



CYFARFOD BWRDD PRIFYSGOL IECHYD UNIVERSITY HEALTH BOARD MEETING

DYDDIAD Y CYFARFOD: DATE OF MEETING:	27 July 2023
TEITL YR ADRODDIAD: TITLE OF REPORT:	Improving Service User 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 months of April and May 2023.

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 April to 31 May 2023 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'.

We continue to progress the roll out of the Civica patient experience to all areas of the Health Board. Currently we are working to improve feedback rates within Mental Health and Learning Disability Services as well as Community and Primary Care.

Work is being undertaken across NHS Wales as part of the Once for Wales programme to support improved reporting and data analysis of concerns data, through the Datix and Civica systems. Internally to the Health Board we are looking at how we improve the triangulation of data to support the quality management system.

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 103 compliments and 82 'Big Thank You' nominations were received. 5402 patients left feedback on our Friends and Family system with 95.1% of responders leaving a positive recommendation. This is particularly notable in the area of Emergency Care, where a score of 93% was received.

243 patients completed the All-Wales Patient Experience Questionnaire; the overall patient experience score provided from these surveys returned over 80% positive rating, the average score for 2021/22 being 92%. The feedback for each area will be reviewed at regular intervals to identify potential causes for the reduction.

353 complaints/concerns (previous period 416) were received by the Patient Support Services Team, 90 were responded to as early resolution cases. 260 required investigation under the putting things right complaint process. 67% of the cases received were responded to within 30 working days. The implementation of the revised toolkit is ongoing.

Concerns around clinical assessment and treatment continues to be a prominent theme, including delays in diagnosis. Communication issues: appointments and waiting times also remain within the main reasons for concerns.

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

Five new investigations were commenced by the Public Services Ombudsman for Wales and four early resolutions. One final report was received, which was partly upheld. This was presented to the Listening and Learning Sub-Committee earlier this month.

A progress report has been provided on our duty of candour and quality implementation. Whilst good progress has been made in relation to the training, further support is required. It is identified that out of 22 cases that had triggered the duty of candour, 4 had complied with the requirements of the duty. This is being closely monitored by the Quality and Engagement Act internal Implementation Group.

The Arts and Health Team continue to make significant progress and embedding the arts into health care provision and promotion of staff wellbeing. The dose of Art project, utilising the plastic vials from the vaccination centres during covid, was launched at the Senedd on 5 July. This was very well received. The art will be installed at our various health care facilities from September. The Arts and Health Charter will be presented to the Board for approval in the autumn.

Argymhelliad / Recommendation

The Board is asked to **NOTE** the Improving Service User Experience report, which highlights to patients and to the public the main themes arising from patient/service user feedback.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol:
Datix Risk Register Reference and Score:

Risk 581 Health Board wide risk of not learning from events in a timely manner (current score 8).

Parthau Ansawdd:
Domains of Quality

7. All apply

Quality and Engagement Act (sharepoint.com)	
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	4. Learning, improvement and research 1. Leadership
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 2021-2022	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 Termau: 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 SERVICE USER EXPERIENCE REPORT

April 2023 – May 2023



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 areas for improvement, 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. Our Listening and Learning Sub-Committee receives feedback from across concerns, compliments and experience.

The report also provides an update on implementation of the new Duty of Candour and Duty of Quality.

We are also pleased to share the excellent work being undertaken by the arts and health team who are making a positive difference to patients, staff and our communities through use of the arts.

Service User Feedback at a Glance

April 2023- May 2023

- ▶ **103 Compliments** were recorded by staff on the patient experience system which is a 10% increase from the previous report. These compliments are received from patient, families and carers direct to the service or the Corporate Office. Respect, kindness and compassion are the terms most often mentioned. The patient experience team are visiting all wards and departments to ensure compliment capture posters are visitable and staff are aware how to record their compliments in real time.
- ▶ **82 Big Thank (TBTY) you nominations for our staff** were received from our patients or their families which was an increase of 43% from last report. Further details are provided later in the report. Hywel's Applause - Staff Awards have been promoting TBTY in order to capture the voice of the patient in acknowledging the positive impact a team or individual has had on them.
- ▶ **23,738 Individuals received our friends and family patient experience survey. 5402 people responded** to this and is in line with nationally reported response figures. 95.1% of responders provided a positive rating and would recommend the services of the Health Board to their friends and family this is a 0.3 % improvement on the previous report. Staff attitude, care and treatment are the areas receiving positive feedback. All acute sites have improved their overall positive feedback ratings.
- ▶ **243 Service users completed the Your NHS Wales Experience** survey Over 80 % of the responders provided a positive score when asked 'how would you rate your overall experience of using the services of Hywel Dda University Health Board'.

Complaints & Concerns at a Glance - April 2023/ May 2023

- ▶ 353 complaints were received, of which:
- ▶ 90 were managed as an early resolution case (within two working days).
- ▶ 260 cases proceeded to complaints investigation under the 'Putting Things Right' Regulations. The number received for April and May represents a decrease of 50 from the previous two-month period.
- ▶ 3 complaints were reopened in April and May. Complaints are 'reopened' when the complainant feels the response has not addressed the concerns they have raised, and the Health Board considers that further engagement may yet have the potential to resolve the issues.
- ▶ On review of initial grading, there are 3 Grade 5 (serious harm/death) and 2 Grade 4's were received during the period. The number of Grade 5 represents a decrease in 1 from the previous two-month period. Upon completion of investigations, most grade 5 and 4 complaints are re-graded according to the outcome on the individual, as less severe. As demonstrated in our quarter 4 Welsh Government submission, there were 0 grade 3, 4 or 5 (moderate harm or above) concerns reported following final investigation.
- ▶ 415 enquiries were received for the two month period, a decrease of 180 on the preceding period. 436 enquiries were closed. The most prominent themes of enquiry are around appointments, treatment and communication issues.

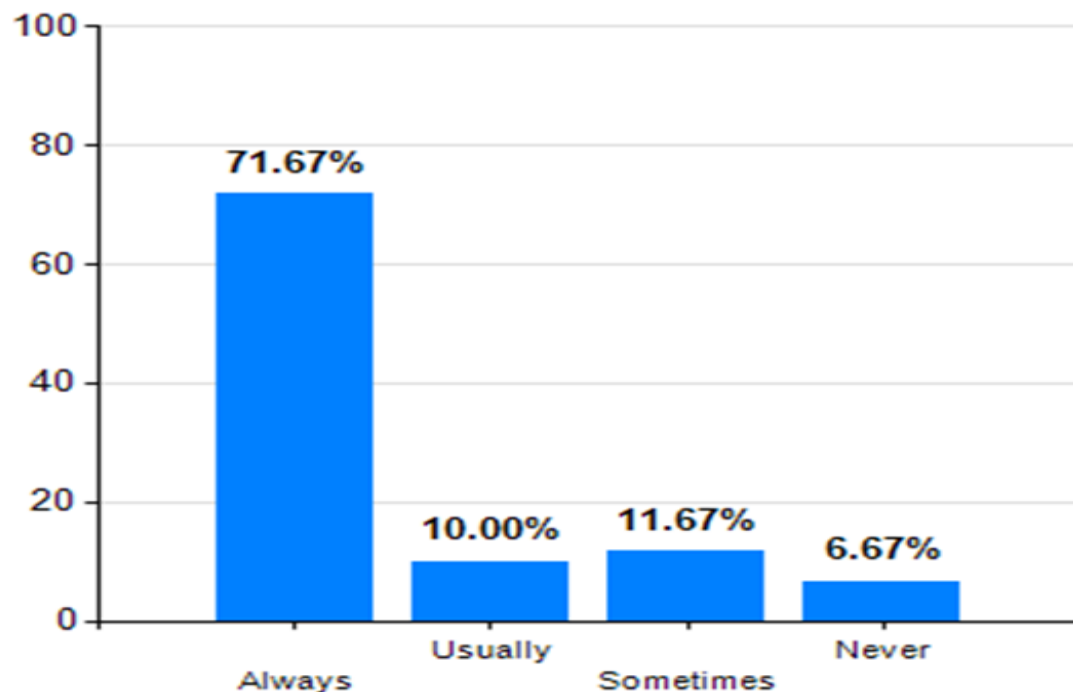
Closed complaints:

- ▶ 355 cases that were managed through the Putting Things Right complaints process were closed in April and May. Of these, 237 were closed within 30 working days. This means 67% of the complaints received during these two months were closed within 30 working days, showing a small yet continued improvement through the course of the year. We are striving hard to improve upon this and ensure that the totality of our complaints are all resolved within 6 months.
- ▶ Of the complaints closed in April and May, 276 were not upheld, though this does not prevent us from taking the opportunity to learn from all aspects of feedback we receive. As anticipated, the removal of the partially upheld category from the all Wales electronic complaints system, has resulted in a higher proportion of upheld complaints. However, the outcome grading will be used to reflect the severity of the issues. The only codes now in use are upheld, not upheld and withdrawn (by the person raising the concern).
- ▶ Clinical treatment and assessment continue to be a prominent theme, representing 34% of all new concerns in the period. The next most prevalent theme is appointments at 17%. 11% of concerns in the period are linked to communication and 9% staff attitude and behaviour. This represents an improvement as communication and staff attitude in the previous period accounted for 23% of concerns.
- ▶ There were 5 new investigations commenced by the PSOW. 1 final report was received for the HB, this being partly upheld. There were also 4 early resolution agreements. The key learning from the final report was in relation to the monitoring of a patient's arterial cannula which fell short of the expected requirements. Whilst the PSOW did not find that the shortcomings in monitoring had an adverse impact on the patient outcome, it was considered likely that they resulted in distress and anxiety to the patient and family. The lessons learnt from these reports and progress with the action plans are considered by the Listening & Learning Sub-Committee.
- ▶ One final report was received relating to a GP practice (independent). The themes of this case were in relation to a request for disclosure of clinical records, where the Practice failed to provide clear, consistent information and failed to maintain an accurate record of its handling of the information request. Also that a third party entry recorded in the patient's clinical records was not done so in line with the Practice's relevant guidance. Finally the decision to de-register the patient was not done in accordance with recognised best practice.

DIGNITY, RESPECT AND KINDNESS

Your NHS Wales Experience survey

➤ I am treated with Dignity, Respect and Kindness?



There has been an decrease in performance for this measure compared to the previous period due to 6.67% of responses stating they are never treated with dignity, respect and kindness compared to 4.78% on last period.

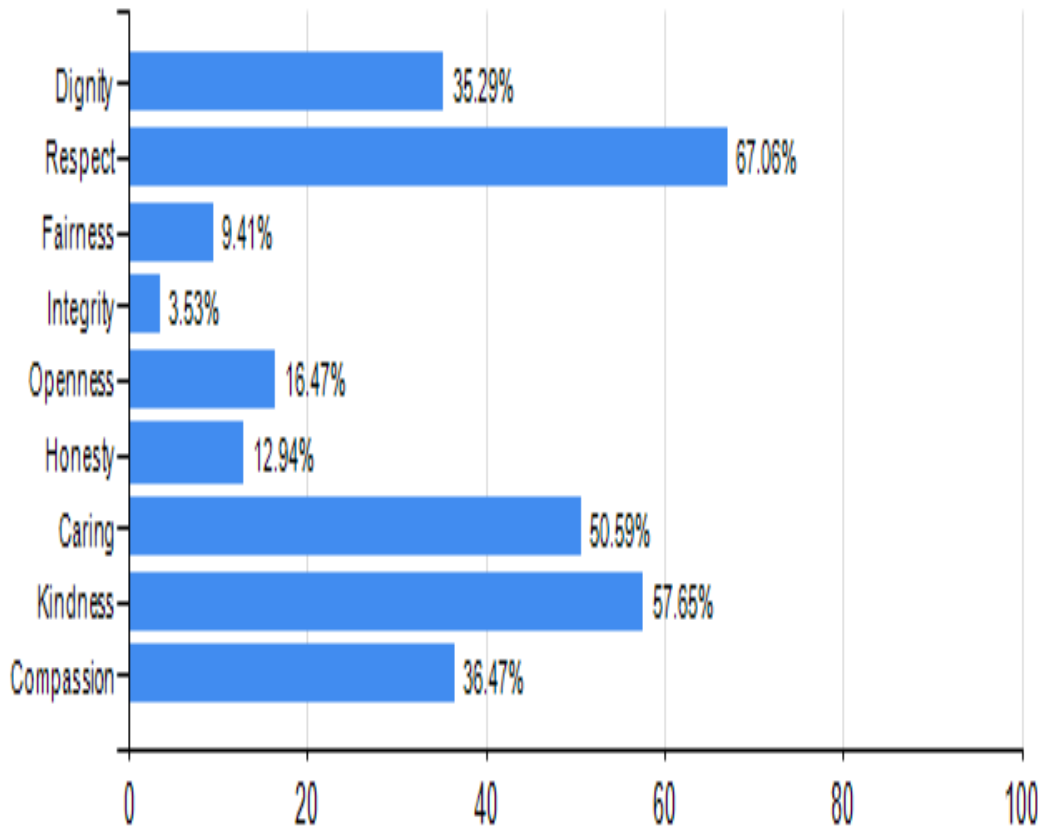
➡ I was very well looked after throughout my visit for Cataract Operation. The cup of coffee and biscuits afterwards was much appreciated. Diolch yn Fawr. Many thanks indeed.

➡ I have had several procedures leading up to my prostate cancer diagnosis. Each visit was a good experience for the standard of care I received. The last meeting with a Urology Consultant was very good, he explained all I needed to know on the way forward.

➡ I told Doctors that my operation did not go well but they NEVER once responded to that question. I did every thing in my power to help myself but I know something is not right and I cannot get anyone to listen to me.

DIGNITY, RESPECT AND KINDNESS - COMPLIMENTS

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



I arrived in hospital by ambulance not understanding what was happening to me. Once I was assessed and they explained what was wrong with me I soon became aware I was in the right place and in good hands.

My admiration for all the Nursing Staff, Doctors, and Surgeons knows no bounds.

I'd particularly like to mention Specialist who's empathy and professionalism reassured me everything would be fine. My thanks to everyone involved in my care.



The Nurse and HCSW were both exceptional and couldn't do any more for my son, the nurse was very comforting and explained everything very carefully to me 3 year old. I appreciated the calmness of them both.



Offering to help without being too condescending which can happen when in a wheelchair. Everything was explained to me clearly and loudly as I'm deaf, even more so once I'd removed my hearing aids, even once I said that I trying to lip read he tried to speak more clearly

DIGNITY, RESPECT AND KINDNESS CONCERNS

- ▶ During April and May, **25** new complaints were received relating to attitude and behaviour of staff, a decrease of 22 on the previous period. These concerns range across services. The services to receive more than two complaints of this kind were Accident & Emergency, Breast Care, Ophthalmology and Gynaecology.
- ▶ Where we receive concerns pertaining to issues of dignity, respect and kindness, we generally see a range of linked themes occurring. However, in this period we noted that there were **2** complaints around privacy and dignity. There were **4** concerns around patient care, especially around responding to patient needs.
- ▶ The attitude and behaviour of medical staff generated **7** complaints in this period.

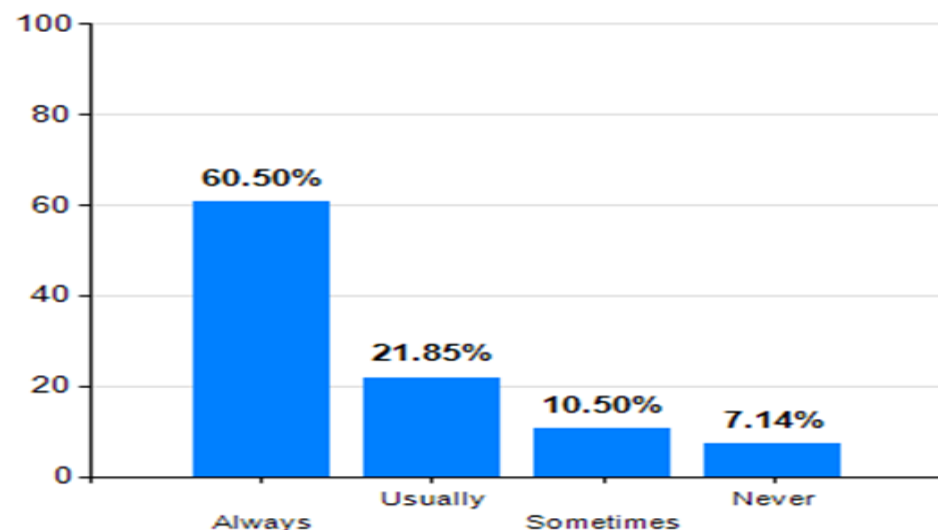
DIGNITY, RESPECT AND KINDNESS

LESSONS LEARNED

You Said	We Did
<p>Patients attending A&E departments may face a long wait, they need to be offered food and drink during their attendance.</p>	<p>There is water, tea and coffee available in our A&E departments and we always try to keep our patients as comfortable as possible.</p>
<p>I was personally reliant on a disabled family member to bring me a drink as vending machines were out of order.</p>	<p>However, the Senior Nurse Manager is working with the Nutrition Strategic Lead and undertaking a review with the aim of to improving the provision of food and drink in the department.</p>
<p>Going through a recent termination of my pregnancy was an incredibly difficult time, and I felt that staff left me waiting, unprepared and unthoughtful actions made the process more upsetting.</p>	<p>Study sessions are being prepared for all new members of staff in order to equip them with the knowledge and skills required to manage and care for women going through such a sensitive procedure.</p>

Your NHS Wales Experience survey - COMMUNICATION

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



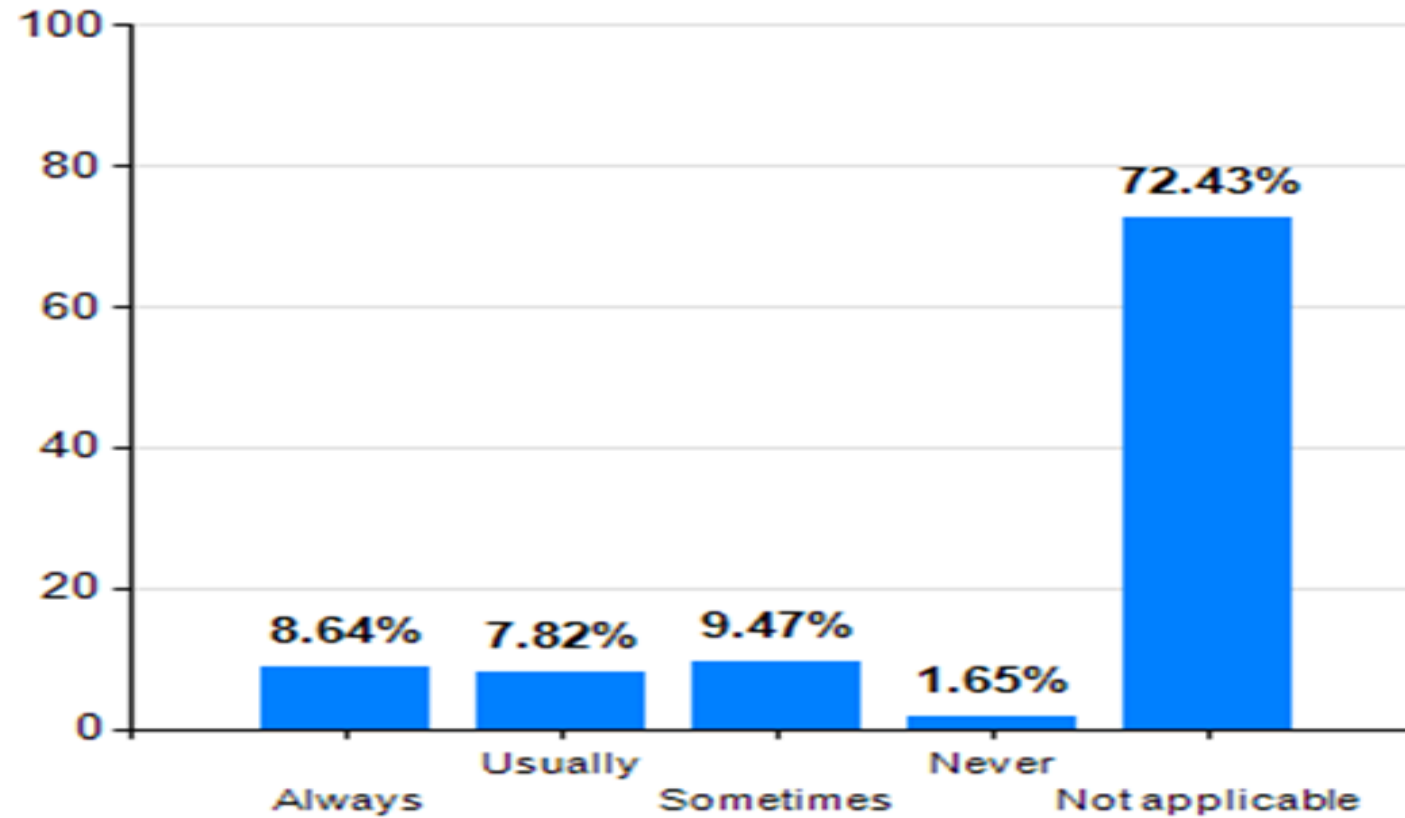
There has been an decrease in performance in this measure compared previous period due to an increase of 1.52% of responses stating that things were never explained. Unfortunately the individuals did not leave further comments for us for us to review the data further; however feedback is provided generally to the services involved.

➡ When I was in front of the x-ray machine and he came an poked me sharply in the back on my right shoulder and shouted keep this shoulder closer. I took a deep breath and did this. I wear hearing aids and would have heard him if he would have asked me from where he was standing. I got dressed shortly afterwards and remember him forcing me out of the room into another room , leaving me confused and unable to find the button for the door. I have Aspergers.

➡ Jody Mainwaring the nurse was outstanding in caring for me all day. The consultant I saw spoke clearly and made sure I understood everything he said. He included me in the decisions and the care I was given was outstanding.

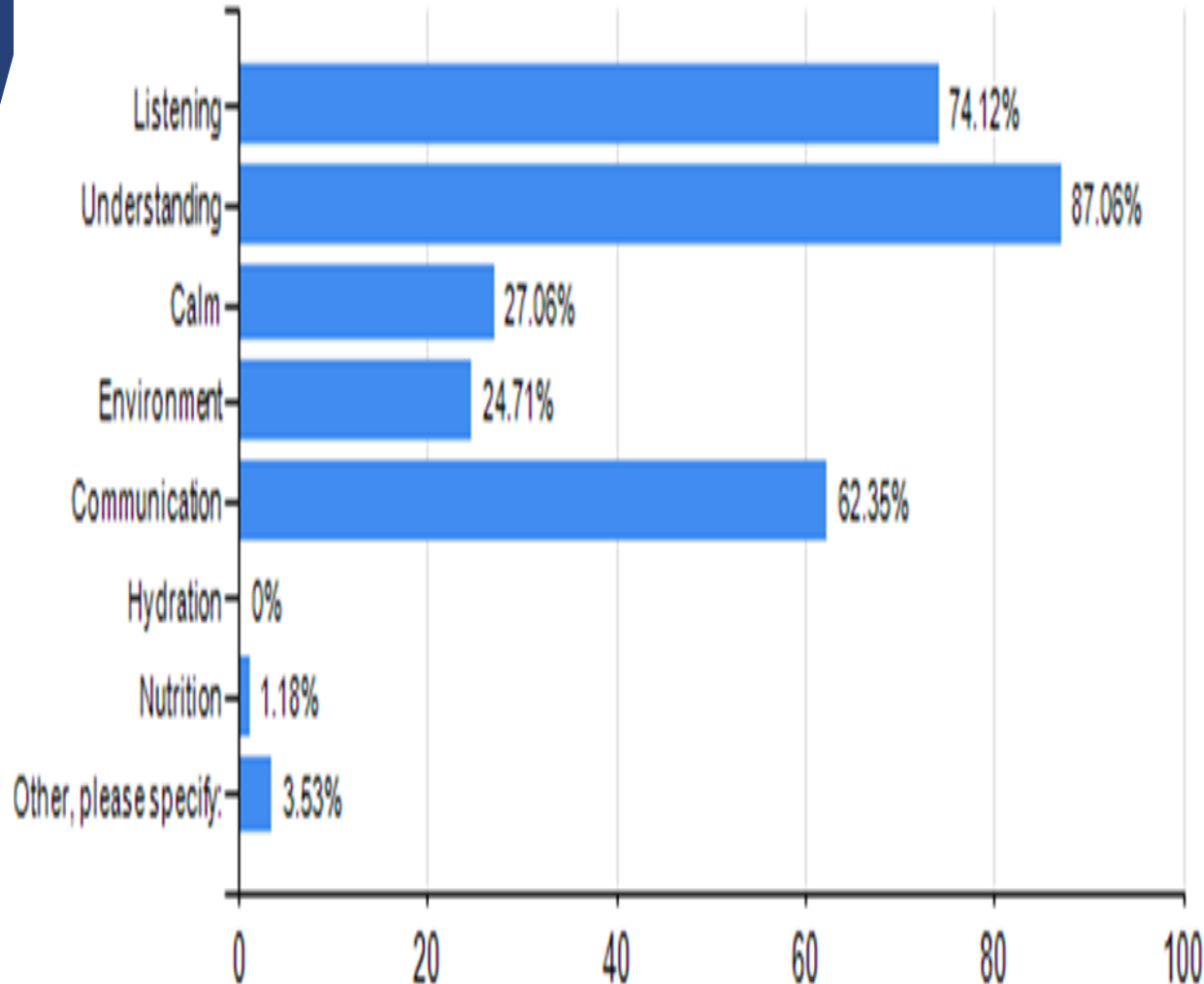
Your NHS Wales Experience survey - COMMUNICATION

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



COMPLIMENTS - COMMUNICATION

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



→ The nurse who was called Angela and another called Donna were especially lovely they explained everything and nothing was to much trouble for them, made my experience much more relaxing as I was very nervous.

→ When I eventually got my operation my care could not be improved. Every member of staff I met at any level were exemplary. I got to know staff nurse Caroline and student Anne Marie most and they made my stay fun. Nothing was ever too much to ask, often what I needed was done even before I asked. I cannot express my gratitude enough. From the ladies making cups of tea remembering how I drink my tea to the fantastic consultant and brilliant registrar. Thank you

COMMUNICATION CONCERNS

- During February and March, **50** concerns were received about communication, which is consistent with the previous period (51). **36** of these are closed and **14** are still under investigation.
- The main themes of concerns linked to communication are around the standard of our communication with patients and their families, which represents 74% in this area.
- **10%** of concerns linked to communication in this period are due to insufficient or incorrect information being given to patients or families.
- Communication is recognised as a widespread challenge and remains one of the top four prominent themes in complaints across the Health Board.
- The Health Board's A meeting of the Listening and Learning Sub-Committee was held on 8th March to review all feedback relating to communication and discuss ways in which this area can be improved upon. The positive feedback received about the Health Board's Making A Difference Communication/ Customer Care Training was appreciated. Further work around communication amongst teams, particularly where there is shared care across different specialties is planned with support from the Quality Improvement Team.

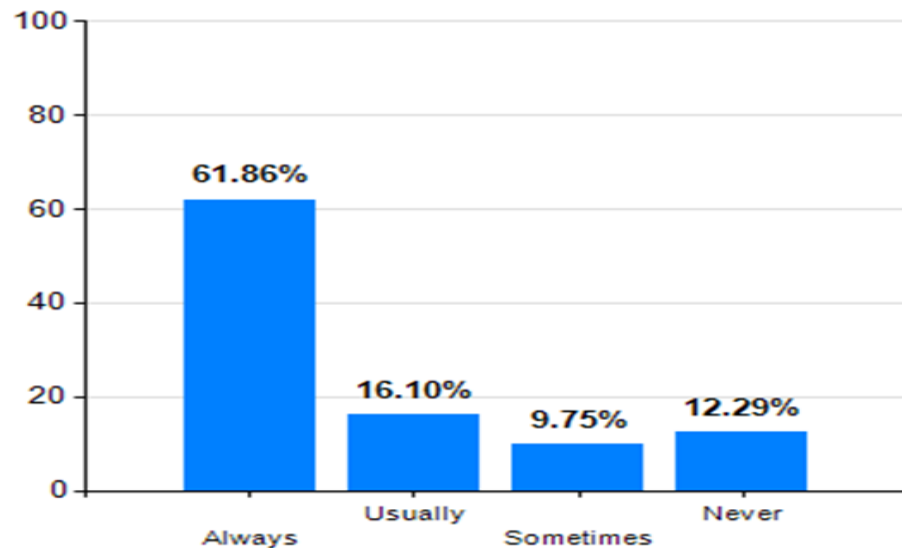
COMMUNICATION LESSONS LEARNED

You Said	We Did
You wrote to me to advise me that I should be mindful of my conduct when engaging with Health Board staff. I disagreed with your version of events, and yet it wasn't made clear to me how I could communicate this , or make an appeal.	We reviewed your concerns and in conjunction with our Patient Support Services and Health and Safety Committee, have approved a process for allowing people to appeal against instances where we feel their conduct needs bringing to their own attention.
I was not informed that my mother's condition was deteriorating and as a result of this poor communication, I missed an opportunity to spend some final moments with her,	<p>The staff involved have been asked to conduct reflective learning opportunities and our practice development nurses are delivering training around the importance of good record keeping.</p> <p>Good communication remains high on the agenda for the Health Board, and is being addressed through corporate training projects – our 'managing better' initiative, as well as locally by team managers.</p>

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

Your NHS Wales Experience survey

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



During the period there has been an 1.78% increase performance in this measure compared previous period due to of responses where 60.08% of responses said they were involved in their decisions in care.



The doctor and nurses where very good at what they do, and explain everything to me before the op and after.

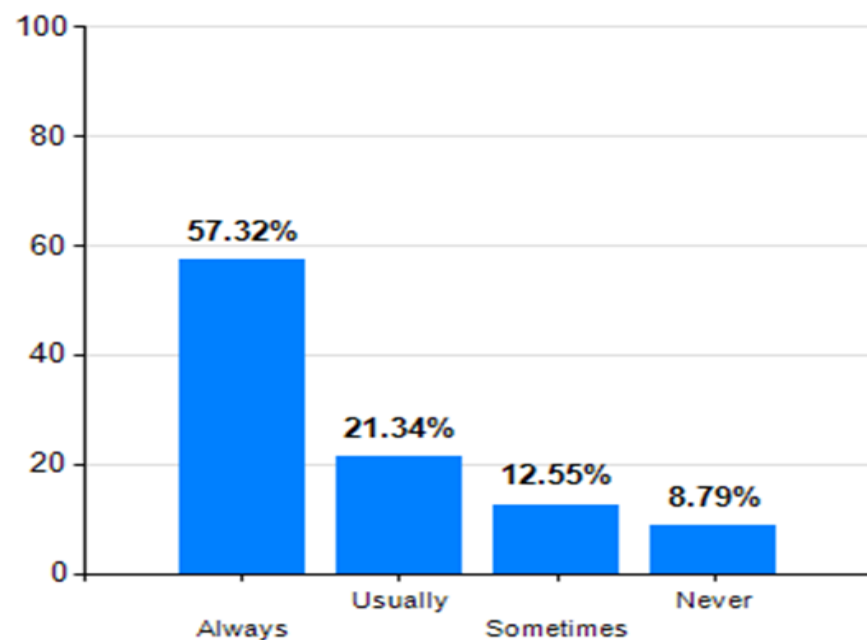


Despite A&E triage nurse asking if I would like pain relief this was not administered, despite 3 separate requests over 2.5hrs. Temp 36.8 with suspected perforated appendix/diverticulitis diagnosed initially. - It became apparent, following several queries from different nurses following the above, that my notes/file had probably been lost which I believe increased the length of time I was in extreme pain and without assistance. I felt that no "ownership" had been taken of me at this time.

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

Your NHS Wales Experience survey

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



There has been a decrease of 1.31% compared to the last period. However there has been a 2.84 % increase people responding with usually giving an overall improvement.



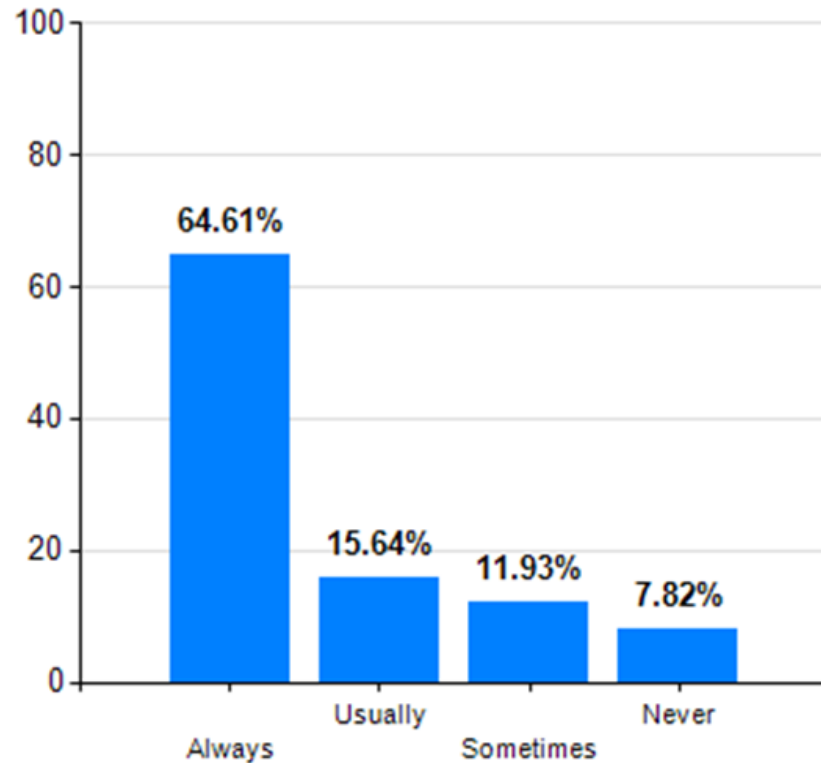
They explained the procedure fully and asked all the relevant questions. They constantly checked to see that I was comfortable while the procedure was taking place. After the procedure they explained what to do next, how to care going forward and answered all my questions. They were both friendly and professional.



I am a carer and would like to give credit to all the staff on Preseli ward . All the staff treated my father with kindness and compassion and nothing was too much trouble for them . They were very informative & answered all my questions clearly and kindly . Alan the staff nurse was excellent , but all the HSCW were very informed and helpful at all times. The ward sister and staff were particularly kind to my elderly mother when she visited, they were compassionate and caring towards her too.

Your NHS Wales Experience survey

Did you feel that you were listened to?



There has been less improvement for this period where 64.61% of responses advised they were never listened to compared to 68.38 % in the last period.



I had been waiting a long time for surgery but I was dreading the day it came. The nursing team were very reassuring and caring and explained that everything was going to be ok. The surgical team was also brilliant and made sure that everything was carried out professionally and with the utmost care and compassion. A bit of pre-op banter humour helped me to relax and I knew from this that they are a good team. The post surgical nursing was brilliant and every need and question answered.



Communication was poor, sat for many hours waiting to be seen, with some basic communication between the staff and waiting room the experience would have been better. Nobody comes to A&E and expects it to be fast but not knowing even a timeframe the experience was just worse

KEEPING PEOPLE INFORMED AND INVOLVED AND TAKING ACCOUNT OF THEIR WISHES AND NEEDS - LESSONS LEARNED

You Said	We Did
I am concerned about the delay in reporting the results of radiology scans and the impact this may have on treatment.	We are trying to address the delays in Radiology by recruiting new radiologists, in addition to implementing weekend and out of hours reporting sessions to manage delays.
When my husband was admitted to hospital with pneumonia, the light in his bed cubicle could not be turned off and this caused him additional discomfort.	<p>One of our senior nurses reviewed this concern. Our cubicle lighting is fitted with motion sensors and so they are activated on movement.</p> <p>The department is liaising with the Estates Team to ascertain whether the motion sensors can be deactivated when needed, and in the meantime a supply of eye masks and ear plugs have been requested to ensure that patients are as comfortable as possible.</p>

PATIENT STORY

This story relates to the importance of nutrition, and was provided by the Dietetic Team for Intermediate Care.

The patient is 86 years of age. A 999 emergency call was received from his neighbours, as he had suffered a fall and had been laying on the ground for a long time. The Dietetic Team visited him at home the next day. The patient was very frail, had a low weight of 25kg (55lbs). His food intake was very small. The Dietetic and Acute Response Team supported by:

- Changing the milk delivery from semi-skimmed to full cream milk
- Prescribed nutritional supplements (high calorie & high protein)
- Provided neighbours with fortified/nourishing food & fluid ideas (do food shop)
- Acute response team supported with blood monitoring and medics prescribed appropriate vitamins as requested by Dietitian
- Educated patient regarding risks associated with malnutrition & dehydration in order to empower

You can listen to the story here: [Insert link](#)

The outcomes were very positive for the patient as a result of this support.

- ▶ The patient's nutritional status significantly improved = reduced risk of malnutrition related disease (infection, falls, fractures, kidney injury, wound healing)
- ▶ Functional status significantly improved = increased confidence to mobilise & carry out activities out daily living, less risk of falling again, increased independence
- ▶ Quality of life significantly improved = now able to enjoy life, feeling well in the comfort of own home
- ▶ Hospital admission avoided = significant cost savings

Friends and Family Test - Patient Feedback

Below are a selection of sound bites, taken from the All Wales CIVICA system, staff can listen to this feedback and learn from patient experiences.

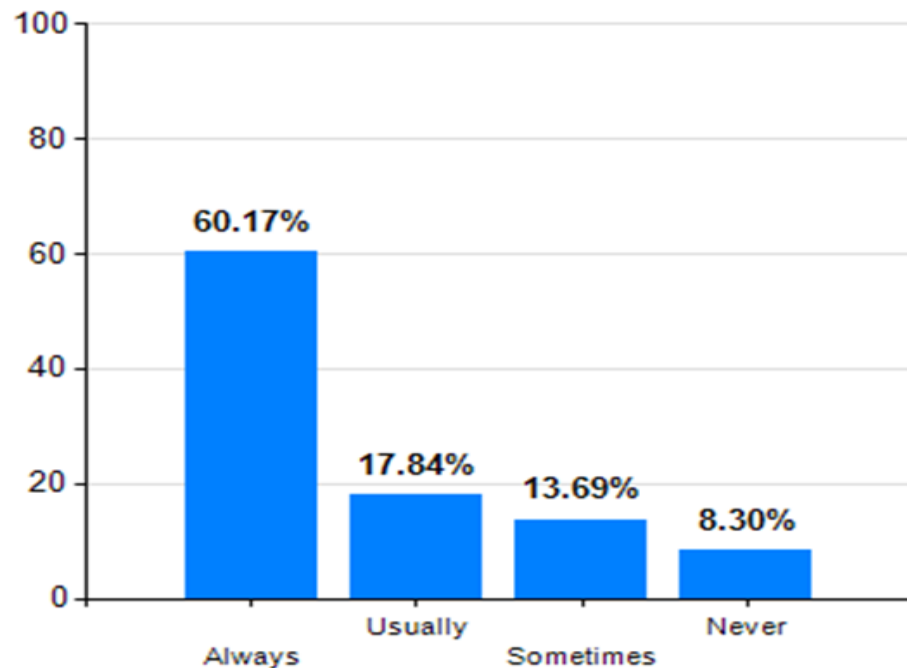
Please click on the hospital to listen to the feedback provided.

Awaiting links (to be provided just before Board Meeting)

Safe and Effective Care, in an appropriate & Clean Environment

Your NHS Wales Experience survey

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



There has been an overall increase in performance in this measure, compared to only 59.92% to the previous period



I would like to highlight how nothing was too much trouble from Neal in A & E. his sunny character and reassuring nature were amazing and I cannot recommend enough how kind he was to me and other patients. Food was amazing 3 course meal I would have paid for in a restaurant. I was scared but everyone allayed my fears.

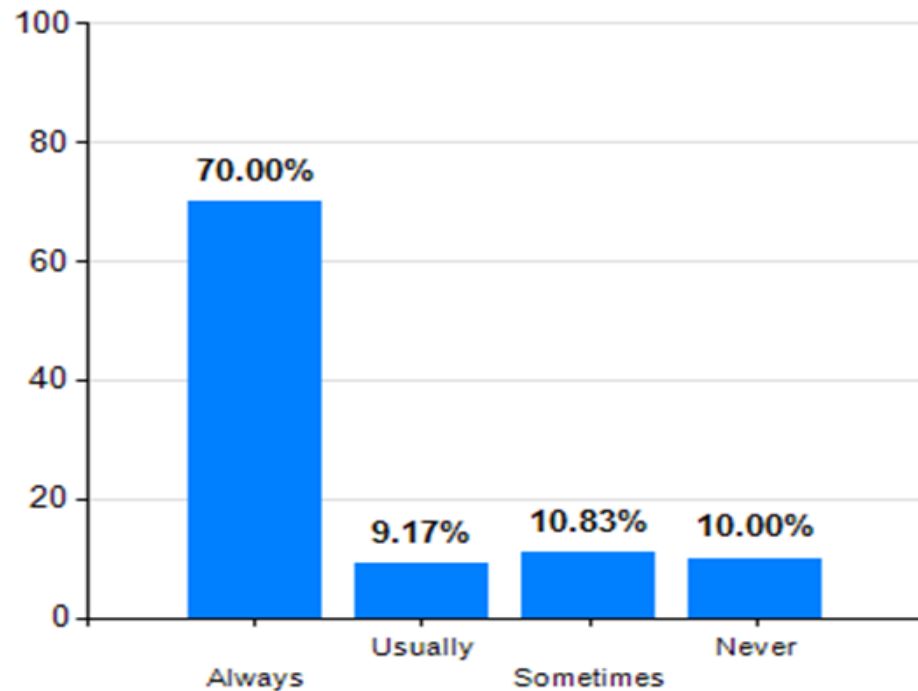


Room suitable for the appointment, if a procedure is going to take place, make it a safe and comfortable space. Explain everything and don't rush patients.

Safe and Effective Care, in an appropriate & Clean Environment

Your NHS Wales Experience survey

Did you feel safe and well cared for?



Performance has seen an increase compared to last period where only 69.32% of responses said they were always well cared for.

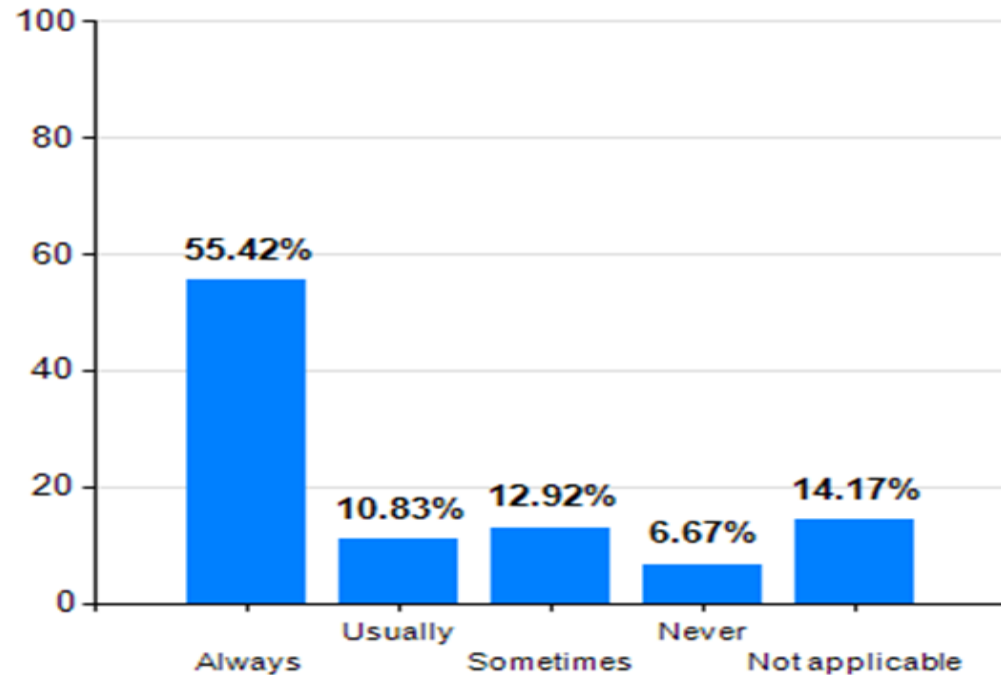
➡ First of all, give the patients information about where and when the appointment will happen, by letter, phone call or text message. Also, be more concise and honest with the patient about the issue that is being treated to not let this patient waste time unnecessarily. Give a solution or a treatment, also doing tests when is needed instead of giving pain killers and medication and send you home.

➡ I was 17 weeks pregnant and bleeding. I was told it was nothing to worry about and my waters broke a week later and was told they didn't and wasn't scanned then when it was finally confirmed after I came in again the consultant was horrible, blunt and not informative. I should have been treated as a mother. I feel like my baby was ignored. I should have been assigned to anti natal triage. I actually felt safe in their care and heard.

Safe and Effective Care, in an appropriate & Clean Environment

Your NHS Wales Experience survey

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



This performance has seen an decrease of 6.98% since the last period, however there has been an increase of in responders answering usually and sometimes. A number of responders have not give a reason for their answers.

➡ I had to take my wife to A&E at Glangwili Hospital. The service received was appalling. There was no sign of any care / concern shown by any of the members of staff (including nurses and doctors). The treatment given to remedy pain was completely inadequate. The treatment room was filthy including blood splattering on many surfaces. I would not want to visit this A&E again even if I was dying!!!

➡ Operator on Waiting List line very very helpful but was very limited as to what he was able to do and couldn't help me at all!

Safe and Effective Care, in an appropriate & Clean Environment

Concerns

- ▶ **117** concerns were received during April and May pertained to clinical assessment and treatment.
- ▶ **45** out of the **117** complaints have been looked into and responses provided. The remaining **72** are being investigated. Typically, clinical investigations can be complex and can take longer to investigate, sometimes spanning a number of services.
- ▶ **57** of these concerns were about delays in receiving treatment or lack of treatment. The services receiving the highest numbers were Accident and Emergency, Ophthalmology and Urology. These numbers should be taken into the wider context of the high number of patient activity in these services.
- ▶ **22** complaints were received about delays to diagnosis or incorrect diagnosis being given. 3 of these were attributed to Cardiovascular Services and 2 to Radiology and Accident & Emergency, with other spread across services.
- ▶ **23** concerns were received about a delay in diagnosis, or incorrect diagnosis, and **29** were around treatments being insufficient or incorrect.

SAFE AND EFFECTIVE CARE IN AN APPROPRIATE AND CLEAN ENVIRONMENT

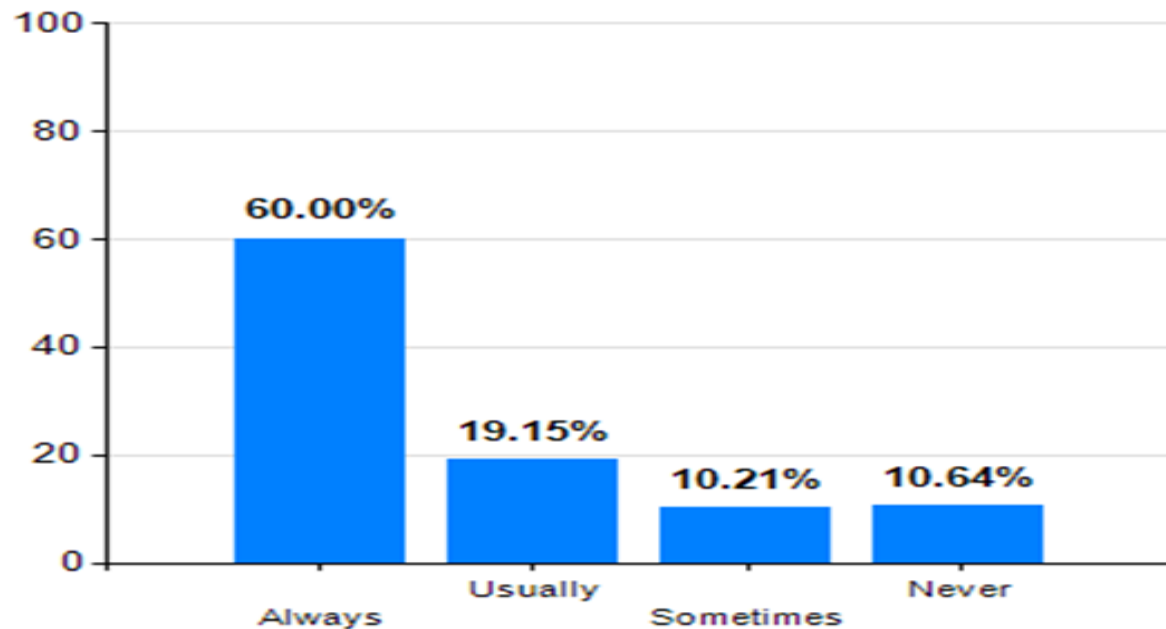
Lessons Learned

You Said	We Did
When I attended the A&E department I was discharged with an undiagnosed fracture. This should have been identified at the time and the fracture should have been immobilised and supported accordingly.	<p>We investigated this thoroughly and agreed that there were missed opportunities to diagnose the patient's fracture.</p> <p>We sought to understand why this had occurred and recognised that there were some key learning points around communication, seeking support from clinical colleagues and clinical practice.</p> <p>We have used Royal College of Emergency Medicine (RCEM) learning materials and reviewed National Institute for Health and Care Excellence (NICE) guidelines to support the management of this type of fracture in the A&E teams.</p>

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

Your NHS Wales Experience survey

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



This performance shows 60% of responders are encouraged to share feedback compared to 64.11% in the previous period

➔ More understanding of mental health. Communication. Empathy. I was laughed at and could hear staff talking about me. Worst experience of my life. I'm a nurse working within the Trust and would never treat a patient in the way I was.

➔ I spent a long time in A&E prior to move to ward and quick trip to surgery. During the evening/night there was little communication about time table/plans/potential events - it seems assumed that everyone knows about issues with bed space and staffing in NHS and of course we do, but when it is you as an individual requiring assistance it is really helpful to have specific communication. The staff are living with the pressures but for most patients it's a new and difficult experience.

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

Friends and Family Test



I appreciate the notice of my appointment. I always arrive early, registering was quick and I was seen 5 mins before my appointment. The regular ear and procedure was pain free and comfortable and I left the clinic after being there for 20 mins



Not enough seating in the initial waiting area. Entrance door 'outpatients' sign is small & faded so entrance isn't easy to identify.



I have to say the Tenby minor injuries nurse was amazing. If she hadn't pushed my leg down and our in a brace I think I would have struggled to straighten my leg as quickly as I did. The follow up was good as well. Thank you

Friends and Family Test Summary - Patient Type

Overall satisfaction on how patients are feeling about their recent visit

Patient Type	% Positive	% Negative	Total Responses	Very good	Good	Neither good nor poor	Poor	Very poor	Don't Know
Total	95.1%	4.9%	5402	3937	912	257	131	121	44
Community & Primary Care Patient	87.5%	12.5%	8	5	2	0	1	0	0
Day Case	98.6%	1.4%	211	184	22	1	1	2	1
Emergency Patient	94.3%	5.7%	1817	1283	326	98	56	42	12
Inpatient	92.8%	7.2%	370	248	73	22	11	14	2
Maternity Inpatient	100.0%	0.0%	14	13	1	0	0	0	0
Maternity Outpatient	92.6%	7.4%	55	41	9	1	2	2	0
Mental Health Outpatient	88.9%	11.1%	22	13	3	1	0	2	3
Outpatient	96.0%	4.0%	2501	1868	403	118	46	49	17
Paediatric Inpatient	100.0%	0.0%	18	13	5	0	0	0	0
Unmapped	93.4%	6.6%	386	269	68	16	14	10	9

Friends and Family Test - Glangwilli Hosptial

Department with less than 10 responses have been excluded from the table.

Sub Location	% Positive	% Negative	Total Responses	Very good	Good	Neither good nor poor	Poor	Very poor	Don't Know
Total	94.0%	6.0%	1542	1064	292	86	42	44	14
Aberglasney Suite	100.0%	0.0%	33	31	2	0	0	0	0
Accident and Emergency Department	91.5%	8.5%	454	295	84	35	22	13	5
Ambulatory Care Unit	83.3%	16.7%	14	5	5	2	0	2	0
Branwen Suite	94.1%	5.9%	20	14	2	2	0	1	1
Cardio-Respiratory Unit	94.9%	5.1%	102	75	18	3	2	3	1
Childrens Centre	100.0%	0.0%	13	11	0	2	0	0	0
Clinical Decisions Unit	90.0%	10.0%	10	7	2	0	1	0	0
Day Surgery Unit	94.1%	5.9%	17	16	0	0	1	0	0
Derwen Ward	96.7%	3.3%	30	24	5	0	0	1	0
EEG/EMG Department	100.0%	0.0%	30	20	7	2	0	0	1
Endoscopy Department	100.0%	0.0%	10	8	2	0	0	0	0
Madog Suite	95.5%	4.5%	68	49	15	0	0	3	1
Merlin Ward	100.0%	0.0%	14	7	5	2	0	0	0
Outpatient Department (Blue)	95.2%	4.8%	537	378	101	30	10	14	4
Paediatric Ambulatory Care Unit	83.3%	16.7%	20	11	4	2	3	0	0
Picton Ward	81.8%	18.2%	23	15	3	1	2	2	0
Same Day Emergency Care Unit	100.0%	0.0%	24	22	2	0	0	0	0
Tysul Ward	100.0%	0.0%	29	24	5	0	0	0	0

Friends and Family Test - Prince Philip Hospital

Departments with less than 10 have been excluded from the table

Sub Location	% Positive	% Negative	Total Responses	Very good	Good	Neither good nor poor	Poor	Very poor	Don't Know
Total	96.3%	3.7%	1132	867	167	53	23	17	5
Acute Medical Assessment Unit	91.7%	8.3%	24	16	6	0	1	1	0
Cardio Respiratory Department	100.0%	0.0%	29	24	2	3	0	0	0
Day Surgery Unit	96.9%	3.1%	32	29	2	0	0	1	0
Endoscopy Department	100.0%	0.0%	19	17	2	0	0	0	0
Minor Injuries Unit	94.5%	5.5%	288	195	63	11	9	6	4
Outpatient Department	96.4%	3.6%	614	486	79	27	13	8	1
Physiotherapy Department	94.7%	5.3%	21	12	6	2	0	1	0
Pre Op Assessment Clinic	100.0%	0.0%	24	21	2	1	0	0	0
Rheumatology Department	100.0%	0.0%	24	18	2	4	0	0	0
Same Day Emergency Care Unit	100.0%	0.0%	27	23	3	1	0	0	0

Friends and Family Test - Withybush Hospital

Departments with less than 10 have been excluded from the table

Sub Location	% Positive	% Negative	Total Responses	Very good	Good	Neither good nor poor	Poor	Very poor	Don't Know
Total	95.3%	4.6%	1040	770	170	51	18	28	3
Accident and Emergency Department	94.8%	5.2%	390	276	70	25	7	12	0
Adult Clinical Decisions Unit	90.0%	10.0%	10	6	3	0	0	1	0
Cardio Respiratory Department	98.2%	1.3%	113	97	13	1	0	2	0
Day Surgery Unit	97.9%	2.1%	48	41	5	1	0	1	0
Gynaecology Care Suite	96.2%	3.8%	27	22	3	1	0	1	0
Outpatient Department (A)	95.1%	4.9%	297	217	52	12	6	8	2
Physiotherapy Department	96.2%	3.8%	31	20	5	5	0	1	0
Rheumatology Department	100.0%	0.0%	21	14	5	2	0	0	0
Same Day Emergency Care Unit	88.9%	11.1%	19	14	2	1	2	0	0
Ward 4	100.0%	0.0%	20	17	3	0	0	0	0

Friends and Family Test - Bronglais Hospital

Departments with less than 10 responses have been excluded from the table

Sub Location	% Positive	% Negative	Total Responses	Very good	Good	Neither good nor poor	Poor	Very poor	Don't Know
Total	94.9%	5.1%	823	596	144	37	22	17	7
Accident and Emergency Department	93.8%	6.2%	362	247	71	21	11	10	2
Cardio-Respiratory Department	96.6%	3.4%	61	51	7	0	1	1	1
Ceredig Ward	93.3%	6.7%	16	13	1	1	0	1	0
Clinical Decisions Unit (Green)	92.3%	7.7%	15	9	3	1	1	0	1
Day Surgery Unit	100.0%	0.0%	35	31	4	0	0	0	0
Integrated Sexual Health Clinic	100.0%	0.0%	16	13	3	0	0	0	0
Outpatient Department	94.4%	5.6%	230	162	42	12	8	4	2
Physiotherapy Department	90.0%	10.0%	11	7	2	1	0	1	0
Rhiannon Ward	95.5%	4.5%	22	20	1	0	1	0	0

Friends and Family Test - Community Hospitals

Main Location	% Positive	% Negative	Total Responses	Very good	Good	Neither good nor poor	Poor	Very poor	Don't Know
Total	97.2%	2.8%	366	298	49	8	9	1	1
Aberaeron Intergrated Care Centre	94.3%	5.7%	38	27	6	3	2	0	0
Amman Valley Hospital	100.0%	0.0%	10	7	3	0	0	0	0
Cardigan Integrated Care Centre	97.7%	2.3%	219	185	24	4	4	1	1
Llandovery Hospital	100.0%	0.0%	5	3	2	0	0	0	0
South Pembrokeshire Hospital	100.0%	0.0%	31	29	2	0	0	0	0
Tenby Cottage Hospital	95.2%	4.8%	63	47	12	1	3	0	0

The Patient Experience Team has been visiting community hospitals, encouraging patients to share their experience of their care. Further in the report we will share some feedback from our visit to South Pembrokeshire Hospital.

CIVICA Training

We continue to provide weekly training sessions for staff to enable them to gain access the CIVICA Patient Feedback System.

Once staff are trained they are able to review their own service feedback and act on any feedback by highlighting success stories and looking to improve any feedback improvements. We currently have 250 members of staff with access to the CIVICA patient feedback system

Theresa and Catherine work in the Tenby Minor Injuries unit and recently received training, Catherine said she uses the system to add compliments the team receive. Theresa is finding it useful to see patients feedback as she can highlight anything that needs improving.





South Pembrokeshire Community Hospital

The Patient Experience Team has been attending South Pembrokeshire hospital to visit patients who have moved from Ward 3 in Withybush General Hospital while building works is being completed. The team spoke to staff working on the ward who informed them that both staff, patients and equipment will be moved to the Cleddau ward in June.

The patients that the team spoke to said “the ward was very comfortable and quiet, and it was nice to look out at the greenery”. The team will be making regular visits to the ward to ensure the ward have enough patient items and patients, families and carers have access to the team if required.

It was good to hear that the Ear Syringe Service had restarted in the hospital and that the team was getting good feedback. The Health Board is working together to explore further development to expand the service to meet the needs of those people who are housebound.

Previously, referrals to the ear-wax clinics were via the GP practices, the team have now evolved and you can self-refer by simply phoning (for Carmarthen and Ceredigion patients) 0300 303 8322 and choosing option 5 (other services) within the following hours (Monday-Friday 8.00am to 5.00pm, Saturday/Sunday/Bank Holidays 9.00am to 4.00pm). For Pembrokeshire patients, you need to call 01437 774335.

Feedback in Primary Care

The Patient Experience Team created the new patient feedback surveys on the Civica Experience Wales System and the new posters were distributed to the Managed GP Surgeries towards the end of March ready for implementation on the 1st April.

During this period there has been one response, and the Practices have advised that this could be attributed to the surveys that were carried out by the practices towards the end of March as part of their Access submissions. It is also recognised that many of the appointments are conducted by telephone and there is less patient attendance at the premises.

The Patient Experience Officers will continue to visit practices during the next period and we hope to see an increase in feedback.



Admiral Nursing Feedback

The Admiral Nurse team covers Carmarthenshire, Ceredigion and Pembrokeshire with a focus on delivering person-centred and relationship-centred dementia care. The team contacted the Patient Team for support in getting feedback from their patients, families and carer's. Below are two of the recent comments the team have received.

- My Admiral nurse has been very supportive during a very difficult time for myself and my husband. She has been a huge help. It has been comforting to be able to talk to her about the stresses of the caring role. I have always felt that she was there for me. She has also given me good advice (advance care plan for example) and reminded me how important it is to make some time for myself and to get support from anywhere I can.

This service has been invaluable to me. The support and empathy given has been second to none. I felt fully supported and listened to and able to offload my thoughts without any judgement. I owe a great deal to Liz my Admiral Nurse for all the kindness, support and advice offered to me and will be truly forever grateful to her. thank you.

The Admiral Nursing Team continue to use the their to gain feedback the team have said “ I find them really useful and mainly use these to feedback to the Service Delivery Operational & Performance meetings by adding the link to the monthly report and to share any feedback with the team during team meetings.

Paediatric Surveys



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

The Patient Experience Team continue to work along side the Community Paediatric Team in promoting their community survey, and hope to share feedback in future reports.

During April and May, the number for each of the Paediatric questionnaires received has decreased to a total of 66 compared to 167 during the last period.

During this period we received the following; for parents and cares 58 responses, 4- 11 year old's and 11 years and above both has 4 responses each.

The reduced survey responses could be attributed to resourcing, and the availability of Patient Experience Officers visiting the Paediatric units to support with patient feedback. The Service are looking for some volunteers for health to support with this too

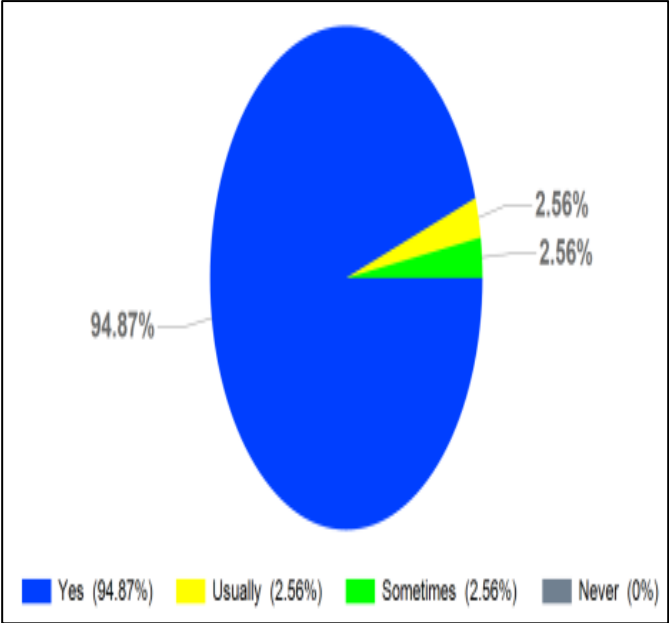
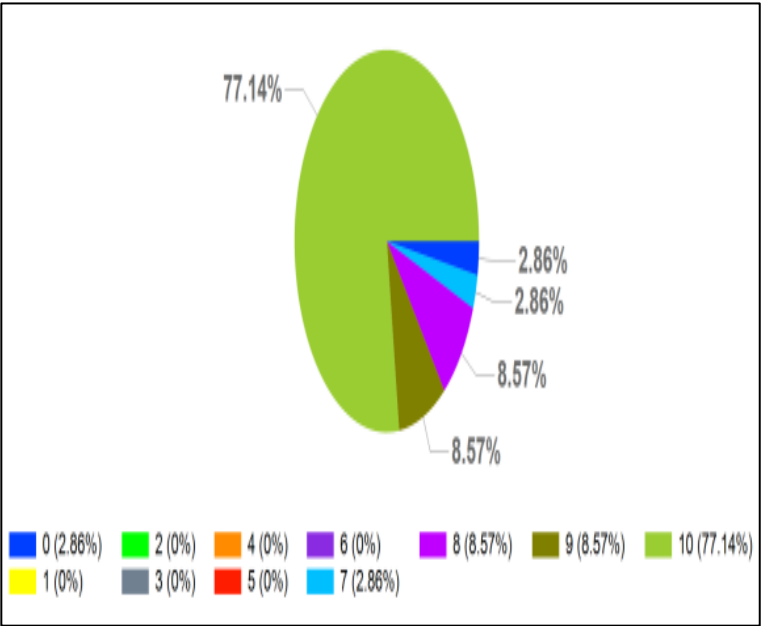
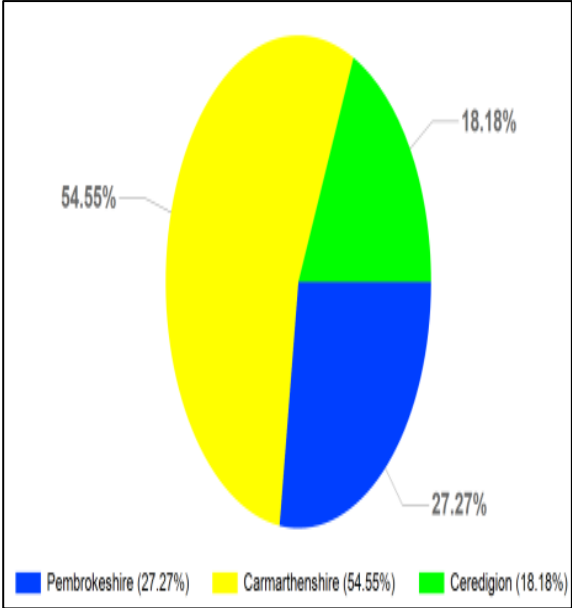
Paediatric Surveys



What County are you from ?

Using a scale of 0 -10 where 0 is very bad and 10 is very good, how would you rate your overall experience of this ward/ unit?

Were you given advice about caring for your child after you went home?



77% of Parents rated 10 for their overall experience they understood what was happening with their child and 94.87 of families were given advise about caring for their child when they got home. Over half of all Paediatric Parent responses are from residents of Carmarthenshire.

Paediatric Surveys



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

The staff are amazing. Everyone nice, good advice, and have time to talk.

having a recliner that goes flat as a parental bed.

Glangwilli Paeds are second to none. The care for my daughter was exemplary from the nurses to play staff, surgeons, and anaesthetists. Thank you

We were referred by GP for an appointment (urgent) however it has taken 7 days to be seen. We had an appointment at 2pm however was not seen by doctor until gone 530pm, I understand this is an urgent dept however was not made aware of any possible wait! Had I been made aware I would have brought provisions with me i.e. food snacks , entertainment etc

Feel Good Friday

The team continue to promote the Feel Good Friday and provide teams with certificates of appreciation. Teams continue to provide feedback on how great it feels to receive this recognition, and look forward to seeing this recognition every Friday on the staff information email.



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 CLINICAL DECISIONS UNIT - GLANGWILI HOSPITAL



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THE BIG THANK YOU X-RAY TEAM - TENBY COTTAGE



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THE BIG THANK YOU ENDOSCOPY TEAM - WITHYBUSH HOSPITAL



The Health and Social Care Quality & Engagement (Wales) Act 2020

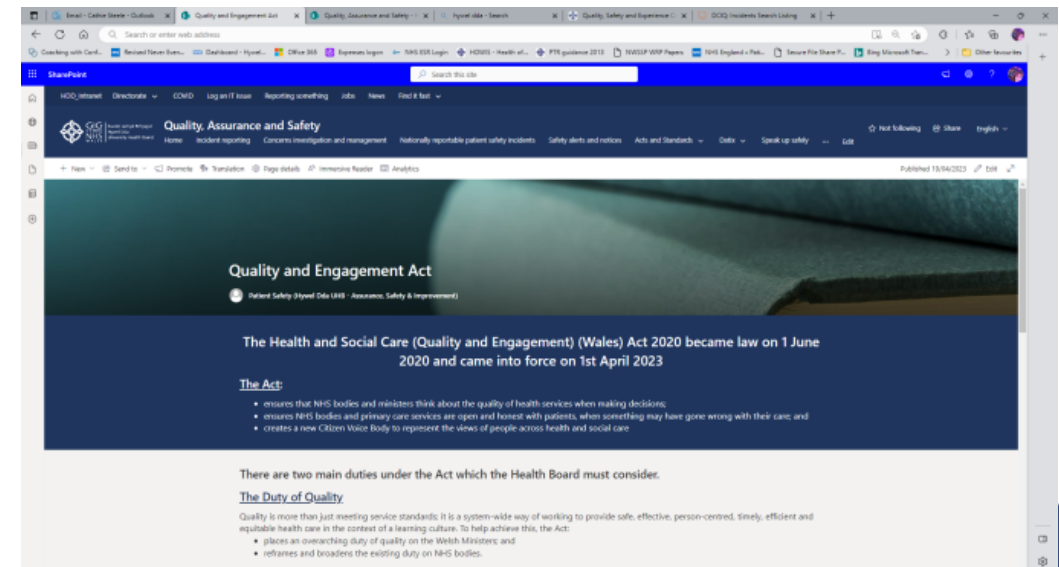
Update on implementation (some highlights)

- Implementation Group continues to meet and make progress on roadmap to implementation
- SharePoint page developed (1756 hits)
- Communication plan refreshed
- Training needs analysis undertaken
- All opportunities to promote the two duties are being used (in excess of 30 presentations to different staff groups given) including concerns proportionate investigation training
- Using the “Our Performance” and “Our Safety” Dashboards and the Integrated Performance and Assurance Report – always on reporting
- Improving together framework

Areas of further work (some highlights)

- Ratification of revised Putting Things Right Policy – seeking support from listening and Learning Sub-Committee as operational ownership group and will then be brought to QSEC for final ratification
- Education on the Duty of Candour triggers – more than awareness sessions
- Support for the identified Duty of Candour leads
- Primary Care capture of DoC and reporting arrangements
- Aligning the “Our Performance” and “Our Safety” Dashboards and the Integrated Performance and Assurance Report with the Health and Care Quality Standards

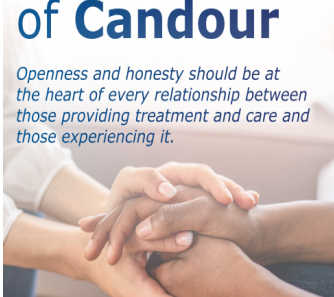
Total of staff briefed	
Nursing staff	105
Medical staff	146
Therapies staff	7
Primary Care staff	22
Other staff	85
	365



Duty of Candour

The Duty of Candour

Openness and honesty should be at the heart of every relationship between those providing treatment and care and those experiencing it.



The Duty of Candour was enacted on the 1st April 2023 and applies to all NHS care delivered or commissioned and is aimed to create a culture of trust and openness. The Duty is triggered where a service user may have suffered harm categorised as more than minimal harm (moderate or above) and their NHS care was a factor.

As part of the Management Review, the manager should consider whether the level of harm reported is appropriate and confirm if the incident meets the criteria for Duty of Candour – if it does meet the criteria then the Duty is triggered and contact should be made with the service user or next of kin without delay.

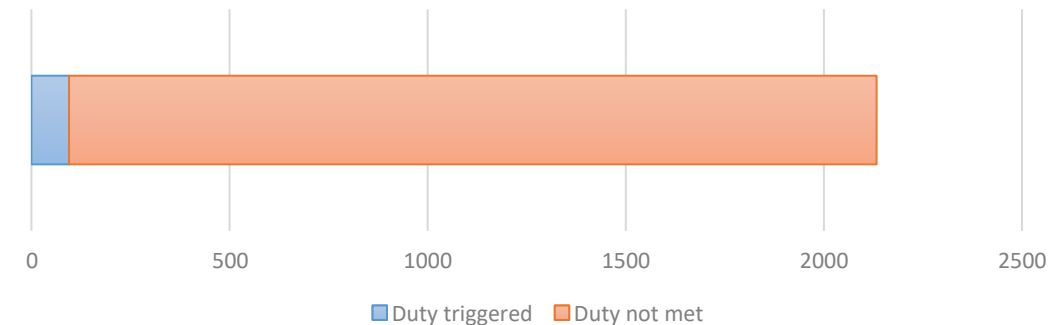
All patient safety incidents reported as moderate, severe or catastrophic and above are reviewed by the Quality Assurance and Safety Team and support and guidance is offered to staff to ensure the duty is carried out accordingly for those cases that meet the threshold. Staff can also consider if the incident took place prior to the duty coming into force during this process or any other factors.

Of the incidents reported in April 2023, 22 incidents have been considered as triggering duty of candour (at the time of preparing this report). Initial contact has been made in 4 cases.

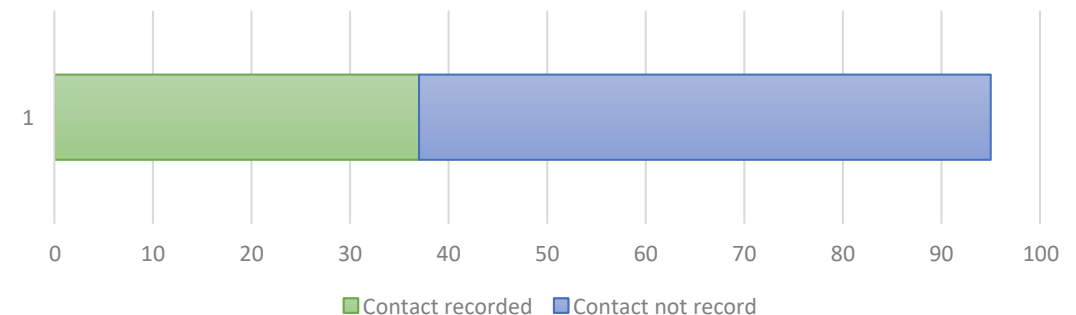
It is clear further work is required to ensure key staff are aware of their duties.

Between 1st April 2023 and 30th June 2023, 635 patient safety incidents occurred where harm is reported as more than minimal

Patient Safety Incidents Q1 23/24
DoC initial assessment completed



In-person contact - as recorded on DatixCymru



Actions

Work continues to ensure that managers are aware of the duty of candour and the requirements under the duty (including recording through DatixCymru)

Arts & Health for our patients

Arts for patients with dementia

We are delighted to be continuing to offer arts interventions with two arts partners across two settings in each of the four acute hospitals in Hywel Dda with funding from the Dementia Steering Group and Welsh Government.

- Interactive singing & movement with Forget Me Not Chorus
- A mix of visual arts with Arts Care Gofal Celf



*"That was uplifting and brightened my day."
"I was born to sing and today I could use
my beautiful voice."*



Arts Boost

Our work with CYP known to SCAMHS continues. Season 2 is open to referrals. Season 1 has been evaluated with ongoing evidence of positive impact on CYP.

*"I am not on my own with 'stuff'. There is 'stuff'
going on with all people, not just me. I feel more
comfortable being around other people, talking
and doing art work like this."*

Arts & Health for our communities

Creative Prescribing Discovery Programme

We continue to deliver an Discovery programme with arts partners and Public Health Wales about the way forward for Arts on Prescription across Hywel Dda.

Creative Prescribing Café - Pembrokeshire - 40+ representative came together to discuss arts on prescription across Hywel Dda



Connect Wales – With further arts & health provision for social prescribers across Wales led by WAHWN



Dance on Prescription continues in the 2xTs Cluster with Cluster Funding for patients with chronic illness and/or mobility issues to increase physical activity, reduce social isolation and improve mental wellbeing.

Current findings show:

- 100% of participants felt it was enjoyable
- 100% felt more active and benefited from meeting people
- 88% felt physically healthier and happier

"I can feel my legs working now which is good"

"was able to join even though I have never comfortably taken part in physical activity"

Arts & Health for our staff

Creative activities for staff wellbeing

The art & health team continue to bring staff together to share creative activities and offer a diversity of choices and experiences. Now with over 130 members, the Creative Collective is gaining momentum and we are considering how best to take the provision forwards with an application to charitable funds being developed. Here are some staff enjoying Arts & Health at the **Wellbeing Day at the Aberaeron Integrated Care Centre** this Summer. July see's the launch of the **Creative Collective Breakfast Club**, based on the success of our **Art Gratitude Journaling Breakfast Sessions**.



"Feel more relaxed so perform better at work."

Also taking place:
Movement for Wellbeing with:

- Ceredigion Community Team
- School Nurse Team for Pembrokeshire
- **Storytelling** with Junior Drs in Glangwili and more...

Dose of Art – This month sees the unveiling of Hywel Dda's commission for a bespoke artwork to honour the efforts of Hywel Dda and Health Care staff throughout the Covid-19 pandemic as part of NHS 75 Celebrations at the Senedd in Cardiff. Here is Gemma Brown, handing over the lids collected by staff across Hywel Dda to artist Nathan Wyburn.



"Definitely feel better for doing the session."

Improving Healthcare Environments

Bronglais Chemotherapy Day Unit



As part of our efforts to improve healthcare environments for our patients and staff we have been working hard on the BGH CDU project with creative engagement activities for staff and patients to help develop a shared vision for the role of artwork within the CDU.

“The Public Art programme will help to create a comfortable and calming atmosphere that better reflects the service provided to patients by the CDU team.”



The artwork needs to “draw on our beautiful environment to help us to nurture our patients” and help shape an atmosphere that feels like a healing, care and kind environment.



Patient postcards tell us patients want an environment that is:

*Calming, safe, warm
Warm, cosy, homely
Care, compassion, confidence
Restful, supportive, reassuring*

Improving Experience - In Summary

We continue to receive many positive stories and comments about the services provided by our caring and compassionate staff. We are continually sharing and celebrating these achievements across the organisation.

A significant number of patients take the time to provide feedback, over 5,000 people shared their experience during this period, which is appreciated. 95.1% were happy with their experience.

Feedback captured in real time via surveys is collected from patients who are staying in our hospitals; 243 patients completed our Experience surveys with over 90% reporting that their experience has been positive. Any issues or concerns received from the feedback are shared with the Ward manager as soon as possible.

- **PPH** received 1132 feedback responses with 96.3 % providing a positive score. All services received a score of 90% or above. Cardio-respiratory; Endoscopy; Pre Operation; Rheumatology and Same Day Emergency care receiving 100%.
- **GGH** received 1542 feedback responses with 94% providing a positive score. All services received over 90% with the exception of Ambulatory Care and Picton Ward. Aberglasney Suite; Children's Centre; EEG/EMG; Endoscopy; Merlin Ward; SDEC and Tysul wards receiving 100% positive rating.
- **WGH** received 1040 feedback responses , 95.3% felt positively about their experience.
- **BGH** received 823 feedback responses, 94.9% providing a positive score. All services received a score of over 90% with the exception of Same Day Emergency Care. Ward 4 received a 100% positive score.
- Of 90% or above, with Sexual Health Services and Day Surgery receiving 100% positive feedback.
- 366 people responded about their experience of attending our community hospitals 97.2% felt positively about their experience. All received over 90% positive rating, with South Pembrokeshire; Llandovery and Amman Valley hospitals achieving 100%.

Improving Experience - In Summary

The feedback on the achievement of the Improving Experience charter shows the areas of communication, attitude and behaviour of staff and involving and informing people about their care and treatment, are areas we receive many positive comments about these aspects, we do not get this right all of the time.

We continue to promote the Board's 'Making a difference customer care and communication training'; looking at ways in which we can improve communication between teams particularly when there is shared responsibility across different specialties for care; and improving information for patients and carers.

We continue to expand the range of areas we are capturing patient experience data for, including Mental Health and Learning Disability Services and primary care and community.

Despite the recognised pressures within our emergency department & minor injury areas, feedback from patients who attended an emergency setting during the reported period was 93% . It is pleasing to note the positive feedback from patients attending the same day emergency care units.

The number of complaints we have received remains relatively stable with little fluctuation since January 23. 67% of complaints for the period were closed within 30 working days. We are striving to improve our timeliness for responses. The implementation of the revised complaints handling and investigation process seeks to also improve the quality of the investigations, as well ensuring a more positive experience for people raising concerns, and better support for staff that are the subject of a complaint.

Whilst access to appointments and waiting times for treatment remain one of the top 3 reasons for contact to the Patient Support Team, the Waiting List Support Service is having a positive impact on the experience of patients, by making proactive contact with patients and offering appropriate support during the waiting period.