



## CYFARFOD BWRDD PRIFYSGOL IECHYD UNIVERSITY HEALTH BOARD MEETING

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	25 July 2024
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Improving People and Community Experience
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Sharon Daniel, Interim Director of Nursing, Quality and Patient Experience
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Louise O'Connor, Assistant Director, Legal Services / Patient Experience

### Pwrpas yr Adroddiad (dewiswch fel yn addas)

#### Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

### ADRODDIAD SCAA

#### SBAR REPORT

##### Sefyllfa / Situation

The attached report provides a summary of patient experience feedback and activity for the months of April and May 2024.

##### Cefndir / Background

The Board is asked to note the current position in relation to feedback, including complaints.

This report covers the period 1 April to 31 May 2024 and sets out the feedback we have received from patients, carers and families, together with actions taken to make improvements in line with our 'Improving People and Community Charter' (the Charter).

##### Asesiad / Assessment

Feedback on our services is received from 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 104 compliments and 63 'Big Thank You' nominations were received. 6341 (15.5% response rate) patients left feedback on our Friends and Family system, with 93.4% of responders leaving a positive recommendation.

1406 patients completed the All Wales Patient Experience Questionnaire – 81% reported positively about their experience. Any narrative comments received as part of the survey explaining why an experience has not been as positive as we would have wished, have been incorporated into the report.

490 complaints/concerns were received by the Patient Support Services Team, 79 were responded to as early resolution cases (within two working days). 400 required investigation under the putting things right complaint process.

It is notable from the information displayed on page 8 that the site receiving the highest number of complaints is Glangwili Hospital. However, this should be taken in the context of the number of patients seen and activity at the hospital. Work is being undertaken to identify an appropriate denominator (such as activity or workforce) to provide greater context to the information and display the number of concerns as a percentage of the activity or size of the department. The largest departments, such as A&E or Orthopaedics, will routinely see higher numbers of cases due to the higher numbers of patients accessing the service.

Themes of complaints remain consistent, with clinical treatment and assessment as prominent, including issues such as delay in diagnosis and incorrect interpretation of results; and medication management. Appointments, communication and staff attitude and behaviour are also within the top 10 reasons for a complaint, but remain at consistent levels. Further work is being undertaken to analyse in greater depth the qualitative information received across the concerns and patient feedback area, to provide greater insight and clarity to the emerging themes and trends.

There were 2 new investigations commenced by the Public Services Ombudsman for Wales (PSOW). One Final Investigation Reports was received, which was partly upheld. There were also 3 early resolution agreements reached with the PSOW and 16 decisions not to investigate.

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

### 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.

<b>Amcanion: (rhaid cwblhau)</b> <b>Objectives: (must be completed)</b>	
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 <a href="#">Quality and Engagement Act (sharepoint.com)</a>	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: <a href="#">Quality and Engagement Act (sharepoint.com)</a>	1. Leadership 4. Learning, improvement and research
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: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022</a>	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

<b>Gwybodaeth Ychwanegol: Further Information:</b>	
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
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	Not applicable

<b>Effaith: (rhaid cwblhau) Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian: Financial / Service:</b>	All concerns have a potential financial implication: whether this is by way of financial redress, following an admission of qualifying liability, or an ex-gratia payment for poor management of a process; or an award made by the Ombudsman following review of a concern.
<b>Ansawdd / Gofal Claf: Quality / Patient Care:</b>	Improving the patient experience and outcomes for patients is a key priority for the UHB. All concerns received from patients, public and staff alike are taken seriously and investigated in accordance with the procedures. Information from concerns raised, highlights a number of clinical and service risks which should be reflected in Directorate Risk Registers. All Directorates are required to have in place arrangements for ensuring lessons are learnt as a result of investigation findings regarding concerns and that appropriate action is taken to improve patient care.
<b>Gweithlu: Workforce:</b>	The 'Putting Things Right' process is designed to support staff involved in concerns and incidents. All managerial staff have a responsibility to ensure staff are appropriately supported and receive appropriate advice throughout the process. The success of the process is dependent upon the commitment and support from staff across the organisation, not only as part of the investigation process

	and transparency arrangements, but in the encouragement of patients and their families to provide feedback, both positive and negative, to support organisational learning.
<b>Risg: Risk:</b>	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.
<b>Cyfreithiol: Legal:</b>	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.
<b>Enw Da: Reputational:</b>	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.
<b>Gyfrinachedd: Privacy:</b>	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.
<b>Cydraddoldeb: Equality:</b>	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 Llais 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 PEOPLE EXPERIENCE REPORT

April 2024 – May 2024



# A Charter for People and Community 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.

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. The Listening and Learning Sub-Committee will oversee the communication and implementation plan for the Charter. The Committee receives feedback from across concerns, compliments and experience.

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.

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 2024 - May 2024

- ▶ **104 Compliments** were recorded by staff on the Patient Experience system. These compliments are received from patients, families and carers direct to wards, departments or the Corporate Office. A selection of these are shared each week in the Patient Experience Feel Good Friday staff bulletin. Caring and compassion are the terms most often mentioned.
- ▶ **63 Big Thank You (TBTY) nominations were received for our staff from patients or their families** – Patients or their families are able to make nominations to thank staff for their care and impact on experiences. Further details are provided later in the report.
- ▶ **40,880 Individuals received our friends and family patient experience survey** – 6341 responded to this which is a 15.5% rate (above nationally reported response rates). 93.4 % of responses provided a positive rating (94.2% previous period) of very good or good when asked to rate their overall experience.
- ▶ **1,406 Service users completed the Your NHS Wales Experience survey.** 81% 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’ compared to 80.1% for the previous period.

# Word cloud to show patient feedback

This Word Cloud has been created by using feedback from the Friends and Family Test, for this and the previous period



Friendly, excellent, comfortable are the top positive words commonly used where anxious, rude, and concern are the most negative comments.

# Friends and Family Test

The feedback below shows the words commonly used by patients for this period and previous period

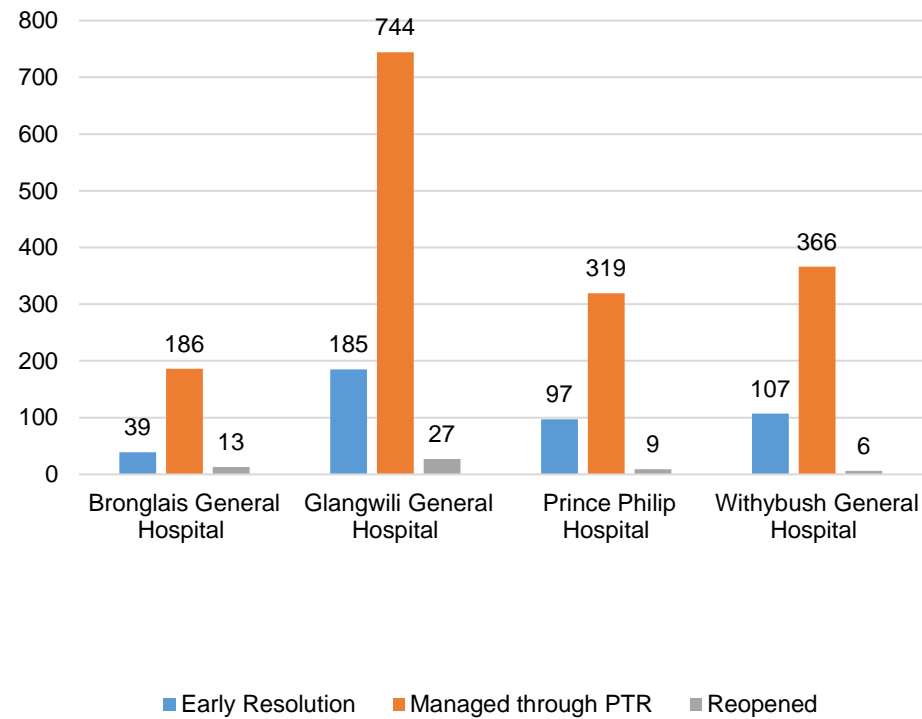
Previous period	Current period
<ul style="list-style-type: none"><li>➤ What a <b>fantastic</b> team, everyone was lovely. Very <b>kind</b> and helpful. The care I received was truly amazing. But seeing the kindness and dedication to sick people on my ward was wonderful.</li><li>➤ The staff were <b>friendly</b>, efficient and made me feel <b>comfortable</b> and safe. Explanations about my treatment were clear and any questions I had were answered.</li><li>➤ I was referred by my doctor with chest pains they saw me straight away and were very thorough with the examination and treatment all the staff were so <b>friendly</b> and efficient</li></ul>	<ul style="list-style-type: none"><li>➤ The consultant's approach was abrasive and <b>rude</b>. He left no space for me to give my opinion and insight into my condition. I felt a lack of urgency and felt that an unhealthy approach was fostered. The information I received since the visit does not correspond to what I was informed at the appointment.</li><li>➤ I was seen promptly by kind friendly staff. From the staff member taking my weight and blood pressure to the consultant herself I was treated with smiles, interest and <b>supportive</b> information.</li><li>➤ All staff were very professional &amp; <b>friendly</b>. Very thorough with their testing &amp; examinations. I felt <b>reassured</b> when I left &amp; relieved due to the depth &amp; thoroughness of their examinations.</li><li>➤ All of the staff I came into contact with were <b>exceptional</b>. All showed outstanding levels of care and <b>compassion</b>. The unit itself was beautifully decorated and so warm and <b>welcoming</b>.</li><li>➤ I was very <b>anxious</b> about attending the clinic but thanks to the kindness and efficiency of the staff found the experience far less frightening.</li></ul>

# Complaints & Concerns at a Glance - April 2024 - May 2024

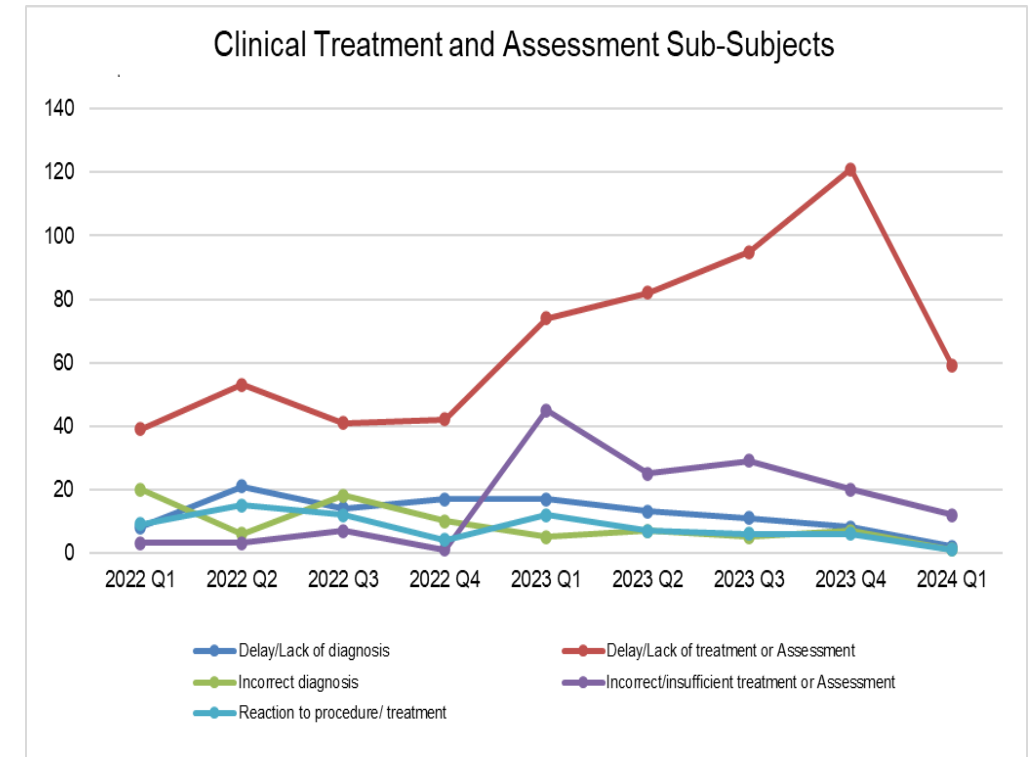
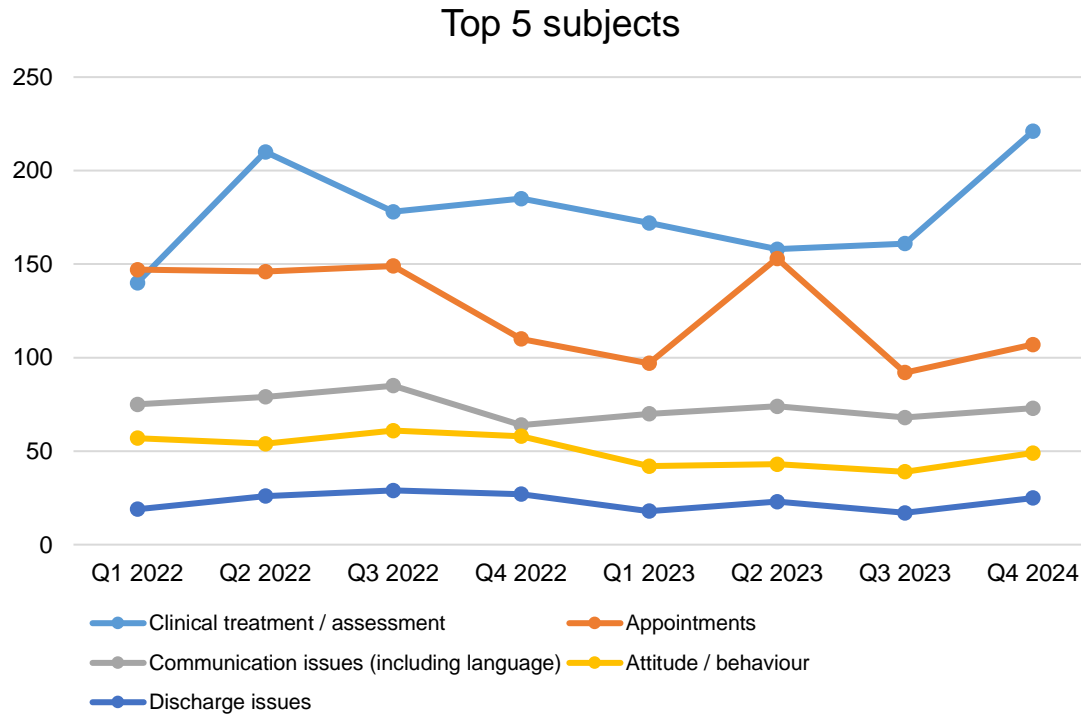
- ▶ 490 complaints were received, of which:
- ▶ 79 were managed as an early resolution case (within two working days).
- ▶ 400 cases proceeded to complaints investigation under the 'Putting Things Right' Regulations.
- ▶ 11 complaints were reopened in April and May against 11 in the preceding period. Complaints are 'reopened' when it is agreed that an initial response has not addressed all the concerns raised or if there is a need for reinvestigation.
- ▶ There were 4 new complaints in the period containing allegations of severe harm, which remain under investigation. These complaints reside with a range of services within the organisation.
- ▶ 370 enquiries were received for the two-month period, a decrease of 152 on the preceding period.
- ▶ 388 enquiries were closed. The most prominent themes of enquiry are around appointments, test and investigation results and communication issues.

# Complaints & Concerns at a Glance - April 2024 - May 2024

All complaints received - Financial year 2023-2024



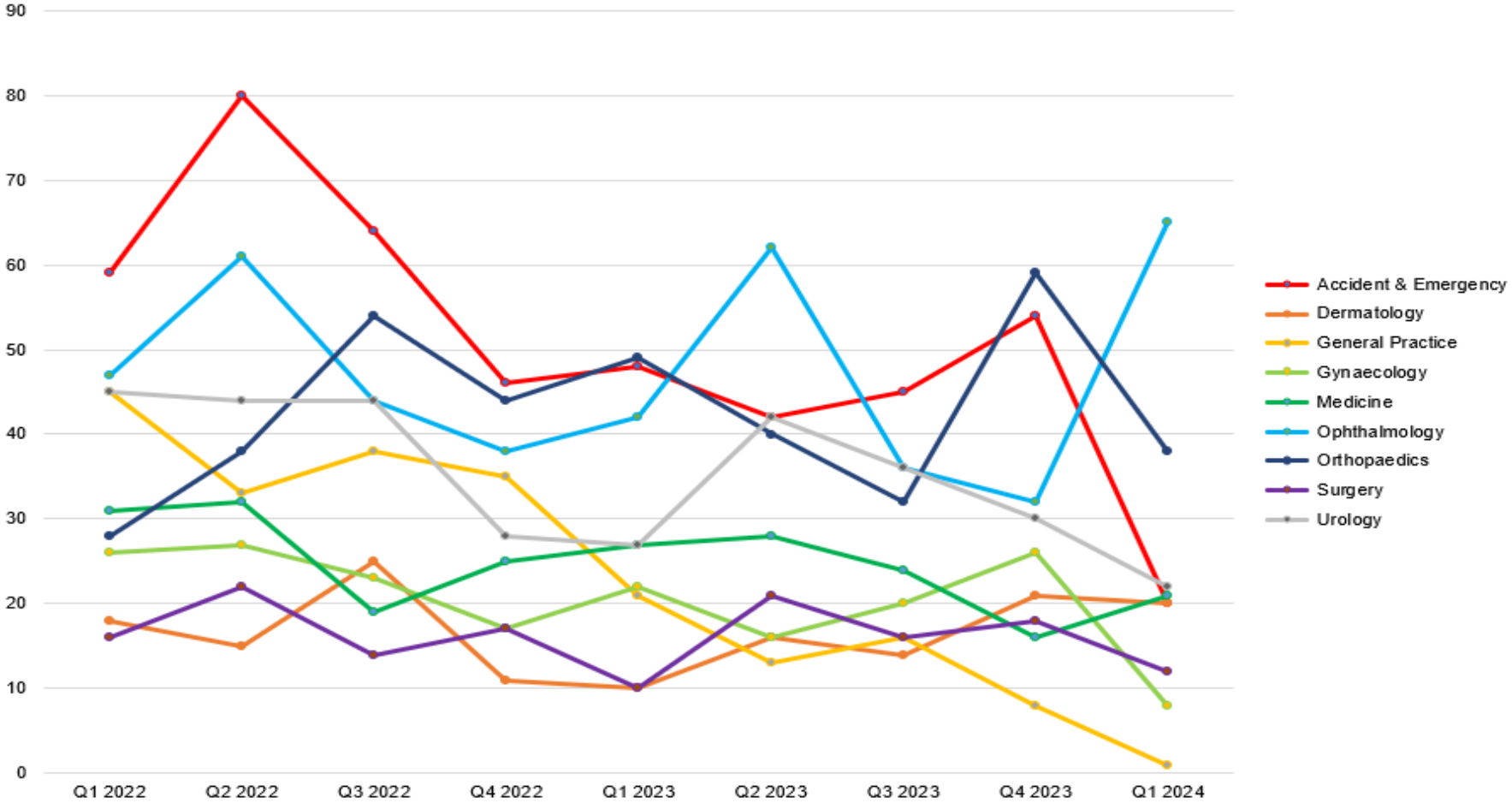
# Complaints & Concerns at a Glance -April 2024 - May 2024



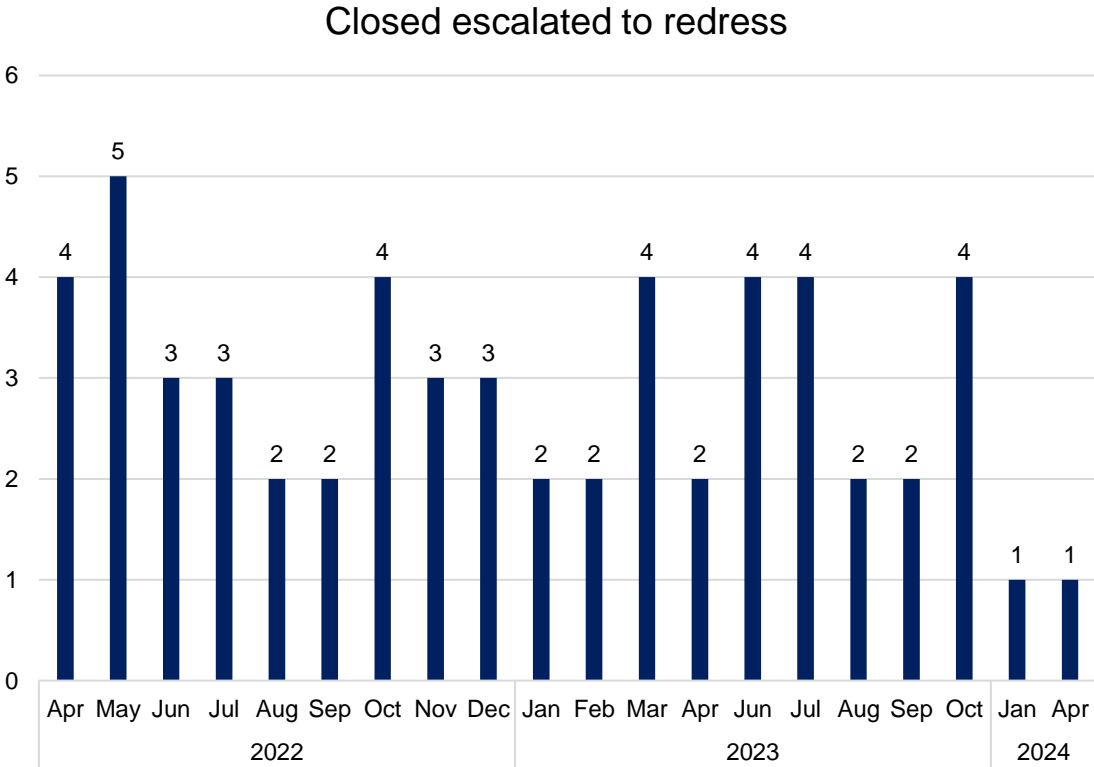
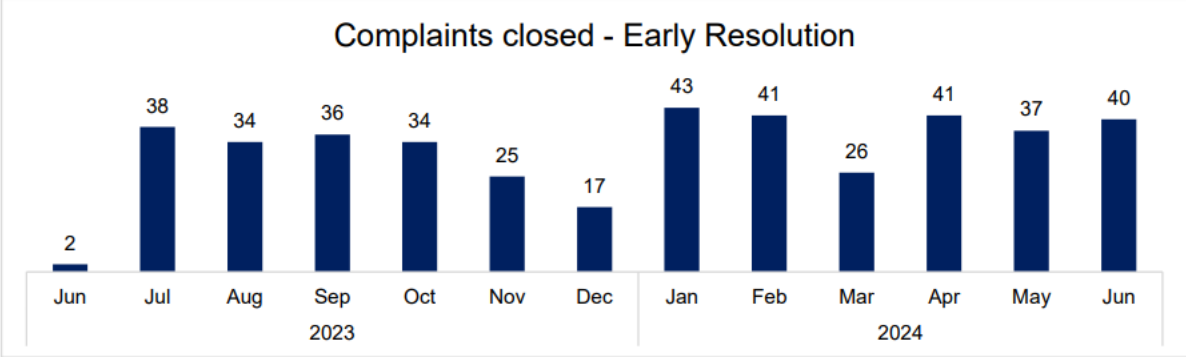
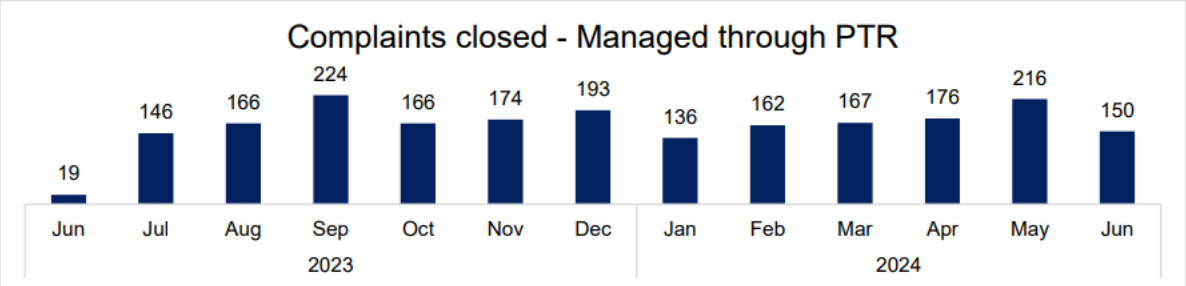
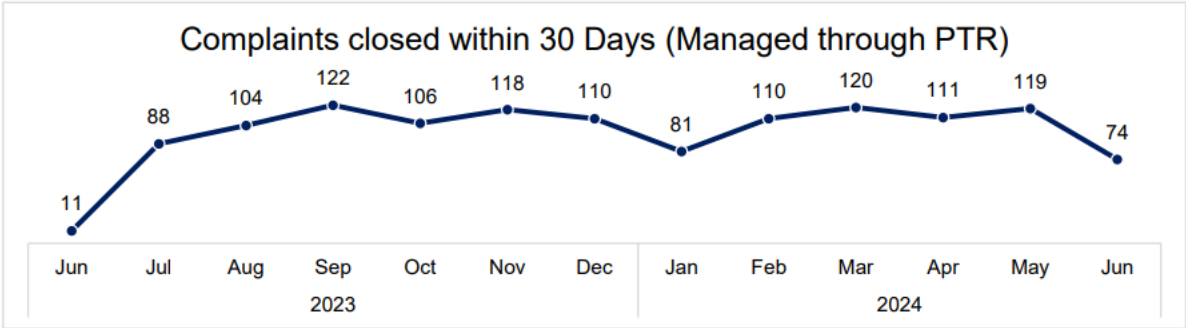
The above graphs depict the top 5 subjects of concerns received into the Health Board. We will be working on developing more analysis of the qualitative (narrative) data. Usually, the cause for concerns can relate to several factors that are not always about clinical care and treatment, such as environmental or admin issues.

# Complaints received by Speciality

Top 10 specialties



# Complaint closure rates



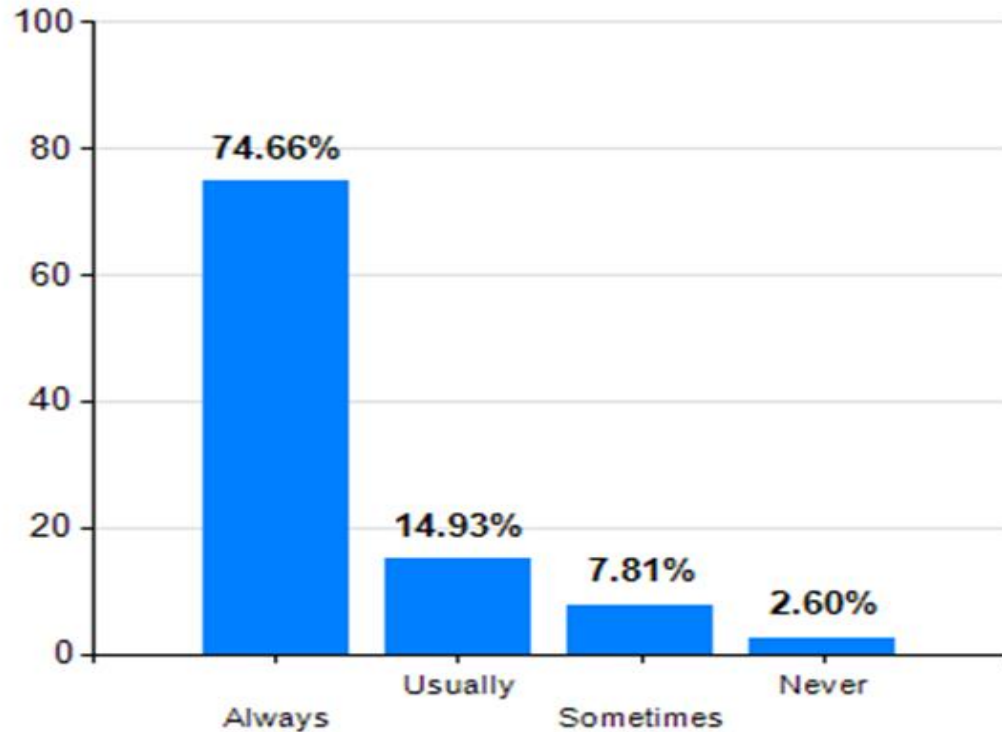
## Closed complaints:

- ▶ 379 cases that were managed through the Putting Things Right complaints process were closed in April and May, compared to 324 in the previous period. Of these, 229 (60%) were closed within 30 working days, 9% down from previous period and further from the current target of 75%.
- ▶ 305 complaints closed in the period were not upheld. 4 complaints were withdrawn. 70 complaints were upheld, of which 66 had an outcome of grade 1 or 2 (no harm or low caused), suggesting minor deficiencies in standards with no impact upon the patient. There were 4 complaints upheld where harm had been reported as moderate or above. These included failures to complete NEWS score and escalate care, lack of availability for HOLEP procedures, and poor communication between clinical teams affecting patient care.
- ▶ Overall themes of complaints remain consistent, with clinical treatment and assessment still most prominent. Appointments, communication and staff attitude and behaviour are also prominent, but remain at consistent levels.
- ▶ There were 2 new investigations commenced by the Ombudsman. 1 Final Investigation Reports was received, which was partly upheld. There were also 3 early resolution agreements reached with the PSOW. There were 16 decisions made by the Ombudsman not to investigate.
- ▶ Where the Health Board is asked to evidence compliancy with the Ombudsman's recommendations and agreements, these are currently being achieved twelve days in advance of target date, with national average only achieving compliancy on the exact target date. In this area we are continuing to improve and are currently one of the better performing Health Boards in Wales against this criteria.
- ▶ The key learning from the partly upheld Final report in this period identified a failure to recognise the importance of obtaining regular and accurate levels of patient's immunosuppressant medication. Although monitoring subsequently improved, the initial failing meant that, for the first 3 weeks of admission, the patient's tacrolimus levels were probably higher than usual for her and exceeded recommended safe dose. This may have slightly decreased her chance of survival although it was not possible to say if the outcome would have been different. Lessons learnt from the Ombudsman's reports, as well as progress against associated action plans are considered by the listening and learning Sub-Committee.

# DIGNITY, RESPECT AND KINDNESS

## Your NHS Wales Experience survey

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



There has been an increase in performance for this measure compared to the previous period where 74.66 % of responses stating they are always treated with dignity, respect and kindness compared to 73.60 % for last period. Of the 17 patients that responded 'never' no specific comments relating to dignity respect and kindness were made, other than staff need to be more caring and listen more to patients.

➔ Mrs Khawaja and her team were exceptional, during what was a very traumatic time. From initial diagnosis, I was treated with dignity and empathy. The Peony suite staff were helpful, caring and provide a very serene setting in which to undergo treatment. Of particular note was the nurse and HCA on duty as I left just before, I didn't get their names, but both picked up on a potential personal issue and took time to check I was safe. Both offered help. VERY intuitive. Thank you.

➔ As I said in the short survey I have just taken, the professionalism and care shown towards me could not be faulted. I was treated with respect and dignity throughout the day and cannot thank the staff enough.

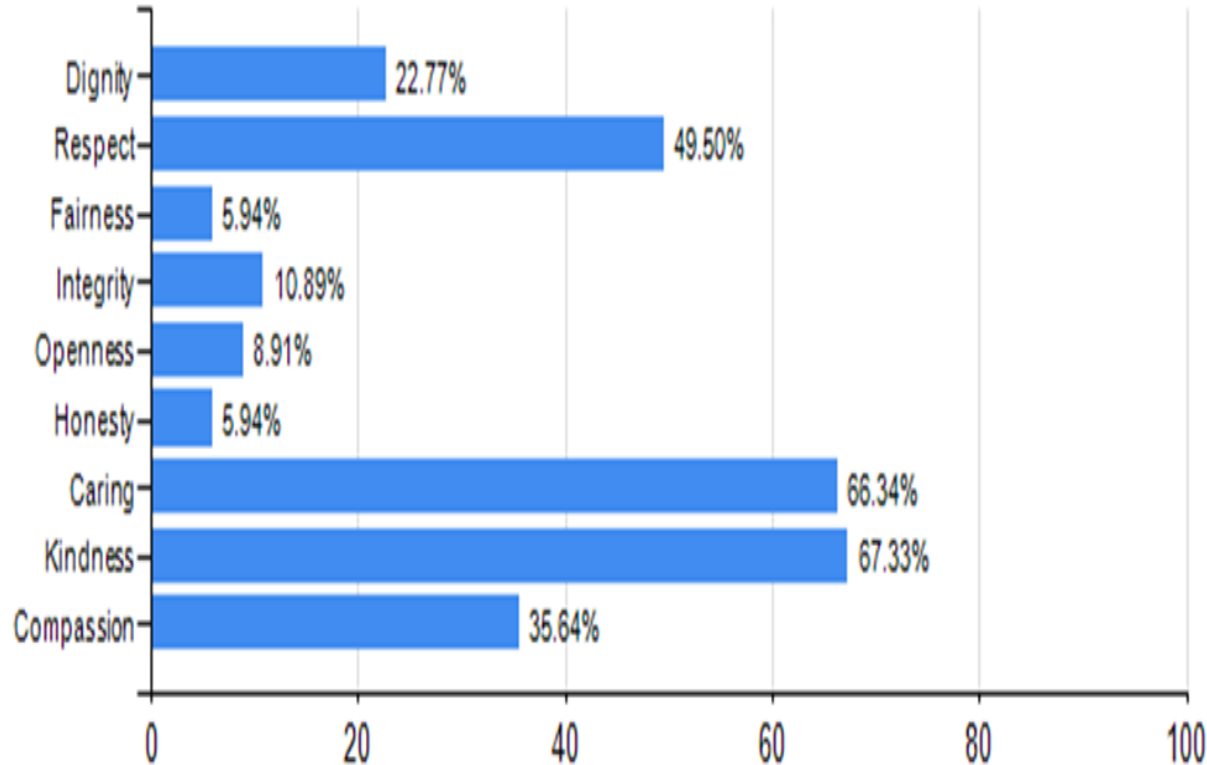
➔ I was in agony and vomiting, but despite that was left to moan and groan in a full waiting room. No dignity and no pain relief for a while. I told them I would vomit up the oromorph, but they took no measures to deal with that and so I was in pain for 10 hours. The doctor couldn't find a vein I was so dehydrated.

➔ Ensure that the elderly have the appropriate care on a ward commensurate to their needs. For example, if they are entering their final days give them some dignity by having them in a ward that's calmer and more peaceful rather than A&E.

[Click here to listen to patient experience](#)

# DIGNITY, RESPECT AND KINDNESS - COMPLIMENTS

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



→ **Dr Thomasine, A&E, Glangwili** - Dr Thomasine treated myself, my aunt and uncle with such kindness, care and respect during our visit yesterday. She was amazing. She spoke in such a lovely manner and was so patient and provided such important reassurance to my Aunt at such a difficult time. She spoke clearly and gave us detailed information along each step of the process. We would all just like to say a massive thank you to her and tell you how lucky you are to have such a fantastic person working for you.

→ **SCBU, Glangwili** - We cannot describe how much we thank you for your exemplary professionalism and kindness whilst \*\* was in your care. We are not first-time parents, but we were found for the first time to be in an extremely difficult situation; however the staff supported us with kindness and compassion as they could see we were experiencing difficult times. They took the time to explain things on multiple occasions.

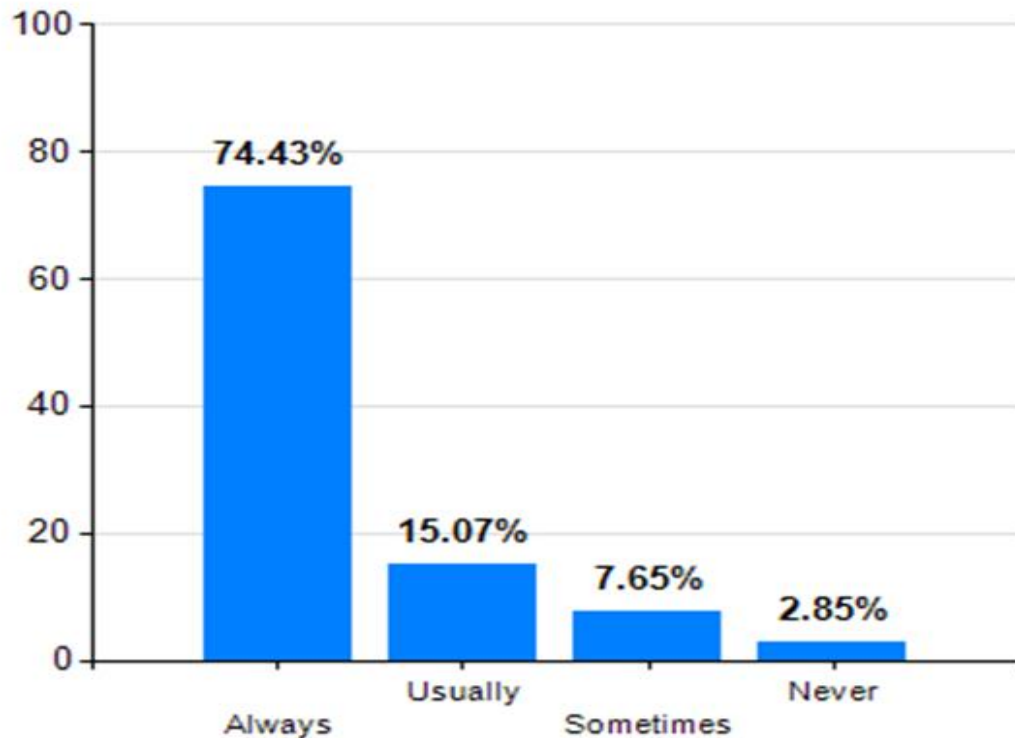
## DIGNITY, RESPECT AND KINDNESS CONCERNS

You Said	We Did
<p>Following my mother's diagnosis, things were distressing and difficult for us as a family. We did not understand what an 'end of life' pathway meant and didn't feel fully informed when discussions took place around it.</p>	<p>We have created a policy called 'Spotlight on Pembrokeshire Specialist Palliative Care Team' which outlines changes being made to improve integrated care and information sharing.</p> <p>The use of forms and documentation is helping to make processes consistent. Information systems are being used to ensure GP's and consultants have oversight of ongoing care.</p> <p>The team have put clinical secretaries in place to provide a single point of contact for patients, families and professionals – and all referrals. This will provide cover at weekends and reduce the chance of missed communications.</p>

# COMMUNICATION

## Your NHS Wales Experience survey

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



The performance for this period is in line with previous performance.



I was seen and treated within 5 hours, good communication and follow up over the next few days, staff were friendly, hospital was clean.



My details were taken in A&E, and I was directed straight to MIU where Brian and Dylan provided gold standard care. Their communication was great, and the unit is run on simplicity which means that it just works the way it should.



Communication problems, rude receptionist who said that I was not allowed to know if I was having a biopsy, and it wasn't a big deal. I explained it was a big deal to me and I needed to know what was going to happen as I needed to travel 34 miles for the consultation and would have appreciated some information and empathy.

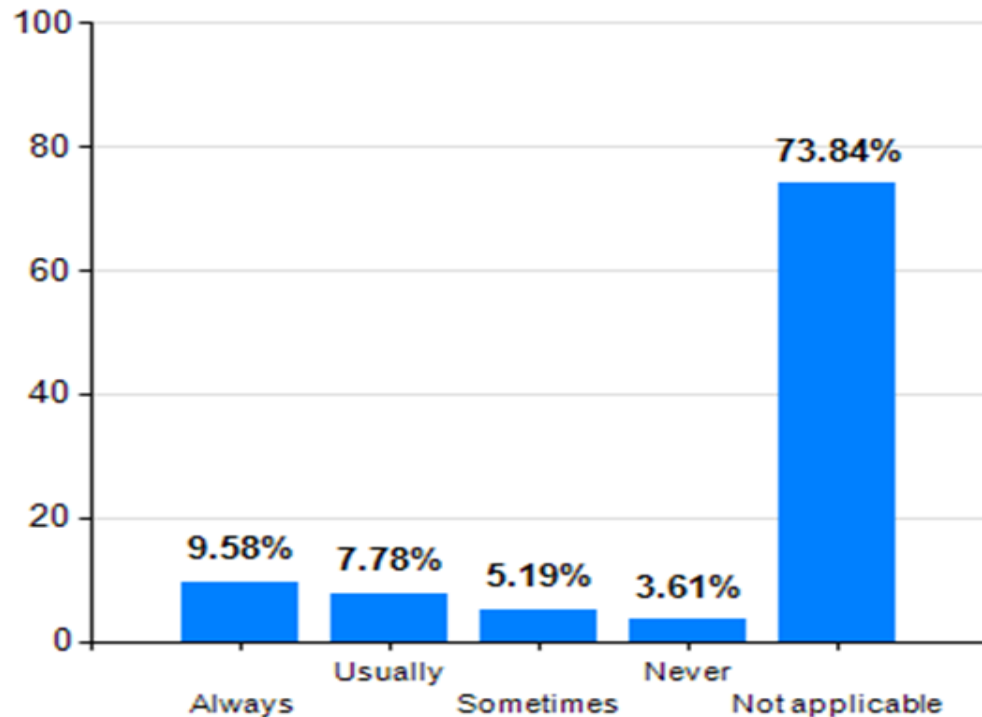


Lack of communication between my GP and the hospital. Nobody talks to each other. Had to tell my GP to phone the hospital to arrange an appointment - that should be standard procedure.

# COMMUNICATION

## Your NHS Wales Experience survey

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



Receptionist spoke Welsh, it put me at ease.



Possibly have a Welsh speaking receptionist at the desk.



Gwasanaeth SDEC yn Aberteifi yn wych a'r stff yn Glangwili yn arbennig. Diolch yn fawr (SDEC service in Cardigan is great and the staff in Glangwili in particular. Thanks a lot)

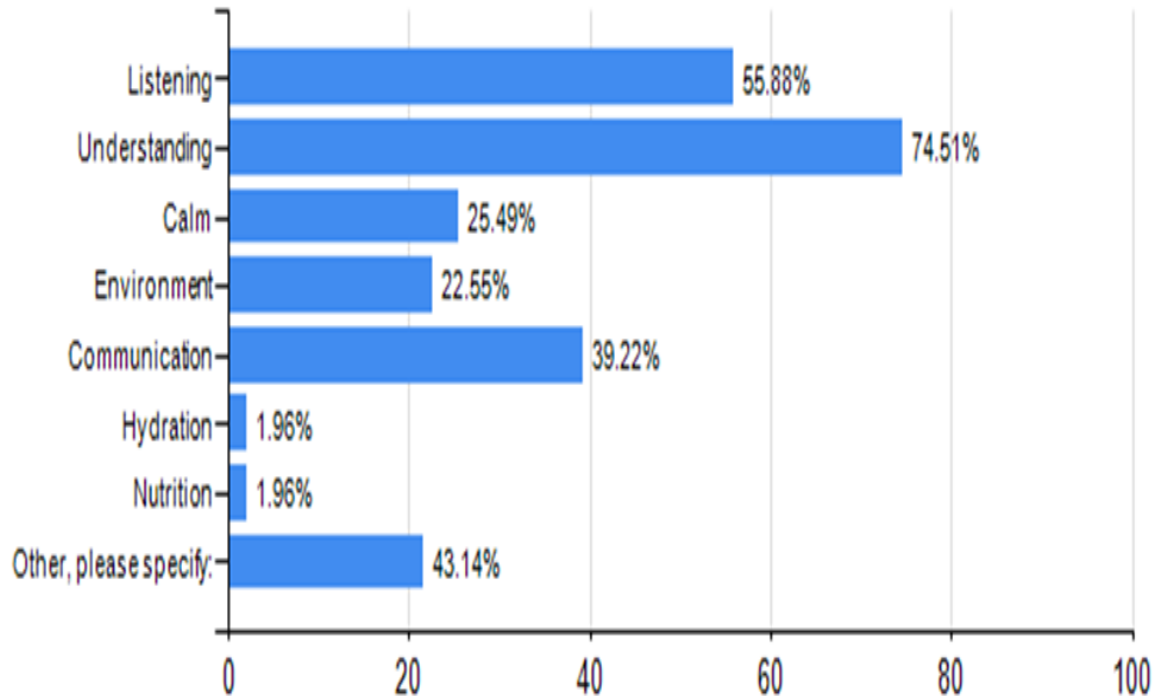


Dim pob ffurflen yn ddwy ieithog (Not all forms are bi-lingual)

There has been a decrease in this period where 9.58 % of responders were always able to speak to a member of staff in Welsh compared to 10.32%. Feedback is available for services to review their data. Both English and Welsh feedback has been provided by service users which has been shared. Of the 32 patients that said 'never' there was no mention of Welsh language issues in their narrative comments. Final discussions are taking place at an All Wales level to revise the question on languages to ensure greater clarity and inclusivity.

# COMMUNICATION - COMPLIMENTS

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



**A&E, Bronglais** - The whole team was good, and I am very happy with my care. Ffion made me feel cared for and valued as an individual; helping me deal with my worries and problems at a very difficult time. Great communication skills, as its difficult for the patient dealing with such a big multi discipline team at such a stressful time



**Endoscopy Department, Bronglais** - Very good communication from the beginning of the process including the admin. Friendly team who communicated what was going to happen and feedback afterwards.

[Click here to listen to patient experience](#)

# COMMUNICATION CONCERNS

During April and May, 40 concerns were received about communication, which has increased by 6 from the previous period.

The main causes of concerns linked to communication remain the same. 35% were around patients being unable to contact staff or services. 28% of concerns linked to communication in this period are due to insufficient or incorrect information being given to patients or families.

A modest reduction in communication complaints was noted in 2023/34 compared to the previous financial year, despite initiatives such as the 'Making a Difference' training programme.

The Quality, Safety and Experience Committee received an update on measures being undertaken to improve communication. This includes:

- ▶ Training – new training programme on compassionate communication; empathy workshops; and increased focus on communication at management and leadership programmes.
- ▶ Accessible Communication – Service Improvement project to improve how sensory loss is identified and addressed by staff
- ▶ Patient Communication – improved process for letters and communicating with patients, via digital or other ways
- ▶ Telecommunications project – modernisation of the telephony systems in the Health Board, improving access and the experience for callers and staff
- ▶ Improving Communication between teams – service improvement project reviewing how test results are reviewed and actioned; access to diagnostic test results for patients; and improved MDT working.

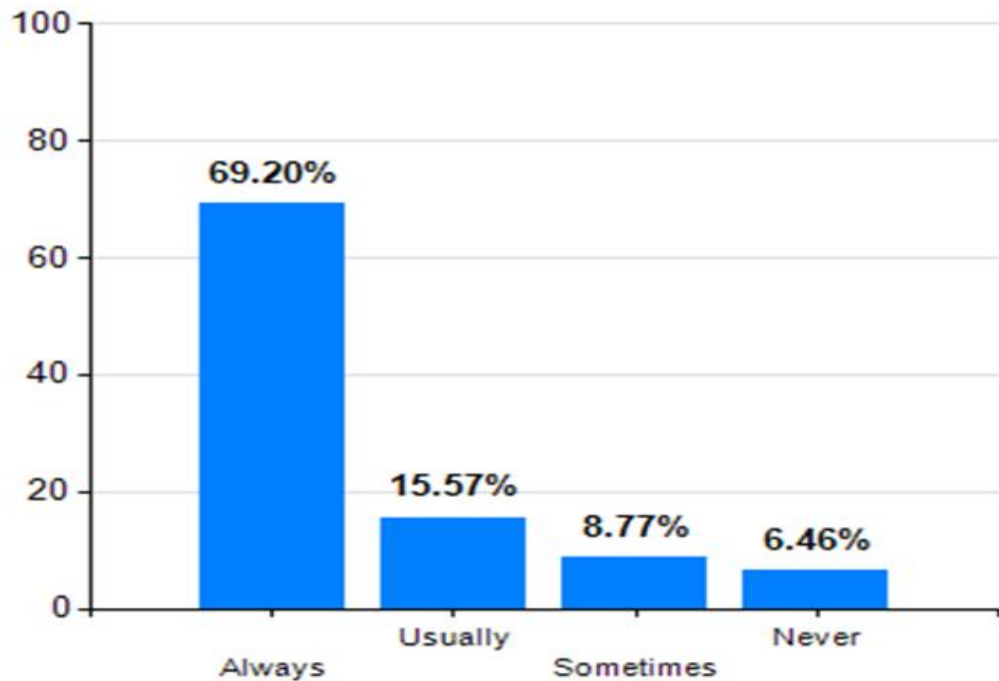
# COMMUNICATION - LESSONS LEARNED

You Said	We Did
<p>I attended the Minor Injuries Unit in Prince Philip Hospital, only to be redirected to the A&amp;E department in Glangwili General Hospital without being treated.</p>	<p>In line with the 'right place, right time' philosophy, the Minor Injuries Unit at Prince Philip Hospital is working with the Communications Team to promote the role of the MIU, so that patients attend the location best suited to their condition.</p> <p>In some instances, it is more appropriate for patients with certain types of conditions to attend an A&amp;E department, which Prince Philip Hospital has not had for several years.</p> <p>In this way, we are recognising the need for improved communication and public awareness regarding the role and of the MIU department, its functions and limitations.</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?



Staff were very friendly despite enormous pressures and long queues. Clear and comprehensive explanations, without talking down.

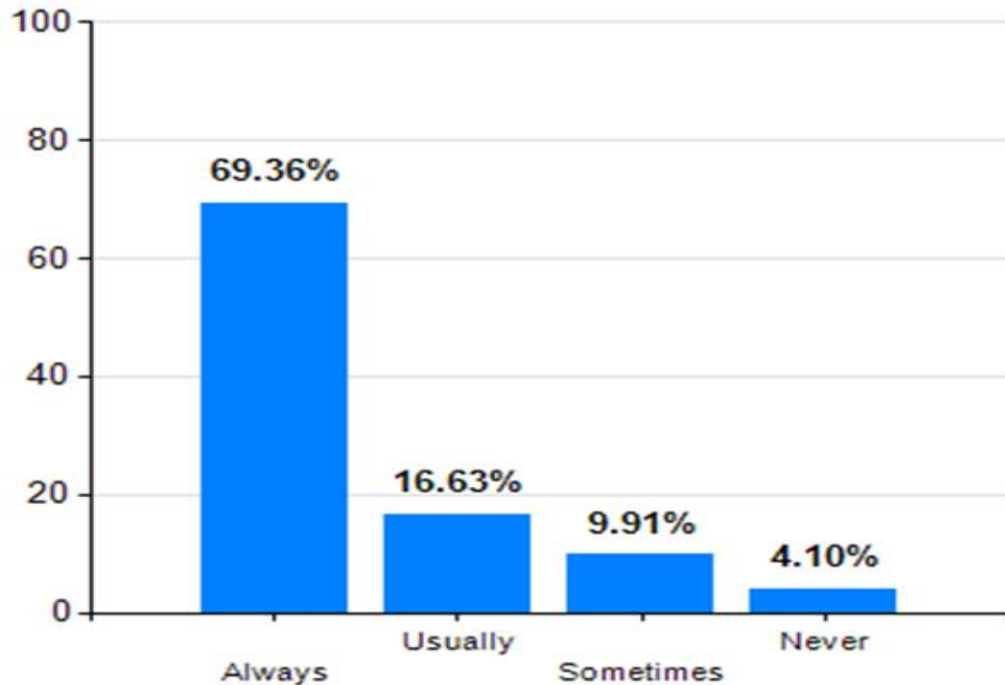


Staff on the ward & in the surgery I could not fault. But I was left feeling like I wasn't properly involved in what happens next & confused that there was a mismatch of initial information received about what is likely the plan & following surgery none were mentioned. This left me feeling concerned & like I wasn't included in any future care or plan.

There has been an increase in this period where 69.20 % of responders were involved in decisions about their care compared to 67.91 % for the previous period.

# 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?



The performance for this period is in line with previous performance.



Dr saw my partner who had neurological symptoms that had worsened. Dr was the most polite, professional and thorough we have encountered in any NHS setting. Left no stone unturned when trying to diagnose the issue with my partners health, even taking the time to hand draw diagrams and explain the condition in simpler to understand terms rather than technical medical/scientific terms. Without a doubt they deserves all the praise in the world.



Was explained in simple words to understand and was showed where the damage was on doctor



Ensure that all consultations about my care are discussed with my family members, as I was not always able to understand or address the issue.

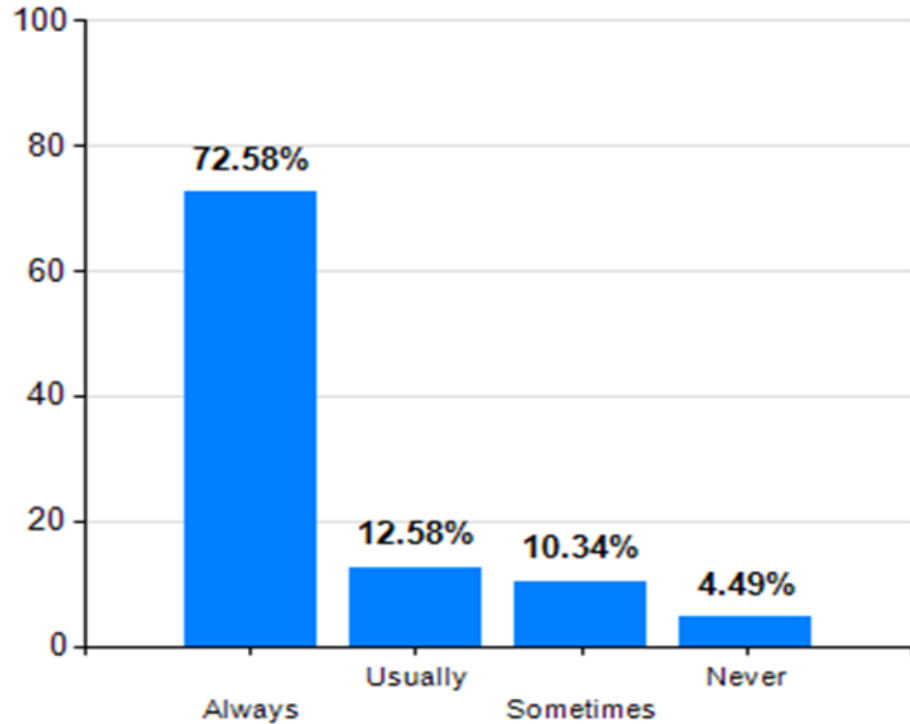


Everyone was very efficient in looking after my husband, we did have quite a wait but that was waiting on blood test results and head scan. The only other problem we had was trying to understand the Dr's and nurses especially my husband being deaf and myself being hard of hearing

[Click here to listen to patient experience](#)

# Your NHS Wales Experience survey

## Did you feel that you were listened to?



The performance for this period is in line with previous performance.



Returning to the surgery I saw an excellent nurse practitioner. Really identified with my need for reassurance and handled my high emotion brilliantly and I was listened to.



The triage was conducted very carefully, and I was really listened to carefully. The Doctor's was very thorough both in her questioning and physical examination. I was reassured.



Really good with my son that has severe learning disabilities. Listened to myself as his mother which made experience for my son better

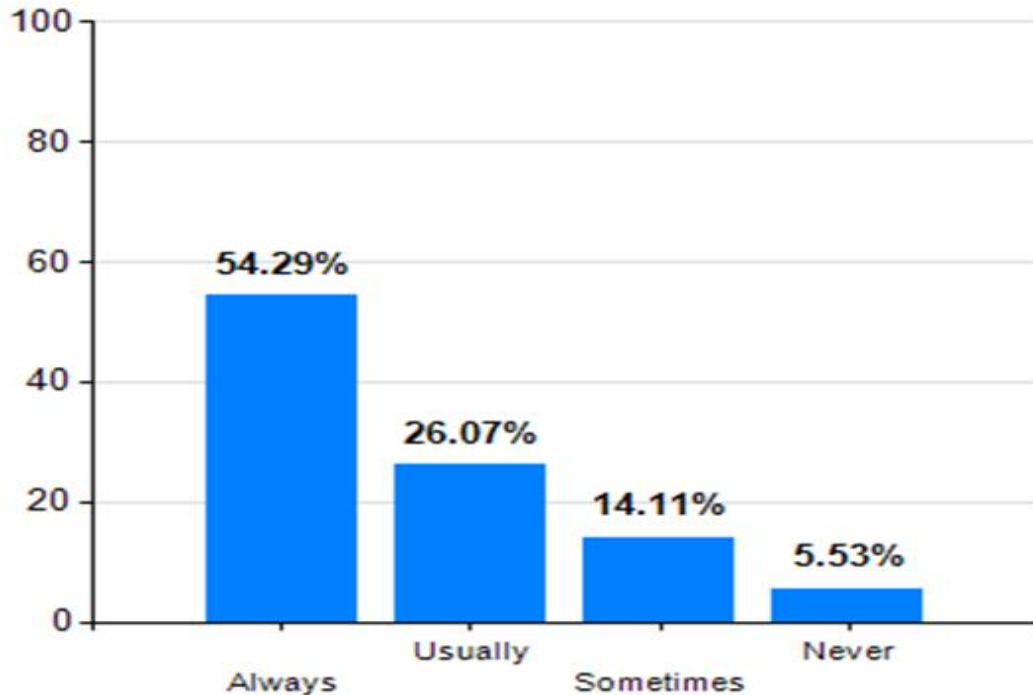


The staff I saw were very understanding and listened to my concern for my health on this occasion this however is not always the case some staff on previous occasions have been very rude and abrupt I understand they are understaffed however there is no need to be rude as I wouldn't be there if I didn't need to be there

# 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?



The performance for this period is in line with previous periods performance.



Excellent service, the staff were all friendly, polite and knowledgeable. Very clean and professional environment, felt efficient.



I would have preferred to have been treated in a ward in a bed, as opposed to having to stay in a recliner chair in a busy corridor next to the noisy admissions desk for 3 days. Staff were brilliant considering the pressure they have to work under due to lack of facilities. I felt extremely uncomfortable waiting for my lift to arrive to take me home, I was almost shoved out by many different admissions/ discharge officials. Such is the desperate state of lack of beds.



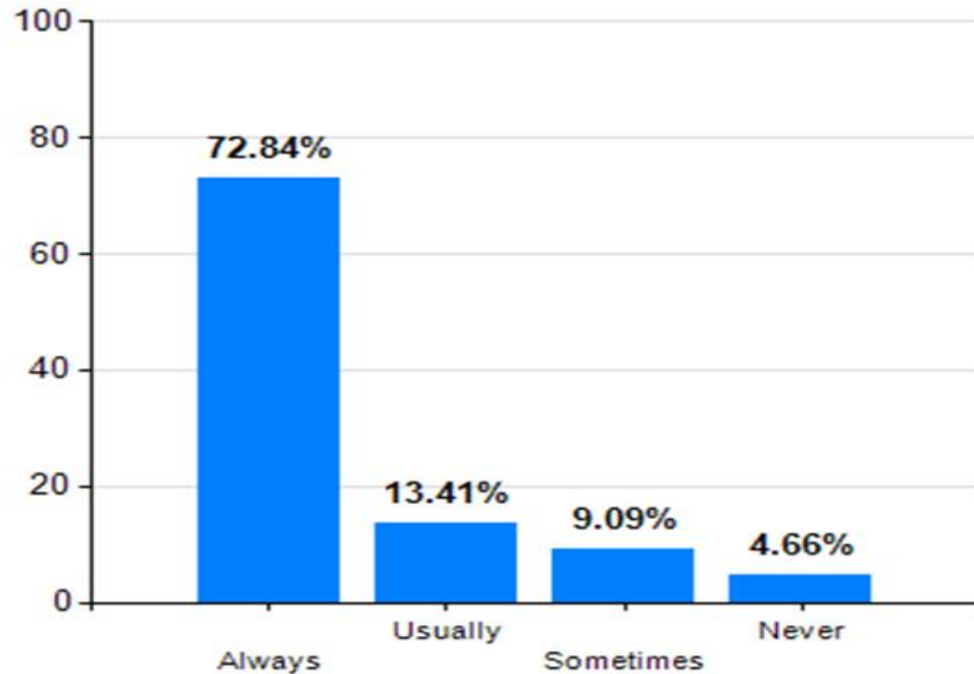
Provide a more confidential setting for early pregnancy. Forms should be made accessible online rather than walking into surgery to complete form. The midwife appointment room was also located in my local surgery which again was not in a confidential setting. I also think that information packs regarding pregnancy should be given as soon as you find out your pregnancy opposed to waiting for your first midwife appointment. I found this wait very stressful and worrying which led me to Google.

[Click here to listen to patient experience](#)

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

## Your NHS Wales Experience survey

### Did you feel well cared for?



72.84% of responders said they always felt well cared for compared to 71.14% for previous period. Sometimes feel safe response has seen a decrease compared to last period 9.09 % compared to 10.63 % for the last period.



I felt cared for. The staff were professional and efficient. At 5 hours, the waiting time was long but understandable given how busy it was. The cardiologist I saw was clear and concise and was able to put my mind at ease. Triage was quick, friendly and efficient.



Staff went about and beyond to make us feel welcome and could not have done more. Cared about the family as a whole and not just patient. They helped look after our son and found ways of getting observations etc that we never would have!



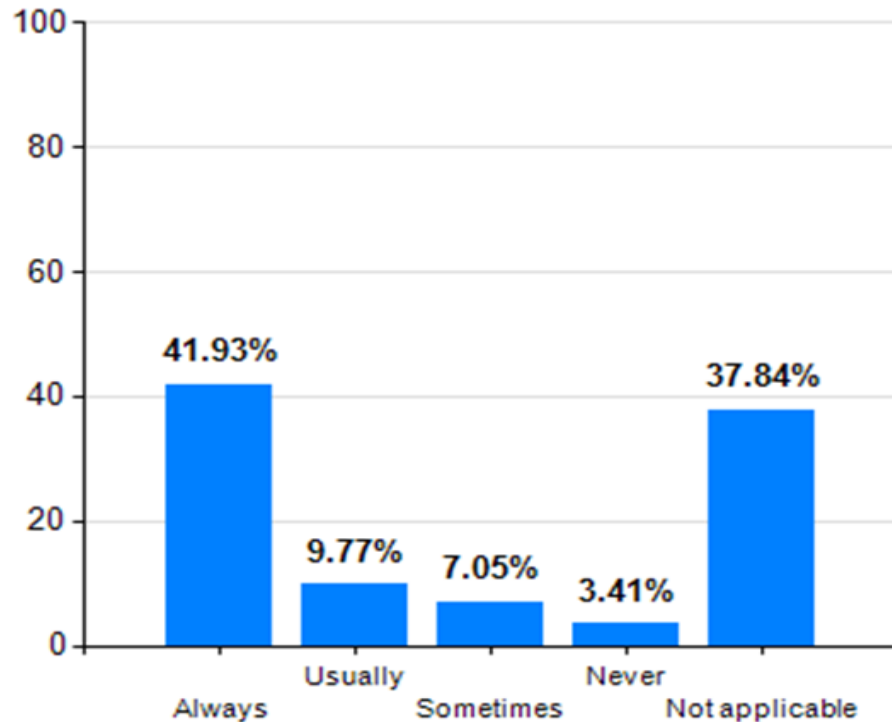
When I was called in to the Dr, I was not offered a seat. The Dr was rude when asking where a female was to attend with me. He was uncaring and dismissive of my concerns and after telling me to go to my Dr if I needed anything else, he walked away and didn't even tell me how to leave the area. This person needs to be more respectful to other members of staff and if this is how he deals with patients who fear what is happening, he may need some HR support for his attitude.

[Click here to listen to patient experience](#)

# 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?



Gave me assistance in getting out of my car from car park.



Grandfather needed urgent assistance. A polite and friendly paramedic arrived and helped him at his home address. We needed an ambulance. We received a good response time. The staff were more than helpful in providing care.



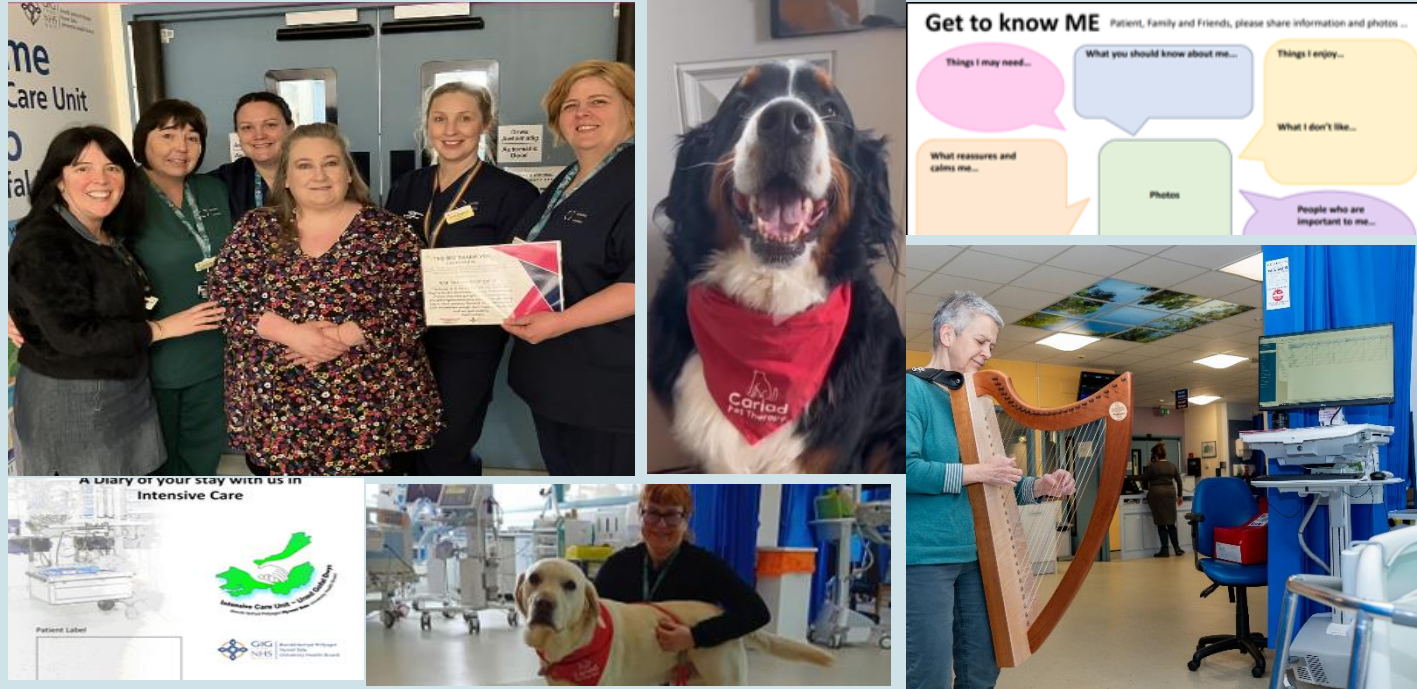
After I waited six hours, I was given a poor consultation and then they said I was given too much morphine. After 30 minutes I had a shock from the morphine with terrible pain. I had to beg for assistance, nobody cared, I had to crawl to the door for help.

37.84% of responders stated this question was not applicable compared to 35.43% for the previous period. 41.93% of responses stated they always getting assistance completed to 42.04% to the previous period.

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

- ▶ 137 concerns received during April and May pertained to clinical assessment and treatment.
- ▶ 55 out of the complaints have been investigated and responses provided. The remaining 82 are being investigated. Typically, clinical investigations can be complex and can take longer to investigate, sometimes spanning many services.
- ▶ 20% of these concerns were about incorrect/insufficient treatment with no single prominent service noted.
- ▶ 86 complaints were received about lack of treatment compared to 64 complaints in the last period. Accident and Emergency received 17% of these concerns, being the most for a single service and an increase from 8% in the preceding. Other services included Trauma and Orthopaedics 13%, Urology 8%, Anaesthetics 4%, Medicine 4%, Orthopaedics 4% and Ophthalmology 4%. The rest were spread in small numbers across the Health Board's services.
- ▶ 9 concerns were received about a delay in diagnosis, or incorrect diagnosis.

# Patient story - Improving Experience in Critical Care



'There is more to life than measuring death' (King's fund, 1989)

# Patient story - Improving Experience in Critical Care

Nadine experienced ICU delirium whilst critically unwell in the Critical Care Unit. Delirium is a temporary state of acute confusion caused by medication, sleep deprivation, pain, infection, lack of oxygen and other medical reasons. Many critical care patients experience this phenomenon (up to 80%). Individuals experiencing ICU delirium can have difficulty with orientation; thinking; reasoning; memory and Concentration; altered perceptions in the form of nightmares or hallucinations.

In her story, Nadine describes her experience, which includes how isolated and fearful she felt when discharged to the ward and subsequently when discharged home. Unaware and unsupported, she did not understand that her experience was common for those who experience a critical illness. Luckily, Nadine was able to seek support through the Critical Care Patient Support Group, where learning from others enabled her to better understand her own experience, allowing for a better recovery.

**Listen to Nadine's story here: <https://youtu.be/GFJQ422xVfQ>**

The Hywel Dda UHB critical care service have sought to develop new practices to enhance patient experience and improve patient quality of life. Nadine's experience highlights the importance of Critical Care Follow up services, specifically for her, the role of the patient support group in facilitating her recovery.

In Hywel Dda UHB individuals are invited to attend a critical care patient support group within 6 months of discharge. Meetings are held in community venues, which rotate across the health board each month. Each session involves a recovery-related talk, as well as the opportunity to meet critical care staff and speak with individuals who share similar experiences. ***“I was firstly nervous about the meeting. I will say it's the best thing I ever did, to know I wasn't the only one, it was a huge relief for me to see other people myself.”***

# Patient story - Improving Experience in Critical Care

## Additional evidence based interventions to enhance patient experience and outcomes:

- ✓ **Pet therapy** - Therapy animal visits to hospitals have a positive impact on patients physically and psychologically. They have also had an additional benefit in supporting staff wellbeing on our units.
- ✓ **Psychological support services** - Providing psychological assessment, support and follow up to Critical Care Patients. *“Your kind and positive words were a large part of my ability to stay alive.”*
- ✓ **Patient diaries** - Providing a factual account of what has happened during a patient's time in critical care. This process is thought to support healthy recovery. *“ I was so grateful for my diary and the effort that was put into completing it. It helped my recovery by filling in the gaps and helping me to decipher what was fact as opposed to what I had imagined/hallucinated”.*
- ✓ **Music therapy** – Patients were reported to be *“smiling whilst music was being played and appeared calmer / relaxed”*. <https://youtu.be/B9IN42fFXIM>
- ✓ **Improved access to information** - Developing digital and printed leaflets to support patient and relative's knowledge and support successful recovery
- ✓ **Bereavement boxes** - Supporting healthy grief by providing relatives opportunities to produce memory boxes for dying relatives
- ✓ **EQUlip programme** - Improved access to early rehabilitation. This project has given rise to several potential areas of service development including:
  - The introduction of “This is me boards” in each bedspace
  - A “Rehabilitation week” in the ICU (week of the 1<sup>st</sup> July 2024) to raise awareness of early rehabilitation
  - Introducing a rehab focused training day for our nursing team

# SAFE AND EFFECTIVE CARE IN AN APPROPRIATE AND CLEAN ENVIRONMENT

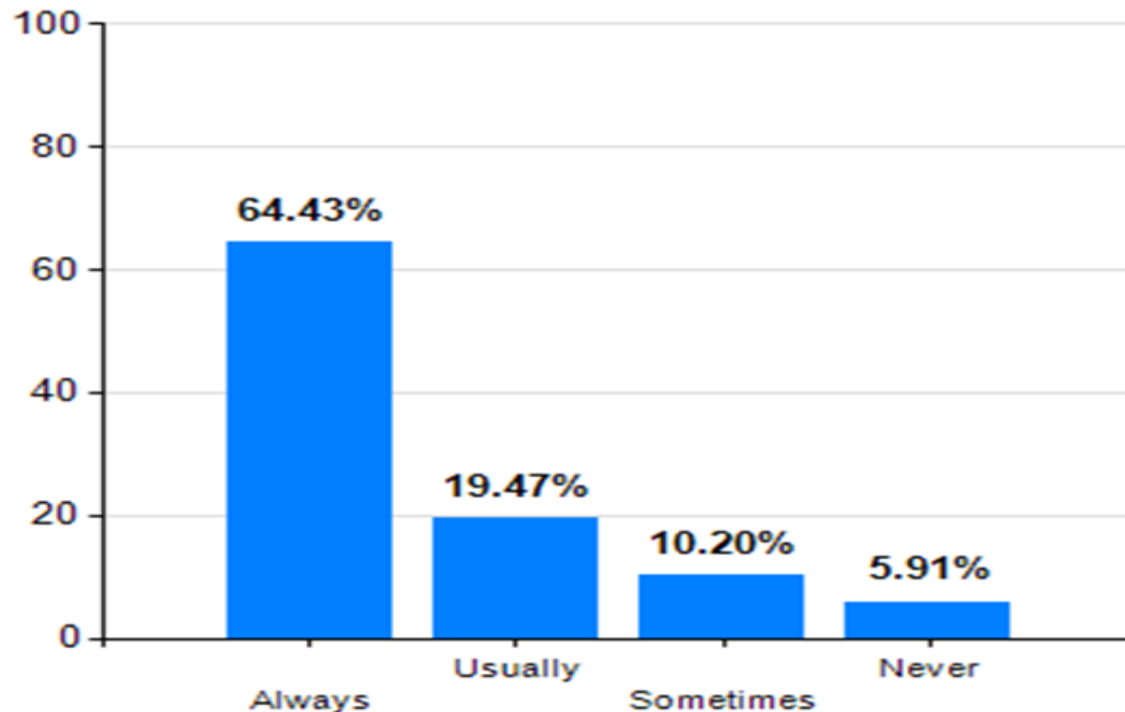
## Lessons Learned

You Said	We Did
<p>When my mother was receiving her final period of care prior to her death, clinical staff did not deactivate her pacemaker which caused us a lot of concern. There was no care and compassion.</p>	<p>An ICD training plan has been developed, incorporating the deactivation of Implantable Cardioverter Defibrillators (ICD's). We reminded our staff that ICD's can be temporarily deactivated with the use of a magnet. These magnets are now readily available in the Emergency Department, the Clinical Decisions Unit, Coronary Care Unit, and the Cardio-respiratory Unit.</p> <p>An all-Wales Framework around ICD's, including deactivation, has since been put in place. There has been focus on patient care and safety within our ward rounds and safety huddles, giving opportunity for escalation of any concerns that require immediate attention.</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 64.43% of responders are encouraged to share feedback compared to 63.90% in the previous period.

# Overall patient feedback

Patient Type	% Positive previously received	% Negative previously received	% Positive	% Negative	Total Responses	Very good	Good	Neither good nor poor	Poor	Very poor	Don't Know
<b>Total</b>	<b>94.2%</b>	<b>5.8%</b>	<b>93.4%</b>	<b>6.6%</b>	<b>6341</b>	<b>4492</b>	<b>1071</b>	<b>338</b>	<b>181</b>	<b>210</b>	<b>49</b>
<b>Community &amp; Primary Care Patient</b>	<b>69.6%</b>	<b>30.4%</b>	<b>39.1%</b>	<b>60.9%</b>	<b>27</b>	<b>8</b>	<b>1</b>	<b>3</b>	<b>3</b>	<b>11</b>	<b>1</b>
<b>Day Case</b>	<b>98.7%</b>	<b>1.3%</b>	<b>97.0%</b>	<b>3.0%</b>	<b>311</b>	<b>266</b>	<b>30</b>	<b>5</b>	<b>5</b>	<b>4</b>	<b>1</b>
<b>Emergency Patient</b>	<b>89.7%</b>	<b>10.3%</b>	<b>90.3%</b>	<b>9.7%</b>	<b>1825</b>	<b>1154</b>	<b>378</b>	<b>115</b>	<b>76</b>	<b>89</b>	<b>13</b>
<b>Inpatient</b>	<b>92.3%</b>	<b>7.7%</b>	<b>93.7%</b>	<b>6.3%</b>	<b>516</b>	<b>379</b>	<b>79</b>	<b>26</b>	<b>11</b>	<b>20</b>	<b>1</b>
<b>Maternity Inpatient</b>	<b>92.9%</b>	<b>7.1%</b>	<b>85.7%</b>	<b>14.3%</b>	<b>15</b>	<b>12</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>2</b>	<b>0</b>
<b>Maternity Outpatient</b>	<b>95.2%</b>	<b>4.8%</b>	<b>89.8%</b>	<b>10.2%</b>	<b>62</b>	<b>42</b>	<b>11</b>	<b>2</b>	<b>1</b>	<b>5</b>	<b>1</b>
<b>Mental Health Inpatient</b>	<b>75.0%</b>	<b>25.0%</b>	<b>66.7%</b>	<b>33.3%</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>
<b>Mental Health Outpatient</b>	<b>93.5%</b>	<b>6.5%</b>	<b>76.7%</b>	<b>23.3%</b>	<b>44</b>	<b>24</b>	<b>9</b>	<b>0</b>	<b>4</b>	<b>6</b>	<b>1</b>
<b>Outpatient</b>	<b>95.9%</b>	<b>4.1%</b>	<b>95.6%</b>	<b>4.7%</b>	<b>3001</b>	<b>2217</b>	<b>476</b>	<b>162</b>	<b>65</b>	<b>58</b>	<b>23</b>
<b>Paediatric Inpatient</b>	<b>96.0%</b>	<b>4.0%</b>	<b>96.3%</b>	<b>3.7%</b>	<b>30</b>	<b>21</b>	<b>5</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>1</b>
<b>Paediatric Outpatient</b>	<b>100.0%</b>	<b>0.0%</b>	<b>72.7%</b>	<b>27.3%</b>	<b>12</b>	<b>8</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>0</b>
<b>Unmapped</b>	<b>97.0%</b>	<b>3.0%</b>	<b>94.4%</b>	<b>5.6%</b>	<b>495</b>	<b>360</b>	<b>81</b>	<b>21</b>	<b>14</b>	<b>12</b>	<b>7</b>

Responses for this period total 6341 compared to 6702 for the previous period. 4492 people responded with a very good rating compared to 4734 in the previous report. Community & Primary feedback responses rating has decreased to 39.1% positive rate compared to 69.6% for the previous period; however, this volatility is due to the very low volume of responses, with there only being 27 for the entire period. A pilot project has been agreed to implement Civica into managed GP practices in Hywel Dda with support from Public Health Wales. This is the first pilot project of its kind and will inform how this is implemented across Wales. Mental Health outpatient has seen a decrease from 93.5% for the previous period to 76.7% for this period in positive feedback. Unmapped resources on the system have been decreased

# Prince Philip General 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
<b>Total</b>	<b>96.1%</b>	<b>3.9%</b>	<b>1506</b>	<b>1135</b>	<b>242</b>	<b>66</b>	<b>31</b>	<b>25</b>	<b>7</b>
Acute Medical Assessment Unit	96.8%	3.2%	32	23	7	1	0	1	0
Cardio Respiratory Department	98.5%	1.5%	67	53	12	1	0	1	0
Day Surgery Unit	100.0%	0.0%	32	27	5	0	0	0	0
Endoscopy Department	91.7%	8.3%	24	20	2	0	1	1	0
Minor Injuries Unit	91.7%	8.3%	318	195	81	14	13	12	3
Outpatient Department	97.3%	2.7%	748	591	101	35	12	7	2
Physiotherapy Department	97.4%	2.6%	41	32	5	3	0	1	0
Pre Op Assessment Clinic	97.8%	2.2%	47	37	7	2	1	0	0
Rheumatology Department	94.7%	5.3%	62	44	10	3	2	1	2
Same Day Emergency Care Unit	100.0%	0.0%	42	38	3	1	0	0	0
Ward 6	100.0%	0.0%	12	11	1	0	0	0	0
Ward 7	100.0%	0.0%	30	27	3	0	0	0	0
Ward 9	88.9%	11.1%	10	6	2	1	1	0	0

# Glangwili General 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
<b>Total</b>	<b>92.6%</b>	<b>7.4%</b>	<b>1838</b>	<b>1261</b>	<b>320</b>	<b>112</b>	<b>53</b>	<b>73</b>	<b>19</b>
<b>Aberglasney Suite</b>	<b>90.9%</b>	<b>9.1%</b>	<b>57</b>	<b>43</b>	<b>7</b>	<b>2</b>	<b>2</b>	<b>3</b>	<b>0</b>
<b>Accident and Emergency Department</b>	<b>87.2%</b>	<b>12.8%</b>	<b>453</b>	<b>261</b>	<b>100</b>	<b>34</b>	<b>22</b>	<b>31</b>	<b>5</b>
<b>Ambulatory Care Unit</b>	<b>73.3%</b>	<b>26.6%</b>	<b>19</b>	<b>8</b>	<b>3</b>	<b>4</b>	<b>2</b>	<b>2</b>	<b>0</b>
<b>Branwen Suite</b>	<b>100.0%</b>	<b>0.0%</b>	<b>24</b>	<b>22</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>1</b>
<b>Cardio-Respiratory Unit</b>	<b>94.7%</b>	<b>5.3%</b>	<b>96</b>	<b>65</b>	<b>24</b>	<b>2</b>	<b>2</b>	<b>3</b>	<b>0</b>
<b>Chemotherapy Unit</b>	<b>100.0%</b>	<b>0.0%</b>	<b>30</b>	<b>24</b>	<b>5</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Childrens Centre</b>	<b>90.9%</b>	<b>9.1%</b>	<b>12</b>	<b>7</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>
<b>Cleddau Ward</b>	<b>100.0%</b>	<b>0.0%</b>	<b>15</b>	<b>14</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Clinical Decisions Unit</b>	<b>100.0%</b>	<b>0.0%</b>	<b>12</b>	<b>8</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Day Surgery Unit</b>	<b>100.0%</b>	<b>0.0%</b>	<b>19</b>	<b>18</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Derwen Ward</b>	<b>91.2%</b>	<b>8.8%</b>	<b>35</b>	<b>24</b>	<b>7</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>1</b>
<b>EEG/EMG Department</b>	<b>92.6%</b>	<b>7.4%</b>	<b>32</b>	<b>19</b>	<b>6</b>	<b>3</b>	<b>2</b>	<b>0</b>	<b>2</b>
<b>Endoscopy Department</b>	<b>96.9%</b>	<b>3.1%</b>	<b>32</b>	<b>29</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>
<b>Madog Suite</b>	<b>91.9%</b>	<b>8.1%</b>	<b>44</b>	<b>25</b>	<b>9</b>	<b>5</b>	<b>2</b>	<b>1</b>	<b>2</b>
<b>Maternity Booking Appointment</b>	<b>100.0%</b>	<b>0.0%</b>	<b>10</b>	<b>6</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>
<b>Medical Day Unit</b>	<b>83.3%</b>	<b>16.7%</b>	<b>18</b>	<b>15</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>
<b>Merlin Ward</b>	<b>90.9%</b>	<b>9.1%</b>	<b>23</b>	<b>16</b>	<b>4</b>	<b>1</b>	<b>0</b>	<b>2</b>	<b>0</b>
<b>Outpatient Department (Blue)</b>	<b>94.6%</b>	<b>5.4%</b>	<b>644</b>	<b>456</b>	<b>105</b>	<b>44</b>	<b>16</b>	<b>16</b>	<b>7</b>
<b>Paediatric Ambulatory Care Unit</b>	<b>100.0%</b>	<b>0.0%</b>	<b>26</b>	<b>19</b>	<b>5</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Picton Ward</b>	<b>96.0%</b>	<b>4.0%</b>	<b>25</b>	<b>19</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>
<b>Same Day Emergency Care Unit</b>	<b>100.0%</b>	<b>0.0%</b>	<b>45</b>	<b>40</b>	<b>2</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Surgical Assessment Unit</b>	<b>78.6%</b>	<b>21.4%</b>	<b>16</b>	<b>8</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>2</b>	<b>0</b>
<b>Tysul Ward</b>	<b>98.1%</b>	<b>1.9%</b>	<b>53</b>	<b>45</b>	<b>6</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>

# Withybush General 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
<b>Total</b>	<b>91.7%</b>	<b>8.3%</b>	<b>1198</b>	<b>790</b>	<b>232</b>	<b>76</b>	<b>44</b>	<b>48</b>	<b>8</b>
<b>Accident and Emergency Department</b>	<b>86.2%</b>	<b>13.8%</b>	<b>380</b>	<b>199</b>	<b>94</b>	<b>35</b>	<b>25</b>	<b>22</b>	<b>5</b>
<b>Adult Clinical Decisions Unit</b>	<b>88.2%</b>	<b>11.8%</b>	<b>21</b>	<b>9</b>	<b>6</b>	<b>4</b>	<b>1</b>	<b>1</b>	<b>0</b>
<b>Cardio Respiratory Department</b>	<b>96.5%</b>	<b>3.5%</b>	<b>116</b>	<b>91</b>	<b>18</b>	<b>3</b>	<b>1</b>	<b>3</b>	<b>0</b>
<b>Child Health Department</b>	<b>93.3%</b>	<b>6.7%</b>	<b>16</b>	<b>11</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>
<b>Day Surgery Unit</b>	<b>94.3%</b>	<b>5.7%</b>	<b>35</b>	<b>27</b>	<b>6</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>0</b>
<b>Endoscopy Department</b>	<b>100.0%</b>	<b>0.0%</b>	<b>12</b>	<b>11</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Fracture Clinic</b>	<b>90.0%</b>	<b>10.0%</b>	<b>12</b>	<b>7</b>	<b>2</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>0</b>
<b>Gynaecology Care Suite</b>	<b>91.7%</b>	<b>8.3%</b>	<b>26</b>	<b>19</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>0</b>
<b>Medical Day Unit</b>	<b>100.0%</b>	<b>0.0%</b>	<b>30</b>	<b>24</b>	<b>4</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Outpatient Department (A)</b>	<b>95.3%</b>	<b>4.7%</b>	<b>295</b>	<b>212</b>	<b>51</b>	<b>17</b>	<b>7</b>	<b>6</b>	<b>2</b>
<b>Physiotherapy Department</b>	<b>98.3%</b>	<b>1.7%</b>	<b>61</b>	<b>47</b>	<b>11</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>1</b>
<b>Same Day Emergency Care Unit</b>	<b>92.3%</b>	<b>7.7%</b>	<b>68</b>	<b>46</b>	<b>14</b>	<b>3</b>	<b>1</b>	<b>4</b>	<b>0</b>
<b>Ward 4</b>	<b>100.0%</b>	<b>0.0%</b>	<b>16</b>	<b>12</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Ward 7</b>	<b>66.7%</b>	<b>33.3%</b>	<b>12</b>	<b>5</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>3</b>	<b>0</b>

# Bronglais General 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
<b>Total</b>	<b>93.7%</b>	<b>6.3%</b>	<b>787</b>	<b>582</b>	<b>122</b>	<b>32</b>	<b>22</b>	<b>25</b>	<b>4</b>
<b>Accident and Emergency Department</b>	<b>91.7%</b>	<b>8.3%</b>	<b>293</b>	<b>197</b>	<b>57</b>	<b>16</b>	<b>9</b>	<b>14</b>	<b>0</b>
<b>Angharad Ward</b>	<b>100.0%</b>	<b>0.0%</b>	<b>10</b>	<b>8</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Cardio-Respiratory Department</b>	<b>100.0%</b>	<b>0.0%</b>	<b>49</b>	<b>43</b>	<b>4</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Clinical Decisions Unit (Green)</b>	<b>88.9%</b>	<b>11.1%</b>	<b>10</b>	<b>8</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>
<b>Day Surgery Unit</b>	<b>100.0%</b>	<b>0.0%</b>	<b>29</b>	<b>28</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Endoscopy Department</b>	<b>95.5%</b>	<b>4.5%</b>	<b>22</b>	<b>17</b>	<b>4</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>
<b>Integrated Sexual Health Clinic</b>	<b>94.1%</b>	<b>5.9%</b>	<b>17</b>	<b>16</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>
<b>Outpatient Department</b>	<b>93.7%</b>	<b>6.3%</b>	<b>264</b>	<b>192</b>	<b>44</b>	<b>10</b>	<b>11</b>	<b>5</b>	<b>2</b>
<b>Paediatric Ambulatory Care Unit</b>	<b>88.9%</b>	<b>11.1%</b>	<b>10</b>	<b>6</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>
<b>Paediatric and Antenatal Clinic</b>	<b>88.9%</b>	<b>11.1%</b>	<b>10</b>	<b>7</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>
<b>Rhiannon Ward</b>	<b>94.1%</b>	<b>5.9%</b>	<b>18</b>	<b>15</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>

# Community Hospitals

Main Location	% Positive	% Negative	Total Responses	Very good	Good	Neither good nor poor	Poor	Very poor	Don't Know
<b>Total</b>	<b>93.6%</b>	<b>6.4%</b>	<b>415</b>	<b>305</b>	<b>62</b>	21	11	14	2
<b>Aberaeron Integrated Care Centre</b>	<b>90.0%</b>	<b>10.0%</b>	<b>35</b>	20	7	4	2	1	1
<b>Amman Valley Hospital</b>	<b>95.2%</b>	<b>4.8%</b>	<b>24</b>	17	3	3	1	0	0
<b>Cardigan Integrated Care Centre</b>	<b>93.1%</b>	<b>6.9%</b>	<b>244</b>	181	36	11	7	9	0
<b>Llandovery Hospital</b>	<b>87.5%</b>	<b>12.5%</b>	<b>8</b>	6	1	0	0	1	0
<b>South Pembrokeshire Hospital</b>	<b>95.1%</b>	<b>4.9%</b>	<b>41</b>	30	9	0	1	1	0
<b>Tenby Cottage Hospital</b>	<b>100.0%</b>	<b>0.0%</b>	<b>61</b>	51	6	3	0	0	1

# Mental Health Service Feedback

This Word Cloud has been created by using feedback from the Mental Health Service.



- The psychiatrist and occupational therapist came to the home because my grand daughters anxiety is so bad. They allowed her to direct the pace of the meeting, consequently she felt confident enough to agree to meet them a second time. I only have good words to say about them , they have been helpful all the way through.
- The staff were all very helpful. I had questions answered and felt satisfied when I finished my visit. I had gone in depressed and came out a happy person.
- Kind caring psychiatrist. Has time for you and identifies your needs.

# Paediatric Surveys



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

During the months of April and May, the overall number for the paediatric questionnaires has increased by 16 responses to a total of 71 responses.

47 responses for the Parents & Carers questionnaire, 13 responses for the 12-16 years questionnaire, and 11 responses for the 4-11 years questionnaire.

The team will be working closely with play specialists to encourage 12-16 year olds to provide feedback of their experience.

The team has been working with the community Paediatric team to support them with a bespoke survey and we hope to share information with you in the next report.

# Paediatric Surveys



Below are some of the comments that Carers and parents are sharing with us regarding the paediatric wards across the Hywel Dda University Health Board:

“everyone is friendly. I was made to feel physically comfortable and relaxed.” – 12-16 years old Survey

“Every member of staff went above and beyond and made me feel heard when it came to my anxiety before my general anaesthetic. The care I received was amazing.” – 12-16 years old Survey

“My appointment was cancelled without me being told so I turned up to clinic with my mum and was sent home.” – 4 to 11 years old Survey

“I just want to say all of the staff are amazing, lovely, caring, kind and supportive. Going to miss you all. You are a credit to the hospital and they are so lucky to have you. Thank you for looking after my child, me and Tom. We cannot thank you enough. Keep being your lovely selves. Angharad Ward is fantastic!!!!!!” – Parents Survey

“At night, I heard screaming and crying” – 4 to 11 years old Survey

“Staff were very friendly and child focussed. I am disabled and a wheelchair user. this made the process more difficult and meant that I was unable to stay overnight with my child. This in turn caused distress and upset for my child that would not have been an issue if there were provisions to allow for disables parents. I’m not sure how this could be accommodated in future” – Parents Survey

# Feel Good Friday

The team continue to visit services to 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 CCU TEAM - GLANGWILI HOSPITAL



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 DERMATOLOGY TEAM PRINCE PHILIP HOSPITAL



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 RHIANNON WARD BRONGLAIS HOSPITAL



# Arts and Health at Hywel Dda

## Funding News:



Hywel Dda Charitable Funding secured to continue our arts and health provision for

- Our inpatients with dementia right across the health board (£64,220.00)
- Our therapeutic live music for critical care. (£7200)

## Listen:

[St Nons patient singing](#)

Clay pot by Glangwili patient



## Our Printmaking Workshops for Bronglais Cancer Treatment Unit



“The whole experience was memorable and has imprinted on me. I am engaging in more art activities in my own time”

**Watch:** [Live music in ITU / https://youtu.be/B9IN42fFXIM](https://youtu.be/B9IN42fFXIM)

**Read** [Evaluation Publications - TriTech Institute \(nhs.wales\)](#)

## Hywel Dda Tri Tech Reports on Arts and Health Published:

**Creative Prescribing Discovery Programme** - Cross-sector partnership project designed to explore how best to embed evidenced based arts activity into social prescribing practice across the health board to reduce health inequalities

**Arts Boost** - Year 2 - A partnership project with our S-CAMHS colleagues using the arts to improve mental health in children and young people known to Hywel Dda Children and Adolescent Mental Health Service.

## Award winning:



## Read:

[Recycled vaccine lid artwork wins at the Welsh Sustainability Awards - Hywel Dda University Health Board \(nhs.wales\)](#)

## Hywel Dda Arts and Health Charter Published!

“What an absolute joy it was to be part of yesterday’s event! It was a fantastic programme, brimming with success and support from all sides. So wonderful to hear from patients and staff and to see some of the beautiful work on show” Liz Clarke, Arts Council of Wales



Hywel Dda University Health Board

## Arts and Health Charter

Integrating the arts into the work of the health board to improve health and wellbeing and promote healing and recovery

“This is a game changer – first of its kind in Wales – fantastic work everyone!” Angela Rogers, Director of Wales Arts Health and Wellbeing Network

# 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, 6341 people shared their experience during this period, which is appreciated. 93.4% were happy with their experience.

Feedback captured in real time via surveys is collected from patients who are staying in our hospitals; or from patients who access the survey following their attendance. 93.4% reported that their experience has been positive compared to previous surveys, which average 94.2 %.

- **Prince Philip General Hospital** 1135 received feedback responses with 96.1% providing a positive score compared to 95.3 % for the previous period. All services received a score of over 94%, with the exception of Ward 9 which scored 88.9 %. Day Surgery, Same Day Emergency Care Unit, ward 6 and 7 all receiving 100%.
- **Glangwili General Hospital** received 1838 feedback responses with 92.6% providing a positive score, compared to 92.7% for the previous period. All services received over 83%, with the exception of Ambulatory Care and Surgical Assessment Unit which scored 73.3% and 78.6%. Branwen suite, Chemotherapy unit, Cleddau Ward, Clinical decisions unit, Maternity bookings, Paediatric Ambulatory Care Unit and Same Day Emergency Care Unit all receiving a 100% positive rating.
- **Withybush General Hospital** received 1198 feedback responses with the same positive response rating as the previous period of 91.7%. All services scored 88% or above, with the exception of ward 7 which scored a 66.7% . Endoscopy, Medical Day Unit and Ward 4 received a 100 % experience score.
- **Bronglais General Hospital** received 787 feedback responses, with a 93.7% a positive score compared to % for the previous period. All services received a score of 90% or above, with the exception of Paediatric Ambulatory Care, Antenatal Care Clinic and Clinical Decisions Unit which scored 88.9%. with Day Surgery, Angharad Ward and Cardio – Respiratory receiving a 100% positive score.
- 415 people responded about their experience of attending our **community hospitals** compared to 364 for the previous. 93.6% felt positively about their experience compared to 94.6% for the previous period. All received over 90% positive rating, with the exception of Llandovery Hospital which scored 87.5%. Tenby Cottage Hospital received a 100% positive score.