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One Bay Way

ANNUAL QUALITY REPORT

2024-2025

DRAFT



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Chief Executive Message

I am pleased to share the Annual Quality Report for 2024–25, which outlines how we are working to provide safe, effective, and compassionate care for the communities we serve. This report reflects our ongoing efforts to become a high-quality organisation, in line with our long-term vision.

Over the past year, we have continued to improve the quality of our services, support people to live healthier lives, and reduce health inequalities. Everything we do is guided by a clear purpose: to make sure patients and service users feel cared for, listened to, and safe.

We remain focused on improving key areas including maternity and neonatal services, mental health, and urgent and emergency care. Important work is already underway in each of these areas to strengthen services, address challenges, and ensure more consistent, patient-centred care. With the continued support and dedication of our teams, we are committed to delivering the improvements our patients and communities rightly expect.

I would like to sincerely thank all our staff for their hard work and dedication. Their commitment is at the heart of the progress we are making, and I am confident that, together, we will continue to build a health service the public can trust and be proud of.

Abigail Harris
Chief Executive

Chair Message

I welcome this Annual Quality Report for 2024–25, which reflects our ongoing commitment to delivering safe, high-quality care and improving outcomes for the people and communities we serve.

Over the past year, we have continued to focus on our core strategic goals—supporting healthier lives, reducing health inequalities, and ensuring that care is compassionate, person-centred, and consistently reliable. This report highlights the progress we’ve made, including important improvements in access to services and patient outcomes, while also acknowledging where we need to continue to learn and improve.

Maternity and Neonatal services, Mental Health and Learning Disability services and Unscheduled Care were all important items on the Board agenda. We will continue working our hardest to secure continuous improvements.

I join Abi in expressing my heartfelt thanks to all our staff, whose professionalism, resilience, and commitment have been at the heart of everything we have achieved. Their contribution, often in the face of considerable pressure, has been vital in helping us meet the evolving needs of our population. As we look ahead, we remain focused on working collaboratively across the system to build on our progress and ensure we continue to deliver the best possible care for everyone who relies on our services.

Jan Williams
Chair

Introduction

Swansea Bay University healthboard: Annual Quality Report 2024/25

Swansea Bay University healthboard is committed to becoming a high-quality organisation for our patients, our staff, and the communities we serve.

This report provides an overview of the quality and safety achievements and the challenges we have encountered throughout the 2024/25 period. It also sets out our key priorities for the year ahead, 2025/26.

The Annual Quality Report should be read alongside our wider Annual Report (SBUHB, 2024), which details the organisation's achievements and strategic plans for the future.

In support of our Ten-Year Vision to become a 'High-Quality Organisation', we launched our five-year Quality Strategy in March 2023. Central to this strategy is that **Quality is Everybody's Business**.

The strategy sets out four core quality ambitions, each underpinned by dedicated workstreams designed to drive progress:

- Delivering safe and reliable care
- Being an organisation our patients and communities are proud of
- Empowering our staff
- Ensuring high-quality, accessible services – now and for the future

Together, these ambitions have continued to guide our commitment to improving patient outcomes, staff experience, and the overall quality of care throughout the 2024/25 period.

Our Quality Improvement 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 across Swansea Bay University Health Board (SBUHB). 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 2024/25 our annual quality priorities have been:

1. Nutrition and Hydration

- We undertook a communication campaign called 'Don't Wait to Weigh' for staff to understand the importance of weighing patients so we can tailor our care to their needs. From May 2023 to March 2025 we increased the number of patients weighed on admission from 33% to 49%. For the coming year we are going to focus on increasing the percentage of patients weighed and making sure patients receive nutritional screening if they need it.
- We have held catering promotion days in each of our hospital sites, cascading patient menu choices, allergen options, specialised diets and snack provision.
- We have listened to our patients and young people and launched a new children's a la carte menu in our paediatrics wards in Morriston Hospital. We have also launched a new snack box option in the Emergency Department, feedback from patients about this provision has been positive.
- This year we will be focusing on making sure that patients can access snacks when they want them and also piloting a digital ordering system to reduce food waste and to make sure patients receive the right calorific input to help them get well.

- It is important to stay hydrated when you're a patient and we wanted to improve access to fresh drinking water and reduce plastic waste in the Emergency Department. Through putting two drinking water stations in the department we have increased access to water, reduced waste and saved money.
- Making sure that we use the correct testing processes means we can more accurately diagnose and treat urinary tract infections. We have been working with Cwmtawe GP Cluster to improve their awareness of when to use (and not to use) dipstick testing so that they only prescribe antibiotics when they are needed.
- So that we can increase fluid intake in patients in Gorseinon Hospital, we have introduced a coloured jug system, helping staff to see at a glance who needs support with meeting their hydration needs.
- A new allergen process has been introduced on HEPMA (Hospital Electronic Prescribing Medicines Administration) system to reduce the risk for patients with food allergens being prescribed medication which could impact on their health.
- Patient representatives have been recruited to taste meals and provide feedback, so that we can make sure our menus are what people want.

2. Falls Prevention

- Since 2022, patient falls in our hospitals 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 - this means that less patients fall in our care, compared to the national average.
- Our focus is now looking at how we prevent and respond to falls for patients who are not in hospital.
- Falls prevention is an important part of our work to prevent deconditioning aligned to the national Six Goals work.

- 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 means that more people who fall are cared for at home, without needing an ambulance This project is currently being expanded to include other agencies, supported housing, and residential care provision regionally.
- It is important that we know if a patient is at risk of falling when they come into our care, so we are focusing on making sure that we screen patients when they come through our services.
- We have supported the development of a Regional Falls Prevention taskforce that covers health board, emergency services, local authorities, private and third sector organisations, reporting into a national taskforce.

3. Improving End-of-Life-Care

- By increasing the number of end-of-life care conversations we have with patients in their last six to twelve months, discussing their needs and wishes, with care providers, we aim to improve the number of patients dying in their preferred place of death and to base our care decisions on what is important to the patient.
- We have continued to promote "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 across our hospitals to support clinical decisions that reflect the patient's priorities and realistic clinical options.
- We have recorded between 60-70 new discussions regarding Advance Care Plan on the Welsh Clinical Portal.
- Over 34% of staff had been trained in End of Life Care by the end of March 2025.
- We have refreshed the information on our website so that patients and the public can easily access information on End of Life Care.
- Having digital support to help with recording and communicating people's wishes at end of life is important and we continue to work across the organisation to support this.

4. Pressure Damage

- Pressure damage in our hospitals has reduced by 10% compared to the previous year.
- Over the past year we have invested in training for staff of all levels to ensure they have the skill and knowledge to assess skin, risk assess and prevent pressure ulcers.
- Most deep tissue pressure damage occurs in patients' own homes so we are reviewing the information we provide to patients and their carers, so that they can work with us to reduce their risk of pressure damage.
- Our previous skin assessment tools did not take into account different skin tones, we are pleased to have addressed this inequity and now have skin assessment tools for different tones.
- We have 200 Tissue Viability 'Champions' across SBUHB who we support through monthly 'Questions and Answers' and educational meetings.
- In the coming year we will be focusing on assessing people's skin when they come into our care so that we can identify, treat or prevent pressure damage from occurring.
- The goal for 2025/2026 is to reduce total number of HB avoidable incidents by 20%.
- We have developed an assessment document to support pressure ulcer prevention in premature babies.
- In November 2024 we undertook a Pressure ulcer prevention campaign that included a staff conference event and public facing awareness week with stands across all of our hospitals.

5. Preventing Acute Physical Deterioration

- Recognising acute deterioration in our patients means that we can respond quickly and appropriately. Over the coming year we will be launching new national early warning systems, including those for infants, children and pregnant women.
- In preparation for this we have strong structures in place that will ensure that once early warning scores are introduced, we can monitor how we are implementing them, and make improvements if needed.
- Alongside this work we will be learning from colleagues across the UK to introduce a process for escalation based on patient or carer concerns in 2026. This commitment to ensuring that every patient's voice is heard.

Avoiding Deconditioning

Deconditioning means losing strength, mobility, and confidence over time because of reduced activity.

Every extra day in bed can mean lost muscle, reduced independence, and a slower return to normal life. Older adults are especially vulnerable to this decline, which can also affect mental wellbeing and lead to higher rates of readmission.

But this is preventable. By encouraging and enabling patients to stay mobile and active during their stay, we can support faster recoveries, maintain independence, and ease the strain on our healthcare teams.

Small steps make a big difference. Empowering both staff and patients to prioritise movement and activity is key to delivering better outcomes – and a better experience of care.

Worryingly, we are causing harm by keeping patients in hospital longer than they need to be, and through routine practices that do not support long-term recovery. These include the use of bed pans and commodes when patients could be supported to walk to the toilet, over-reliance on incontinence products such as pads, and a lack of encouragement for patients to get out of bed, dressed, and active each day. These habits can foster dependency, accelerate functional decline, and undermine patients' confidence and autonomy.

Achievements and Upcoming Goals

- 5 projects selected to be part of the National Safe Care Collaborative 'Preventing Deconditioning Workstream.
- Recruitment of more than 25 Reconditioning Ambassadors who promote the importance of being active in their roles - with a full year of training and forum events planned.
- Development of an Avoiding Deconditioning SharePoint site, acting as a one-stop-shop for all staff to access information on the part they can play in preventing deconditioning.
- Activities focussed on preventing deconditioning to launch during Active August 2025.

Quality Assurance

Quality Assurance can highlight good practice, check how our quality improvement projects are making a difference. It can also help us to learn and make further improvements to our services.

From 1st April 2024 to the 31st March 2025 we visited on average one site per month to undertake spot check Quality Assurance audits across a range of services. All visits are unannounced so that we can find out what care is like every day.

Multi disciplinary teams looked at all elements of patient care from admission to discharge, this includes speaking to patients, carers and staff who give us invaluable insight into what is important for our patients and those that care for them.

During visits any immediate concerns are flagged to the ward manager/senior teams and this is followed up with a debrief with senior ward staff the following day. Our quality assurance systems are the way we check that the care we provide meets the standards we expect. We do this through spot checks, audits and talking to patients and staff.

A report is then produced and shared with senior staff highlighting the findings from the visit, wards are asked to produce action plans to address any issues or shortfalls.

We have made improvements to the Quality Assurance Framework:

- Development of a training package so that assessment teams can confidently undertake assurance visits.
- Aligned the Quality Assurance Toolkits with the Health Care Standards as set out the Duty of Quality which is part of the Health and Social Care (Quality Engagement) Wales Act 2020.
- Implementation of Audit Management and Tracking System (AMaT) which makes the process more efficient. It also produces consistent results in 'real time' which gives ward areas the opportunity to see and understand their results immediately so they can make any required changes as soon as possible.
- Include a range of services, with professional staff undertaking the reviews e.g. Estates, Pharmacy and Safeguarding.
- Adaption of the toolkit for Paediatric Areas.
- Improved engagement within the process for staff and patients.
- Improved how we monitor delivery of actions.

Priorities for coming Year

- Supporting departments to undertake their own assurance audits using the AMaT Quality Assurance Toolkit.
- Increase the reach of the toolkit to include:
 - Minor Injuries Unit
 - Emergency Department
 - Outpatient Departments
 - Theatres
 - HMP Swansea
 - Community Teams
- Supporting patients and communities to be involved in assurance processes
- Checking how patients are offered care in their language of need through the Active Offer of Welsh language care
- Increase follow up visits to ensure areas are compliant in terms of completing actions as set out following an assurance visit and support them to do so when required.

Patient Safety Congress

Our Patient Safety Congresses bring together a variety of staff from different professions in order to share learning across the health board. Sharing learning is important in order to improve services for our patients and to celebrate staff who have been instrumental in making positive changes and contributions to patient safety and care.

Topics covered to date have included listening and learning from patient stories, patient safety incidents, how human actions play a role in incidents and how awareness of these factors helps us continually improve.

Quality Improvement Training

Team Achievements in 2024/5

Last year, in April 2024, we set out to:

- Support Quality Improvement education and developing improvement leaders for the future through continuing to deliver training courses and delivering a new team-based training approach.
- Increase the number of staff trained in quality improvement
- Develop the information that we share about quality improvement on our staff intranet
- Develop how clinicians can engage with quality improvement

Looking back through 2024/5 Quality Improvement achievements in 2024/25:

- We developed a package of quality improvement training courses available to staff including a 1-day 'Fundamentals of Improvement' course run every month, 2-day 'Improvement in Practice' course and ran tailored workshops to meet the needs of staff and teams.
- We relaunched our 'Quality Improvement Community of Practice' as the Improvement Forum, open to all health board staff. It features events to build quality improvement knowledge and skills, share projects, offer coaching drop-ins, and enhance our digital resources.

Quality Improvement training

- We delivered the training to over 210 staff across the year. (149 Fundamentals, 26 Improvement in Practice and 41 in tailored workshops).

Priorities for 2025 - 2026

In the next year we will set out to:

- Increase the number of staff trained in quality improvement methodology.
- Continue to increase access to quality improvement information, coaching and mentorship for staff through the Improvement Forum.
- Use new systems to share quality improvements across the organisation
- Review how we support our people (or patients, carers and families) to learn more about quality improvement and how they can get involved.

Breakdown of Training April 1 2024 - March 31 2025

Training	Numbers Attended	Update
Fundamentals of Improvement (SBUHB monthly training 2024-2025)	149 (approx.12 per month) staff members attended Fundamentals of Improvement course.	All completed the 1-day course, giving them a basic understanding of quality improvement, enabling staff to start to support projects to improve services.
Improvement in Practice (IiP) (SBUHB 2024 - 2025)	26 staff members have enrolled on the IiP course.	All staff members are undertaking small quality improvement projects in their specialist areas.
2 Cohorts in this financial year: Cohort 1 July 2024 Cohort 2 March 2025 - Ongoing	Cohort 1: A total of 14 staff members completed all training days. Cohort 2: 12 staff members attended day 1 with day 2 in April 2025.	Themes of ongoing/ completed projects include: <ul style="list-style-type: none"> • Maternity Services • Regional Services (Lymphoedema and Trauma) • Nutrition and Hydration • Education of staff and people • Mental Health and Learning Disabilities • Improving the Efficiency of Processes

Quality & Safety Dashboard

The quality & safety dashboard was launched in March 2025. The dashboard will help us to see information on the quality and safety of our care at a glance. The dashboard will continue to be developed, to ensure the most relevant and up to date information is available.

AMaT

Over the past 18 months, SBUHB has implemented and adopted a digital system called AMaT (Audit Management and Tracking) to help monitor and improve the quality of care we provide. One part of this system is the ward, area and service projects module.

The module is used by healthcare staff to track and manage ward and area based quality assurance audits that are required across the healthboard. These audits help ensure the care we provide meets high standards, complies with regulations, and prioritises patient safety. Audits include checks to ensure medications are given safely, areas are clean and hygienic, and that patients are treated with dignity and receive person centred care.

From a patient's perspective, the system offers several key benefits:

It keeps staff organised and accountable. Every team member can clearly see what needs to be improved to ensure the ward is safe and delivering high quality care. This helps to ensure that improvements happen more quickly and effectively.

It supports safer care. By tracking audits digitally, the system ensures that key elements such as safety checks, policy updates and staff training are all accounted for.

It helps identify what's working and what isn't. Staff can view audit results and action plans over time, enabling evidence-based decisions that focus on what truly makes a difference to patients.

It encourages teamwork. Staff across different areas can collaborate more efficiently, leading to more consistent and co-ordinated improvements across the health board.

Currently, the module has been rolled out to 178 areas across the health board, with 42 live assurance audits and over 500 staff trained.

By embedding this digital approach into our daily workflows, we are ensuring that patients and their families receive safer, more consistent, and high quality care, every day, in every area.

Looking ahead, we plan to expand the use of the module to more clinical teams including domiciliary care areas. We will also use it to manage more service specific audits and further embed it into our quality and safety frameworks. This will ensure even greater consistency and drive further improvements in patient care.

The Welsh Language

Increasing our ability to offer to carry out Clinical Consultations in Welsh

In December of 2024, the healthboard published a 5-year plan which outlined the actions we would take to increase our ability to offer to carry out clinical consultations in Welsh, in 7 key priority areas as outlined by Welsh Government's More Than Just Words Strategy. Recognising and meeting people's language needs is an important part of good quality care.

The following areas of the healthboard have each developed live plans detailing the actions they will take over the next five years to improve services available to patients that need to access services in Welsh.

- Mental Health, Learning Disabilities and Dementia Care
- Speech and Language Therapy
- Children and Young People's Services
- Care of the Elderly
- Stroke Services

Development of the action plans was led by managers within these service areas with support and guidance from the Welsh Language Officer. Responsibility for meeting the targets set out within the action plans rests with Service Managers, who will be supported in completing actions by the Welsh Language Officer.

We are pleased to report that our plan was published on schedule, and that the service areas have been working in earnest to move the work forward. In the brief period since launching their plans most areas have now established groups of 'Anogwyr' (encouragers) who will be the standard bearers for this work in their divisions. The Anogwyr are leading on tasks such as 'Word of the week,' 'Ciplun' Staff Profiles along with other informal methods of raising visibility of Welsh in the service and helping staff feel at ease when stepping out of their comfort zone to use it.

Service areas are also delivering 'lunch and learn' sessions for staff where the Welsh language and its importance in meeting patient's needs is a standing agenda item. As this work develops, these will be a good opportunity to share learning across divisions and identify best practice.

The progress made has also helped identify the need for validated clinical resources and standardised assessment tools to be made available in Welsh for multiple services. These are issues where collaboration on a national level is needed, and we are ready to play our part in driving this work forward for the benefit of patients across Wales.

In addition to implementing the actions detailed in our plans published in December 2024, work continues to develop micro plans which will transform existing provisions into bilingual services. Each service area will identify and develop a detailed plan for one very specific area of delivery. These micro plans will be published as appendices to the main body of work by December 2025 and will be delivered by the end of the five-year plan (2029).

Case study – Switchboard

Our Switchboard and Network teams have been working diligently over the past 12 months to improve the service we are able to offer people who wish to speak with us in Welsh over the phone. Following an assessment of our ability to forecast and answer Welsh language calls it was identified that investment and development was needed in the current provision.

Across the organisation we had 24 members of staff answering calls to our main switchboards, 5 were capable of handling calls in Welsh. Turnover of staff in this department is low, so there is a high level of knowledge and expertise, however the Welsh language resource available was not being allocated effectively, meaning that there would be occasions where multiple Welsh speaking staff were on duty, and other occasions where there were no Welsh speakers available. Calls made to our switchboards were also answered manually, meaning that there was no way to establish if a caller wanted to speak with us in Welsh before the call was answered. This also meant that detailed, reliable data for the service was not available.

To address this, short, medium and long term actions were developed with support and guidance from the Welsh Language Commissioner's office.

We introduced an automated front end to our main numbers, greeting all callers bilingually and asking them to select the language that they would like to use with us. Since the implementation of this system, callers that select Welsh are routed to a call handler with the appropriate skills to answer their call. This has been a significant improvement in the quality of service offered and an additional benefit is that we are now able to gather accurate data on the number of calls presented to us in both languages. Since the introduction of this system, we have seen an increase in the number of callers selecting Welsh. This data is monitored monthly by service managers.

Already, this data has provided us with the evidence needed to invest in opportunities to upskill our staff by sending them on confidence boosting courses and tailored Welsh improvement courses. We have also looked again at our recruitment strategy for this service and through natural turnover have been able to increase the number of Welsh speakers in the team to 8 out of the 24. Additionally, we have now adopted a smart rostering process, where staff with Welsh skills will be allocated more evenly across shift patterns, reducing the risk that Welsh calls will be missed.

Whilst the steps we have taken have improved service, we recognise that there is still a way to go before we are offering assurance of a resilient service to our Welsh speaking callers. Our long-term plan has actions that will ensure that when recruiting to fill future vacant posts in this team, the language skills needed will be a primary consideration in the recruitment process.

Our team have risen to the challenge set over the past year. Non-Welsh speaking call handlers have engaged in basic language training and are now more confident in responding appropriately to enquiries in Welsh, and our Welsh speakers are meeting the needs of more callers than ever before. We are thankful to them for the commitment they have shown.

Priorities for 2025-2026

Over the coming year, we will work to raise awareness across the organisation of the importance of delivering an Active Offer to every patient. Achieving this will mean that our knowledge of patient language preferences will increase, and our planning of future services will be better informed.

Our networks team will continue to roll out developments to our telephony systems so that all departments that need them will be able to implement automated bilingual front ends to their contact numbers - Improving the quality of experience for callers that wish to speak to us in Welsh.

We will continue to work with Key Priority areas as set out in Welsh Government's More Than Just Words strategy to develop Micro Plans which will lead to the transformation of specific services to be fully bilingual. Our service groups have demonstrated great progress in a short period on their work around delivering clinical consultations in Welsh, and we are excited to see how their proposals for very specific services develop over the next twelve months.

Arts and Heritage

Our Arts and Heritage Team manage a range of projects and partnerships that improve the experience of our patients, staff and communities. All projects rely on charitable donations, money raised from art sales or external grants. The team also manages the Heritage Collection, which documents the history of healthcare in the Swansea Bay area.

The Arts in Health work focuses on three main areas;

People: Everyone interacts with healthcare throughout their lives, and we harness the arts to improve those experiences by providing opportunities for patients, visitors and staff to engage and express themselves through creative activities. For example through live music on wards or creative staff wellbeing sessions.

Spaces: Great care environments are documented to help with recovery, improve health outcomes for patients and the wellbeing of staff. We commission local artists to create bespoke artworks for wards and public areas.

Communities: Art projects can help us connect with the diverse communities we serve, decrease health inequalities and offer support where people live through social prescribing programmes.

SBUHB Arts & Heritage Highlights 2024-25:

Musical Hospitals

With funding from Arts Council Wales, we were able to form a unique partnership with some of the top music organisations in Wales and run a programme of music performances in our hospitals. The aim of this one-year pilot was to provide live music in wards, not only for the benefit of patients and staff, but to evaluate the impact these performances would have on resources and services overall.

- Delivered by the SBUHB Arts & Heritage Team with leading Welsh music organisations (BBC NOW, WNO, Live Music Now, Music in Hospitals and Care)
- 174 live music sessions on wards (NPTH & Tonna) and 8 concerts in public areas
- 3,000+ patients, staff, and visitors reached

The evaluation shows a meaningful and measurable contributions to patient recovery, emotional wellbeing, staff morale, and wider organisational goals.

Patients: Reduced agitation, enhanced recovery (stroke, neuro-rehab, dementia), improved emotional and physical engagement, stronger mother-baby bonding.

Staff: 80% reported improved wellbeing, 70% reduced stress, higher morale and job satisfaction.

Resources: The data collected indicates the creative activities on a ward resulted in significant savings due to reduced staffing hours required, reduced sickness and other factors. We hope to explore and test this on a larger scale in the future.

“Music makes life better, whatever life throws at you. Simple as that.”

-Staff member response to Musical Hospitals

Sharing Hope

Sharing Hope is an innovative, arts-based initiative designed to support staff wellbeing. This program offers an alternative to existing wellbeing provisions by offering accessible, creative outlets for staff to enhance their mental health and connect with colleagues. It also provides managers with a valuable resource to refer team members to on-site wellbeing sessions. Experienced artist facilitators lead regular sessions, establishing safe, creative communities where staff can openly discuss mental health, share their stories, and learn practical tools for wellbeing.

Since the programme started in 2022, over 1500 staff and placement students have engaged with our artist facilitators, in a variety of art activities across our sites.

- This year we marked the end of our 3 year pilot period with an exhibition celebrating our staff and their creativity, opened by the Chair.
- We secured funding from Arts Council Wales and charitable donations to continue the programme until October 2025.
- We won the Royal Society for Public Health - ‘Health and Wellbeing in Workplaces Award’.

Singleton Reception Refurbishment

As part of the refurbishment of Singleton Hospital reception area, the team commissioned a series of artworks based on local plants that have traditionally been used in medicine.

The 15 images were created by Swansea-based artist Carly Wilshere-Butler, using an alternative photographic process called cyanotype, that harnesses UV rays from the sun to produce delicate, X-ray-like images.

Carly's personal experiences as both a visitor and patient have influenced the project.

“As well as on occasions being a patient myself. This project was very important to me as a way to give back to everyone who has helped me and my loved ones.”

The plants were handpicked locally from Petallica Flower Farm Community Interest Company in Dunvant, and Bramble and Nettle Community Interest Company in Penmaen. The artworks were commissioned with money raised from art sales in Singleton Hospital, organised by our wonderful volunteer Fiona Edwards.

Ambitions for 2025/26

- We will work with a range of community partners and develop an arts-led programme to support the mental health of young people in Swansea Bay.
- We will launch an ambitious Art Strategy for the organisation.
- We will work with our Health Charity to fundraise for a comprehensive creative wellbeing programme for SBUHB staff.
- We will continue to build our heritage collection and explore ways to share this rich history with the public.

Looking Forward

We are proud of our achievements in relation to quality, safety and improvement, but recognise we have more to do. Over the coming year we will strengthen how we use data and information on the quality of our care, so that we can continually make improvements to patient experience and outcomes.