important to monitor the experience of those who access our services and the quality of care that they receive. This allows us to identify where services need to improve, to share good practice and learn from positive experiences.

The following information demonstrates how we are capturing service user feedback by encouraging our service users and providing different 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 and to demonstrate that we are fulfilling our pledges as set out in the Charter for Improving Experience as referred to above.

## Service User Feedback at a Glance - August - September 2022

- ▶ **97 compliments** were recorded by staff on the patient experience system - listening and understanding were the top sentiments expressed in the feedback received, closely followed by respect, care and compassion.
- ▶ **32 Big Thank you Nominations for our staff** were received from our patients or their families; further details are provided later in the report.
- ▶ **57,732 individuals received our friends and family patient experience survey. 7,695 people responded** to this survey. Whilst this figure is lower than we would like, it is in line with nationally reported response figures. **93.6%** of responders provided a **positive rating** and would recommend the services of the Health Board to their friends and family. Staff attitude, care and treatment are the areas receiving positive feedback. All acute sites have improved their overall positive feedback ratings.
- ▶ **426 service users completed the All Wales Patient** surveys. The Family Liaison Officer roles continue to support the completion of inpatient surveys in real time. The overall patient experience score provided from these surveys returned a 92.24% positive rating, the average score for 2021/22 being 92%.

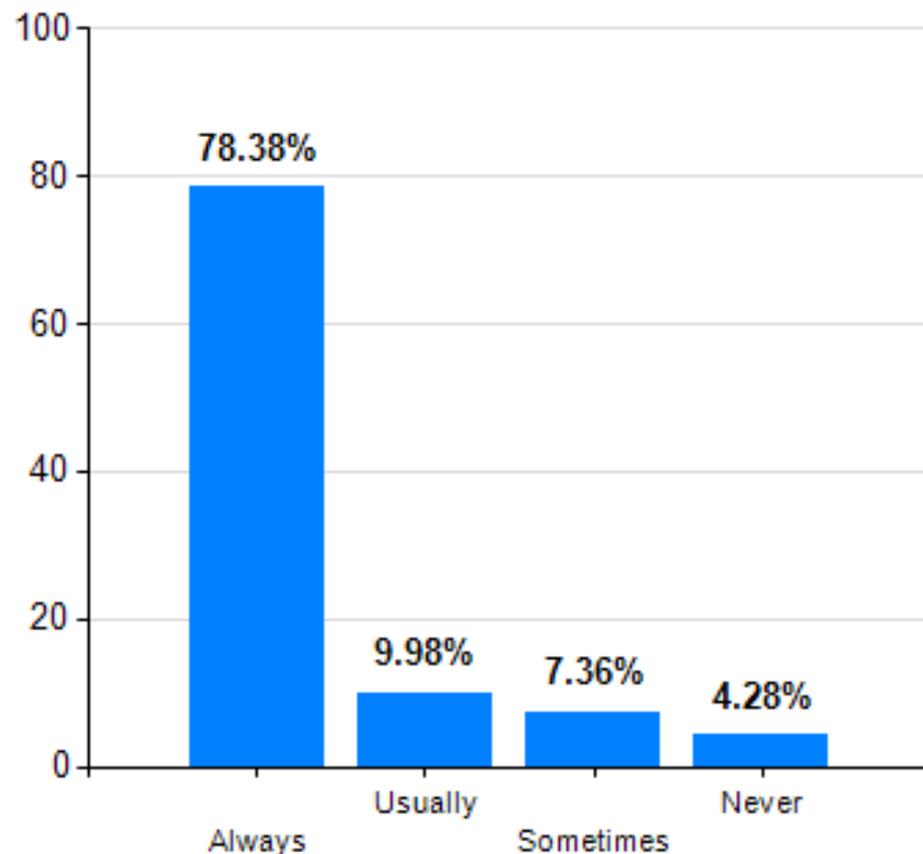
# Complaints & Concerns at a Glance - August and September 2022

- ▶ 430 complaints were received, of which:
  - ▶ 95 were managed as an early resolution case (within two working days) by the Patient Support Services Team.
  - ▶ 335 cases proceeded to complaints investigation under the 'Putting Things Right' Regulations. The number received for August and September represents an increase of 54 from the previous period, mainly due to the challenge of needing to close early resolutions within 2 working days before becoming a full 'putting things right' complaint.
  - ▶ 2 Grade 5 (serious harm) complaints were received during this period, relating to medical procedures and surgery. These are being fully investigated and there is ongoing liaison with the families of the patients.
  - ▶ 555 enquiries were received for the two month period, an increase of 91 on the preceding period.
- ▶ 272 cases managed through the Putting Things Right complaints process were closed in August/ September, of which 183 were closed within 30 working days. This means 67% of the complaints received during these two months were closed within 30 working days. Since 1<sup>st</sup> April 2021 - 64% of complaints are responded to within 30 working days.
- ▶ Of the complaints closed, 30 were upheld and 56 partially upheld.
- ▶ Concerns around clinical assessment and treatment continues to be a prominent theme, representing 48% of all concerns. A continued theme relates to delayed appointments and cancelled appointments and represents 35% of all concerns in the period. Details regarding how we are trying to improve this are included later on in the report. Of these, a third are linked to Ophthalmology Services. 28% of concerns in the period are linked to communication or staff attitude and behaviour. There is no single service receiving a high number of communication complaints; they are spread across multiple services.
- ▶ There were no new investigations commenced by the PSOW during the period. 2 final reports were received, both being partly upheld. There were also 5 early resolution agreements. Key themes from the final reports were the quality of clinical records - failure to accurately record all aspects of treatment and care; lack of adequate nutritional care, nutrition and feeding not appropriately coordinated; significant failures in communication with patients family. The lessons learnt from these reports and progress with the action plans are considered by the Listening & Learning Sub-Committee.

# DIGNITY, RESPECT AND KINDNESS

## All Wales Health Questionnaire

### ► I am treated with Dignity, Respect and Kindness?



I have to mention all the staff from reception right through the whole process. Friendly, caring, cheerful and professional all at the same time. This has to be a model that all units are based on. Brilliant.



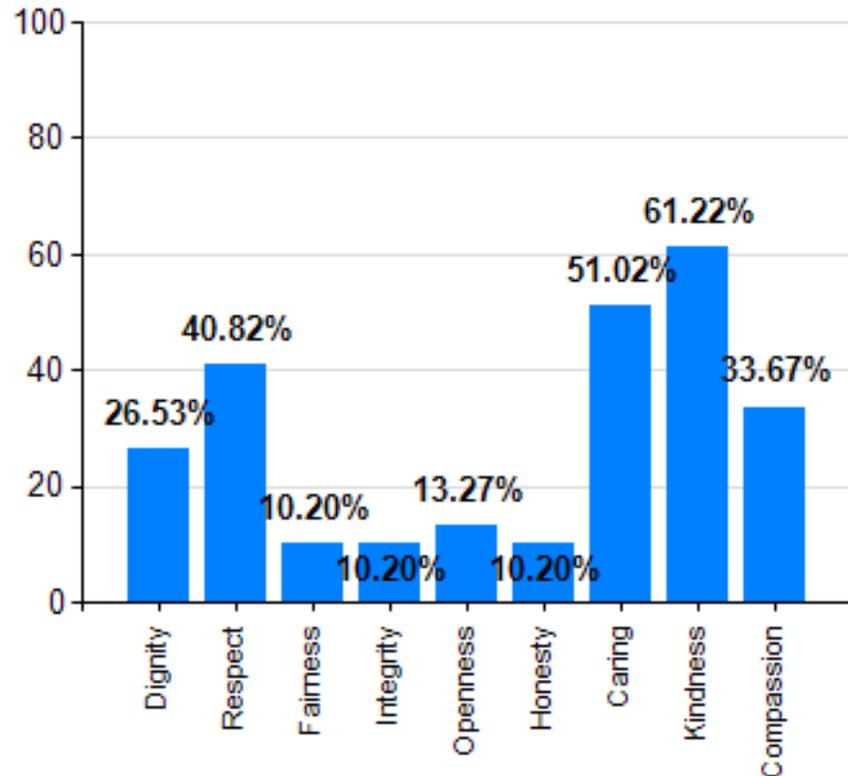
Spent nearly three weeks on ward 8 and can't thank all the staff for their care and attention. I would appreciate if my comments could be placed for staff to read please.



Staff mostly helpful and polite but they were too busy to deal with medical problems and too many older patients just needed changing and feeding etc.

# DIGNITY, RESPECT AND KINDNESS COMPLIMENTS

Of all the compliments received, kindness, care and respect are the terms most often mentioned.



From my referral, my subsequent cancer diagnosis to my return home after a hysterectomy could not have been more positive. I am especially grateful to the surgeon, Mr Islam whose skill has allowed me to return home within 24 hours with very little pain. The care and compassion given to me by all the teams involved should be shared and highlight how lucky we are to have the NHS.

Had X-ray done on 29/07. Was very concerned before getting there but from the phone call to the end of procedures everything was flawless and the team has dealt with the results in a very efficient manner with a lot respect and dignity. A round of applause to all for the experience. Could not ask for more in a moment of vulnerability. So, THANK YOU ALL very much.

# DIGNITY, RESPECT AND KINDNESS CONCERNS

- During August and September 29 complaints were received relating to attitude and behaviour from staff. These concerns range across services. These concerns have been shared with the Heads of the Departments concerned. 25 of these complaints have been responded to and 4 remain under investigation.
- Where we receive concerns pertaining to issues of dignity, respect and kindness, we generally see a range of linked themes occurring. In this period, a number of concerns were raised around the amount of care taken when handling patients. Encouragingly, areas that we have previously reported as receiving a number of concerns linked to dignity and kindness had received no complaints in this period, demonstrating a sustained improvement since earlier in the year.
- Medical staff have received the most complaints about their attitude and behaviour towards patients and represent 48% of all complaints of this kind. Work around empathy and communication is being developed and feedback to the individuals is always undertaken. Patient stories are encouraged as a way of feeding back to the teams involved.

# DIGNITY, RESPECT AND KINDNESS

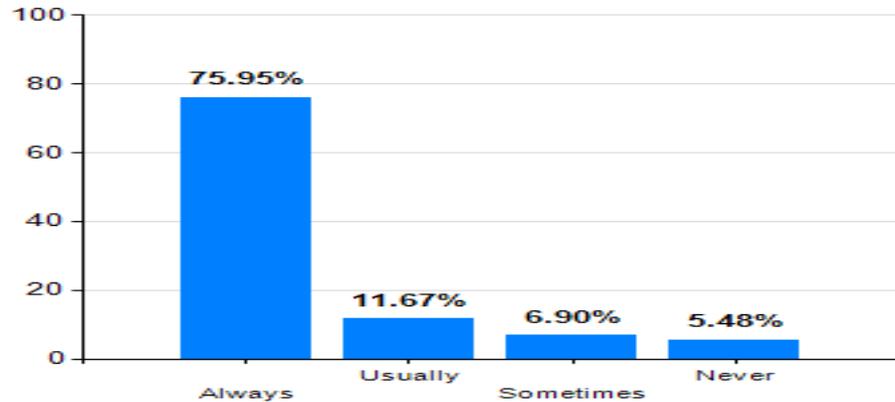
## LESSONS LEARNED

| You Said   | We Did   |
|--|--|
| <p>Food and drink should be offered in Accident and Emergency Departments, especially as there are long delays before being treated.</p> | <p>Whilst we routinely offer food at mealtimes for patients with a long wait within Emergency Departments, we now have supplies of bottled water readily available for our patients and their relatives. Whilst we already keep a supply of sandwiches, we recognise that with increased numbers of attendances and prolonged waiting within the department, this can be inadequate. Consequently, we are increasing the amount of snacks to reduce the risk of running out.</p> <p>Because we have received complaints about the about the facilities within our Emergency Departments generally, we have established a working group to review seating, signage, and the environment within our Emergency Departments.</p> |

# COMMUNICATION

## All Wales Health Questionnaire

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



Specialist very good, nice easy manor. Explained things in a way that was not overly complicated. Very clever way of ensuring I understood what he was saying.

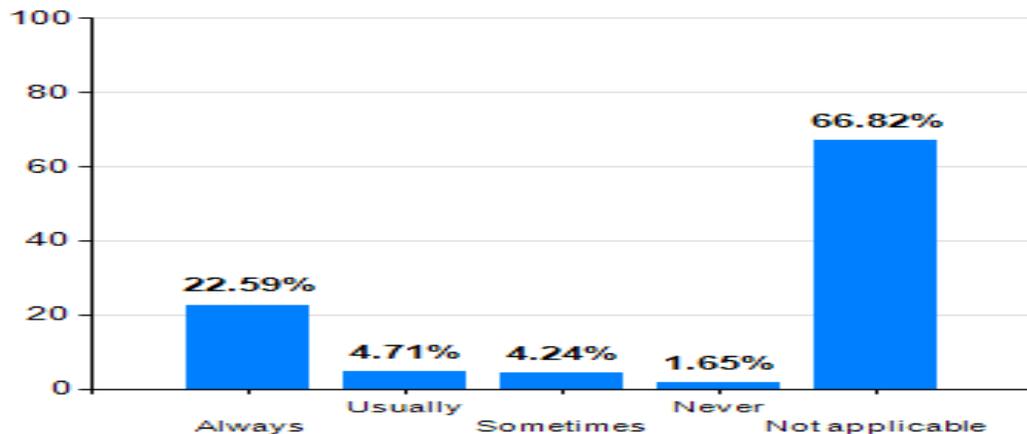


The nurse who provided my care was absolutely excellent, and managed to draw a detailed drawing of my knee, and cruciate ligament, while explaining everything. Phenomenal treatment! 10/10



Lovely staff, they were so understanding and patient with me. The family liaison officer was brilliant, spent so much time coming back and fore to have a chat with me and keep me entertained.

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



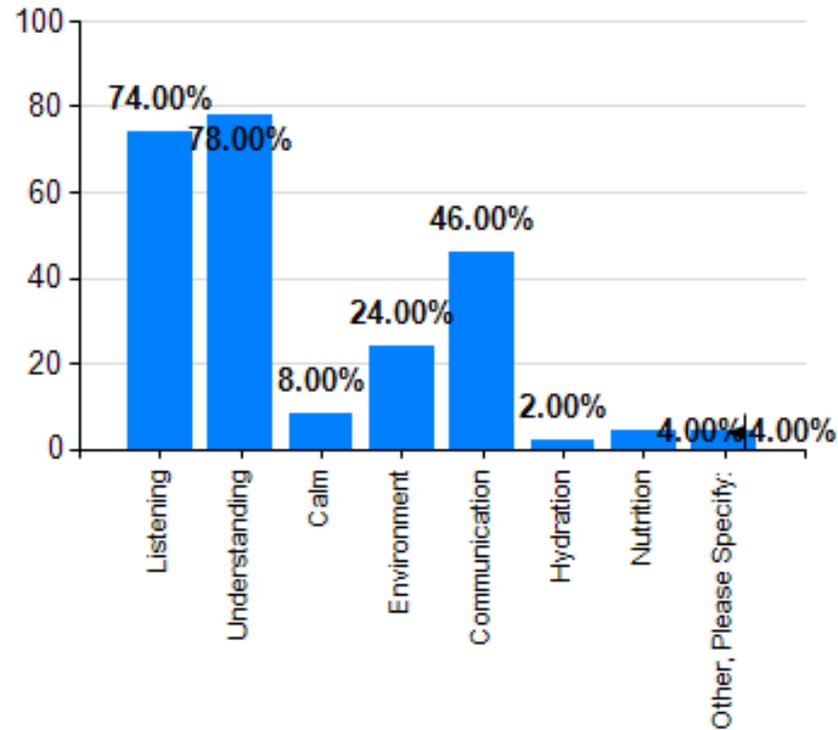
Your map of the hospital, more disabled parking provision. Maybe coloured band along the wall directing to departments and a band to show the way out, even in my short time in the hospital I was asked directions twice, and saw staff asked many times.



Absolute lack of communication between surgeons and ward staff regarding theatre lists.

# COMMUNICATION COMPLIMENTS

The sentiments expressed within the compliments we receive, show that understanding, listening and communication are terms most often used.



Senior consultant and junior consultant staff provided excellent clarity of information when requested....always ending in a satisfactory answer all staff professional in their duties.

Ward 1 staff made my stay comfortable and safe, their professionalism was second to none, from surgeons, doctors, nurses to healthcare, cleaners and canteen staff, made my stay a pleasure. They could not have done anymore, thank you so much Elaine and Gail in the domestic staff, they were excellent as was James. Their hard work was noticed and it was all done with a good bit of wit, as good as the medicine given to me. Thank you.

# COMMUNICATION CONCERNS



*My dad should never have fallen whilst he was in hospital. He should never have been left unattended to use the bathroom, he did call the bell but nobody answered. As a result he fell and broke his right hip which he never recovered from and ultimately was the cause of his death. At no time during his stay were family members informed of his rapid deterioration in health. The only reason alarm bells rang were due to dad not answering his phone. We had no liaison nurse in his last 32 hrs.*

- During August and September 46 concerns were received about communication.
- The main cause of concerns linked to communication in the period was around patients being unable to contact staff or services. This represented 23% of communication concerns which are often raised when patients or families are given incorrect contact details, or the phone of the ward/ team they are trying to reach goes unanswered.
- Being given insufficient or incorrect information are also a frequently raised concerns – 39% of those linked to communication in this period.
- Whilst we acknowledge that considerate communication needs to be at the forefront of everything we do, we are encouraged to see less complaints in this period around patients or families feeling excluded from discussions around their care and treatment.
- Our 'making a difference' communication training is being provided to staff across the organisation with positive feedback being received. Feedback on communication (positive and negative patient experiences) is also provided to clinical staff across the organisation, including junior doctors and nurse preceptorship training programmes.

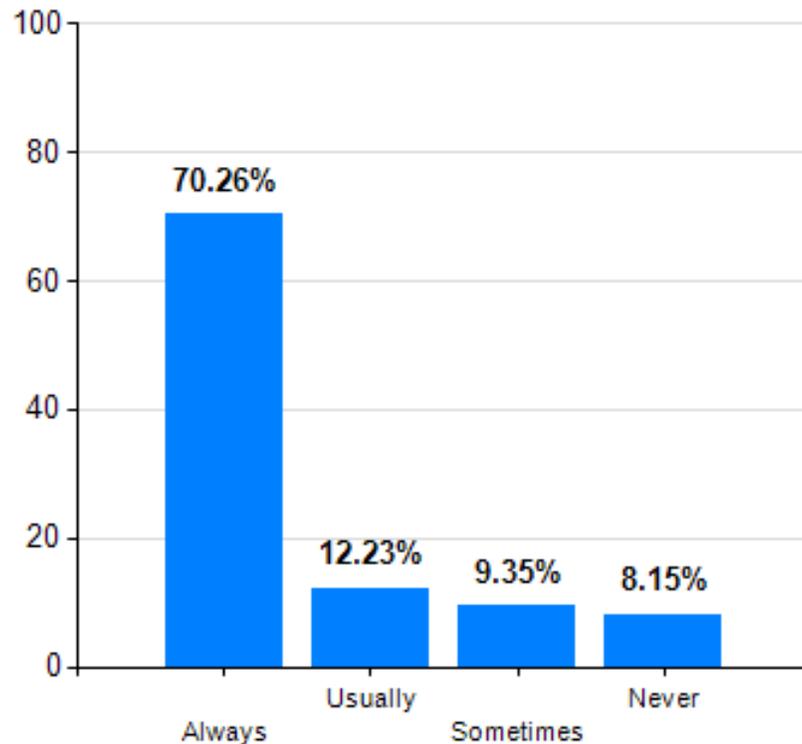
# COMMUNICATION LESSONS LEARNED

| You said   | We did   |
|--|--|
| <p>Where something as important as diagnosis of cancer is concerned, please don't make assumptions about the level of our understanding. At a distressing time, you need to do everything you can to ensure that communication is clear.</p> | <p>For patients with certain types of cancer diagnosis, we are providing increasingly robust support.</p> <p>In Bronglais General Hospital, for example, once a diagnosis is made the patient is allocated to a named nurse who will be there to guide them through the process. This approach has been replicated when cancer patients receive support when attending hospital for surgery.</p> |

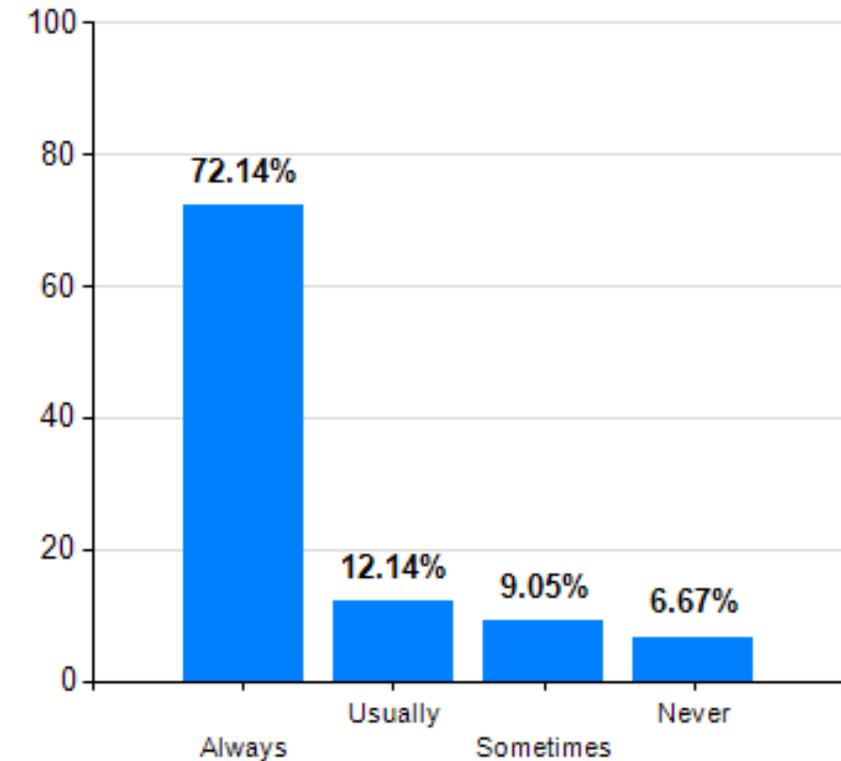
# KEEPING PEOPLE INFORMED AND INVOLVED AND TAKING ACCOUNT OF THEIR WISHES AND NEEDS

## All Wales Health Questionnaire

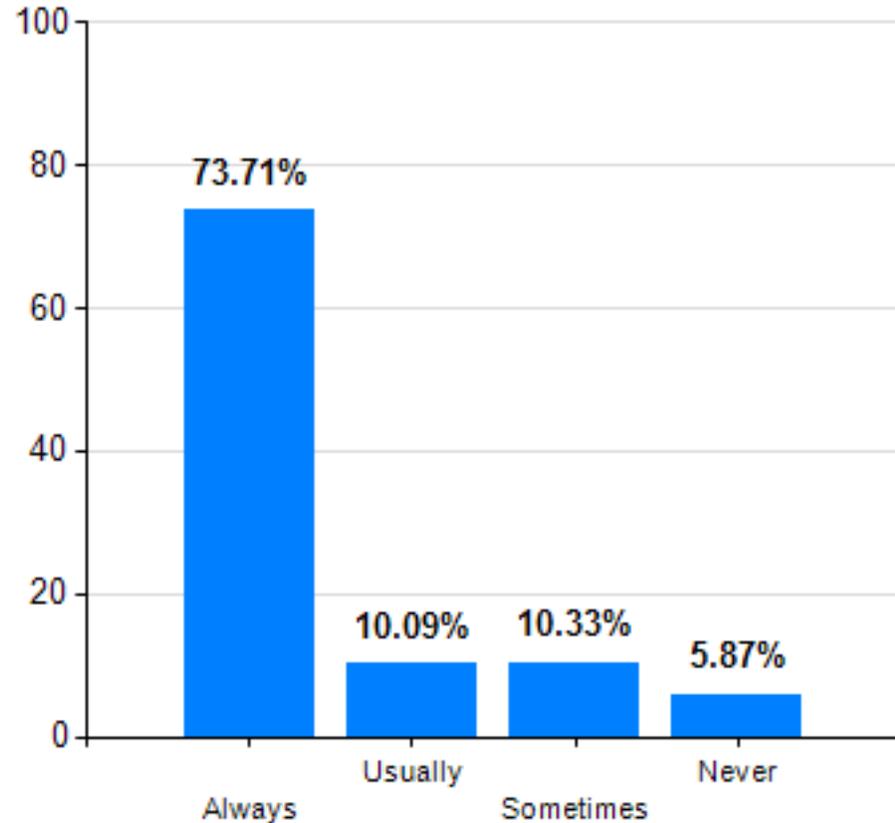
- ▶ Were you involved as much as you wanted to be in decisions about your care?



- ▶ Did you feel you understood what was happening in your care?



## Did you feel that you were listened to?



➔ Once transferred to CDU I had a fantastic experience as all the staff were very friendly and attentive. The food was excellent and I felt very well cared for. The service I received in CDU was exemplary.

➔ All staff were particularly helpful and upbeat at all times. Food choices were very good and food very good. Doctors and specialists have always explained my situation and any changes in detail to enable me to fully understand my health plan and detail of the next stages.

➔ Spent 9 hours. Uncomfortable sparse seating. No water available. Early morning Dr gave pain relief afternoon Dr said he would but clearly forgot. Worrying that after being discharged at 1600 I was called by a healthcare who was looking for me to take me for an X-ray. No idea whether I need it or not but I would not return anyway.

# KEEPING PEOPLE INFORMED AND INVOLVED AND TAKING ACCOUNT OF THEIR WISHES AND NEEDS

## LESSONS LEARNED

| You said   | We did   |
|--|--|
| <p>After attending the Minor Injuries Unit, I had to wait in my car to be seen and became cold and unwell as a result.</p> | <p>The Minor Injuries Unit in Prince Philip Hospital has developed a process for risk assessing patients who may be required to wait in their cars, to ensure that the most appropriate decisions are made in relation to their condition and circumstances.</p>                                       |
| <p>Take account of our needs and wishes around pain relief for women giving birth.</p>                                     | <p>The anaesthetic on-call structure for the week will be displayed on the labour ward ensuring that all staff, including anaesthetists, obstetricians and midwives, are able to identify the senior responsible anaesthetist and escalate patients' needs for pain relief to them as appropriate.</p> |

# PATIENT STORY - Waiting List Support Service

Whilst the Health Board experiences challenges with waiting times and waiting lists following the pandemic, complaints of this nature from our patients have increased. In response to this, the Health Board established a waiting list support service. This dedicated clinically led service is supported by non-clinical call-handlers whom deliver a meaningful offer of support and advice to patients awaiting elective treatment. The service currently supports patients on an elective (planned) pathway to provide advice on self-management of symptoms, signpost and refer to alternative services and crucially, to identify clinical deterioration and harm (with agreed escalation plans) to manage and mitigate the risks associated with waits for treatments. The service also provides advice and resources to patients on how to prepare for treatment and optimise their health and wellbeing whilst they are waiting. Since establishing the service in January 2022:

- *10,800 patients contacted with an offer of support and signposting to bespoke online resources on how to prepare for treatment*
- *Over 3,700 phone contacts with patients*
- *Over 4,500 hits on the online resources on how to prepare for treatment*
- *197 email contacts*
- *93 patients identified that clinically deteriorated needing clinical escalation to a consultant and waiting list prioritisation*
- *118 patients identified that clinically deteriorated needing clinical escalation and review by clinical nurse specialists*
- *145 stage 4 patients identified that no longer needed to be on the waiting list (indirect validation exercise)- patients already had their procedure done elsewhere or requested to be removed from the list*

A selection of patient stories follow evidencing the impact on patient experience and care. These highlight the importance of regular communication, monitoring of the waiting lists and the provision of support and advice to patients.

# PATIENT STORY - Waiting List Support Service

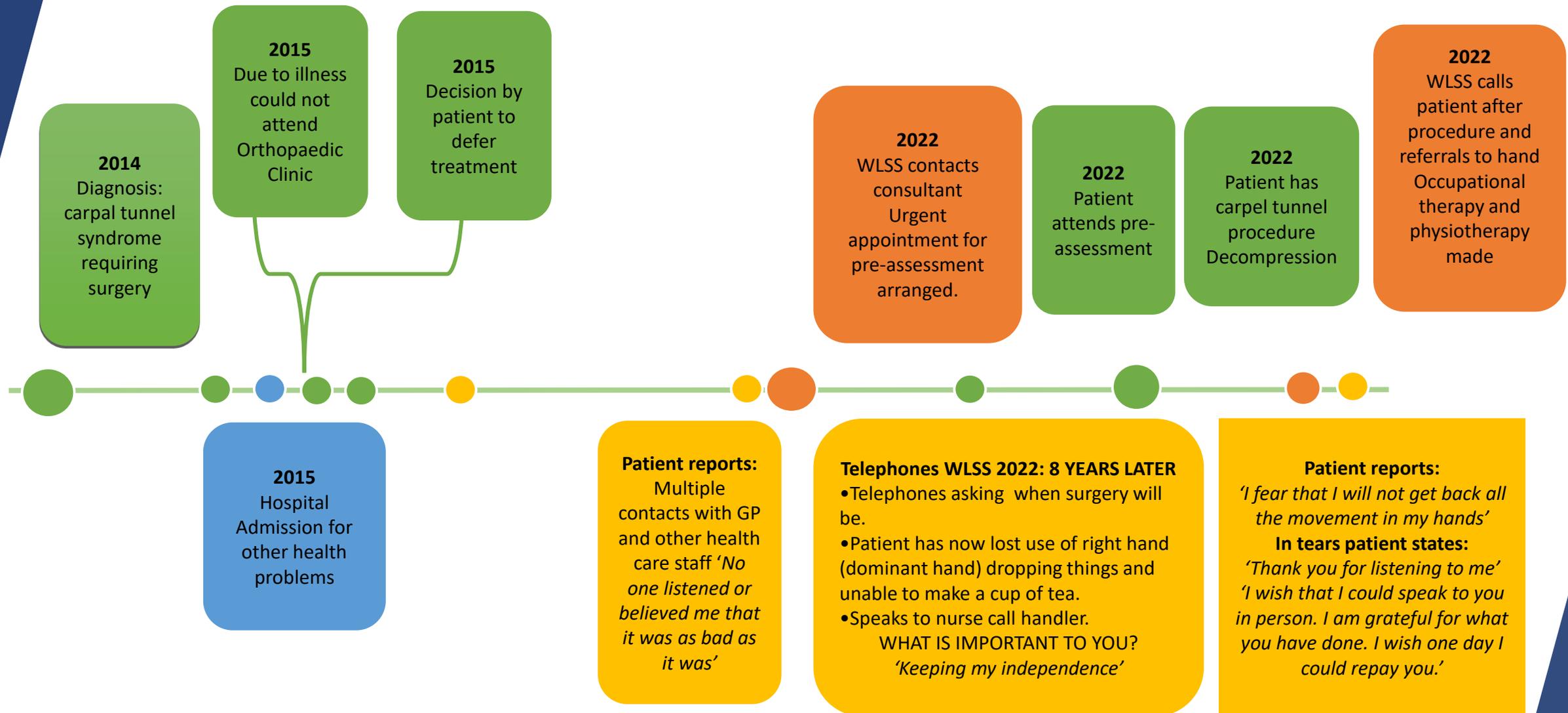
Here we listen to Linda's and Mavis story of their experience of the waiting list support team  
Please select their name to listen to their experience.

Mavis

Linda

The following case example provides a timeline of a patient's journey. The patient had been waiting over 8 years for her orthopaedic procedure after initially deferring her treatment due to ill health. She contacted the service and received an urgent procedure followed by occupational and physiotherapy. The consequences for the patient would have been serious had she not contacted the service, as she was already losing function in her hand and her independence was suffering as a result of it. The patient is overwhelmed with the service she received and able to be more independent as a result.

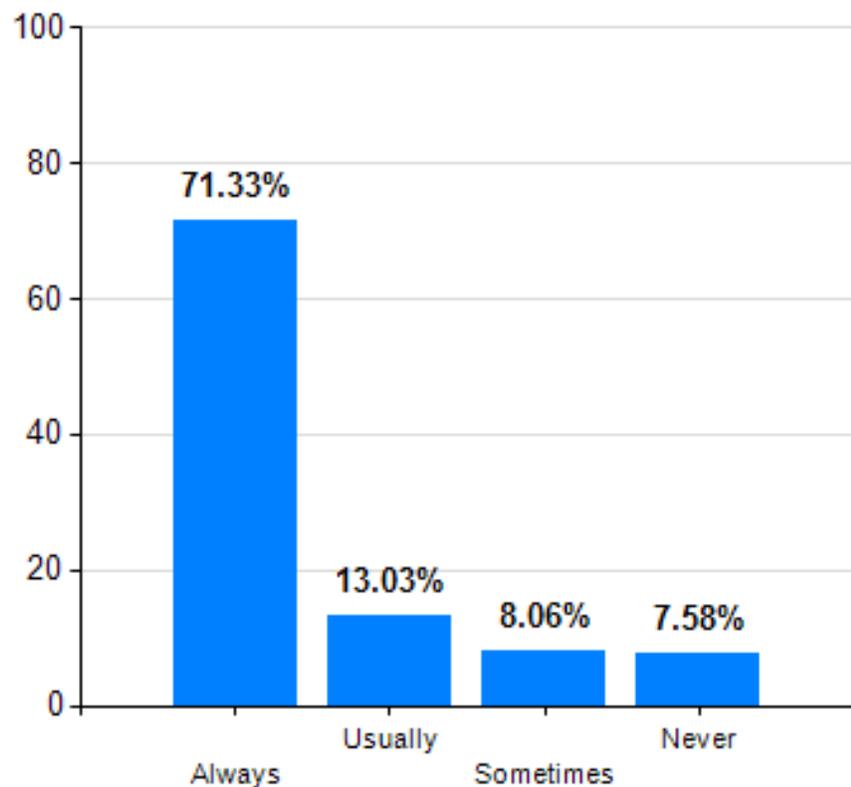
# WAITING LIST SUPPORT SERVICE – PATIENT EXPERIENCE ORTHOPAEDIC PATHWAY



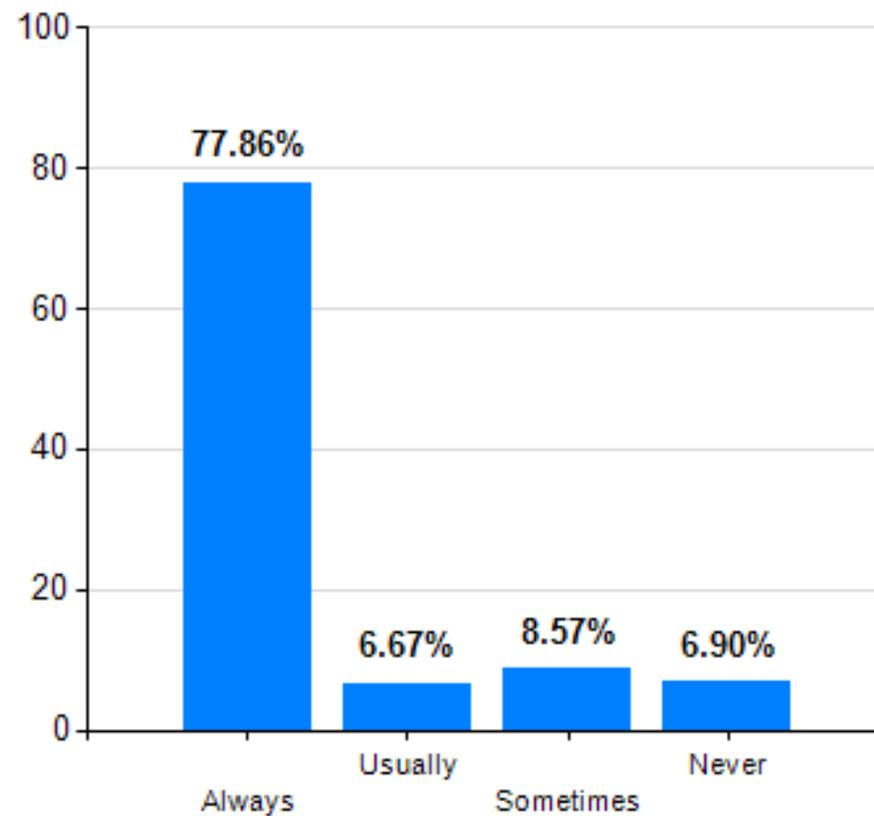
# Safe and Effective Care, in an appropriate & Clean Environment

## All Wales Health Questionnaire

- ▶ My care is provided in the most appropriate setting to meet my health needs?



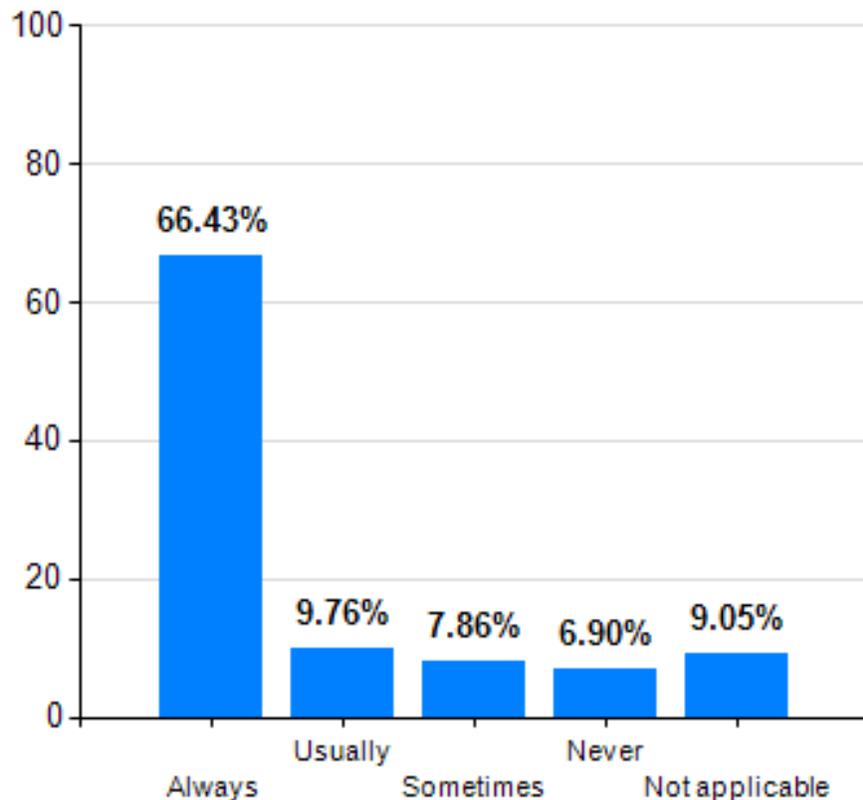
- ▶ Did you feel safe and well cared for?



# Safe and Effective Care, in an appropriate & Clean Environment

## All Wales Health Questionnaire

### ► If you asked for assistance, did you get it when you needed it?



► Successful operation now recovering well. Food very good. Cleanliness very good. some staff very good.

► Staff are so kind and caring, always cheerful even when workload is high, the liaison lady Julie was superb, she allowed me to use the phone to contact my friends and she tirelessly ran round for all the patients getting them tea or walking with them or doing iPad chats or puzzles with them

► Reception actively make things very difficult. A man who came in after me with a coronary died because receptionist wouldn't get help until she got a 3rd phone number. 5.5 hr wait in a not busy Dept is unacceptable. I passed out because 3 times no one came back to say I could have water. No one knew what to do with me despite identical symptoms to previous history. Food and meds forgotten although dispensed. Told I'd be better cared and fed at home. Of the 4 hospitals Glangwilli is the worst

# Safe and Effective Care - Waiting List Support Service

Supporting patients while they are waiting for treatment is important to ensure they are provided with any additional support and reassurance while they wait. This story is about a patient who has also been in contact with the Waiting List Support Service (WLSS).

The Patient, who is over 90 years of age, lives alone since losing her son, who was her main carer. She contacted the WLSS after receiving an Ophthalmology letter regarding her cataract surgery and wanted to enquire about having her procedure carried out privately.

The patient spoke with a Registered Nurse call handler who undertook a holistic assessment of her needs. The patient is housebound and has poor mobility and told us she relies on neighbours to take her to hospital appointments. Her main concern during the call was that she had missed a physio appointment as she was unable to get herself dressed and would not be able to get into a car. The patient is able to cook meals for herself and has a cleaner to assist her once a week and does not have a package of care. She has not had any falls in the last year and had adaptations made to her property as well as a lifeline to call for assistance in the event of an emergency.

As a result of the call to the WLSS, the patient was provided with the telephone number for patient transport so she can book the correct transport and assistance for any future hospital appointments. A referral to the GP and District Nurses was also undertaken for a general review for her diabetes, heart condition, and arthritis. A referral to Social Services was undertaken for her to be provided with a full Social Work and OT assessment with a view to her care needs and whether additional aids and adaptations can be provided. A referral to MIND and Bereavement Services was also offered, but declined. The patient did not have internet access and was unable to access our online resources.

The patient was extremely happy with the service provided by WLSS, and reported that she was satisfied with the advice provided and felt able to seek support to manage her condition whilst she waits for her Ophthalmology procedure.

# Safe and Effective Care, in an appropriate & Clean Environment

## COMPLIMENTS

Staying in the Cardigan area for a few days and on the way home, I became extremely unwell. My husband and friends had to carry me into the Centre and immediately I was cared for by Russell and his team. They were absolutely amazing. I felt safe in their hands as they were so reassuring and kept me and my husband constantly informed on what procedures they were carrying out. They were very efficient but we were so impressed with the caring attitude that they demonstrated.

Having removed the strips from my head wound 8 days after their application at the Unit, I was delighted to see that the gash had all but gone! Many thanks to the nurse (Laura?) who so skilfully closed the wound with the strips and offered after care advice. The nurse also took the time to check me over thoroughly which was very reassuring after an unexpected head injury while on holiday. All the staff I came into contact with at the Unit were kind and caring despite being so busy.

I fell in asda in Pembroke dock on 29th June breaking my hip and was admitted to your hospital just before midnight on that day. Following the operation i was put onto ward 1 bay 2 and later bay 4 where i received excellent treatment from doctors, nurses, ancillary staff, cleaners and catering staff. will you pass my thanks to all these staff for the excellent service you can be proud of them.

# Safe and Effective Care, in an appropriate & Clean Environment Concerns

- ▶ 131 concerns were received during August/ September pertaining to clinical assessment and treatment.
- ▶ 61 out of the 131 complaints have been looked into and responses provided. The remaining 70 are still being investigated. Typically, clinical investigations can be complex and can take longer to investigate, sometimes spanning a number of services.
- ▶ 49 of these concerns were about delay in receiving treatment and 30 were about lack of treatment.
- ▶ 16 of the concerns were about a delay or missed diagnosis, and 12 were around reactions to treatment.
- ▶ The settings for the majority of these concerns were A&E (16%), Trauma and Orthopaedics (11%), Urology (9%) and Ophthalmology (6%).

# Safe and Effective Care, in an appropriate & Clean Environment

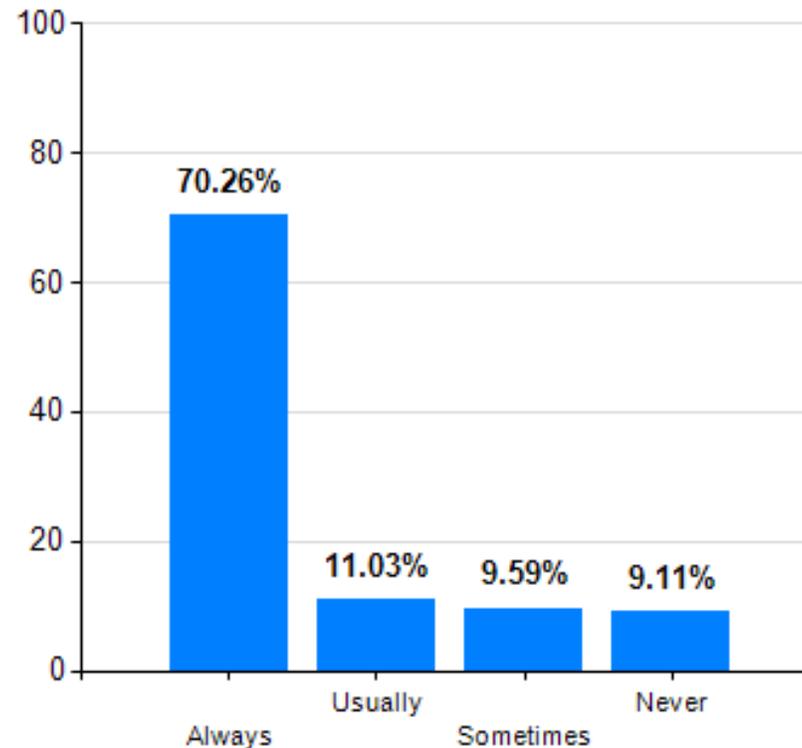
## Lessons Learned

| You said  | We Did  |
|---|---|
| <p>At times when the Health Board is short staffed, you should consider using alternative staff to carry out some activities.</p> | <p>Getting the right staffing levels is a challenge, but equally of the utmost importance to us. We have been developing and extending the knowledge, skills and scope of practice of our support workers and registered nurses to ensure that the medical staff are able to focus their time appropriately.</p> <p>We ensure that the staff working in our departments are skilled appropriately to maximise the delivery of care to the patients.</p> |
| <p>If surgery or treatment is delayed, we need to be kept informed or timescales and alternatives.</p>                            | <p>The Health Board is reaching out to all patients whose surgeries have been delayed due to the pandemic. Plans are also moving forward to outsource a number of services to private providers, in order to help with waiting list pressures and ensure patients receive their required interventions as soon as possible.</p>   |

# People are encouraged to share their experiences of health care to help us improve

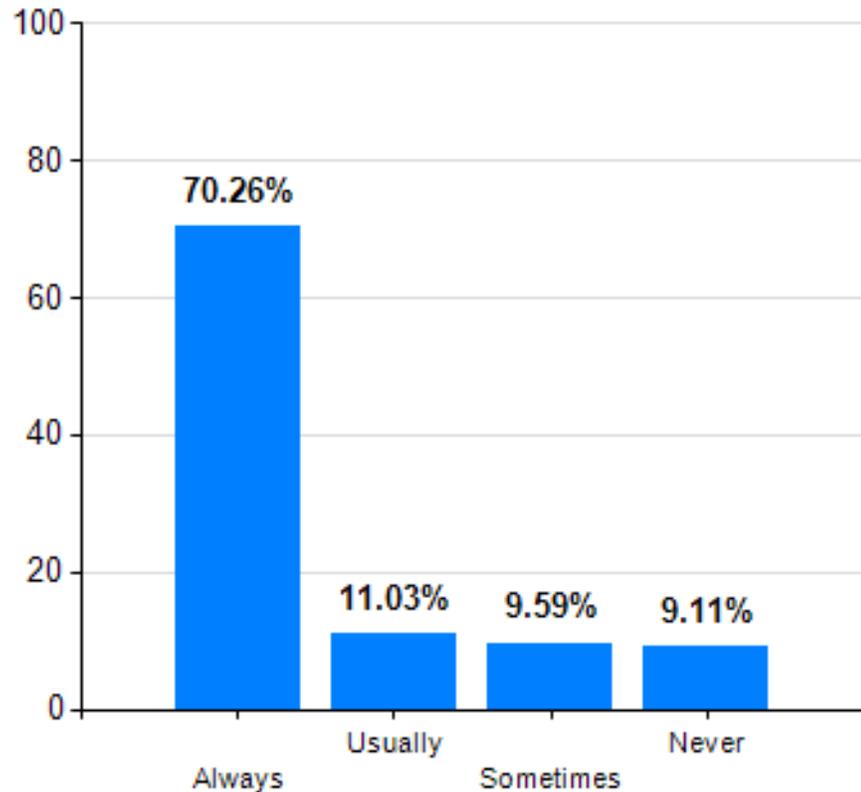
## All Wales Health Questionnaire

- ▶ I am supported and encouraged to share my experience of care, both good and bad to help improve things?



# People are encouraged to share their experiences of health care to help us improve

## Friends and Family Test



The staff was very nice. Since we had an appointment, we did not have to wait long until it was our turn. Everything was explained well to me and I could ask any questions. The only minor negative aspect was that once we were done, we were asked to also see a consultant / doctor. We waited over an hour, got in, the doctor read out loud the notes from the nurses, we confirmed that this was correct, and then we could go. This seemed a bit useless to us. But otherwise a positive experience.



Excellent ongoing service from physio department. All staff friendly and helpful from point of contact at reception and onwards. Physiotherapist Peter has been excellent, patient, giving good advice, trying different treatments in order to help resolve the problem with my knee.



The staff and care were excellent. But, there was a lot of waiting around: to be seen initially; then to see the doctor; then to see the doctor again after X ray. I arrived at A and E around 9 pm. My husband, who accompanied me, didn't get home until around 3am. I had to sleep on a trolley in a casualty consulting room, (all the casualty rooms were occupied with sleeping patients) because there were no beds available on wards. More resources needed throughout the system.

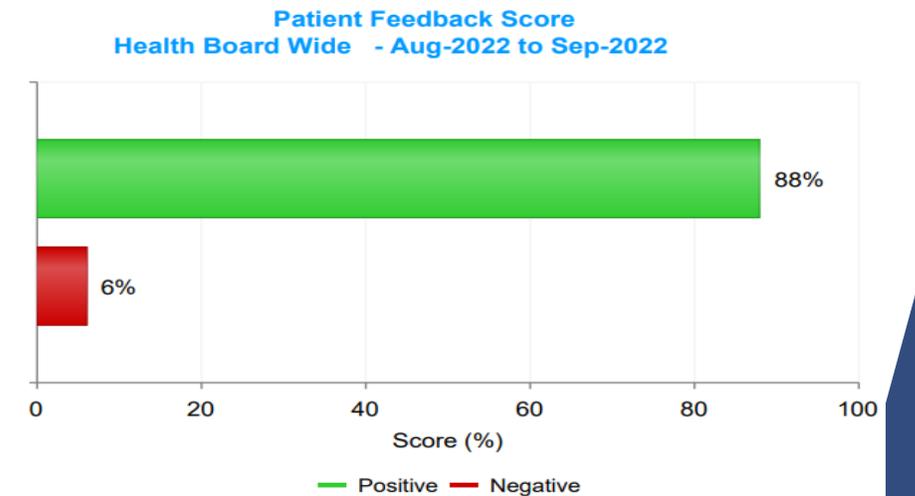
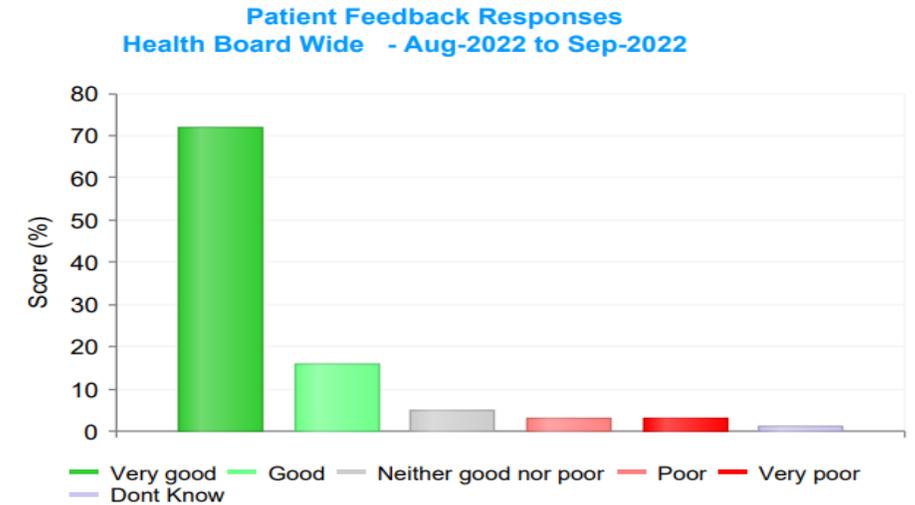


I attended Withybush A&E with severe abdominal pain, however as there is no on call gynaecologist there I was referred to glangwilli gynaecology department that same day. I was told to attend glangwilli A&E where gynaecology was expecting me. I arrived at glangwilli to be told there was no record of me, and gynaecology wasn't expecting me. I had to go through the triage process again at glangwilli to be told I may not even be seen by a gynaecologist. I was in both A&Es a total of 12 hrs

# Friends and Family Test by patient type

Overall satisfaction on how patients are feeling about their recent visit.

| Patient Type             | % Good | % Poor | Total Responses | Very good | Good | Neither good nor poor | Poor | Very poor | Don't Know |
|--------------------------|--------|--------|-----------------|-----------|------|-----------------------|------|-----------|------------|
| Total                    | 93.6%  | 6.4%   | 5574            | 4003      | 908  | 289                   | 166  | 171       | 37         |
| Day Case                 | 97.0%  | 3.0%   | 33              | 30        | 2    | 0                     | 0    | 1         | 0          |
| Emergency Patient        | 88.6%  | 11.4%  | 1471            | 930       | 277  | 106                   | 81   | 74        | 3          |
| Inpatient                | 93.8%  | 6.2%   | 372             | 269       | 65   | 15                    | 12   | 10        | 1          |
| Maternity Inpatient      | 100.0% | 0.0%   | 4               | 3         | 1    | 0                     | 0    | 0         | 0          |
| Maternity Outpatient     | 87.5%  | 12.5%  | 8               | 4         | 3    | 0                     | 0    | 1         | 0          |
| Mental Health Outpatient | 93.8%  | 6.3%   | 18              | 11        | 4    | 1                     | 0    | 1         | 1          |
| Outpatient               | 95.5%  | 4.5%   | 1954            | 1431      | 324  | 98                    | 41   | 42        | 18         |
| Paediatric Inpatient     | 80.0%  | 20.0%  | 11              | 7         | 1    | 1                     | 2    | 0         | 0          |
| Unmapped                 | 95.6%  | 4.4%   | 1703            | 1318      | 231  | 68                    | 30   | 42        | 14         |



# Friends and Family Test by Hospital

## Withybush

| Sub Location                      | % Good | % Poor | Total Responses | Very good | Good | Neither good nor poor | Poor | Very poor | Don't Know |
|-----------------------------------|--------|--------|-----------------|-----------|------|-----------------------|------|-----------|------------|
| <b>Total</b>                      | 90.1%  | 9.9%   | 747             | 487       | 131  | 55                    | 33   | 35        | 6          |
| Accident and Emergency Department | 84.1%  | 15.9%  | 322             | 185       | 58   | 32                    | 22   | 24        | 1          |
| Adult Clinical Decisions Unit     | 100.0% | 0.0%   | 7               | 4         | 3    | 0                     | 0    | 0         | 0          |
| Anentatal Clinic                  | 0.0%   | 100.0% | 1               | 0         | 0    | 0                     | 0    | 1         | 0          |
| Child Health Department           | 100.0% | 0.0%   | 1               | 1         | 0    | 0                     | 0    | 0         | 0          |
| Coronary Care Unit                | 100.0% | 0.0%   | 1               | 1         | 0    | 0                     | 0    | 0         | 0          |
| Occupational Therapy Department   | 100.0% | 0.0%   | 5               | 3         | 2    | 0                     | 0    | 0         | 0          |
| Outpatient Department (A)         | 94.3%  | 5.7%   | 323             | 231       | 51   | 20                    | 8    | 9         | 4          |
| Physiotherapy Department          | 95.3%  | 4.7%   | 44              | 32        | 9    | 1                     | 2    | 0         | 0          |
| Pre Assessment                    | 100.0% | 0.0%   | 1               | 1         | 0    | 0                     | 0    | 0         | 0          |
| Puffin Ward                       | 75.0%  | 25.0%  | 5               | 2         | 1    | 1                     | 1    | 0         | 0          |
| Ward 1                            | 87.5%  | 12.5%  | 8               | 6         | 1    | 0                     | 0    | 1         | 0          |
| Ward 10                           | 100.0% | 0.0%   | 2               | 2         | 0    | 0                     | 0    | 0         | 0          |
| Ward 11                           | 100.0% | 0.0%   | 2               | 0         | 2    | 0                     | 0    | 0         | 0          |
| Ward 12                           | 100.0% | 0.0%   | 2               | 1         | 0    | 0                     | 0    | 0         | 1          |
| Ward 3                            | 100.0% | 0.0%   | 4               | 3         | 1    | 0                     | 0    | 0         | 0          |
| Ward 4                            | 100.0% | 0.0%   | 15              | 12        | 3    | 0                     | 0    | 0         | 0          |
| Ward 7                            | 100.0% | 0.0%   | 1               | 1         | 0    | 0                     | 0    | 0         | 0          |
| Ward 8                            | 100.0% | 0.0%   | 3               | 2         | 0    | 1                     | 0    | 0         | 0          |

## Glangwili

| Sub Location                      | % Good | % Poor | Total Responses | Very good | Good | Neither good nor poor | Poor | Very poor | Don't Know |
|-----------------------------------|--------|--------|-----------------|-----------|------|-----------------------|------|-----------|------------|
| <b>Total</b>                      | 89.7%  | 10.3%  | 1178            | 749       | 237  | 68                    | 54   | 59        | 11         |
| Accident and Emergency Department | 84.0%  | 16.0%  | 364             | 198       | 85   | 25                    | 29   | 25        | 2          |
| Ambulatory Care Unit              | 87.5%  | 12.5%  | 16              | 9         | 5    | 0                     | 1    | 1         | 0          |
| Cilgerran Ward                    | 71.4%  | 28.6%  | 7               | 4         | 1    | 0                     | 2    | 0         | 0          |
| Cleddau Ward                      | 100.0% | 0.0%   | 6               | 2         | 3    | 1                     | 0    | 0         | 0          |
| Coronary Care Unit                | 100.0% | 0.0%   | 9               | 7         | 2    | 0                     | 0    | 0         | 0          |
| Day Surgery Unit                  | 94.4%  | 5.6%   | 18              | 16        | 1    | 0                     | 0    | 1         | 0          |
| Derwen Ward                       | 91.7%  | 8.3%   | 37              | 29        | 4    | 1                     | 2    | 1         | 0          |
| Dewi Ward                         | 100.0% | 0.0%   | 2               | 1         | 1    | 0                     | 0    | 0         | 0          |
| Dinefwr Ward                      | 100.0% | 0.0%   | 3               | 2         | 1    | 0                     | 0    | 0         | 0          |
| Gwenllian Ward                    | 100.0% | 0.0%   | 1               | 1         | 0    | 0                     | 0    | 0         | 0          |
| Merlin Ward                       | 96.3%  | 3.7%   | 29              | 20        | 6    | 2                     | 1    | 0         | 0          |
| Midwifery Led Unit                | 100.0% | 0.0%   | 1               | 1         | 0    | 0                     | 0    | 0         | 0          |
| Outpatient Department (Blue)      | 92.7%  | 7.3%   | 607             | 408       | 114  | 35                    | 16   | 25        | 9          |
| Padarn Ward                       | 100.0% | 0.0%   | 2               | 2         | 0    | 0                     | 0    | 0         | 0          |
| Physiotherapy Department          | 100.0% | 0.0%   | 1               | 1         | 0    | 0                     | 0    | 0         | 0          |
| Picton Ward                       | 76.7%  | 23.3%  | 34              | 16        | 7    | 4                     | 3    | 4         | 0          |
| Steffan Ward                      | 50.0%  | 50.0%  | 2               | 0         | 1    | 0                     | 0    | 1         | 0          |
| Surgical Assessment Unit          | 66.7%  | 33.3%  | 3               | 2         | 0    | 0                     | 0    | 1         | 0          |
| Teifi Ward                        | 100.0% | 0.0%   | 3               | 2         | 1    | 0                     | 0    | 0         | 0          |
| Towy Ward                         | 100.0% | 0.0%   | 1               | 1         | 0    | 0                     | 0    | 0         | 0          |
| Tysul Ward                        | 100.0% | 0.0%   | 32              | 27        | 5    | 0                     | 0    | 0         | 0          |

## Bronglais

| Sub Location                      | % Good | % Poor | Total Responses | Very good | Good | Neither good nor poor | Poor | Very poor | Don't Know |
|-----------------------------------|--------|--------|-----------------|-----------|------|-----------------------|------|-----------|------------|
| <b>Total</b>                      | 92.5%  | 7.5%   | 541             | 382       | 89   | 32                    | 18   | 20        | 0          |
| Accident and Emergency Department | 87.3%  | 12.7%  | 248             | 152       | 47   | 20                    | 12   | 17        | 0          |
| Anghardd Ward                     | 100.0% | 0.0%   | 2               | 2         | 0    | 0                     | 0    | 0         | 0          |
| Antenatal Department              | 100.0% | 0.0%   | 6               | 4         | 2    | 0                     | 0    | 0         | 0          |
| Ceredig Ward                      | 100.0% | 0.0%   | 7               | 4         | 3    | 0                     | 0    | 0         | 0          |
| Clinical Decisions Unit (Green)   | 87.5%  | 12.5%  | 8               | 5         | 2    | 0                     | 1    | 0         | 0          |
| Day Surgery Unit                  | 100.0% | 0.0%   | 15              | 14        | 1    | 0                     | 0    | 0         | 0          |
| Dyfi Ward                         | 100.0% | 0.0%   | 5               | 4         | 1    | 0                     | 0    | 0         | 0          |
| Meurig Ward                       | 100.0% | 0.0%   | 4               | 4         | 0    | 0                     | 0    | 0         | 0          |
| Occupational Therapy Department   | 50.0%  | 50.0%  | 2               | 1         | 0    | 0                     | 1    | 0         | 0          |
| Outpatient Department             | 96.9%  | 3.1%   | 199             | 156       | 29   | 8                     | 3    | 3         | 0          |
| Paediatric Ambulatory Care Unit   | 100.0% | 0.0%   | 2               | 1         | 0    | 1                     | 0    | 0         | 0          |
| Physiotherapy Department          | 95.5%  | 4.5%   | 24              | 18        | 3    | 2                     | 1    | 0         | 0          |
| Rhiannon Ward                     | 100.0% | 0.0%   | 14              | 12        | 1    | 1                     | 0    | 0         | 0          |
| Y Banwy Unit                      | 100.0% | 0.0%   | 4               | 4         | 0    | 0                     | 0    | 0         | 0          |
| Ystwyth Ward                      | 100.0% | 0.0%   | 1               | 1         | 0    | 0                     | 0    | 0         | 0          |

## Prince Philip

| Sub Location                   | % Good | % Poor | Total Responses | Very good | Good | Neither good nor poor | Poor | Very poor | Don't Know |
|--------------------------------|--------|--------|-----------------|-----------|------|-----------------------|------|-----------|------------|
| <b>Total</b>                   | 96.8%  | 3.2%   | 1050            | 782       | 176  | 55                    | 22   | 10        | 5          |
| Acute Medical Assessment Unit  | 95.2%  | 4.8%   | 23              | 16        | 4    | 2                     | 1    | 0         | 0          |
| Coronary Care Unit             | 100.0% | 0.0%   | 1               | 1         | 0    | 0                     | 0    | 0         | 0          |
| Minor Injuries Unit            | 93.2%  | 6.8%   | 289             | 188       | 60   | 23                    | 13   | 5         | 0          |
| Outpatient Department          | 98.3%  | 1.7%   | 621             | 481       | 100  | 25                    | 7    | 3         | 5          |
| Physiotherapy Department       | 97.1%  | 2.9%   | 36              | 31        | 2    | 2                     | 0    | 1         | 0          |
| Rheumatology Department        | 100.0% | 0.0%   | 2               | 1         | 1    | 0                     | 0    | 0         | 0          |
| Speech and Language Department | 100.0% | 0.0%   | 3               | 1         | 1    | 1                     | 0    | 0         | 0          |
| Ward 1                         | 100.0% | 0.0%   | 3               | 2         | 1    | 0                     | 0    | 0         | 0          |
| Ward 3                         | 50.0%  | 50.0%  | 2               | 0         | 1    | 0                     | 0    | 1         | 0          |
| Ward 4                         | 100.0% | 0.0%   | 1               | 0         | 1    | 0                     | 0    | 0         | 0          |
| Ward 5                         | 100.0% | 0.0%   | 2               | 1         | 0    | 1                     | 0    | 0         | 0          |
| Ward 6                         | 100.0% | 0.0%   | 19              | 18        | 1    | 0                     | 0    | 0         | 0          |
| Ward 7                         | 97.9%  | 2.1%   | 48              | 42        | 4    | 1                     | 1    | 0         | 0          |

We continue to share this feedback with staff here we have some feedback shared in our Feel Good Friday communications.

FRIDAY, OCTOBER THE 18TH - 2022

# FEEL GOOD FRIDAY

The Patient Experience Team

The Patient Experience Team work across the whole Health Board and each week we are inundated with supportive comments from our patients, families, and their carers about the care they have received from the staff of Hywel Dda University Health Board. These comments are collated from various sources including The Big Thank You, The Friends and Family Test, our Compliments System and the NHS Wales Experience Survey. We will be sharing a selection of these wonderful comments with you every Friday.

## THE BIG THANK YOU



**MATERNITY TRIAGE UNIT - CLANGWILI**

GIG Cymru NHS Wales Bwrdd Iechyd Prifysgol Hywel Dda University Health Board

Patient Experience Team  
Tîm Profiad Y Cŵl



The Maternity Triage Unit in Glangwili Hospital received a big thank you certificate from a patient. They were praised by the patient saying; I wanted to write to say how appreciative I was of the excellent care I was given during my visit to the Triage unit in Glangwili Hospital. I was on holiday in Tenby and needed to attend for an episode of reduced fetal movements. As a Consultant Obstetrician in another Trust, I was very impressed with the friendliness, attention, thoroughness and efficiency of the care I received. I was made to feel welcome and felt very looked after by every member of the team, and felt reassured by my visit. With special thanks to Padi Sutherland.

- Charlotte Lloyd

## THANK YOU TO ANGHARAD WARD - BRONGLAIS

Really lovely, caring and kind staff on Angharad Ward. I cannot express how grateful I am to all the staff who have looked after my daughter. Thank you so much all.

People are encouraged to share their experiences of health care to help us improve.  
The Big Thank You

## THE BIG THANK YOU



### ACUTE RESPONSE TEAM - WITHYBUSH

The Acute Response Team in Withybush Hospital received a big thank you certificate from a patient. They were praised by the patient saying;  
I just wanted to say how wonderful the Acute Response Team were. I had breast cancer surgery last week and the wound needed another new dressing following a few problematic days. A huge thanks to the amazing ladies who were so helpful. - Lynda Arke



Patient Experience Team  
Tim Profiad Y Claf



### BEN MATTHEWS - PHYSIOTHERAPY

Ben Matthews, a physio in Prince Philip Hospital received a big thank you certificate from a patient. He was praised by the patient saying;  
After my first conversation with Ben I felt so relieved knowing I had someone to speak to who understood my problems and was willing to give me the help and support I needed. It only takes one amazing person like him to care enough to make a difference in my life whilst I was going through a tough time physically and mentally. He went above and beyond in supporting me before and after surgery and I cannot thank you enough for that Ben.  
I will be forever grateful.

- Bernadette Dolan

\*Thank you to Ben Matthews colleague who kindly stood in for the photo\*



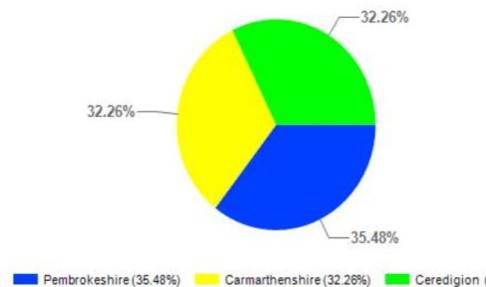
# Paediatric Surveys



- ▶ During the months of August and September 2022, we saw a total of 171 survey responses this is an increase from the previous report.
- ▶ This breaks down to 116 responses for the Parents, Relatives & Carers Survey, 23 responses for the 11 years and older survey, and 32 responses for 4-11 years old. Below is a breakdown of the responses by county.

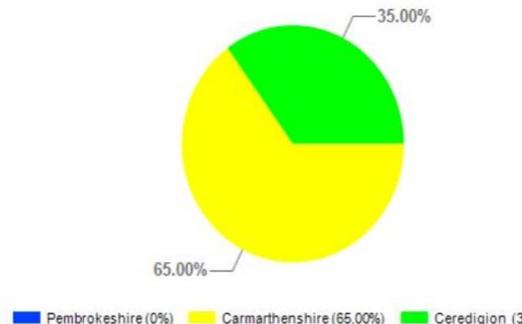
## 4 – 11 year old summary

| Available Answers | Responses | Score (%)   |
|-------------------|-----------|-------------|
| Pembrokeshire     | 11        | 35.48%      |
| Carmarthenshire   | 10        | 32.26%      |
| Ceredigion        | 10        | 32.26%      |
| <b>Total</b>      | <b>31</b> | <b>100%</b> |



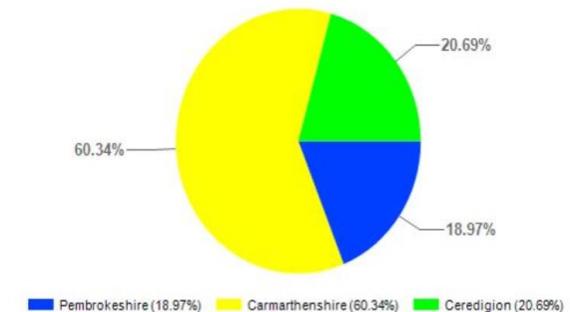
## 11 years and above

| Available Answers | Responses | Score (%)   |
|-------------------|-----------|-------------|
| Pembrokeshire     | 0         | 0.00%       |
| Carmarthenshire   | 13        | 65.00%      |
| Ceredigion        | 7         | 35.00%      |
| <b>Total</b>      | <b>20</b> | <b>100%</b> |



## Parents and carers

| Available Answers | Responses  | Score (%)   |
|-------------------|------------|-------------|
| Pembrokeshire     | 22         | 18.97%      |
| Carmarthenshire   | 70         | 60.34%      |
| Ceredigion        | 24         | 20.69%      |
| <b>Total</b>      | <b>116</b> | <b>100%</b> |



# Paediatric Surveys



Here are some of the comments about the paediatric wards across the Hywel Dda University Health Board:

Staff on Cilgerran ward are all absolutely wonderful, they are all friendly and clearly care deeply about the children and families they work with, they're all inspiring humans" Cilgerran Ward, Glangwili General Hospital - Parents, Carers, Relatives Survey

"I felt my child was professionally and expertly evaluated and I felt she was in good hands. I am grateful for the thorough examinations and tests which were used to diagnose him correctly. All staff were amazing. Thank you." Angharad Ward, Bronglais Hospital - Parents, Carers, Relatives Survey

"I was offered a lot of activities to do during my stay, which helped me focus on something rather than pain" - Cilgerran Ward, Glangwili General Hospital - 11 years and over Survey

I liked how friendly the nurses are and the food was lovely" - Cilgerran Ward, Glangwili General Hospital - 4-11 years old survey

"marmalade on toast, video games, having my pulse taken, button to call nurse, and playing lego with another boy" - Angharad Ward, Bronglais Hospital - 4-11 years old survey

# ARTS IN HEALTH - OUR FIRST YEAR





# ARTS IN HEALTH

AT HYWEL DDA



THANKS TO:



## ANNUAL REPORT 2021/22

### UNCOVERING ENORMOUS POSSIBILITIES

“Hywel Dda's new Arts in Health Team have been on an incredible journey for their first year in post, uncovering huge potential and enthusiasm for the arts to improve health and wellbeing for our patients, staff and communities.

I'm extremely proud of the work done by the team and really look forward to continuing to watch our Arts in Health programme grow as we build momentum, increase access and listen to our patients, their families and our staff about what they need in order to live well.” **Maria Battle, Chair of Hywel Dda University Health Board**



Hywel Dda University Health Board (HdUHB) has a shared vision with our communities to live healthy joyful lives. The ambition is to shift from a service that just treats illness to one that keeps people well, prevents ill-health and provides help early on. (A Healthier Mid & West Wales)



# WHAT IS ARTS IN HEALTH?

## LIVING JOYFUL LIVES

Arts in health is a very rapidly growing and exciting field of work which includes any art project, intervention or commission where the intention is to improve health and well-being through arts engagement.

At Hywel Dda we are keen to build on the growing body of evidence that suggests that the arts have a role in helping people to **live well** and where there is proven health and wellbeing benefits through taking part in the arts such as:

- Improving mental & physical health & wellbeing
- Add joy and meaningfulness
- Reduce loneliness and isolation
- Connect communities
- Express complex stories, identities and emotions
- Commemorate, remember and reflect
- Improve healthcare environments

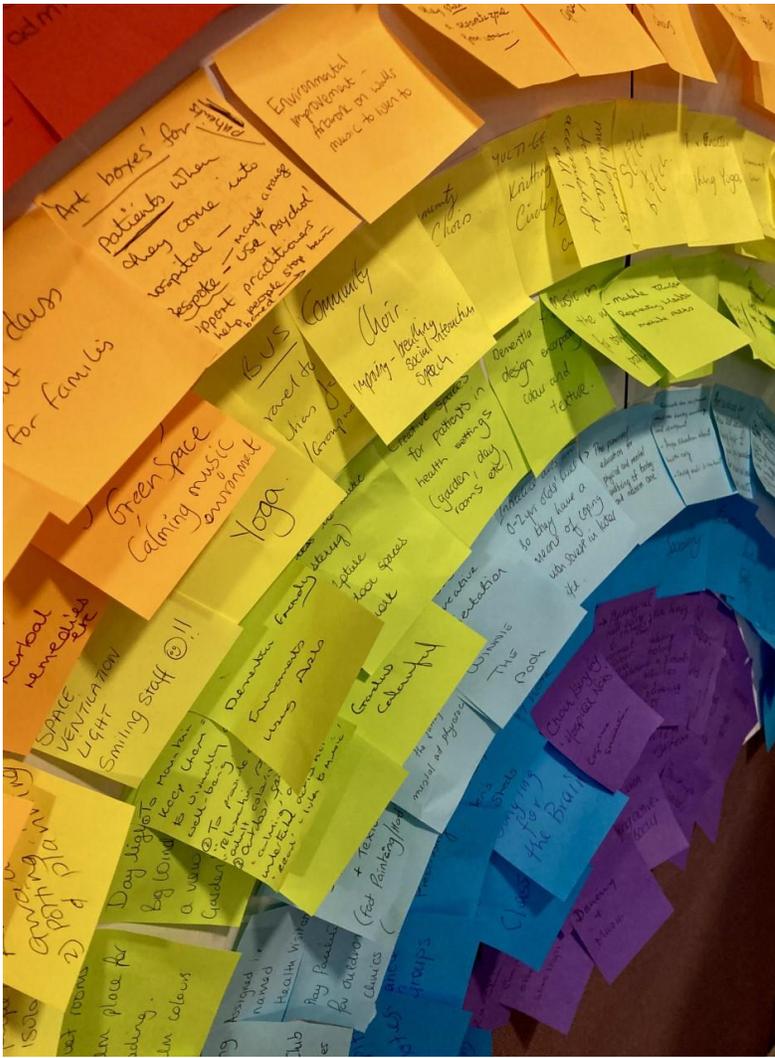
# THE JOURNEY SO FAR

## PUTTING CREATIVITY AT THE HEART OF ALL OUR SERVICES.

Arts in Health Co-ordinators Kathryn Lambert and Dr Catherine Jenkins joined the Patient Experience Team in Oct 2021 to help promote and encourage the use of the arts in healthcare across all three counties.

Kathryn brings over 20 years' experience of working in the arts sector, whilst Dr Cath is a practicing GP.

The post is part funded by The Arts Council of Wales as part of a national programme to support all Health Boards in Wales to engage an Arts in Health Coordinator. This strategic partnership is built on a Memorandum of Understanding between the Arts Council and the NHS Confederation to capitalise on the powerful contribution art can make to healthcare.



# CO-CREATION

## WORKING TOGETHER

Hywel Dda is keen to develop a vision for arts in health in which creativity is at the heart of all our services. We have been listening, learning, trialing and have had rich conversations about arts in health right across the health board.

Hywel Dda will co-create an ambitious Plan for Arts in Health and a set of principles and priorities with input from across the health board, stakeholders, patients, staff and the arts sector. An engagement and co-production plan is underway with conversations about arts in health taking place at:

- The Annual Nursing and Midwifery Conference 2022 – Empowered to Care
- National Eisteddfod debate & activities
- Arts Sector consultations & conversations
- **Have Your Say** – We want to know what you think. Please visit:
- [Have your Say Hywel Dda UHB \(wales.nhs.uk\)](https://www.wales.nhs.uk/haveyoursay)

# IMPROVING PATIENT EXPERIENCE

## DOING THINGS DIFFERENTLY

**Arts Boost** - A pilot 'arts in mental health' programme for children and young people living with disordered eating, self-harming behaviours, low mood and/or suicidal feelings in partnership with sCAMHS (Children & Adolescent Mental Health Service) to help children and young people build creative coping skills, reduce psychological distress and gain an increased sense of empowerment by working with artists. Funded by the Arts Council of Wales and the Baring Foundation.

*"Best way I can express myself" "amazed, fun, relaxing, inspiring"*

*"I really loved the exercise, drawing the landscape was totally engrossing"*

**A pilot programme of live Music in all 4 intensive care settings across the health board** - Funded by Music in Hospitals

- "lovely environment created for our patients"
- "was lovely to see the music making patients smile"
- "made a Friday on ITU a happier place"



# IMPROVING STAFF WELLBEING

## CREATIVE ACTIVITIES FOR STAFF WELLBEING

Hywel Dda Arts in Health Team have been delighted to be able to offer opportunities for staff wellbeing with funding from NHS Charities Together. Schemes have included:

**Hywel Dda Creative Collective** – A staff community of creative individuals taking part in creative writing, drawing, collage, stitching and mindful photography

**Cultural Cwtsh** – An online creative wellbeing resource for health & social care workers

**Arts & Culture Benefits for NHS staff** – Cheaper access to the wellbeing benefits of the arts

**Singing & Silence** – Covid anniversary singing and Hywel Dda Singing Bursaries

**Live music in staff & patient settings** – to raise spirits and mark special moments

*"Thank you everyone really inspiring and look forward to sharing with rest of my team. See you next time.."*

*"So inspiring to have arts being valued and brought forward in health"*



# IMPROVING COMMUNITY WELLBEING

## HEALING NOT JUST CURING

### Weekly Healing Arts Workshops for Ukrainian Refugees at the Welcome Centre in Hywel Dda

*“somewhere we can just relax, not think about anything.” “somewhere we can try something new, enjoy being creative”*

*“The art sessions were amazing, kept kids busy and happy, because they were doing lots of wonderful things with their hands.”*

**Creative Prescribing Development Programme** – A 1 year partnership project with Public Health Wales to embed Arts on Prescription into social prescribing practice at Hywel Dda to reduce health inequalities.

**Dance on Prescription** for patients with mobility problems, chronic illness and/or frailty.



*“The arts celebrate diversity”*



# ENHANCING HEALTHCARE ENVIRONMENTS

## CREATING SPACES WHERE IT FEELS LIKE PEOPLE CARE

We have been engaging in discussions with Capital teams at Hywel Dda to ensure arts is on the agenda in future developments and in refurbishment plans. There are huge opportunities to explore incorporating art into capital schemes to improve the patient, visitor and staff experience. Watch this space.





# GROWING A MOVEMENT

## BUILDING RESOURCES

Fundraising: The new Arts in Health Team have managed to lever over £100,000 of funding for arts in health in Year 1.

We have been building teams across the health board to grow the evidence base for arts in health within Hywel Dda and to drive forward innovation.

- **Hywel Dda Arts in Health Steering Group**, chaired by Maria Battle with representation from Heads of Service right across the health board
- Arts in Health Research & Innovation Group
- Arts in Health Project specific groups
- Creative Prescribing Steering Group
- National Team of Arts in Health Coordinators across Wales
- Members of the Welsh Government Cross Party Group on Arts in Health

*"Engagement in creative activity with members of the local community supports improved social integration, which is one of the key factors that leads to good population health, particularly among less affluent groups" (Welsh NHS Confederation 2020)*



## NEXT STEPS?

### ONE YEAR ON

**We are continuing to identify priorities, uncover possibilities and co-create programmes and projects.**

**Coming Soon:** A Dose of Art – An artist commission to create a bespoke piece of art to commemorate the extraordinary efforts of the Covid 19 Vaccination programme in partnership with Hywel Dda Vaccination Teams.

Neuro rehabilitation Art Club, Arts & Dementia, Arts & Recovery, Singing & Long Covid Recovery...

If you want to find out more or get involved contact: Arts in Health Coordinator, Kathryn Lambert

[Kathryn.lambert@wales.nhs.uk](mailto:Kathryn.lambert@wales.nhs.uk)

