



CYFARFOD BWRDD PRIFYSGOL IECHYD UNIVERSITY HEALTH BOARD MEETING

DYDDIAD Y CYFARFOD: DATE OF MEETING:	29 September 2022
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 month of June/July 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 1st June 2022 and 31st July 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

Hywel Dda University Health Board (HDd UHB) receives patient and service user feedback through a variety of routes: Friends and Family Test (FFT); compliments, concerns and complaints, Patient Advice and Liaison Service (PALS) feedback; local surveys and 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 new patient experience feedback system is in place and currently being rolled out across the organisation, giving teams greater access to feedback received about their services and the ability to report on themes/trends and 'you said/we did' activity.

The comments made at the previous Board meeting around triangulation and analysis of data across the domains to highlight good practice and any negative areas requiring improvement, have been noted and a revised format is currently being developed. Due to some data mapping and reporting discrepancies within the patient experience system (due to initial implementation errors) and within the Datix system, this has not been possible for this report but will be incorporated into the next reporting period.

For the period, a total of 117 compliments and 57 'Big Thank You' nominations were received (almost 50% increase compared to the previous period). Feedback was given by 2181 patients on the Friends and Family system, with 84% leaving a positive recommendation (85% previous period). The All Wales Patient Experience Questionnaire was completed by 396 patients.

The Patient Support Services Team received 427 complaints/concerns were received by the Patient Support Services Team (374 in the previous period); 146 were responded to as early resolution cases; 396 were enquiries; 281 required investigation under the 'Putting Things Right' complaint process; 62% 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.

Four Public Services Ombudsman final reports were received during the period, two were upheld, one partly upheld and one not upheld. All Ombudsman reports are received by the University Health Board's (UHB) Listening and Learning Sub-Committee for sharing lessons and oversight of compliance with Ombudsman recommendations. Examples of lessons learned and how the UHB is addressing these are within the attached report.

The Arts in Health programme is progressing well with success from a patient, community and staff perspective. The Team has secured over £95,000 in funding for arts activities to promote well-being, since commencing in post during the Autumn of 2021.

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 UHB-wide risk of not learning from events in a timely manner (current score 8).
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	6.3 Listening and Learning from Feedback
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	All Planning Objectives Apply

Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS 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:	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. 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. Concerns literature is accessible in a range of languages and formats and translation services are available, as required.



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Patient Experience Team
Tîm Profiad Y Claf

IMPROVING PATIENT EXPERIENCE REPORT

June and July 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 in order that we can 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 there has been a valuable purpose to 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 referred to above.

Service User Feedback at a Glance - June and July 2022

- ▶ **117 formal compliments** were recorded on the patient experience system - listening and understanding were the top sentiments expressed, closely followed by respect, care and compassion.
- ▶ **57 Big Thank You nominations for our staff** were received from our patients or their families – examples of the awards provided to our staff are detailed below.
- ▶ **26,600 patients received our friends and family patient experience survey** to which 2181 responded. Whilst this figure is lower than we would like, this is in line with nationally reported response figures. 84% of responders provided a positive rating and would recommend the services of the UHB 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.
- ▶ **396 service users completed the All Wales Patient Experience Questionnaire** during the two month period. The Family Liaison Officer roles are facilitating the completion of inpatient surveys. The overall patient experience score provided was 83.2% positive rating for June and 81.5% for July. The average score for 2021/22 being 92%.

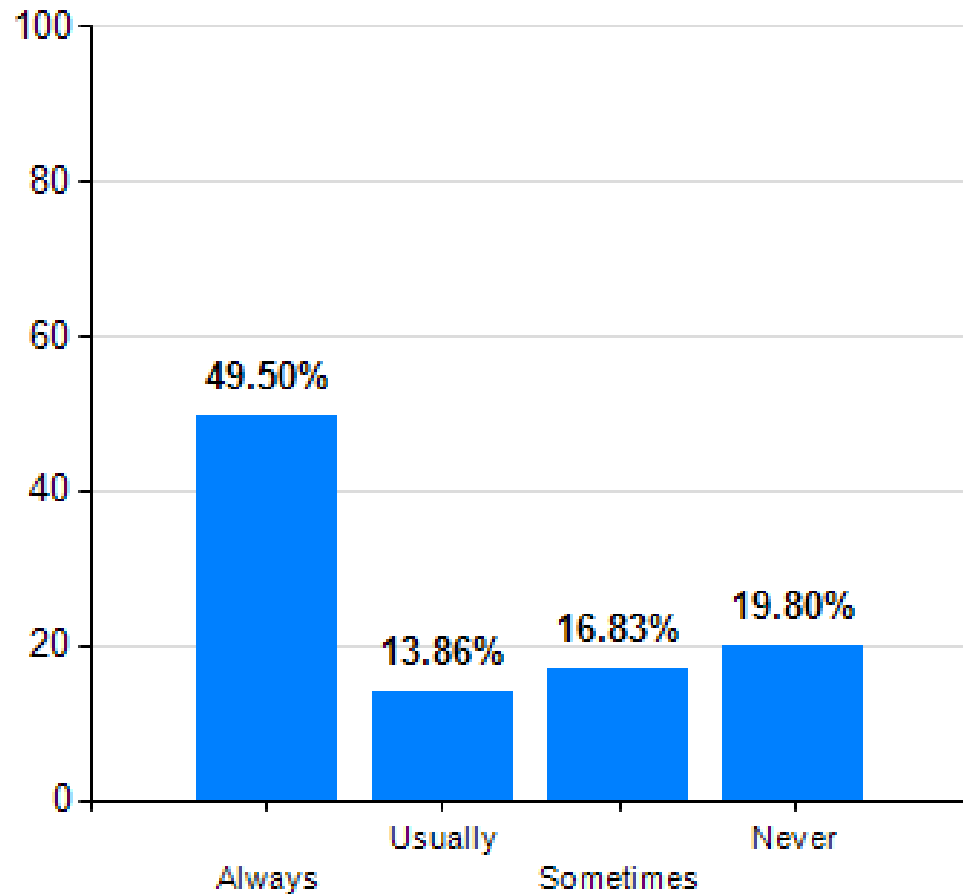
Complaints & Concerns at a Glance - June and July 2022

- ▶ 427 complaints were received, of which:
 - ▶ **146** were managed as an early resolution case (within two working days) by the Patient Support Services Team.
 - ▶ **281** cases proceeded to complaints investigation under the 'Putting Things Right' regulations. The number received for June and July represents a small increase of 10 from the previous period and a sustained 25% increase from the average number (over a 14 month period).
 - ▶ **2** Grade 5 (serious harm/death) complaints were received during this period, relating to A&E, Discharge/Triage. These are being fully investigated and there is ongoing liaison with the families of the patients.
 - ▶ **464** enquiries were received for the two month period.
- ▶ 264 cases managed through the Putting Things Right complaints process were closed in June/July, of which, 174 were closed within 30 working days. This means 62% of the complaints received during these two months were closed within 30 working days. Since 1st April 2021, 64% of complaints have been responded to within 30 working days and 89% of complaints are responded to within 6 months.
- ▶ Of the complaints closed in June/July, 173 of these were not upheld, however, this does not prevent us from taking the opportunity to learn from all aspects of feedback we receive. 29 were upheld and 71 partially upheld.
- ▶ A continued theme is related to appointments and cancelled appointments. There are also themes of delay in diagnosis/ missed diagnosis and discharge arrangements, where patient/families feel they have been prematurely discharged; inpatient falls and communication/attitude and behaviour.
- ▶ One new investigation was commenced by the Public Services Ombudsman for Wales. 4 final reports were received, 2 being upheld, 1 partly upheld and 1 not upheld. Some key themes in the reports were communication with patients and families, lack of documentation, shortcomings in assessment and failing to refer onward to other services. The lessons learned from these reports and progress with the actions plan are considered by the Listening and Learning Sub-Committee.

DIGNITY, RESPECT AND KINDNESS

All Wales Health Questionnaire

► I am treated with Dignity, Respect and Kindness?



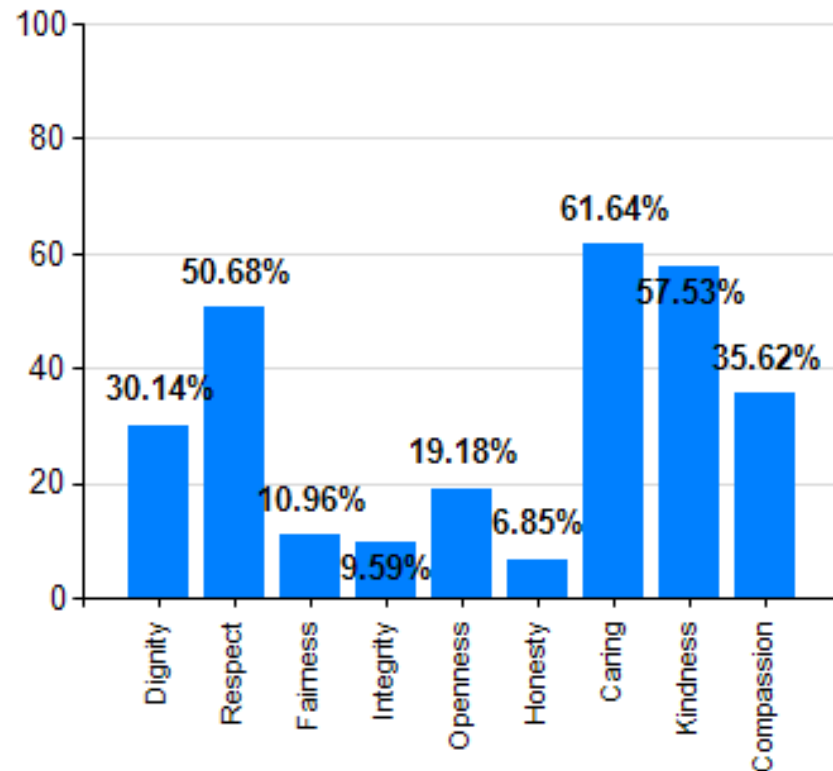
→ Staff very professional and friendly. Very easy to talk to. Nothing too much trouble. Food fantastic. Susan the FLO got me a newspaper and hearing aid batteries and rang my family to let them know how I was. She was very friendly.

→ Staff always in a good mood and friendly and came to your needs when pressing panic button straight away especially at night. Having visitors again has made a huge difference in patient wellbeing and breaks the day up which is a very long day.

→ Some nursing staff were very rude, very ignorant, I don't appreciate foul language being used in front of me, they didn't want to be there, made a total mess of taking my ECG, the doctor who came to read it said it was just plain garbage and he needed to redo it properly which then made my visit even longer.

DIGNITY, RESPECT AND KINDNESS COMPLIMENTS

The sentiments expressed within the compliments we receive, show that respect, care and compassion are the terms most often used.



It was made very clear from the start why I was feeling this way and what we needed to do. Understanding it made such a difference. My therapist got me and gave me the confidence to do treatment. I loved being outdoors, it made all the difference. You saved my life. From start to finish it was amazing.

Judy was absolutely lovely to my 13 year old daughter who was being monitored with an ECG. Throughout the process, Judy talked through everything she was doing with my daughter and why and was helpful, kind, funny and made my daughter feel less worried and stressed. We really appreciated her lovely calming personality.

Thankyou for all of the help and support over the past two years, have helped the client to grow their confidence and overall outlook on life, for which they are very grateful. Client also gave me a bunch of flowers and some chocolates. Have provided therapy and support to family over last 18 months for anxiety and an eating disorder.

To All the staff on Teifi ward, I want to thank each and every one of you. For all the care, skill, hard work, humour and kindness. I feel the deepest appreciation and that despite immense pressures the NHS still exists and continues through your immense dedication skill and hard work. with huge thanks.

DIGNITY, RESPECT AND KINDNESS CONCERNS

During June and July 36 complaints were received relating to attitude and behaviour from staff. These concerns predominantly relate to Emergency Department settings. These concerns have been shared with the Heads of the Departments concerned. 25 of these complaints have been responded to and 11 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 June the most notable area was Ward 1 in Withybush Hospital, as the ward was linked to 16 new concerns. The concerns were wide-ranging, reporting issues with the attitude of staff to patients and families, cleanliness on the ward, toileting, language and appropriate patient clothing. Encouragingly, there were no concerns linked to dignity and respect on the Ward in July.

In other areas, issues of dignity and respect were much more sporadic. Notably, the number of complaints received about the attitude of medical staff to patients reduced to its lowest number in July (7 issues reported), and was equal to the amount of concerns received about the attitude of nursing staff to patients.

‘Staff appeared to be too busy talking amongst self about other staff rather than engaging with those waiting. My visit was wasted as not informed that treatment I required would not be administered as I drove myself to appointment. Still awaiting a further appointment since May’.

‘I had difficulty linked to both diet management also interpreter I hope it will improving in near future’.

DIGNITY, RESPECT AND KINDNESS

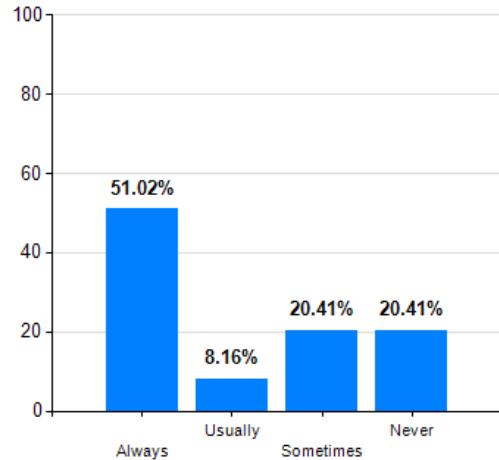
LESSONS LEARNED

YOU SAID	WE DID
With the amount of appointments taking place for blood tests in the Antioch Centre in Llanelli, there should be better waiting facilities in the centre. People should not have to wait outside in all weather.	With increased demand for blood tests a third lane was opened in the Antioch clinic to help cope with this, although it also took away space used as a waiting area previously. Although the centre had a refurbishment, we realise that the space for patients to wait in is minimal and can only hold three people at a time. As a way to overcome this, we ask patients to arrive only 5 minutes before their appointment, and to wait in their cars if early. We realise this is not always possible, such as when patients are reliant on public transport, but where this is the case we ask patients to tell us of their need and we then provide a seat in the waiting room. We realise that blood test services need increasing and other venues need to be offered, so longer term options are being reviewed and explored by the Health Board.
We heard reports that a number of people being cared for on a Glangwili Hospital Ward were dissatisfied with the way that they were being cared for, as were their families.	We immediately contacted the patients and family members to discuss their concerns, and tasked our PALS officers to carry out a satisfaction survey of patients on the ward to make sure they were being treated with the care and respect they deserve. We also made the Head of Nursing, the Senior Nurse Manager and Ward Sister aware, so that they could ensure that things were running smoothly on the ward.

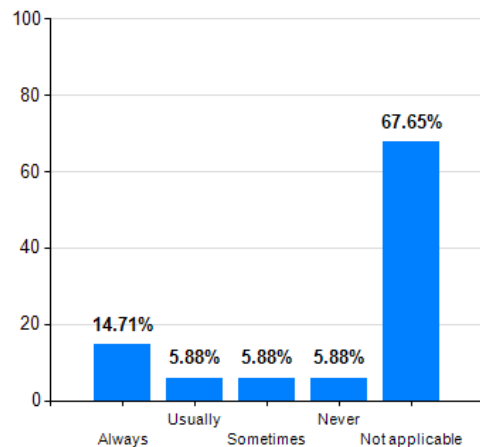
COMMUNICATION

All Wales Health Questionnaire

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



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



If I have needed anything, there has always been someone to help me. An extra blanket or an extra pillow has always been given to me if requested.



Meals and medication are always on schedule. Everybody has been very polite and kind.



I could have gone home some days if the staff here could not only get hold of the outside help and when they do there's one excuse after another; Example the OT said the Red Cross could help me but it turns out they can't. I've been held up for nearly a week very disappointed.



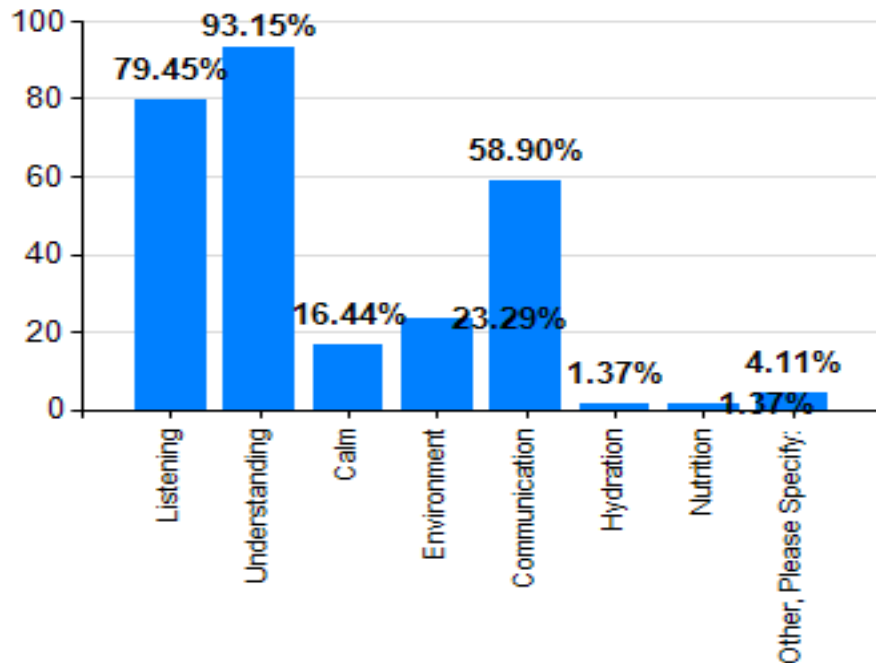
More information about my treatment would help.



Better communication, bottles to be given quicker when requested, more things to do during the afternoon, having different nurses with different routines during night shifts makes things difficult

COMMUNICATION COMPLIMENTS

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



I can't begin to put into words how much our telephone sessions over the last year have helped me change my attitude, my reactions, and my general outlook on life. I know you always say it's me who's done the work but without your help I wouldn't be the strong independent woman I am today.

They offered praise for the team and the specific clinicians mentioned above for all of their support. They commented that they received timely support and did not have to wait for an intervention. Clinicians went over and above to tailor the support to meet the client's and parents' needs. Parents felt well supported throughout even on the most challenging days.

Would like to say how quickly I have been put onto a treatment programme for my inflammatory arthritis. All relevant tests were done quickly and everything was well explained. Excellent service from the team of nurses who took the time to email me back promptly and offer empathy and support around my anxieties. Thank you all.

I was listened to, felt like I was important to my therapist. I never felt undervalued, or decisions or thoughts made for me. My therapist was patient, empathetic, and extremely professional. I couldn't have asked for better. First class service - would recommend it to all veterans who are struggling.

COMMUNICATION CONCERNS

During June and July **49 concerns** were received about communication.

Insufficient information was the main cause for concern; as well as difficulties in contacting staff, communication with the family, and involvement in care decisions.

25% of the concerns around insufficient information are not related to a specific profession, and are linked to our communication processes or systems. Typically, these complaints are around incorrect contact telephone numbers being provided, or patients being unable to reach a particular team. Withybush Occupational Health, Withybush ACDU, Breast Care and Trauma/ Orthopaedics were mentioned in this respect in June and July.

Medical and dental clinical staff were mentioned in 12 of the 49 concerns, which is the group of staff featuring most frequently in concerns around insufficient information. Some of these focus on the responsiveness of clinical staff, such as how quickly they follow up with notes to the GP/other services, or how effectively they provide updates to patients after agreeing to do so. There are also instances where people complain that they have been told incorrect information by the clinician. A common theme across many information-based complaints is the ease with which teams can be reached.

- ▶ *Some doctors did not have a good bedside manner and were completely thoughtless as to the patient, not taking into consideration the patient's mental state. When a patient knows they are terminal it is not required for a doctor to blurt this out and say it could be quicker than expected. No empathy from one doctor in particular. Unfortunately I do not have his name.*
- ▶ *I was not seen by the expected Consultant. My surgical notes and previous follow up appointment were not available to the Doctor that saw me, despite this appointment being booked weeks ago. I had to explain what operative procedure I previously had to the Doctor! This is dangerous and negligent practice. I am aghast that the Welsh Health Service doesn't yet have a modern central IT system so that patient's notes can be accessed from any hospital/ clinics.*

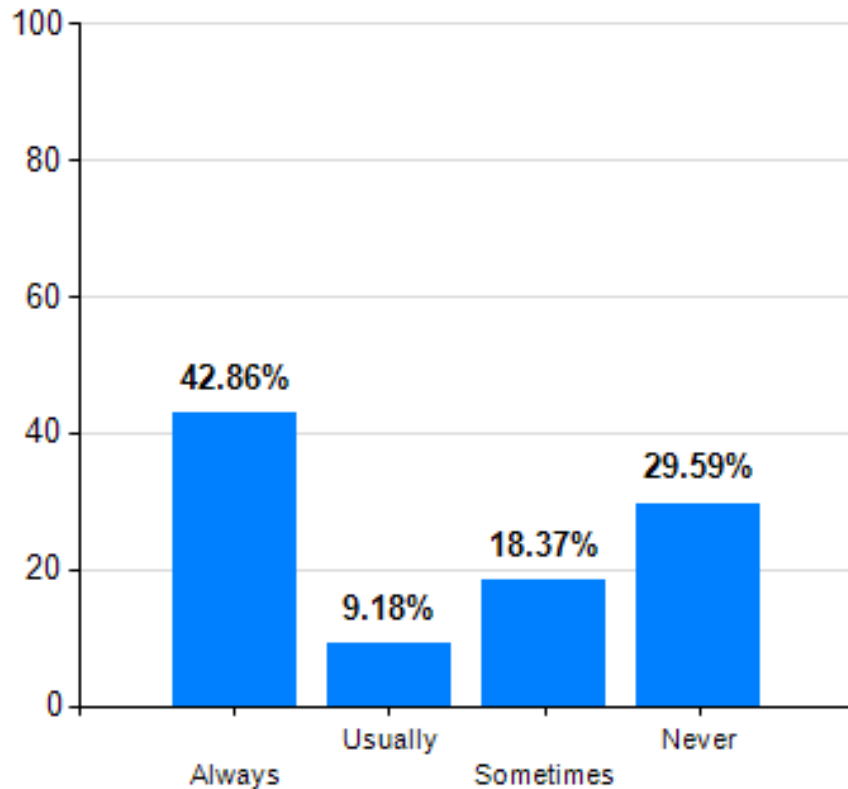
COMMUNICATION LESSONS LEARNED

YOU SAID	WE DID
Being able to speak to a care coordinator when needed is especially important for patients receiving the support of mental health services. The Health Board needs to be responsive when contacted across a range of communication methods, i.e phone, email and text.	We have implemented plans for when care coordinators are not available, such as when on leave or absent due to sickness etc. This includes appointing a deputy care coordinator so there is always someone available to speak to, and to ensure that there is continuity of care. Care coordinators have been allocated additional time so that they have sufficient opportunities to check and respond to messages from patients. Additionally, we have reviewed the wording around the availability of mental health services, to ensure that our patients know when they can reach us.
The miscommunication around our loved-one's cancer diagnosis was unacceptable. As a family, we were informed that there was an improvement when this was not the case. This left us devastated, as we felt that we had been given hope, when tragically there wasn't any.	We investigated the reasons for this sad miscommunication, and realised that it was attributed to a report not being available. This occurred because the signature of the consultant on the report was not easily legible, and the report went to the wrong person. In the future, the forms being used will be pre-printed with the consultant's name prior to clinic. The Lead Nurse is looking to widen this practice to other Oncologists, so that forms bearing the pre-printed name of the consultant become standard, so that other patients do not have a similar experience.

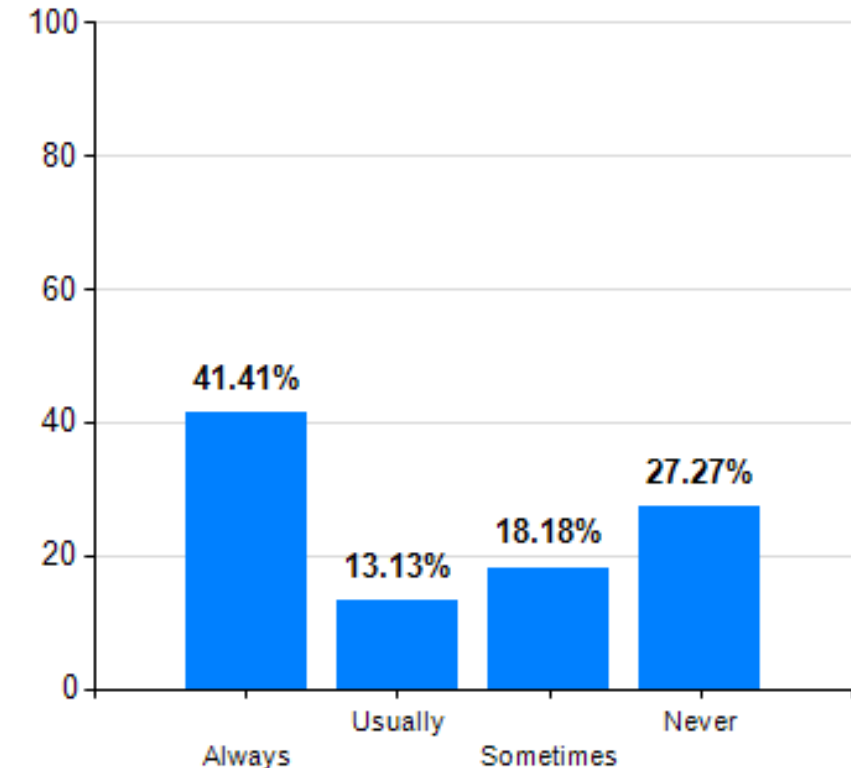
KEEPING PEOPLE INFORMED AND INVOLVED AND TAKING ACCOUNT OF THEIR WISHES AND NEEDS

All Wales Health Questionnaire

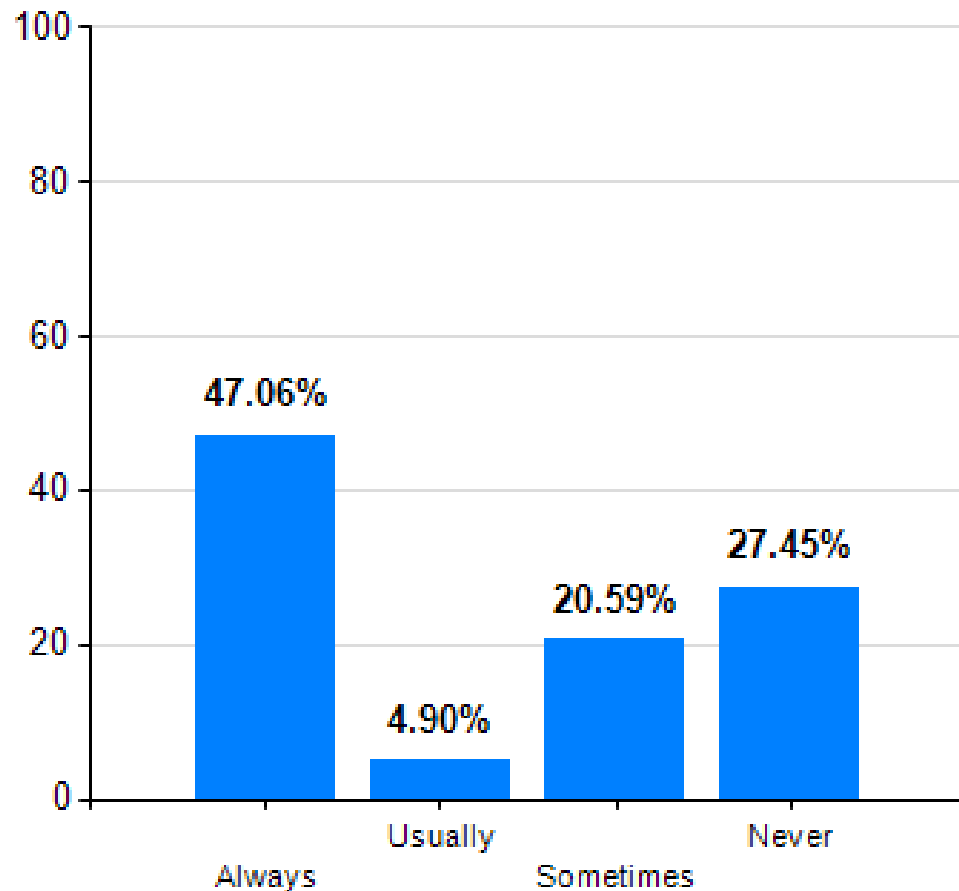
- Were you involved as much as you wanted to be in decisions about your care?



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



Did you feel that you were listened to?



➡ At the most the nursing staff are the best one food hope for helpful friendly did everything they could to help me through my depression periods in fact they alongside the surgeons help save my life read could hope for not food the hygiene well I've never seen anything like it spot on Can't thank everyone enough for what they have done for me.

➡ The family liaison officer was really nice, my dog had to be put down while I was in hospital and she sat and listened to me cry and wiped away my tears. Very grateful for the care and support she showed me.

➡ More visits from family would be better now restrictions have been lifted, staff are always very busy so have to wait quite a long time sometimes when ringing assistance bell, more staff would be helpful at times

ALISON'S STORY

Stories are one of the most powerful and beneficial ways of understanding how our services are being experienced and this will remain the key focus of the Patient Experience Team in supporting services to capture, share and ensure learning from these valuable accounts and personal experiences. The team is pleased to report that there is a significant increase in requests for support in capturing the voice of the patient.

The Patient Experience team continue to support teams to identify service users who are willing to share their stories with us. These stories will then be shared with services to help them better understand how to improve their experience.

This story is about the difference it makes for patients to have normality and a positive environment within a hospital setting. Alison was involved in an accident and spent time in the Heath Hospital and then repatriated back to Glangwili Hospital. She talks about the importance of creating a positive patient experience and how that promotes well-being and reassurance.

► [Alison's story - YouTube](#)

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

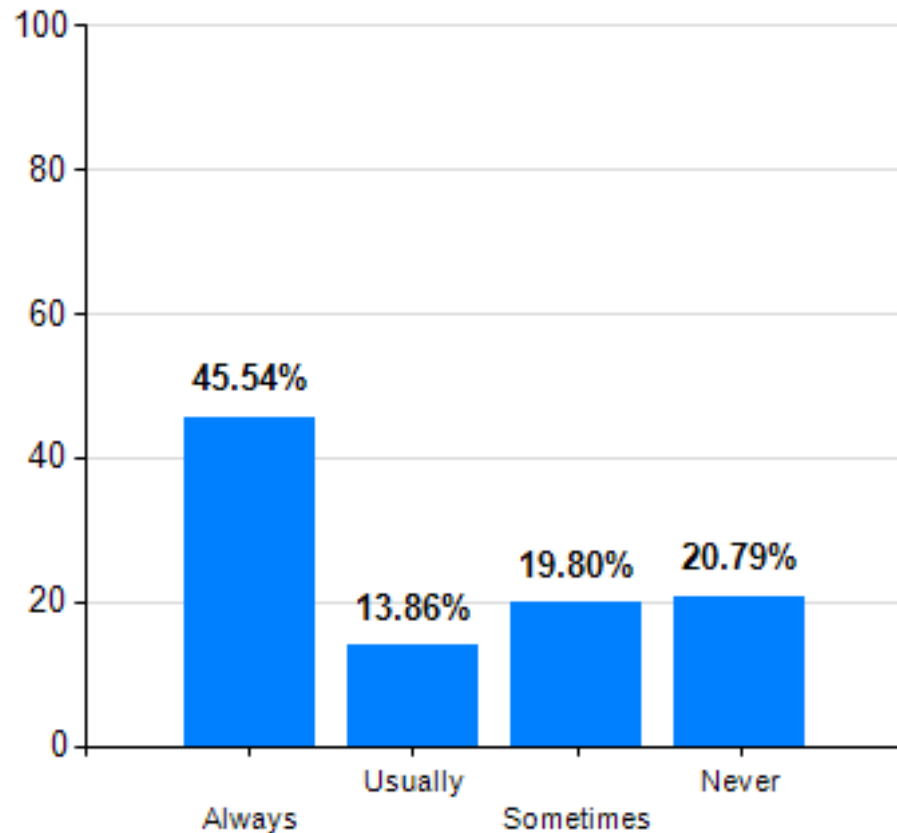
LESSONS LEARNED

YOU SAID	WE DID
Continuity of care needs to be better for young people as they move from the support of the Children and Adolescent Mental Health Service (CAMHS) to the support of the Adult Mental Health Team.	We have employed a transition nurse within the CAMHS service to ensure that we provide a seamless mental health support service for young people as they reach adulthood.
For those patients that are being cared for in hospital and that are approaching end of life, we should minimise unnecessary transfers between wards or hospital sites and respect the patient's wishes to remain on wards where they feel comfortable and familiar with the staff caring for them. Where decisions to transfer palliative patients are necessary, we should communicate this, along with the reasons, with the patient and their family.	We have recently appointed a new palliative Clinical Nurse Specialist and part of this role will involve training staff around end of life care. We have used an anonymised instance of when our communication with the family of a palliative patient could have been better, and used this in our training programmes to support staff.

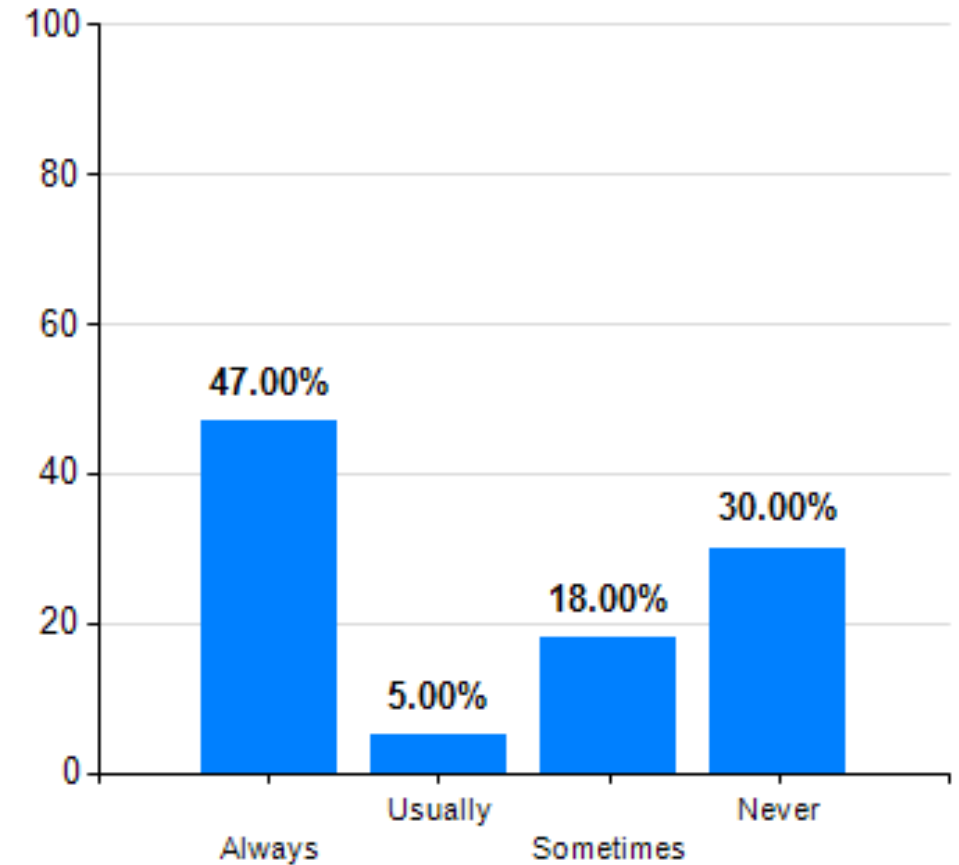
Safe and Effective Care, in an appropriate & Clean Environment

All Wales Health Questionnaire

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



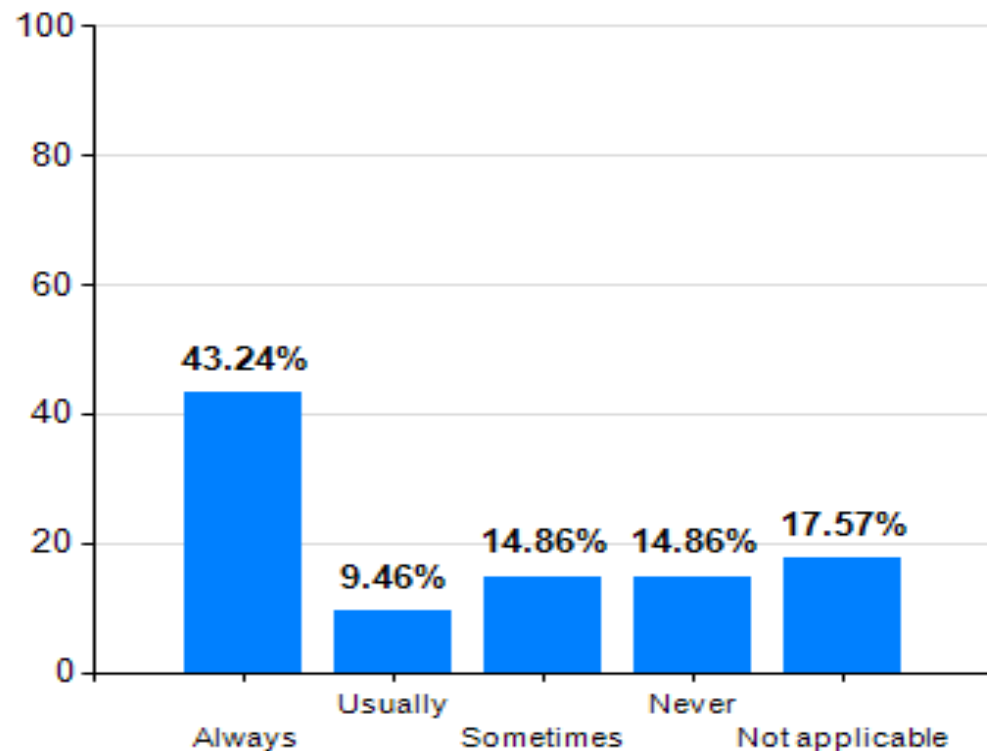
- Did you feel safe and well cared for?



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?



➡ Generally good and if I have needed anything, there has always been someone to help me. An extra blanket or an extra pillow has always been given to me if requested.

➡ Very impressed with FLO on the ward getting items and going beyond the call of duty, HCSW Collette so kind with helping in the shower. All staff on ward 12 are amazing.

➡ I am a type 2 diabetic, and I found it awkward that I was unable to calculate the carbohydrate levels of most of the in house cooked foods. No weights were provided, nor were there any carb levels. It makes life very difficult, not being able to work this out, and therefore work out how much insulin to take.

➡ More staff needed to assist with toilets.

Safe and Effective Care, in an appropriate & Clean Environment

COMPLIMENTS

Thank you so much for all the care and support you gave to my Father. Not only over the last number of months but also in his last days of life. I feel you were the only service that fully recognised Dads needs. I know you did everything you can to meet them. We were so reassured when he came into your care and support. Please accept my sincere thanks. You are amazing in what you do.

Everyone with in service provided as much help as possible. at times going above and beyond. especially the person who I mainly was seen by. whom provided me with support and helped me progress as a person. only other think is location of service is quite far from other areas and once or twice proved challenging to get to.

A big `Thank you` from the bottom of our hearts. All of the staff treated our Dad with so much kindness and care. The staff are so lovely and caring whenever I called or visited, the staff was always helpful and supportive. You are all doing an amazing job so thank you all for your hard work and the care you provided our Dad with.

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

- ▶ 103 concerns were received during June/July regarding clinical assessment/ treatment.
- ▶ 36 out of the 103 complaints have been looked into and responses provided. The remaining are being investigated.
- ▶ 36 of these concerns were about lack of treatment and 29 delay in receiving treatment
- ▶ 14 of the concerns were about a delay or missed diagnosis.
- ▶ The settings for the majority of these concerns were A&E; ophthalmology; urology and orthopaedic services. Lack of access to services related to GP services, medicine and neurophysiology in the main.
- ▶ There were 107 concerns received about appointments, including delays and cancellations. These occurred largely in outpatient settings for services of ophthalmology, gynaecology and orthopaedic services.

Safe and Effective Care, in an appropriate & Clean Environment

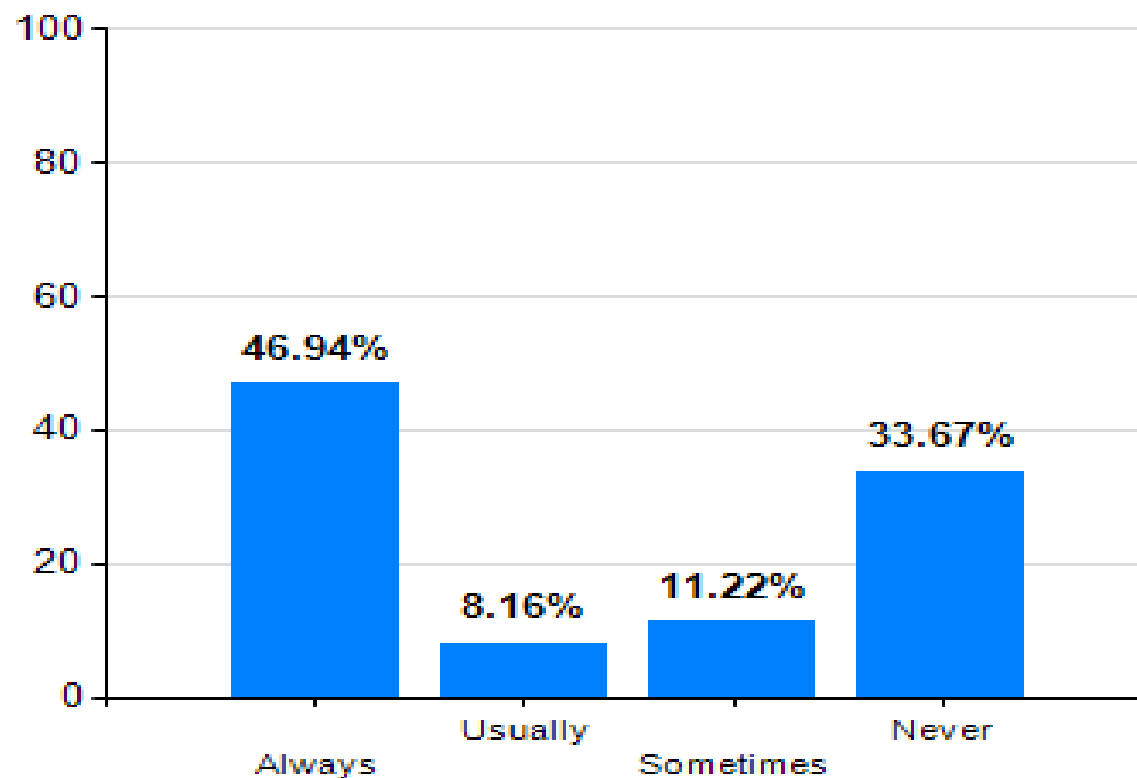
Lessons Learned

YOU SAID	WE DID
Why is it taking so long to get my Ophthalmology appointment, and why are they sometimes cancelled at such short notice?	We explained that, unfortunately, the Ophthalmology Department has experienced delays which have been caused by increased episodes of staff sickness and Covid-related isolation. This has meant that some clinics have been cancelled at very short notice. While we fully understand the frustration these delays cause, the situation is often outside of the department's control. Fortunately, we are now entering a period of recovery where clinical cover is becoming more stable and consistent. If patients think their condition is getting worse, we advise them to see their local Optician/Optometrists and if there is anything urgent, they will be treated or referred accordingly.
A patient asked us why an appointment to see the Neurology Department was taking so long, as he was experiencing problems with his balance and had been referred there by Ophthalmology.	Whilst we understood the patient's frustration at the delay in receiving an appointment to see a Neurologist, we explained that we are having to prioritise the most urgent patients. The longest wait for a routine Neurology appointment is currently 54 weeks, and we are treating routine patients in turn, so unfortunately many patients are experiencing an extended wait for an appointment. The service continues to work on solutions to manage the backlog caused by the pandemic, however this is expected to take a period of time.

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

- ▶ On arrival at reception advised where to go, where I was then greeted by the nurse and told to wait in the examination room. Didn't have to wait long for the consultant. This system is much better than the pre COVID system where sitting in a crowded areas can be very stressful. I have also found all the staff I have come in to contact with have been friendly and professional thank you.
- ▶ Very frustrated with not being able to make an appointment with the doctor for antibiotics. I was referred initially by the doctor surgery to the chemist which frankly was pointless and total waste of money as I had to re contact the surgery again but had another disappointing experience as whilst waiting approx 20 minutes for an answer explaining the situation that i was contacting them again to explain the exact situation but the receptionist simply hung up - very disappointing!
- ▶ All the staff from the domestic team/health care assistants to the qualified nurses, they all did a remarkable job both day and night. Nothing was too much trouble. I was confined to my bed, due to my admittance, I asked a HCA if she could give me a shave and she did it better than me. I actually got upset when I was discharged on my last day, as I grew fond of a few of the HCA's.
- ▶ No waiting, Pre-assessment really friendly staff. Then x-ray were brilliant. Fitted me in because I live an hour away and would have had to come back a second time. BUT it will take 2 weeks or more for x-ray results to reach my doctor and in the meantime I'm hobbling painfully around on a possible break in my ankle.

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
Total	78.7%	10.7%	488	287	97	42	27	25	10
Accident and Emergency Department	71.8%	18.4%	174	81	44	16	14	18	1
Adult Clinical Decisions Unit	100.0%	0.0%	5	5	0	0	0	0	0
Aneantatal Clinic	66.7%	0.0%	3	1	1	1	0	0	0
Child Health Department	100.0%	0.0%	1	0	1	0	0	0	0
Day Surgery Unit	60.0%	0.0%	5	3	0	2	0	0	0
Midwifery Led Unit	50.0%	0.0%	2	0	1	1	0	0	0
Occupational Therapy Department	80.0%	20.0%	5	2	2	0	1	0	0
Outpatient Department (A)	83.7%	6.0%	252	170	41	17	10	5	9
Physiotherapy Department	78.6%	10.7%	28	16	6	3	2	1	0
Puffin Ward	66.7%	0.0%	6	4	0	2	0	0	0
Ward 1	100.0%	0.0%	2	2	0	0	0	0	0
Ward 11	100.0%	0.0%	1	1	0	0	0	0	0
Ward 3	50.0%	50.0%	2	1	0	0	0	1	0
Ward 4	100.0%	0.0%	2	1	1	0	0	0	0

Glangwili

Sub Location	% Good	% Poor	Total Responses	Very good	Good	Neither good nor poor	Poor	Very poor	Don't Know
Total	80.1%	10.0%	698	427	132	54	32	38	15
Accident and Emergency Department	65.9%	20.5%	176	80	36	21	17	19	3
Ambulatory Care Unit	71.4%	14.3%	7	5	0	0	0	1	1
Cilgerran Ward	75.0%	0.0%	4	3	0	0	0	0	1
Cleddau Ward	80.0%	20.0%	5	4	0	0	0	1	0
Coronary Care Unit	100.0%	0.0%	6	5	1	0	0	0	0
Day Surgery Unit	100.0%	0.0%	12	10	2	0	0	0	0
Derwen Ward	81.0%	4.8%	21	12	5	3	0	1	0
Dinefwr Ward	0.0%	100.0%	1	0	0	0	1	0	0
Merlin Ward	63.6%	18.2%	11	4	3	2	2	0	0
Midwifery Led Unit	100.0%	0.0%	2	2	0	0	0	0	0
Morlais Ward	0.0%	100.0%	1	0	0	0	0	1	0
Outpatient Department (Blue)	86.6%	6.0%	419	283	80	22	11	14	9
Padarn Ward	50.0%	0.0%	2	1	0	1	0	0	0
Physiotherapy Department	85.7%	14.3%	7	5	1	0	1	0	0
Picton Ward	72.7%	9.1%	11	6	2	2	0	1	0
Steffan Ward	100.0%	0.0%	1	1	0	0	0	0	0
Surgical Assessment Unit	100.0%	0.0%	2	2	0	0	0	0	0
Teifi Ward	0.0%	0.0%	1	0	0	1	0	0	0
Tysul Ward	66.7%	0.0%	9	4	2	2	0	0	1

Bronglais

Sub Location	% Good	% Poor	Total Responses	Very good	Good	Neither good nor poor	Poor	Very poor	Don't Know
Total	85.9%	7.3%	341	226	67	19	10	15	4
Accident and Emergency Department	75.0%	14.0%	136	76	26	13	7	12	2
Angharad Ward	100.0%	0.0%	2	2	0	0	0	0	0
Antenatal Department	100.0%	0.0%	4	4	0	0	0	0	0
Ceredig Ward	71.4%	14.3%	7	4	1	1	1	0	0
Clinical Decisions Unit (Green)	100.0%	0.0%	8	5	3	0	0	0	0
Day Surgery Unit	100.0%	0.0%	10	9	1	0	0	0	0
Dyfi 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
Meurig Ward	100.0%	0.0%	2	2	0	0	0	0	0
Outpatient Department	92.8%	2.9%	138	100	28	4	2	2	2
Paediatric Ambulatory Care Unit	100.0%	0.0%	1	1	0	0	0	0	0
Physiotherapy Department	90.9%	4.5%	22	14	6	1	0	1	0
Rhiannon Ward	100.0%	0.0%	6	6	0	0	0	0	0
Y Banwy Unit	100.0%	0.0%	1	0	1	0	0	0	0

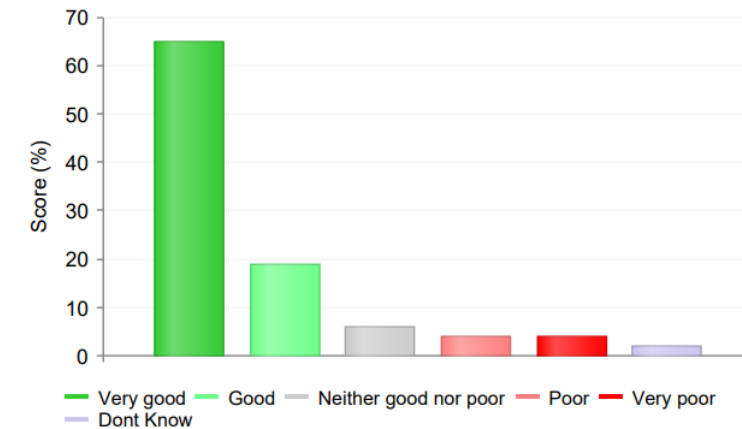
Prince Philip

Sub Location	% Good	% Poor	Total Responses	Very good	Good	Neither good nor poor	Poor	Very poor	Don't Know
Total	87.2%	7.0%	616	425	112	27	24	19	9
Acute Medical Assessment Unit	81.8%	18.2%	11	6	3	0	1	1	0
Minor Injuries Unit	80.7%	12.0%	150	86	35	9	10	8	2
Outpatient Department	88.9%	5.7%	369	271	57	14	12	9	6
Physiotherapy Department	87.8%	4.9%	41	28	8	3	1	1	0
Rheumatology Department	80.0%	0.0%	5	4	0	1	0	0	0
Ward 1	100.0%	0.0%	1	1	0	0	0	0	0
Ward 3	100.0%	0.0%	1	0	1	0	0	0	0
Ward 4	100.0%	0.0%	1	1	0	0	0	0	0
Ward 5	100.0%	0.0%	2	1	1	0	0	0	0
Ward 6	100.0%	0.0%	14	10	4	0	0	0	0
Ward 7	95.2%	0.0%	21	17	3	0	0	0	1

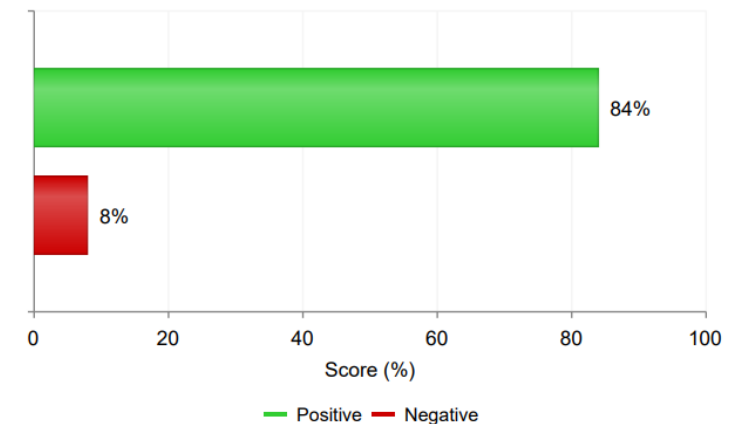
Friends and Family Test by Hospital

Patient Type	% Good	% Poor	Total Responses	Very good	Good	Neither good nor poor	Poor	Very poor	Don't Know
Total	84.2%	7.7%	3528	2292	679	219	135	135	68
Day Case	92.6%	0.0%	27	22	3	2	0	0	0
Emergency Patient	76.2%	14.3%	755	414	161	62	48	60	10
Inpatient	84.4%	5.8%	173	114	32	14	4	6	3
Maternity Inpatient	75.0%	25.0%	4	3	0	0	1	0	0
Maternity Outpatient	80.0%	0.0%	10	5	3	2	0	0	0
Mental Health Inpatient	0.0%	100.0%	1	0	0	0	0	1	0
Mental Health Outpatient	58.3%	8.3%	12	6	1	2	1	0	2
Other	100.0%	0.0%	3	3	0	0	0	0	0
Outpatient	86.9%	6.0%	1355	936	242	69	44	37	27
Paediatric Inpatient	85.7%	0.0%	7	6	0	0	0	0	1
Unmapped	86.4%	5.8%	1181	783	237	68	37	31	25

Patient Feedback Responses
Health Board Wide - Jun-2022 to Jul-2022



Patient Feedback Score
Health Board Wide - Jun-2022 to Jul-2022



Paediatric Surveys

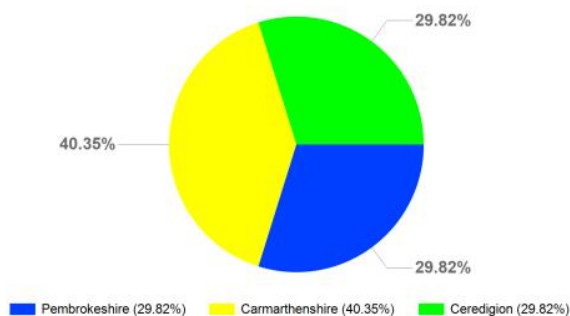


- ▶ During the months of June and July 2022, During the months of June and July 2022, the number for each of the paediatric questionnaires have decreased slightly to 97 with 57 responses in parents/carer/ relatives' survey: 22 responses in the 12 to 16-year-old survey and 18 responses in 4- to 11-year-old survey.
- ▶ The drop in responses are due to the Patient Experience resource being allocated to support a service change in the Women's and Children service .

The details below show feedback by county.

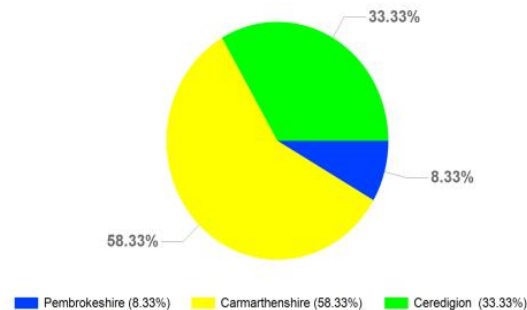
Parents and carers

Available Answers	Responses	Score (%)
Pembrokeshire	17	29.82%
Carmarthenshire	23	40.35%
Ceredigion	17	29.82%
Total	57	100%



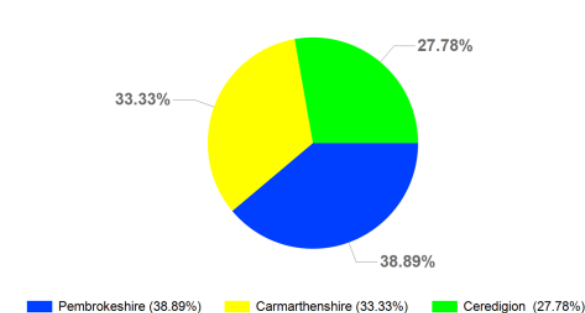
Childrens survey aged 4-11 years

Available Answers	Responses	Score (%)
Pembrokeshire	1	8.33%
Carmarthenshire	7	58.33%
Ceredigion	4	33.33%
Total	12	100%



11 years and upward

Available Answers	Responses	Score (%)
Pembrokeshire	7	38.89%
Carmarthenshire	6	33.33%
Ceredigion	5	27.78%
Total	18	100%



Paediatric Surveys



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

"The nurses were kind and friendly.
Thank you for the care and the Lego" –
**Angharad Ward, Bronglais General
Hospital**

From 4 to 11 year old survey

Kind, friendly, listened and questions
answered. Grateful for bed and sleep and
food, so I don't have to leave my young
baby" – **Cilgerran Ward, Glangwili
General Hospital.**

From Parents / Carers / Relatives Survey

Play staff have been very helpful with finding
things for my daughter to do during out stay.
Nursing staff and doctors on ward who have
looked after my daughter have been very
helpful and have been brilliant." – **Cilgerran
Ward, Glangwili General Hospital.**

From Parents / Carers / Relatives survey

"They were all explaining in a way I
understand and made sure I felt part
of decisions" – **Cilgerran Ward,
Glangwili General Hospital**

From 11 years and above survey

"Hand-made banners, presents and
party held for the patient was
amazing, so much thought and extra
went into patient's birthday, thank
you! Ward is a credit to this hospital!
:)" – **Cilgerran Ward , Glangwili
General Hospital**

*From Parents / Carers/ Relatives
survey*

ARTS IN HEALTH

A pilot programme of live Music in all 4 ITU 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”
- ▶ “gentle soft music which felt comforting and upbeat, which brought a smile on patients face, tapping feet and clapping to the music”
- ▶ “felt it really helped staff and patients mental health”

Arts & Palliative Care

- ▶ More live music has been shared with patients at Ty Bryngwyn Palliative care - plans for longer terms programmes are being explored.

Weekly Arts in health sessions for Ukrainian refugees, led by Arts4Wellbeing have continued throughout the Summer.





A partnership project with Ceredigion Palliative Care team took place consisting of a Welsh language Panel discussion about living and dying well and the role of the arts. We also held Tregaron Palliative Care Sock challenge 2022 - an invitation to staff and communities to knit a sock based on the tradition of death sock knitting in Tregaron to open up conversations about death and dying with the public.

“It was lovely to take part in such an important discussion”

“Well, a lot of nerves trying to discuss difficult topics but we had a very interesting conversation this afternoon.”

- We had a seated dance activity with Arts Care Gofal and Consultation and children’s arts activities outside the Hywel Dda Tent with Art therapy and Haul, arts for health Ceredigion.

