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Swansea Bay University
Health Board



Un Bae Ar y Cyd
One Bay Way

Annual Quality Report 2023-2024



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A message from our Chief Executive & Chair



I am pleased to present the Annual Quality Report for 2023-24, which aligns with the Health Board's 10-year vision of becoming a high-quality organisation. This report highlights our commitment to enhancing our services, ensuring that we deliver patient-centred care, and continuously improving quality and efficiency across the organisation.

The Health Board has a well-defined purpose, ambition, strategic aims, and enabling objectives designed to meet our civic responsibilities. Our focus is on improving population health, reducing health inequalities, and delivering prudent healthcare that ensures patients and service users feel cared for, confident, and safe.

I would like to extend my gratitude to our staff across the Health Board for their unwavering dedication and exceptional efforts in managing the demands and operational challenges we face. It is through their commitment that I am confident we will achieve our vision of becoming a high-quality organisation.

Richard Evans, Interim Chief Executive



I welcome this Annual Quality Report for 2023-24. This report underscores our commitment to delivering exceptional care, prioritising patient outcomes, and fostering a culture of continuous improvement across all services.

The Health Board remains dedicated to our core purpose and strategic objectives, emphasising community health, addressing health inequities, and implementing pragmatic healthcare practices. Our goal is to ensure that every patient and service user experiences care that is compassionate, reliable, and safe.

I echo the words of Richard, and also extend my heartfelt gratitude to our dedicated staff for their extraordinary efforts in navigating operational challenges and upholding our standards of excellence. And I look forward to working together to realise our vision of becoming a high-quality organisation that meets the evolving needs of the communities we serve.

Steve Spill, Vice Chair



Our Quality Strategy: Introduction and Aims

Swansea Bay University Health Board is committed to becoming a high-quality organisation for our patients, staff, and our communities.

This report outlines a summary of the quality and safety successes, and challenges that the Health Board has faced during the 2023/24 period, and sets out what our priorities are for 2024/25.

This Annual Quality Report should be read alongside our wider Annual Report (SBUHB, 2024) – which describes our achievements and future plans across the entire organisation.

To support the Ten-Year Vision for Swansea Bay University Health Board to become a ‘High-Quality Organisation’, our five-year Quality Strategy was launched in March 2023. The strategy has a clear message that quality is **Everybody’s Business**.

Included in the strategy are four quality ambitions, with workstreams attached to progress these.

Our ambitions are:

- Delivering safe and reliable care
- Being an organisation that our patients and communities are proud of
- Having empowered staff
- High quality, accessible services now and in the future

***“Quality is
Everybody’s
Business”***

Our Quality Strategy: Achievements and Challenges

We are proud to report the following achievements against our ambitions, as well as sharing some of the challenges we face - and our plans to address these.



Safe and reliable care

Our achievements include:

- Undertaking a mortality review
- Progressing work on our quality dashboards
- Undertaking an annual programme of patient safety congress events, where we share learning across the organisation, and community practice events
- Undertaking quality priority learning events, including symposiums
- The implementation and rollout of audits on the AMaT (Audit Management and Tracking) system
- Further use of electronic prescribing and digital nursing records
- A planned annual quality assurance programme for audits across the Health Board, with robust feedback and action plan reporting
- Working closely with Llais and Health Inspectorate Wales (HIW), to listen and learn from their reviews of our care
- Taking Part in the Safe Care Collaborative, along with colleagues across Wales, and Improvement Cymru to deliver quality improvements

Challenges we face:

- Addressing technical infrastructure and data standards to reduce fragmentation and improve timely data collection and access
- Making sure we investigate and learn from incidents in a prompt way
- Better understanding to meet people's individual needs, particularly around language requirements
- Learning from and implementing findings from external reviews





An organisation our patients and communities are proud of

Our achievements include:

- For the 2023/24 period, 62,693 *Friends and Family* surveys were completed. The emotional and physical support provided by our staff, along with their friendliness was a feedback theme that stood out as being overwhelmingly positive
- Discussing learning from concerns in our team and organisational meetings, so we can identify solutions and learning opportunities
- Our Health Board's End of Life care team has been encouraging people to have frank and honest conversations, giving our patients and their relatives a safe opportunity to share their requests for the last stage of their life
- Increased communication and engagement on Equality, Diversity and Belonging, including CALON - our LGBT+ network, and with our Black, Asian, and Minority Ethnic Network to celebrate our cultural diversity, and to increase our understanding of the needs of the communities that we service
- Working closely with Llais, HIW, BAYouth and Maternity Voices to inform our learning practices
- Encouraging all our staff who are able to use the Welsh language to do so. In March 2024 we were proud to host our first joint conference with Swansea University, celebrating the importance of the Welsh language for our patients, our communities, and our staff
- Promoting Music in Health - we believe that incorporating music as part of our core services will drastically improve our patients health and wellbeing
- Securing funding from the Arts Council of Wales and the Baring Foundation to support our patients, staff, and volunteers in accessing arts activities as part of the Sharing Hope Project.
- Our Swansea Bay Health Charity is the official charity of the Health Board (Registered Charity Number 1122805). Our major appeals this year are 'Cwtsh Clos Appeal' - refurbishing 5 neonatal houses to support families of sick babies and the '20th Anniversary of the South West Wales Cancer Centre' at Singleton Hospital which will be announced in September 2024

Challenges we face:

- Ensuring timely complaint resolution, targeting 2 days for acknowledgment and 30 days for a full response
- Continuing effective engagement with our communities, including those communities who are seldom heard
- Improving patient feedback rates in order to keep learning, and to always strive for better outcomes
- Sustaining a culture of learning and improvement within the Health Board, so that we can learn from people's experience and share this learning across the organisation



Empowered Staff

Our achievements include:

- Hosting the Big Conversation and Vision for a High Quality Organisation engagement events
- The Establishment of a Quality Improvement Community of Practice
- In 2023-24, we began offering Quality Improvement training via the Improvement Cymru series. We deliver a monthly Fundamentals in Improvement course and run two annual Improvement in Practice cohorts. Staff are encouraged to continue training in national courses. For 2024-25, we are developing a team-based QI training approach to support MDT teams in improvement projects.
- Progress towards 85% PADR compliance for staff across the Health Board
- Empowering our staff to speak about their health and wellbeing - improving our staff psychological safety, by utilising our Sharing Hope Project and our staff wellbeing service
- Delivery of multi-agency improvement project's through Improvement Cymru's Safe Care Collaborative
- Holding diaspora networking events to support internationally educated staff in advancing their careers. These events provide a platform for mutual learning and the exchange of valuable experiences gained in their countries of origin
- Hosting staff recognition awards throughout the year - since nominations opened in February 2024, we have received 379 nominations from patients and service users, families and carers
- Our People Strategy for 2024-2029 - The strategy has been written in collaboration with a broad range of partners, it aligns to the Healthier Wales: A Workforce Strategy for Health and Social Care national document and our new 10-year health board vision to become a High Quality Organisation (SBUHB, 2024)

Challenges we face:

- Ensuring we continue to listen to our staff and aim to take action when they speak up
- Encouraging engagement with the NHS Staff Survey
- Dealing with staff retention amidst service pressures
- Embedding the success of the Sharing Hope staff wellbeing project





Delivering high quality accessible services now and in the future

Our achievements include:

- Assessing the quality impact of all of our decisions
- The development of a Frailty Hub, supported by the frailty strategy and quality priority work
- The Duty of Candour (SBUHB, 2023) is a legal requirement for NHS Organisations in Wales to be open and honest with service users receiving care and treatment - since 2023 the Duty of Candour has become statutory within the Health Board
- Adherence to the national Six Goals for Urgent and Emergency Care Programme to support the Health Board and its partners to transform and improve delivery of Urgent and Emergency Care services
- Compliance with the Duty of Quality - it is more important than ever before to focus on the quality of our services so that we achieve better outcomes for our patients
- Winners in two categories at the Welsh Sustainability Awards, including the top award of the evening - The Chief Nursing Officer's Sustainability in Nursing and Midwifery Award for our District Nursing Service for reducing the use of paper in its service. And the Resilient Wales Award, won by the Gwelfor Ward Occupational Therapy Team, helping adult males with severe mental health issues to get active in a sustainable way
- To improve patient experience the Health Board has implemented a new digital referral system for new pregnancy - for patients or nominated person to self-refer to Swansea Bay University Health Board maternity services
- Approval of the Climate Action Plan 2024-26, which seeks to reduce emissions, as far as practicable with existing funds and resources, whilst furthering the Well-Being of Future Generations Act. This will involve over 20 teams from across the Health Board, who will consider: Our culture and ways of working, our buildings and estates, our transport, our procurement, and our sustainable healthcare
- Our performance on access targets is reported in the main Health Board Annual Report for 2023-24 (SBUHB, 2024)

Challenges we face:

- Making services accessible for our seldom heard groups
- Consistently delivering on the Active Offer for Welsh speakers
- Maximising the opportunities to reduce our carbon footprint





Our Quality Priorities

Quality is at the heart of everything that we do – our services must be safe for our patients and provide good patient experience and outcomes. In 2021 we introduced a series of annual quality priorities, which were areas where we wanted to target our efforts to make a measurable difference in the quality of our care. These priorities have evolved since then and new areas have been added, while other areas become more aligned with business as usual. Since 2023/24 our annual quality priorities have been:



Suicide prevention

- We have increased our staff knowledge and skills in identifying and responding to the risk of suicide through training over 43 % of our staff to date
- Our Sharing Hope arts-based intervention project has supported over 1,200 members of staff to date, and a total of 144 engagement events have taken place since 2022. The project also won a Nursing Times Workforce Award and the Healthcare People Management Association (HPMA) Cymru Awards for Best Staff Wellbeing Initiative.
- Bespoke REACT and Suicide Prevention training delivered to teams across the organisation
- We are reviewing options with the Health Board to ensure the sustainability of Sharing Hope, and Suicide Prevention training going forward



Infection prevention and control

- A proactive schedule of antimicrobial-related audit is now available on the Audit Management and Tracking (AMaT) system for medical staff to undertake audit as part of Quality Improvement work
- The Infection Prevention and Control (IPC) audit programme currently remains a manual process, with over 200 audits undertaken since April 2023. All audit tools have been uploaded to AMaT; training and implementation is dependent on the informatics schedule for introduction, which is anticipated to occur during Q2 2024/25
- Level 2 Infection Prevention & Control training was made mandatory for staff from January 2024. Compliance has subsequently increased from 26% in 2023 to 57% by mid-February 2024 - indicating an improving picture
- We continue to have improvement programmes in place to reduce cases of C. difficile, Staph. aureus, E. coli, Klebsiella bacteraemia and Pseudomonas bacteraemia





Falls prevention

- Since becoming a Quality priority in 2022, inpatient falls have reduced by 19% and the number of Serious Injuries caused as a result of a fall has more than halved in the last year
- Our current inpatient falls rate (per 1000 bed days) is 3.4 against the national average of 6.6
- We are engaging with front door services across the Health Board to develop and launch a falls screening tool
- We continue to engage with the National In patient Falls Audit and see progress across all related Key Performance Indicators
- Focus is now on community scoping and agreeing standard and reporting mechanisms for community falls prevention services
- The falls prevention Quality Priority has a leading role in the deconditioning work stream and is aligned with the National six goals policy
- A joint project working with local authority, Welsh Ambulance Services Trust (WAST) and domiciliary care providers; looking at alternative falls response pathways has seen an initial reduction of 75% of WAST call outs. This project is currently scaling to include other agencies and supported housing regionally servicing more than 2000 residents. A similar project is being mirrored across residential care provision regionally
- Development of the Regional Falls Prevention taskforce continues with direct reporting to the National Taskforce currently chaired by Age Cymru. The regional taskforce brings health board, emergency services, local authority, private and third sector organisations together to develop falls prevention initiatives through co-production and collaboration



Improving the recognition and management of sepsis

- Our sepsis screening tool has been revised to reflect new national guidance, and will launch across the health board
- Over 2,000 staff have undertaken Sepsis Awareness Training, with ward based briefing training provided on all wards, and national e-learning updates available via ESR (Electronic Staff Record)
- We have developed an action plan around blood cultures to improve antibiotic stewardship
- Our community sepsis team is trialling NEWS (National Early Warning Score) and escalation protocols in one cluster
- A more robust sepsis alert has been developed on Signal - our electronic system for patient flow - to improve Sepsis awareness and monitoring
- We are working with the Murrison Service Group to review themes on sepsis admission to Intensive Therapy Unit (ITU)



Improving end-of-life care

- By increasing end-of-life care conversations with patients in their last 6 to 12 months, we discuss their needs and wishes, share these with care providers, and aim to improve the number of patients dying in their preferred place of death
- The Health Board has adopted "My Life My Wishes," a document for recording patient preferences. It is distributed through Virtual Wards, end-of-life care training, chronic condition specialists, and District Nursing
- Treatment escalation plans are being introduced at Neath Port Talbot and Morriston Hospitals to support clinical decisions that align with patient priorities and realistic clinical options
- Communication of end-of-life wishes is crucial. We've improved the recording of Advance Care Plans within Welsh Clinical Portal from 6 to 60 per month, and enhanced Multi-Disciplinary Team collaboration in Primary and Community Care
- The end-of-life care PARASOL team (SBUHB, 2022) has created an end-of-life care training programme for staff, including a Champion programme, bespoke team training, and induction sessions for new staff. Since 2021, the team have trained 4,375 HB staff (34.5% of all HB staff by May 2024) and members from partner organisations like care homes, GPs, third sector, paramedics, and students
- Information on Palliative and End of Life Care is now more accessible to the public and staff via dedicated pages on the Swansea Bay website and intranet, covering end-of-life discussions and available services. Plans include expanding the public page to address frequently asked questions
- The internal audit in Spring 2023 provided reasonable assurance for end-of-life care, with recommended improvements in digital systems and information. This has been a focus throughout 2023/24
- Influenced Health Board policy guidance including Dignity after Death, prioritisation of single rooms (infection control and care in the last days of life), and verification of death



Nutrition and hydration

- We have undertaken an internal communication campaign to promote the importance of weighing patients, through our 'Don't wait to Weigh' campaign
- We have held catering promotion days in each of our hospital sites, raising the profile of our catering departments and cascading patient menu choices, allergen options, specialised diets and snack provision
- Hosted a well attended, and successful virtual learning symposium to share ideas and drive forward best practice
- A solution-focused approach, such as weighted pat slides in Ward W at Morriston Hospital has seen an increased compliance of weighing patients by 40%
- Additionally, Ward W is testing coloured jug lids to help staff easily identify patients needing closer hydration monitoring



Pressure damage

- We are improving our staff training to increase awareness of the risk of pressure damage across all skin tones, following diversity in pressure ulcer care being discussed at an all-Wales level to enable it to become more inclusive
- We have translated our patient information on pressure damage into Bengali and Cantonese – improving communication with our patients
- A mapping of risk assessments within maternity services has been completed to ensure that women have their risks assessed
- We are currently identifying areas of focus across our service groups – project groups will be assembled following identification
- We have undertaken a Health Board wide pressure damage incident reporting audit, to identify issues and recognise best practice
- We have made improvement changes to repositioning charts



Arts in health

- Our Arts & Heritage Team manage a range of projects and partnerships that improve the experience for our patients, staff and communities
- Our Sharing Hope project has supported over 1200 staff with their wellbeing - winning Nursing Times and Healthcare People Management Association awards
- Leading ‘Musical Hospitals’, a ground-breaking collaboration with BBC NOW, Welsh National Opera and other partners – bringing weekly music performances to hospital wards
- New partnership with Coed Lleol and Race Cymru is encouraging global majority communities to engage with nature and the Arts for their wellbeing
- Secured funding from Arts Council Wales to add a Band 6 Arts in Health Project Manager to support the growing portfolio
- Work has started on a new, ambitious Swansea Bay University Health Board Arts Strategy to support our vision



The Welsh Language at Swansea Bay

The Health Board is fully committed to providing a bilingual service and information for all service users. Service users have the right to receive their health care through the medium of Welsh, without having to ask for it, and we are committed to increasing our ability to meet this need.

The Welsh Language Services Team promotes the use of Welsh and supports the Health Board in operating bilingually. Their work includes supporting departments to develop Welsh medium services, providing a translation service and ensuring that the Health Board is compliant with the Welsh Language Standards - The Welsh Language Standards have replaced the Welsh Language Scheme (Welsh Statutory Instruments, 2018).

Here at Swansea Bay we have acknowledged that full compliance with the standards is a long-term process, but one where we have made good progress. Some positives include:

- Our target of 85% of staff completing Welsh language awareness training module has been achieved
- Increased the number of staff who have recorded their Welsh language skills from 30.2% in 2023 to 51.2% in 2024 - this work continues
- Continued growth in requests for translation of materials. During 2023/24 our in-house team translated over 1.1 million words into Welsh
- Hosting the Caring in Welsh Congress, in partnership with Swansea University
- We have made very good progress on developing a plan to increase our ability to offer to carry out clinical consultations in Welsh across the More Than Just Words key priority areas
- 340 members of staff at our hospital sites expressed an interest in starting beginners Welsh classes, with entry level 2 classes are continuing at Headquarters

Looking ahead, our priorities include:

- Completing the task of capturing the Welsh language abilities of our workforce
- Publishing our 5-year plan for increasing our ability to offer to deliver clinical consultations in Welsh this December
- Continue to support staff who are learning Welsh, and deliver a project to support staff who have a good understanding of Welsh but lack the confidence to use it
- We want to replicate the Welsh language 'champions' project established in Occupational Health across the wider organisation
- Build and grow our relationships with key partners, such as The National Centre for Learning Welsh, local schools, Coleg Cymraeg Cenedlaethol, and Swansea University

Our Priorities for 2024 and beyond

In deciding our future quality priorities, we have taken the following steps:

- Holding regular conversations with our patients, communities, staff, contracted services and stakeholders
- Reviewing concerns, incidents and near misses to understand where there may be preventable harm
- Reviewing our risks and issues in relation to quality and safety
- Considering any foreseeable changes or issues that might affect quality and safety
- Assessing if we are the best organisation to take this work forward

Following a review of the themes from this work it was agreed that we need to strengthen how our quality priorities and the health board's operational plans work together. From April 2024 onwards, we will align our priorities with the NHS Six Goals for Urgent and Emergency Care, with a specific focus on how we support frailty and embed infection prevention control across these areas.

1	Co-ordination, planning and support for populations at risk of needing urgent or emergency care	2	Signposting so people get the right care first time
3	Clinically safe alternatives to hospital admissions so people can be treated at home where it is safe to do so	4	Rapid response to a physical or mental health crisis
5	Optimal care and discharge practice from the moment someone is admitted	6	A home first approach and reduced risk of readmission

It is proposed to integrate the quality strategy ambitions with themes from our engagement on future quality priorities and to set out our priorities in broad themes, with individual quality improvement workstreams sitting within these.

The broad theme for Quality Priorities 2024/2025 will be Frailty. We propose to work in conjunction with the Frailty Strategy and have workstreams put into place to achieve specific goals, methods, and outcomes. A Quality Priority Collaborative has already been established which aligns all workstreams that are covered under the frailty umbrella. This will form part of our governance structure.

Our Quality Management System



The scale and complexity of the Health Board’s activities means that we need a system that supports people in doing the right thing every time. To enable us to do this, we have in place a quality management system that was developed in 2022 following internal and external review of our governance systems. A further review of our systems has been undertaken by Audit Wales who are due to report on our Quality Management System in May 2024. Further to this, work was undertaken to create our vision for a One Bay Way - a clinically-led, high quality organisation.

We also have a Quality Hub, which marries improvement and assurance systems to support the delivery of a quality management system. The Quality Hub leads, coordinates, and manages the quality and safety process framework.

We have developed and will continue to strengthen our quality management system, that includes:



Quality Assurance

- A monthly QI assurance programme with increased input from the Estates Team, to address learnings as a result of recommendations
- Regular governance work undertaken, with an adapted and updated assurance toolkit to align to the new quality standards
- Patient Safety Congress events developed



Quality Control

- A review of quality and safety structures started
- Improved use of local and national data to inform quality and safety systems



Quality Improvement

- Supporting QI education and developing improvement leaders for the future through continuing to deliver QI training courses and start to deliver a new QI team-based training approach
- Continue to run quarterly QI community of practice, to allow any Health Board staff member to attend, network and share projects and learning
- Redevelop our Digital QI resources available on the intranet
- QI clinical lead posts introduced



Quality Planning

- Quality Impact Assessment process developed and adopted from October 2023
- Revised quality framework approved in October 2023





Quality Impact Assessment

Quality driven decision making

In 2023 we revised our Quality Framework to include a new Quality Impact Assessment. The Quality Framework was set out in 2019, and this latest revision reflects the legislative and strategic developments which have occurred since then, including the implementation of the Duty of Quality across Wales, the launch of the Swansea Bay Quality Strategy for 2023-2028 and the implementation of our quality management system. The framework describes how the responsibility for ensuring high quality of care translates from individual to Board level.

In order to support quality driven decision making, the Health Board will utilise a quality impact assessment process for its strategic decision making. The assessment aims to understand the quality impact of our decisions, based on the Health and Care Quality Standards (SBUHB, 2024)

<h3>Service Group</h3>	<ul style="list-style-type: none"> • Undertake quality impact assessments for strategic changes within groups and ensure clinical engagement and sign off • Set out mechanism for monitoring quality impact of any service changes • Review strategic direction to ensure that positive quality impact is maximized and negative impact minimized • Escalate unintended significant quality impact to Quality Management Board
<h3>Quality Management Board</h3>	<ul style="list-style-type: none"> • Consider quality impact assessments affecting the whole system, or those identified as having a significant quality impact within service groups • Set out mechanism for monitoring quality impact of any service changes • Review strategic direction to ensure that positive quality impact is maximized and negative impact minimized • Escalate issues of significant quality impact to Quality and Safety Committee and Board as appropriate



Evaluation against the STEEP domains includes:

Safe

Robust assurance measures in place to ensure that Care within the Health Board is Safe. We adopt an open and transparent culture, encouraging the principles of “just culture” where staff are encouraged to report incidents and near miss events by the use of the Datix system. Service groups hold multi-disciplinary discussions to deep-dive specific issues and report these through regular Quality and Assurance forums. In this way, and by embedding the Duty of Candour procedure and reporting framework, we encourage reflective learning when we learn from when things go wrong, to prevent incidents from occurring again. Our Risk reporting system ensures visibility of risk and enables mitigation to prevent or reduce safety risks.

We have considered the lessons learnt from the Public Services Ombudsman for Wales’s findings and recommendations as detailed in the Groundhog Day 2 report (Ombudsman Wales, 2023) to ensure:

- an openness and candour to ensure we identify failures from our local investigations
- objective reviews of clinical care and treatment
- importance of timeliness and good communications
- robustness of investigations to ensure we are acting fairly and proportionately

Timely

Robust reporting measures are in place to provide opportunities for Service Groups to escalate concerns regarding access to treatment as per the National Standards for Time to Treatment. This is also reviewed within our assurance remit.

We have implemented reporting measures that closely monitor theatre cancellation for non-clinical reasons and implement processes to minimise cancellations and promote efficient use of theatre capacity. We have agreed yearly performance targets to reduce the number of patients who are cancelled the day before their “to come in” date. This is not a nationally mandated requirement, but we recognise that the impact of this form of cancellation is equally significant for patients.

Effective

Quality Structures are set out within our Health Board Governance structure which includes the quality sub groups. These detail the reporting at service level and stand alone specialties. The Clinical Outcomes and Effectiveness Group discusses delivery and progress on clinical audit topics from Service Groups and Departments, along with compliance with national guidance, mandated audits/registries, mortality reviews, medical examiner reviews, and discharge summary compliance.

Efficient

We strive to ensure that our focus on quality will result in better patient outcomes and greater efficiencies as we get things right first time, meaning that we don’t only treat conditions, but that we increasingly prevent illness. Our staff are committed to helping patients recover from illness, manage long-term conditions and make healthy choices to ensure patients and their families get the most out of life. We have also implemented system wide solutions to evolve our hospital sites into individual centres of excellence - designed to give people better access to emergency care, and cut through long waiting lists for operations.

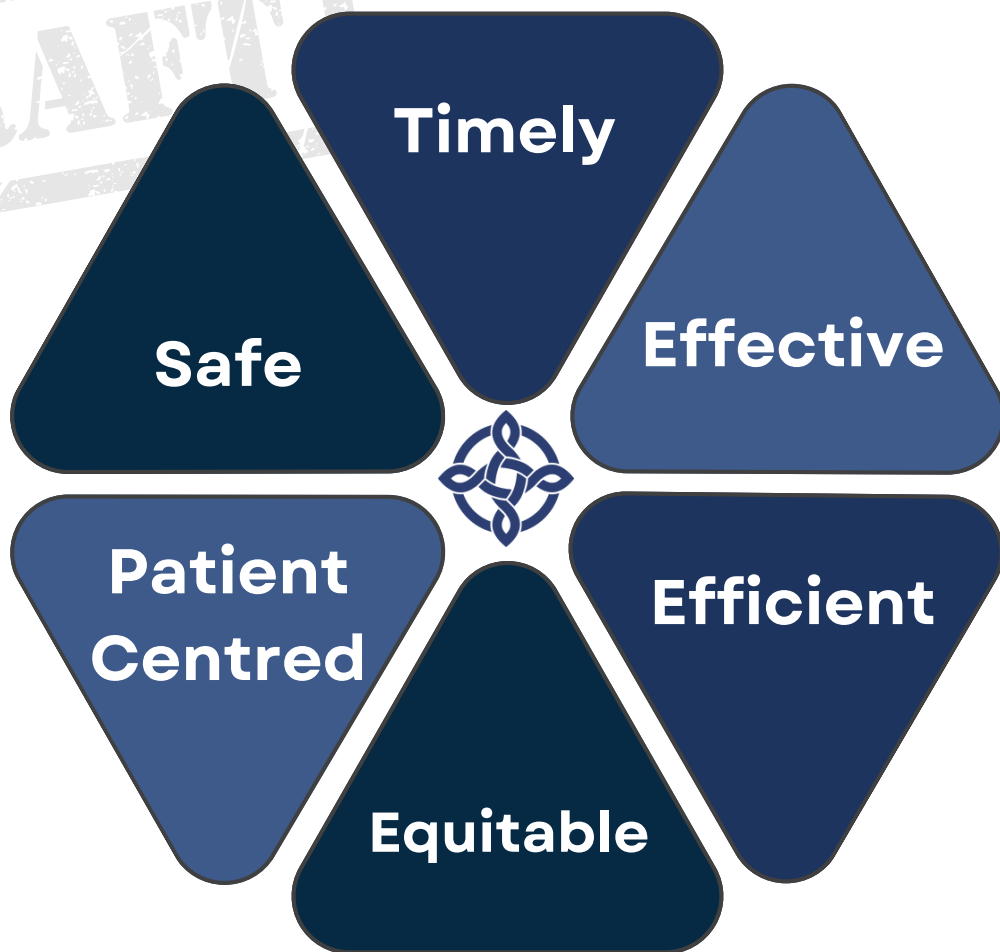
Equitable

We have developed links with our Strategic Equality group and engaged with this group through our quality and safety structures, and are engaging with our communities in a structured manner to ensure we are an inclusive organisation. We are proactively engaging with our minority communities within our area to understand how we can make our services accessible to them.

Person Centred

The Health Board strives to ensure that patients, families, staff, carers, and the public are at the centre of service development. We are committed to working better together and consider the patient 'voice' as an integral part of our service design and provision. An example of this is our work with patients to develop digital stories who explain their experience, which allows us to focus on the patient and family perspective.

These stories provide a rich narrative for us to focus our improvement efforts. A recent example of this enabled us to work with a patient who told us about her experience and led to the development of a post traumatic stress alert flag on Welsh Clinical Portal. Another example led to the development of a new multi-disciplinary team to review all cancer diagnosis from unknown origins, after a patient told us about their experience where they were referred to multiple consultants.



Engaging and Communicating with our communities

An update from the Directorate of Insight, Communications, and Engagement (DICE)

We are committed to putting people at the heart of our 10-year Vision about how we will become a high-quality organisation, and the crucial role all of us will play in achieving this ambition. Central to becoming a high-quality organisation is adopting a Population Health approach, which will deliver the best possible integrated health and care system and outcomes for our population – rather than organising our patients around our structures and services, we will organise ourselves around our patients.

We will invest in gathering insights from our communities - engaging with people every step of the way so they become active participants in the way we design our services to meet their needs going forward. We are committed to listening to, and understanding our patients experiences of our services. Continuous, or Always On engagement will help us better understand what is important to patients, carers and their families, and means we can improve and co-produce services to meet needs and get things right first time.

We have a plan to transform our approach to engagement and establish Insight. The Engagement Team works closely with Swansea and Neath Port Talbot Regional Llais. An interim service change proforma has been developed in partnership with the Health Board, Llais, Local Authorities, and West Glamorgan Regional Partnership Board. The Team has promoted the use of pre-engagement to understand what patients value about current services, issues and what one change could make the biggest difference to their experience of services.

This approach is a significant culture shift and where applied has made a significant difference to the outcome from both a patient and a service perspective - and includes:

- Establishing 'In Your Shoes Events' in partnership with Llais on a thematic basis as identified by insights, or open events where patients can talk about any services
- Improving the profile of Stakeholder Reference Group and recognising the importance of the role of Chair and vice Chair by funding a stipend for these roles
- Implementing the use of Microsoft Forms and the use of QR codes in addition to paper copies to encourage completion of surveys/questionnaires
- Adoption of Civica Engage to improve stakeholder management and communications

Our future plans will involve staff, patients, carers, the public and stakeholders in our work. We will:

- Develop an engagement plan for the Health Board
- Develop an engagement offer which outlines the 'Always on', or standard practice and an 'Enhanced' offer where additional support is required for time-limited periods
- Continue to work with Llais, our Local Authorities and West Glamorgan Regional Partnership Board to agree a visiting approach for Llais and any additional documentation it would make sense to develop in partnership for a consistent approach
- Tailor our engagement mechanisms based on the patient and carer population we are engaging with
- Wherever possible, plan and implement pre-engagement for identified service changes. Develop a plan for service change aligned with the Health Board Plan

Our current and future plans for engaging with our staff, patients, carers, communities and stakeholders will transform our approach, underpinning our focus on becoming a high-quality organisation that puts patients at the heart of what we do.



Patient Feedback

Feedback from the medical examiner following their contact with family and loved ones after a loss

“She felt her mother received the best care, she was comfortable, and they ensured every little detail was covered, they were kind and considerate”.

“Care was absolutely amazing, they did everything for him. Couldn't have asked for better. Consultant at the end was very compassionate. Family were very thankful for the care they also received. Dealt with compassion and dignity. Everyone involved were amazing”.

“Family member wanted to thank all the GP care, Marie Curie, Oncology, Pharmacy, Nurses and everyone involved. They enabled him to be at home where he wanted to be right up until the end. The nurses would come right through the night to see him but provide her support too.

“Ty Olwen - can't thank them enough. In hospital since October - everything has been brilliant no issues. Care After Death Team have been brilliant and communication has been excellent”.

Family member said she has heard many bad experiences that people have with the NHS was hers had been excellent and had the greatest admiration for us all”.

“I was very anxious during my operation to fit a stent. The staff recognised this and couldn't do enough to help me. Not just medical care but emotional support, as well. I couldn't have received any better care. To say I'm grateful, is an understatement”.

“Very happy with the experience I received from the maternity unit especially as a first-time mum, from the moment I called the hospital with my concerns to the time I left 2 days later the midwives and healthcare's I had were amazing! Huge shout out to the girls who helped deliver my little boy”.

Feedback from Friends and family

“Very attentive. Very welcoming. Very clean and healthy environment. The team were very respectful, caring, and efficient. Every aspect was taken care of”.

“All the staff, doctors, nurses, cleaners, and cooks, from the moment I attended the hospital on the Friday morning of my operation until my departure the following day, were polite, friendly, down to earth, and accommodating. Made me feel at ease, nothing too much trouble”.

“The consultant and her ENT Team were absolutely SUPERB. The Medical student was delightful, and the Nurse assisting was also really lovely, courteous, and thoughtfully kind. The reception staff at the desk in the department were also so very helpful”.



References

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