

Health and Social Care (Quality and Engagement) (Wales) Act Annual Report



How we met the Duty of Quality between April
2024 and March 2025

Welcome from the Chair of the Quality, Safety and Experience Committee and Interim Director of Nursing, Quality and Patient Experience

We are pleased to present our Annual Quality Report for 2024-2025. This report provides a comprehensive overview of our ongoing commitment to delivering the highest quality standards of care and services to our patients, their families, and the wider community.

At the heart of our mission lies an unwavering duty of quality. This duty compels us to continuously evaluate and enhance the care that we provide, ensuring it is safe, effective, timely, equitable, and patient-centred.

This report enables us to be held accountable by the public for the care we provide, considering quality in its broadest sense. The Health and Care Quality Standards are a set of standards developed to ensure good quality care and services provided by the NHS in Wales. They include six domains of quality and six quality enablers, which together provide a high-level framework for planning, decision-making, delivery, and monitoring of health services. We have used these domains to structure this report. While it is impossible for us to include information about every service we provide, it is our hope that the report provides a transparent account of our commitments to deliver safe, timely, effective, efficient, equitable, and patient-centred care. This report references documents and information that are in the public domain, including reports to Health Board committees and reports from external organisations. We are reviewing how we make these resources easier for the public to access in the near future, but for the purpose of the 2024/25 Annual Quality Report, we have included links to more detailed reports and documents throughout.

Our commitment to quality is reflected in the collaborative efforts of our dedicated staff, who work tirelessly to uphold the values of the organisation and to care for our population. Their professionalism, compassion, and resilience have been instrumental in navigating the complexities and challenges that we have faced in the past year. We acknowledge that the care we have provided sometimes falls short of the standard that the population should expect, and that the legacy of the pandemic means that people continue to wait far too long for treatment. We remain steadfast in our dedication to fostering a culture of excellence, where quality improvement is integral to everything we do.

We extend our heartfelt thanks to our colleagues and partners in health and to the people who have used our services and who have provided us with feedback and information that allows us to shape our services. Together, we will continue to strive for improvements in the care that we provide.

Looking ahead, we are committed to learning from our experiences, making improvements in areas that matter to our patients, residents, and staff, and ensuring all our strategic decisions are made through a quality lens. We will continue to work collaboratively with our partners and the community to deliver the highest standards of care and services.



**Anna Lewis, Independent Member – Community,
and Chair of the Quality, Safety and Experience
Committee**



**Sharon Daniel, Executive Director of Nursing,
Quality and Patient Experience**

About the Annual Quality and Engagement Act Report

Welcome to our Annual Quality and Engagement Act Report for 2024 to 2025. This report is intended for our population, as well as our Board. It gives us the opportunity to share with you how we are fulfilling our requirements under the Health and Social Care (Quality and Engagement) (Wales) Act 2020 (the Act).

The Health and Social Care (Quality and Engagement) (Wales) Act became law on 1 June 2020 with its full implementation completed April 2023. Its intention is to:

- Ensures that NHS bodies and ministers think about the quality of health services when making decisions;
- Ensures NHS bodies and primary care services are open and honest with patients, when something may have gone wrong with their care; and
- Creates a new Citizen Voice Body to represent the views of the people across health and social care.

There are two main duties under the Act which the Health Board must consider.

The Duty of Quality

Quality is more than just meeting service standards; it is a system-wide way of working to provide safe, effective, person-centred, timely, efficient and equitable health care in the context of a learning culture.

Significant progress has been made to improve the quality of health services in Wales but we still have challenges and changes that we must make to achieve better outcomes for patients across Carmarthenshire, Ceredigion, Pembrokeshire and the borders.

The Duty of Candour

The key intention of the Duty of Candour is to promote a culture of openness, learning and improving that is owned at organisational level, whether a person receives care from the NHS, or from a regulated provider of health care services, and that person can be assured that they will be dealt with in an open and honest way by their care provider. Separate work is being taken forward by Welsh Government to make Regulations to place a duty of candour on providers of independent health care in Wales, using powers under the Care Standards Act 2000.



Meeting the Duty of Quality: how we are ensuring we provide quality services

The health board recognise the importance of the Duty of Quality in meeting service standards and in ensuring we provide safe, effective, person-centred, timely, efficient and equitable health care in the context of a learning culture.

The duty means that we must think and act differently by applying the concept of “quality” across all our services. We are required to have quality-driven decision-making and planning, which ultimately delivers better outcomes for all people who require health services. We are required to involve people in decisions that affect them, balancing short-term needs with planning for the longer-term, with action to prevent problems occurring or getting worse.

Quality Governance

Our Quality, Safety and Experience Committee provides accurate, evidenced, (where possible) and timely advice to the Board to assist it in discharging its functions and meeting its responsibilities with regard to the quality and safety of healthcare; and seeks assurance in relation to the organisation’s arrangements for safeguarding and improving the quality and safety of healthcare and subsequently provide assurance to the Board. We publish our Quality, Safety and Experience Committee meeting agendas and papers on our internet. This is the link to the page where you will find more information [Quality, Safety and Experience Committee \(QSEC\) - Hywel Dda University Health Board](#)

Our governance structures and processes have evolved to support the principles of the Duty of Quality to provide a continuous focus on the quality-of-care provision and an ongoing focus on driving improvements in care and outcomes.

Quality Management System

The overarching aim of our quality management system (QMS) strategic framework is to provide a system-wide approach to achieving quality of care in a way that secures continuous improvement. The strategic framework sets out our approach, structure and tools to empower staff to lead and deliver services that meet quality and safety expectations and standards.

Putting people who use our services, patients, and carers at the centre of everything we do is important, working together as one Hywel Dda team, ensuring we have the data, resources, engagement, and support required to deliver on a quality service through our system. Our QMS framework and the board strategic objectives act as an enabler to this.



Quality Planning

Throughout the year, we have worked on improving quality by understanding our priorities for improvement, understanding the need from the population perspective, identifying the gaps in what is provided and identify the priorities for redesign and continuous improvement.

Due to the nature of service provision across Mid and West Wales, it is recognised that a wide range of services have some fragilities. This was a key driver behind the development of the Health Board’s strategy which seeks to reduce, if not eliminate, the risks to sustainable service provision.

Our strategy called [‘A Healthier Mid and West Wales: Our future generations living well’](#), which was first launched in 2018, outlined the ambition to shift from a service that just treats illness to one that keeps people well, prevents ill-health or worsening of ill health, and provides any help you need early on. Until the strategy is fully implemented, in particular the establishment of the proposed new hospital network, services are having to manage these fragilities on a daily basis. In November 2024, we provided an [update on this strategy to the Board](#).

Our Clinical Services Plan

The pandemic further exposed deficiencies, with many services unable to restore pre-COVID activity levels or service models. Our clinical services plan, aims to review services that are in urgent need of attention so we can develop a set of plans to support key services over the medium-term ensuring that a quality service is delivered

Further information about this work can be found on our website [Clinical services plan - Hywel Dda University Health Board](#)

Quality Control

We aim to provide safe and timely care for our patients. To help achieve this we have identified some key areas where we want to make improvements. In addition, we have identified areas where we are performing well and want to maintain this or, where possible, make further improvements.

In January 2025, the Board reviewed and updated the organisational strategic objectives. The four new strategic objectives are: thriving workforce, healthier communities, great care and positive futures

“Healthier Lives, Well Led”



**Thriving
Workforce**



**Healthier
Communities**



Great Care



Positive Futures

Quality Assurance

During 2024/25, we have reported our progress against our strategic objectives at our [Board meetings](#). Each month we produce a performance report, in the format of a dashboard, to show our progress in these key areas. The report is examined by our Board and Committee members.

A quality dashboard is also available for services and directorates so that they can monitor their performance in relation to the strategic objectives set by the Board.

The Board is committed to reshaping pathways based on outcomes and is using Value Based Health Care to take this forward. To ensure that quality is considered in all strategic decisions, a Quality Impact Assessment Tool has been introduced. Each assessment is considered by the Quality Impact Assessment Panel which ensures that there is clinical oversight of the decisions being requested.

Quality Improvement

In 2018, we made an investment to build its capacity and capability for Quality improvement (QI). In March 2023, the Board approved the updated Quality Improvement Strategic Framework. Our Enabling Quality Improvement in Practice (EQIIP) Programme provides teams with the arena to:

- Come together to agree and prioritise the areas they want to improve;
- Meet regularly to review data and feedback, discuss issues, review progress, and agree actions;
- Agree key improvement measures and making data easily accessible to aid decision making;
- Work on improvement projects aligned to the team’s priorities utilising QI skills and tools and engaging in EQIIP for more complex multi-disciplinary improvement; and
- Share good ideas across the Health Board to help others.



VISUAL BY ELEANORBEER.COM 2023

As well as the improvement projects being undertaken through EQIIP, the Quality Improvement and Service Transformation (QIST) team supports services with designing and implementing improvement projects in response to national and local initiatives and priorities.

Our quality improvements during 2024/25

Using the Health and Care Quality Standards, examples of some of the improvements we have made are outlined below.



The Health and Care Quality Standards

To understand what good quality means and how we can ensure quality is considered across a number of areas, twelve Health and Care Quality Standards have been developed. The Standards comprise of six domains of quality and six quality enablers.

Safe – how we ensure that we provide high quality, highly reliable and safe care that avoids preventable harm, maximising the things that go right and learning from when things go wrong to prevent them occurring again.

Timely – how we ensure that our patients have access to the high-quality advice, guidance and care they need quickly and easily, in the right place, first time.

Effective – how we ensure decision-making, care and treatment reflects evidence-based best practice, to ensure that our patients receive the right care to achieve the best outcomes possible for them.

Efficient – how we make take a value-based approach to improve outcomes that matter most to our patients in a way that is as sustainable as possible and avoid waste.

Equitable – the arrangements we have to ensure that people in Hywel Dda are provided with an equal opportunity to attain their full potential for a healthy life.

Person Centred – how we meet the needs of our patients, ensuring that their preference and values guide our decision making and that we treat everyone with kindness, empathy and compassion, respecting their privacy, dignity and human rights.

The quality standards are supported by six quality enablers: leadership, workforce, culture, information, learning, improvement and research, and whole-system perspective.

Living Well Centre, Carmarthen

In response to public demands for better coordination of services and a willingness from multiple delivery partners to share resources and co-locate, a Living Well Centre has been developed in Carmarthen. Serving the whole of Carmarthenshire, the centre hosts an array of primary care health, third sector, and support services ranging from mental health, dementia, and carer support to information and advice, education, arts, and exercise classes. With over 20 partner organisations currently committed to using the facility, the centre provides clients and visitors with a coordinated and joined-up approach that empowers the individual.

The impact of the Living Well Centre has been significant. Clients and visitors have reported improved access to services and a more holistic approach to their care.

Looking ahead, the Health Board is pleased to support PLANED with this initiative, which demonstrates a whole system approach to service delivery. The centre aims to continue expanding its services and reach, ensuring that every individual in Carmarthenshire can benefit from the coordinated and comprehensive support provided.



Improving Patient Experience – Prince Phillip Hospital

The team at Prince Philip Hospital is taking significant steps to enhance patient experience. In the Minor Injuries Unit, they have installed boards in the waiting room that provide seasonal health information and tips on staying well, such as the importance of hydration. Additionally, a leaflet has been developed to inform patients registering that they may be redirected to a more relevant service, such as the Same Day Emergency Care Unit or a community pharmacy, following triage. The department has also added a water fountain and mobile phone charging points to improve patient comfort.



In the Same Day Emergency Care Unit, patients are now provided with hot lunches, whereas previously only sandwiches were available. This change has been well-received by patients, who appreciate the warm meals during their short stay.



On Ward 3, an art group visits twice monthly to offer patients with dementia opportunities for creative expression through art. The ward also plans to make alterations in the day room to accommodate a vanity unit for ladies' hairdressing and manicures. In response to miscommunication with relatives and patients regarding discharge planning, the Ward Manager has collaborated with the Discharge Liaison Nurses to provide education for medical staff on the discharge process. The multidisciplinary board round has also been strengthened to ensure robust discharge planning.



On Ward 5, the Ward Manager speaks to every patient daily, introducing herself and asking if they have any concerns. If any concerns are raised, action is taken promptly. Patients are also informed of the location of the sister's office and advised to highlight any concerns to the Nursing Staff or the Ward Manager if they feel their concerns have not been addressed. The aim is to improve the patient experience and prevent any complaints.



Looking ahead, the team at Prince Philip Hospital aims to continue their efforts in enhancing patient experience and expanding these improvements to other departments. They are committed to ongoing education and support, ensuring that every patient receives the best possible care.

Hywel Dda Health Charities – helping improve quality in care

Hywel Dda Health Charities is the official charity of Hywel Dda University Health Board. The aim of our charity is to make a positive difference to the health, wellbeing and experience of NHS patients, service users and staff across Carmarthenshire, Ceredigion and Pembrokeshire.

Thanks to donations, Hywel Dda Health Charities has been able us to improve patient experience and the quality of care. Examples of where improvements have been made are outlined below. Further details can be found <https://hyweldahealthcharities.nhs.wales/news/charity-news/>



Gardening Equipment for St Non Ward



The NHS Charity has funded a variety of gardening items for St Non Ward, the Older Adult Mental Health Ward at Withybush Hospital. The raised garden beds, bird bath, greenhouse, plant pots, wind spinners, and watering can enable the Occupational Therapy Team to provide a positive patient experience through gardening sessions. These sessions offer movement, sensory,

emotional, cognitive, and social benefits to the older adults on the ward.

The gardening activities have significantly improved the well-being of patients by providing them with a sense of purpose and accomplishment.

Looking ahead, the Occupational Therapy Team aims to continue offering these gardening sessions and expand the range of activities available to patients. The team is committed to ongoing support and care, ensuring that every patient can benefit from the therapeutic effects of gardening.

3D hand and foot casting moulds for families supported by the Paediatric Palliative Care Service

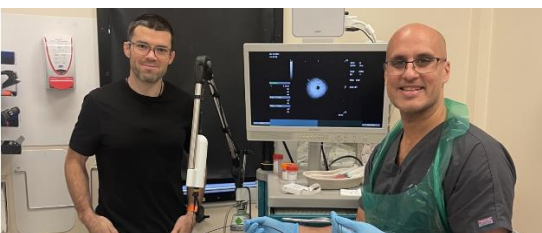


The NHS charity has funded materials to make 3D hand and foot casting moulds for families supported by the Paediatric Palliative Care Service. These moulds are given for special moments such as birthdays or Christmas, providing families with cherished keepsakes that are meaningful and a vital aid in the grieving process.

The 3D casting process allows families to create detailed and lifelike replicas of their child's hands and feet, capturing a moment in time that they can treasure forever.

Looking ahead, the Paediatric Palliative Care Service aims to continue offering this service to more families, ensuring that every family has the opportunity to create these precious keepsakes. The team is committed to ongoing support and care, helping families through their journey with compassion and understanding.

Radial EBUS processor for the respiratory medicine service



Through the NHS charity, a state-of-the-art probe worth over £46,000 for the respiratory medicine service at Prince Philip Hospital was purchased. Patients from the three counties of Hywel Dda – Carmarthenshire, Ceredigion, and Pembrokeshire, who are referred to Prince Philip for lung biopsies, will benefit from the new equipment.

The new Radial EBUS processor is a small and flexible ultrasound probe that is passed down through a bronchoscope, which is a thin tube with a light and camera on it. The probe can reach areas of the lung that cannot be accessed by a standard bronchoscope. This makes it easier for clinicians to perform a biopsy on parts of the lung that are hard to reach.

The Radial EBUS is an advanced diagnostic technique that allows us to sample masses and nodules that are beyond the view of the standard bronchoscope. The new equipment will allow us to diagnose more peripheral lung masses that are too far out for standard bronchoscopy and too far inside the lung for biopsies guided by a CT scanner. The new equipment will enhance our ability to diagnose lung cancer, aid earlier

diagnosis, and help us achieve better outcomes for patients. It will also provide a safer procedure that reduces the risk of damage to the lung.

One clinician shared, "The new Radial EBUS processor has significantly improved our ability to diagnose lung cancer at an earlier stage. This means we can start treatment sooner and improve patient outcomes."

Looking ahead, the team aims to continue its efforts in improving patient care with the new equipment and expanding its use to more patients in the region. The team is committed to ongoing education and support, ensuring that every patient can benefit from the latest advancements in medical technology.

Bladder scanner for use in community clinics

The NHS charity funded the purchase of a bladder scanner worth over £10,000 for use in clinics across Carmarthenshire. This portable bladder scanner enables staff to assess patients in local clinics within the community, helping to reduce the length of time patients have a catheter.

While having a catheter is an important part of treatment, it can sometimes increase an individual's risk of infection. Some patients also feel that having a catheter has a negative impact on their lifestyle. The new bladder scanner gives staff the opportunity to assess a patient's bladder in the community and make decisions about whether the catheter is still required. This benefits the patient as they can potentially have the catheter removed sooner, and it reduces the pressures on other services as it lessens the chance of infection.

One healthcare staff member shared, "The new bladder scanner has significantly improved our ability to assess patients in the community. This means we can make more informed decisions about their care and improve their overall quality of life."

Looking ahead, the team aims to continue its efforts in improving patient care with the new equipment and expanding its use to more patients in the region. The team is committed to ongoing education and support, ensuring that every patient can benefit from the latest advancements in medical technology.

Preventing Frailty Related Hospital Admissions

The South Carmarthenshire Rapid Access Multidisciplinary Service (SCRAMS), an intermediate care falls and frailty service at Prince Philip Hospital, has been successful in preventing frailty-related hospital admissions. The team has received more than 200 referrals, each of which is thoroughly investigated to understand patient needs and call on the right services to provide care and support where needed.

Once a patient is identified by a GP and triaged by a consultant, the SCRAMS team visits the patient at home to carry out a full assessment. This assessment is discussed at a weekly multidisciplinary team meeting, and referrals to other services such as dietetics, falls prevention, or occupational therapy are made. Each care plan is personalized to each patient.



The SCRAMS team works to keep patients healthy and active at home, preventing hospital admissions and improving patients' quality of life. One patient shared, "The support and care provided by the SCRAMS team have been invaluable. I feel more confident and secure knowing that I have a personalized care plan and the support of a dedicated team."



Looking ahead, the SCRAMS team aims to continue its efforts in improving frailty management and expanding its reach to more patients in the region. The team is committed to ongoing education and support, ensuring that every patient can live a healthy and active life.

Case study:

When 'Betty', an elderly lady, came to the attention of the SCRAMS team she had suffered a series of falls and had hospital admissions due to a hip fracture and chest infection.

Betty was living in her own house with the support of her family, friends and her community. She has limited vision and walked slowly with the aid of a stick and zimmer frame. She was taking medication to help with postural hypotension, or low blood pressure when you stand up.

After each admission, Betty became frailer but was determined to return home and to receive help from family and friends. She didn't want care packages offered at the time.

Betty's final admission to hospital was a prolonged stay and she became frailer and lost her confidence. Betty agreed that she needed help and moved into a residential home.

The SCRAMS team reassessed Betty in her new home and found that she had lost her independence and now needed assistance with moving around. She became frailer, wasn't eating as well and had lost a significant amount of weight.

Referrals were immediately made to various teams including dietetics and physiotherapy and a patient centred care plan was put into place, in conjunction with her family.

The dietetics team monitored her weight and dietary intake, adding fortified meals and snacks supplemented with homemade milkshakes and juices based on Betty's likes and dislikes.

Physiotherapists implemented a structured strength and balance programme to improve mobility and independence delivered by the team weekly. Care home staff were familiarised with the exercise programme to assist Betty in-between visits.

The SCRAMS team arranged weekly visits to monitor weight, blood pressure and take strength readings using a dynamometer, a device to assess the strength of muscles in the hand and forearm.

It took a long time for Betty to show signs of improvement but there were improvements and pressure areas she had developed have now healed.

And now...Betty is almost back to her original weight and walking to the dining room with minimal assistance. According to her loved ones, "Betty has her cheeky sparkle back now."

And Betty hasn't been back to hospital since.



Asthma Management in Pembrokeshire's Primary Schools

Through the North and South Pembrokeshire Clusters' Asthma Primary Schools project, significant improvements have been made to essential asthma management and support within primary schools. The programme provides support and education to children with asthma or asthma-like symptoms in 52 Pembrokeshire primary schools. With direct access to clinical records, the healthcare team is able to provide children and families with in-depth asthma assessments and educate them within the familiar school setting.

Since the project started in September 2023, it has empowered almost 400 children in Pembrokeshire to live well with their condition rather than suffer from it. Over 60% of children had their treatment adjusted based on the latest All Wales Paediatric Asthma Guidelines to ensure they receive the best care. Every child was also trained on how to use their inhaler correctly and given a personalised plan to manage worsening symptoms, which was shared with their parents and school. The project also supports the use of 'green inhalers' which provide effective treatment while being kinder to the environment.



The programme has significantly improved children and families' understanding of asthma medications and has given them greater confidence in managing their child's condition. One parent shared, "The support and education provided by the healthcare team have been invaluable. My child now feels more confident in managing their asthma, and we feel more reassured knowing they are receiving the best care."



Looking ahead, the project aims to continue its efforts in improving asthma management in schools and expanding its reach to more children in the region. The team is committed to ongoing education and support, ensuring that every child with asthma can live a healthy and active life.

Our commitment for 2025/26: a final message from the Chair and Executive Lead for the Quality, Safety and Assurance Committee

As Chair and Executive Lead for the Health Board Quality, Safety and Experience Committee (QSEC) we hope that you have found that this Quality and Engagement Act Annual Report has provided a snapshot of our work, demonstrating our commitment to improve the quality of our services and to meet the needs of our patients across Carmarthenshire, Ceredigion, Pembrokeshire and borders.

In 2025 to 2026, we will endeavour to learn from when things have not gone well, make improvements in areas that matter to our patients, residents and staff, and ensure all our strategic decisions are made through a quality lens.

The QSEC is a statutory committee of the Board. Its primary purpose is to scrutinise, assess and seek assurance in relation to the patient impact, quality and health outcomes of the services provided by the Board. The full terms of reference for the committee can be found on our website <http://www.wales.nhs.uk/sitesplus/862/opendoc/324367> With this primary purpose in mind the QSEC will receive at its meetings throughout 2025 to 2026 updates on the key quality priorities, as part of our commitment to continuous learning and improvement for the benefit of our communities and our staff.

Thank you for taking the time to read our report.

Patient support services (feedback and complaints): Share your experience

Quality drives everything we do and for us to continue to improve we'd like to know about your recent experience of using our services.

You can do this by contacting our patient support services:

Telephone: 0300 0200 159

Email: hdhb.patientsupportservices@wales.nhs.uk^[1]

Online: Using our [feedback form](https://hduhb.nhs.wales/healthcare/services-and-teams/patient-support-services-complaints-feedback/)^[2] which can be found on our website <https://hduhb.nhs.wales/healthcare/services-and-teams/patient-support-services-complaints-feedback/>^[3]

Post: Freepost Feedback @ Hywel Dda



[1] <mailto:hdhb.patientsupportservices@wales.nhs.uk>

[2] <https://hduhb.nhs.wales/links/cascade-links/patient-experience-envoy-questionnaire/>

[3] <https://hduhb.nhs.wales/healthcare/services-and-teams/patient-support-services-complaints-feedback/>