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Bwrdd Iechyd Prifysgol  
Caerdydd a'r Fro  
Cardiff and Vale  
University Health Board



# PATIENT EXPERIENCE ANNUAL REPORT

April 2025 - March 2026

# INTRODUCTION

The Patient Experience Annual Report provides assurance on how Cardiff and Vale University Health Board listens to, learns from, and acts upon the experiences of people who use our services, in line with the NHS Wales People's Experience Framework.

It reflects our statutory duties under the Health and Social Care (Quality and Engagement) (Wales) Act 2020, and our commitment to person-centred, compassionate care.

The People's Experience Framework recognises experience as the sum of all interactions, shaped by organisational culture, staff, and systems.

This report outlines how the Patient Experience Department within Cardiff and Vale University Health Board aligns with the NHS Wales People's Experience Framework.

The report demonstrates how each service contributes to listening, learning, inclusion, lived experience, and quality improvement, supporting assurance and improvement at organisational and service level.

Welsh Government's People's Experience Framework can be viewed by visiting this link:

<https://www.gov.wales/sites/default/files/publications/2025-04/peoples-experience-framework-2025.pdf>



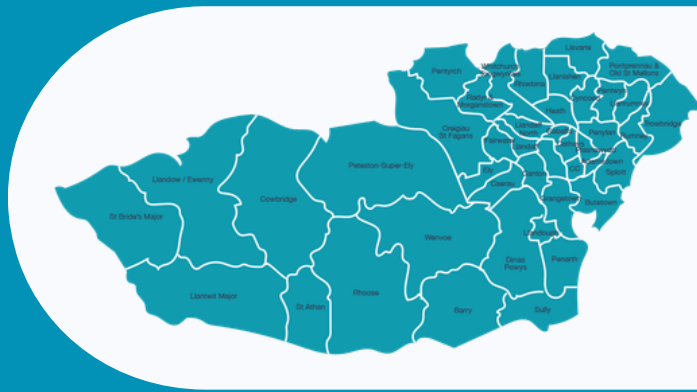
# WHO WE SERVE

## Population Profile

Cardiff and Vale University Health Board

## Population Size and Geography

Cardiff and Vale University Health Board serves the population of Cardiff and the Vale of Glamorgan, covering a mix of densely populated urban areas and more rural and coastal communities.



Cardiff is the most densely populated local authority area in Wales, while the Vale of Glamorgan has a more dispersed population profile with smaller towns and rural settlements.

Cardiff's population increased between the 2011 and 2021 censuses, reaching around 362,300 people in 2021, representing one of the fastest rates of population growth in Wales. This growth has implications for demand on health and care services, particularly in acute, primary care and community settings.

## Age Profile

The population served by the Health Board has a contrasting age profile across its geography:

- Cardiff has the youngest median age in Wales, at 34 years, driven by a large working-age population and significant numbers of students and young adults.
- The number of residents aged 65–74 years in Cardiff increased significantly between 2011 and 2021, while the number of children aged under 5 decreased over the same period.
- The Vale of Glamorgan has a notably older population, with a higher proportion of residents aged 65 and over compared to Cardiff, reflecting retirement patterns and rural demographics.

Across Cardiff and the Vale, the population is ageing overall, with projected increases in older age groups placing growing demand on health, social care and long-term condition management services.

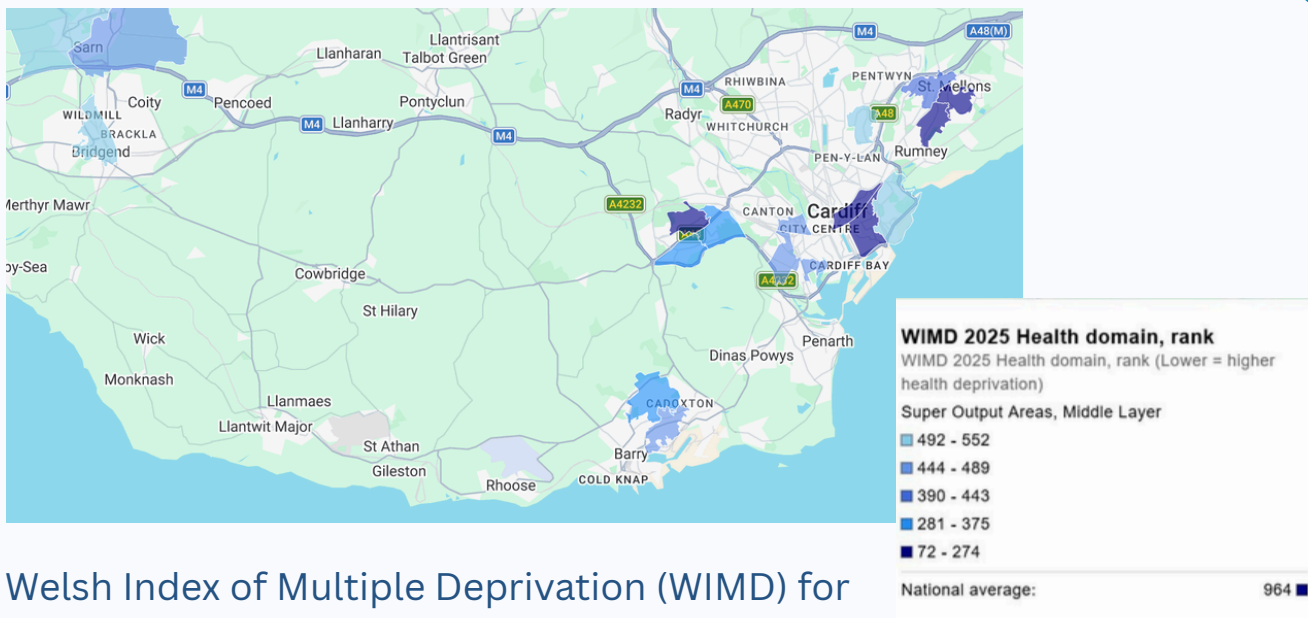


## Socio-Economic Deprivation

The population served by Cardiff and Vale UHB includes communities experiencing some of the highest levels of deprivation in Wales, alongside some of the least deprived areas. Analysis using the Welsh Index of Multiple Deprivation (WIMD) shows:

- Concentrations of deprivation within parts of Cardiff, where poorer housing, lower income, unemployment and reduced educational outcomes coincide with worse health indicators.
- Residents in the most deprived areas are more likely to experience multiple long-term conditions, disability and poorer mental health.
- Deprivation impacts are unevenly distributed, meaning that population-level averages can obscure significant localised need.

Younger age groups and people whose daily activities are limited by long-term illness or disability are more likely to live in the most deprived neighbourhoods, reinforcing the relationship between deprivation, health need and service demand.



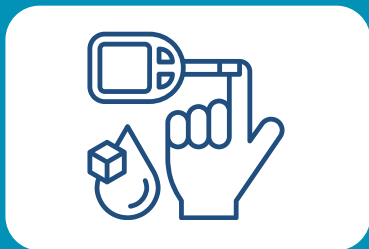
Welsh Index of Multiple Deprivation (WIMD) for Health. The map highlights areas in blues, light blue to dark blue showing the concentration of health deprivation.

## Health Status and Inequalities

Population health across Cardiff and the Vale shows wide variation, with overall improvements in life expectancy over time masking significant disparities between communities.

Public health and population needs assessments highlight:

- Higher levels of long-term conditions, including cardiovascular disease, respiratory illness and diabetes, particularly in areas of greater deprivation.
- Elevated demand for mental health services, with increasing presentations linked to social and economic pressures, including the longer-term impacts of the COVID-19 pandemic.
- Significant health inequality gaps at neighbourhood level, with marked differences in life expectancy and healthy life expectancy between the most and least deprived areas.



These inequalities are geographically concentrated, particularly within Cardiff, where areas of poorer health outcomes closely mirror patterns of deprivation.

## Implications for Service Planning

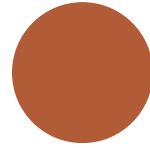
Taken together, the population profile of Cardiff and Vale University Health Board reflects:

- A growing and ageing population, with differing needs across urban and rural communities.
- Persistent and significant health inequalities aligned to deprivation.
- Increasing complexity of need, particularly among older people and those living with multiple long-term conditions.

This population context underpins the Health Board's approach to quality improvement, service transformation and resource allocation, and informs strategic planning through mechanisms such as the Population Needs Assessment and long-term public health planning.

# WHAT WE DO

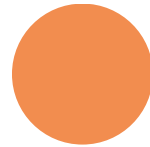
**Accessible Standards**



**Bereavement Services**



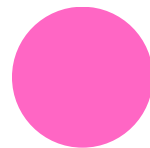
**Unpaid Carers**



**Chaplaincy Services**



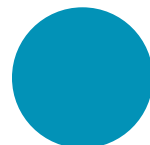
**NHSBT Corneal Donation**



**Digital Stories**



**Voluntary Services**



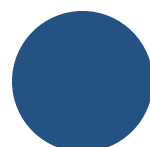
**Enquiries**



**Patient Feedback**



**Information and Support Centres**



# Accessible Standards

The Accessible Information Lead's role is to support departments within Cardiff and Vale Health Board to provide patients, service users and carers with information that is easily accessible and in a format that works for them, regardless of language, disability, culture, or communication need.

## Accessible Information Standards

In September 2025, the Welsh Government re-launched the Accessible Information and Communication Standards Framework.

We are working in partnership with teams across the Health Board to implement the framework's 13 indicators. These indicators cover everything from identifying communication needs, providing accessible formats, offering interpretation, and ensuring information is consistently understandable. The aim is to ensure people with additional communication or information needs are not disadvantaged when accessing healthcare.

### To date, we have.....

- Created an Accessible Information Standards Work Plan to monitor the team's implementation of the standards.
- Developed a draft Accessible Information Standards Policy.
- Provided baseline information to Welsh Government.

### Priorities 2026/27

- Set up an Accessible Information Standards Working Group.
- Set up an Accessible Information Standards Patient Voice Group
- Finalise Accessible Information Standards Policy - to be signed off by Accessible Standards Working Group.
- Create Accessible Information Standards assessment tool for teams to help them audit their implementation of the standards.

# Translation and Interpretation

To support staff to meet the Accessible Information Standards, and support patients' communication needs, we have been developing a range of tools and resources.

This includes:

- Translation and Interpretation SharePoint pages
- A central Interpreter Booking Request Form
- A clear Interpreter Booking Decision Pathway
- Posters for staff areas explaining how to access training and translation services

In addition, we have increased our support for on-demand language services to ensure no one is left without the communication support they need, where booking an interpretation service in advance has not been possible.

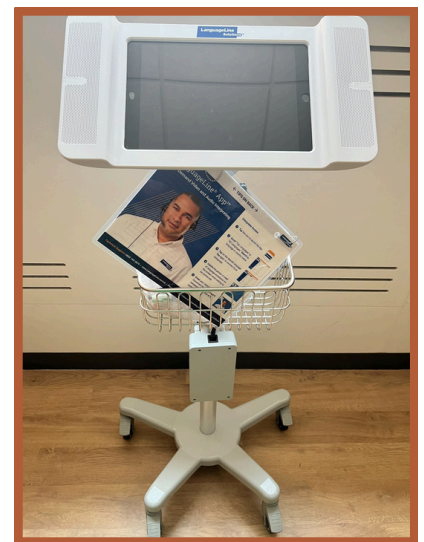
Our goal is to make sure staff can quickly and easily access interpreting services, reducing delays and ensuring safe communication.

In order to achieve this we have procured 10 Interpreter Devices on Wheels. These devices allow users to easily access online video interpreters. They each have over 40 languages, including BSL, and connect to an interpreter, depending on demand, within minutes.

A number of these devices have already been provided to areas where booking an interpreter, in advance, may not always be possible. Currently, we have devices in;

- MEAU,
- Radiology UHL & UHW
- Outpatients UHL
- Main Theatres UHW

We also have a device in each of our offices so wards and clinical areas can loan them on a short-term basis. These devices mean interpreting support is available on demand, whether in emergency departments, outpatient clinics, or community settings. We continue to look at other tools available to support patients and staff, improving access for all.



## British Sign Language (BSL)

Supporting British Sign Language (BSL) users across our sites has been a priority for the team this year. We have been working with partners, Convo, to place a video relay service on our main phone lines, allowing BSL users to contact departments directly and more conveniently.



Work has also been undertaken in partnership with a staff member, with lived experience, in Swansea Bay University Health Board, who has developed a guide helping staff to communicate with D/deaf patients and colleagues. This information can be found on our SharePoint where a standalone page for BSL guidance has been created, including helpful tips for staff and information on how to book BSL interpreters.



Finally, we have been working with teams to promote the use of the Convo App, which provides remote BSL interpreting 24/7. The app has been downloaded onto a number of handheld devices which can be loaned out to departments who require translators at short notice.

### Next Steps

- Working with Convo to create QR codes that can be placed in departments, so staff and patients can access interpreting support instantly. The QR Code can be scanned by the patient on their phone, but they will not be charged as it will be logged against the Health Boards/Departments account.
- Development of resources for areas to use, promoting to patients and unpaid carers how teams can support their communication needs.



**For more information on Translation and Interpretation Services please scan the QR Code**

## Editorial Panel

The Editorial Panel is made up of volunteers who review patient information before it is published. The Editorial Panel are able to provide feedback on:

- Content
- Layout
- Readability
- Accessibility

In 2025/26 the  
Editorial Panel  
reviewed  
**28** documents

Departments receive feedback from the panel to help them improve the clarity and quality of their written information. This ensures our resources are understandable, patient-friendly, and meet accessibility standards.

“ That's brilliant, thanks. Such a useful resource for us when creating posters etc! ”

“ Thank you for the thorough feedback on our leaflet, we have taken most of the comments on board and made the necessary changes ”

“ Thanks so much, this is really helpful to hear the feedback from the panel ”

## Butetown Multicultural Resource Team (BMCRT)

The Butetown Multicultural Team is a small team consisting of Bengali, Sylheti and Somali-speaking individuals who can support Women and Children with face-to-face translation at appointment and in clinical settings.

The team also works in partnership with Clinical and Public Health Teams to provide relevant, up-to-date and correct information about childhood immunisations to help to improve uptake within their communities.

“ I wanted to let you know that it *(the session)* went very well and I think the teamwork between BMCRT and myself was excellent. I think their presence made a HUGE difference to how the session went both for myself and for the ladies present.

*From Public Health Immunisation Co-ordinator* ”

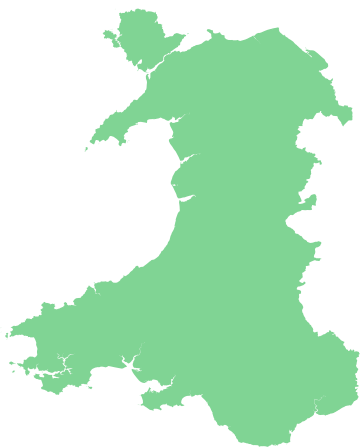
# Bereavement Services

## Who we support & how?

- Anyone who lives in the Cardiff & Vale area
- Anyone whose relative or friend has died in one of our hospitals
- Inpatients struggling with bereavement(s)
- PCCU families / Paeds ED / 25yrs and under / Adult referrals
- All CAVUHB staff struggling with either a work-related or personal bereavement
- Calls (ranging from one to multiple calls over a period of time)
- Text / Email support
- Counselling referrals / signposting
- Ward-based immediate support
- Support families when needed through bereavement debriefs



## National Framework for the delivery of Bereavement Support



We are consistently working towards implementing the standards within the National Framework for the delivery of Bereavement Support and its associated pathways.

The Health Board-wide Bereavement Framework Steering Group enables clear communication and sharing of information and updates.

Progress, obstructions and potential resolutions continue to be shared across Health Boards throughout Wales through frequent meetings of Bereavement Leads. There are also wider discussions with Third Sector and Welsh Government within the National Bereavement Steering Group.

# Bereavement Services

## Remembrance, Reflection and Awareness Raising

- In collaboration with the Patient Experience Team and Health Board colleagues in November 2025 we held a Tree of Remembrance Service for those families who have experienced the death of a child under 18. Each family is sent an invitation and a star to decorate in memory of their child. These stars are hung on trees within the Sanctuary multi-faith space in University Hospital of Wales.
- Throughout the last year we have promoted national events to raise awareness of grief and bereavement such as Grief Awareness Week, Dying Matters Awareness Week and Baby Loss Awareness Week. During these events we hold stands in UHW and UHL in collaboration with third sector partners and provide spaces for remembrance and reflection within our multi-faith spaces.

## Collaborative Working

### Health Board colleagues

- We work alongside many teams within Cardiff and Vale University Health Board to improve the care we provide our bereaved families. We collaborate closely with Chaplaincy, Bereavement Office, Palliative Care and also liaise with clinical areas to provide bereavement support and training when required. Our links with Palliative Care have strengthened as we look to develop Health Board Champions together.

### Statutory and non-statutory stakeholders

- We have supported families by liaising with Coroner's and Medical Examiner's Offices, Registrars, local Councils, and Funeral Directors. As stakeholders we meet routinely to discuss processes relating to care after death and any issues arising; consistently seeking to improve experiences for bereaved families.

### Third Sector

- We work closely with third sector partners such as Marie Curie, Platform 2 Wish, Sandy Bear, and Cruse in order to be able to provide comprehensive support for bereaved families as their needs adapt and change.

# Bereavement Services

## Feedback

Some examples of feedback we have received from those we have supported...

“... gave us so much comfort, support and advice after our child passed away unexpectedly, at a time when we were completely lost and consumed by grief.”

“Grateful thanks for the tremendous support you gave me, when I was so in need.”

“Thank you for caring, you're a truly lovely human being. You helped me when I didn't know if I needed help or not...”

“Thank you for taking the time to meet up with us. It was the first time I felt like someone listened to me and understood me.”

## Planning for the Future

- Implement a volunteer service to support bereavement. This, alongside our collaboration with Palliative Care Champions will expand the reach of our bereavement service and improve support throughout the Health Board.
- Raise awareness of the Bereavement Support Service within Cardiff and Vale communities via communication with GP surgeries.
- Expansion of written resources, for example, an offering in different languages and for those with learning disabilities.

# Digital Stories

## What is a Digital Story?

A digital story is a short, multimedia narrative that combines digital elements such as video, audio, images, text, and sometimes music to help tell a story. It's typically a blend of creativity and technology, allowing individuals to share their experiences, both good and bad, in an engaging, interactive format. Digital stories can be used for a wide range of purposes, from personal experiences or for staff training and public educational use.



### Patient stories:

These are personal accounts shared by patients about their journey through illness, treatment, recovery, or their lived experience of their condition and their journey through the healthcare system. These stories can help humanise the medical process, provide insight into the emotional and psychological challenges patients face, and create empathy.

### Staff stories:

Staff might share their stories to highlight the challenges and rewards of working in healthcare, or to explain specific benefits of treatment, a procedure or the outline of a condition to patients. This helps humanise healthcare systems and can build trust with patients in the services we provide.

## April 2025 - March 2026



**39** digital stories produced



**2,626** views of stories on YouTube



**54** requests for digital stories "You said, we did"



**Ongoing** integration with the Civica platform



**95** staff trained in digital storytelling (inc. CVUHB, Velindre, Cwm Taf UHB)



**7** stories reviewed by the Executive Team and Board at meetings

**Collaborative working with** Public Health Wales, NHS P&I and SBUHB  
**Top 3 story requests clinical boards** - CD&T, Medicine and Specialist Services  
**107 members** in the co-hosted Digital Stories Network Wales

# Digital Stories

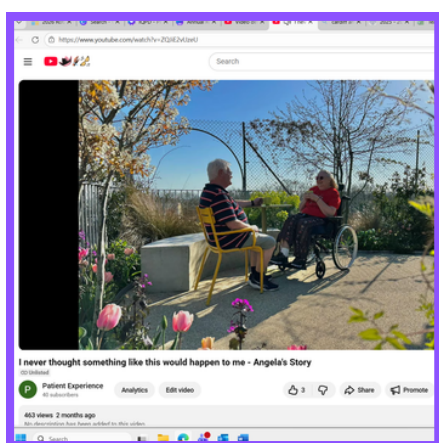
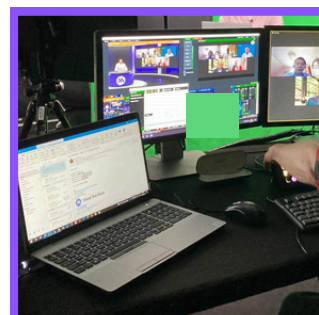
## Why Digital Stories?

All people and communities who use our services and staff who work in our services have the right to provide feedback as a digital story, either being identified or anonymous, whenever they choose.

Digital story feedback is used to celebrate and build upon what is working well and helps identify areas where improvements could be made, supporting the quality and improvement agenda.

Engagement with people can either be face-to-face, over Teams or Zoom, through a telephone call or through written text with the option of anonymity on all communication channels.

There are robust processes in place to capture and listen to people's stories which are then shared at the highest level in the organisation, at committee and board level meetings and used for staff training and awareness through lived experience building confidence in our services.



## Sharing knowledge and skills

The Digital Stories Lead hosts the quarterly Digital Stories Network Wales meetings which has over 100 members from all NHS organisations throughout Wales who work together collaboratively to share knowledge, skills, best practice and learning. Supporting each other using the NHS Wales digital story toolkit is key and sharing stories which contribute to the All Wales Digital story library, as well as keeping a local library of stories.

The Digital Stories Lead has worked collaboratively with other healthcare organisations such as Velindre Cancer Centre, Cwm Taf UHB, Swansea Bay UHB, Public Health Wales and NHS Performance and Improvement to support digital storytelling throughout Wales and share knowledge and skills.

# Digital Stories

## Staff digital story training

The Digital Stories Lead has also been training staff in how to capture digital stories themselves. The training session is 2 hours long, delivered over teams where staff can learn the basics, accompanied by a comprehensive handbook, which details the process step-by-step to create engaging patient stories. So far, over 120 staff across a number of service areas and health boards have received this training.



## Other projects and supporting our team

The Digital Stories Lead also uses their creative skills in a number of areas to support colleagues across the PE Team by providing social media advice and content for awareness days and events such as Dying Matters Week and Grief Awareness Week.



Using digital skills in videography and photography to support the annual paediatric and neonatal remembrance services held at Christmastime, also events such as the annual Volunteer Thank You gathering.



Videography, along with patient and family stories of those sharing their experiences of open dialogue and capturing elements the Voices and Visions gathering has also been utilised by colleagues in Mental Health Clinical Board.

Using graphic design skills in producing staff training information, presentations and reports not just for the PE Team but also for the wider Concerns Team too.



# Digital Stories

## Feedback received from staff and patients

“ Thanks again for all your time and effort! It was a delight speaking to you. Hopefully my story will help make changes across the board by those who watch it.

**Staff member** ”

“ Thank you so much for helping me to share my story and for all the hard work you have put into it. I hope the information shared will be of benefit to other patients in the future.

**Patient** ”

## Digital stories, the next chapter

Looking ahead to the next chapter, the Digital Stories Lead aims to:

- Offer the opportunity to more people to take part in digital stories by attending Feedback Roadshows at stands in hospitals, where people can share their stories, face-to-face in the moment
- Include the opportunity for people to leave digital story feedback on the All-Wales Patient Experience Survey which is circulated to 1,000 people every day
- Train more CVUHB staff in digital storytelling and create an internal network of storytelling to share best practice, knowledge, skills and advice on digital storytelling
- Engage in more partnership and collaborative working using the Digital Story Network (DSN) as a platform for sharing information and increase the numbers of those attending the DSN quarterly meetings

As the Digital Story Lead is just one person providing this service, it would be advisable to look for additional resources or ways to increase posts (students, volunteers, etc.) in this area as digital storytelling becomes more popular and embedded in the organisation through the adoption of Welsh Government's People's Experience Framework.



Voluntary Services enhance the care environment by supporting patients, families, and staff through a wide range of volunteering roles. Volunteers contribute to reducing isolation, improving wellbeing, and fostering a compassionate organisational culture.

Volunteers are people who commit time and energy for the benefit of others, doing so freely, through personal choice and without expectation of financial reward.

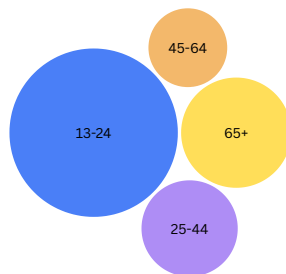
All Volunteer roles complement the services provided, providing support with non-clinical tasks. Voluntary Services covers University Hospital of Wales, Children's Hospital for Wales, University Hospital Llandough, Hafan Y Coed, St David's Hospital and Barry Hospital.

## April 2025 - March 2026

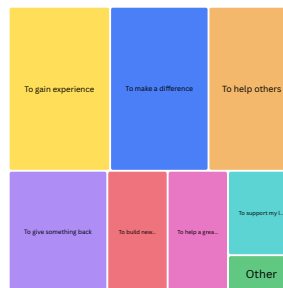
Total UHB Volunteers



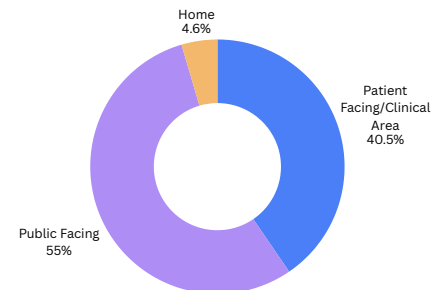
Age Range



Volunteer Motivations



Volunteer Role Type



**UHB Recorded Volunteer  
Hours (approx)  
11,000+**

**UHB Welcome Team Recorded  
Volunteer Interactions (approx)  
35,000+**

## Volunteer Recognition

The Health Board celebrated National Volunteers' Week 1-7 June 2025 by recognising the valuable contributions volunteers make. The week ended in the Annual Volunteer Thank You Event which was attended by volunteers, third sector partners, staff, Chief Executive Suzanne Rankin and Assistant Director of Patient Experience Angela Hughes. To mark Volunteers' Week, Saira Bano was 'In the Spotlight'.

# Voluntary Services

Two volunteers received additional awards for their contributions to volunteering; David White for Healthcare Volunteer of the Year award at Skills for Health's - Our Health Heroes Awards 2025, and Jackie Askey for The Making a Difference Award at The Cardiff and Vale Regional Partnership Board Awards.



“

During my volunteer journey, I have met incredible people, and I am especially grateful to my volunteer colleagues and the team for supporting me so well. All these experiences have given me a sense of belonging with this health board.

”

## Partnership Projects

Voluntary Services works closely with external organisations including Universities, Colleges, Third Sector and Charities to support additional Volunteer Projects within the Health Board.

Examples:

- 91 first year Pharmacy students from Cardiff University undertake Patient Surveys.
- 8 Holistic Therapy students from Cardiff & Vale College completed their placements.
- 110 Volunteers in partnership with Skills & Volunteering Cymru support 34 areas.
- 9 End of Life Companions from Marie Curie support patients referred by Palliative Care Team.
- 17 Horatio's Garden volunteers supporting the Spinal Rehabilitation Centre.

# Voluntary Services

## Dementia Companions - Older Persons Acute Ward

Dementia Companions have been recruited to support on the acute medical assessment ward at University Hospital of Wales which looks after those aged mainly over 65 years, who also have a dementia. Voluntary Services worked closely with the Ward Manager and Consultant Nurse for Older Vulnerable Adults to develop this role. The Dementia Companions offer a reassuring presence for older people when they are acutely unwell and may be confused or distressed, acting as a friendly face, engaging in conversation and activities at the bedside during their time on the ward.



These volunteers received additional training with CVUHB's Dementia Learning and Development Team, completing One in a Million informed level dementia training and Meaningful Engagement training.

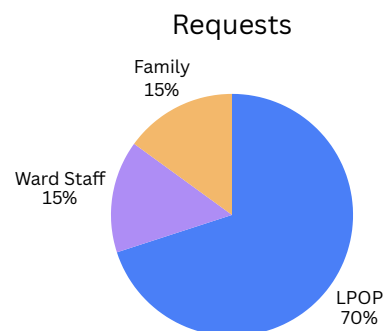
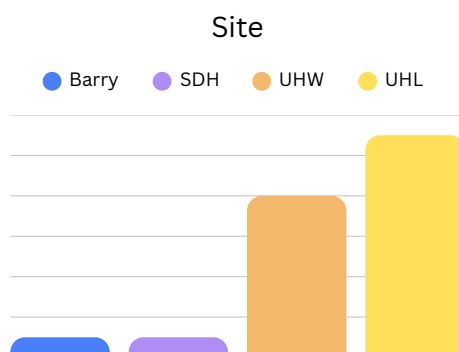
## Youth Board

Over 100 volunteers sit on Cardiff & Vale UHB's Youth Board. Formed in 2018, it gives young people in the Cardiff and Vale area a voice, ensuring their involvement in key decision-making processes, change implementations and improving services across the Health Board.



The Youth Board is made up of young volunteers aged 13-25 from a range of backgrounds and communities across Cardiff and the Vale, each bringing their own experience, knowledge and valued opinions to the table for discussion. From April 2025 to March 2026 Members contributed over 350 hours of their time after school. In March 2026 48 new applications were received.

## Patient Befriender Requests



# Voluntary Services

With 59 Patient Befrienders supporting 4 hospital sites, Voluntary Services has been able to implement a referral system for staff and family to request a visit from a Befriender for a patient/loved one. This means requests can be taken to match a volunteer based on their location, training and skills, as well as any specific interests to engage well with individual patients. This service complements person-centred care on the ward.

“

The patient has provided good feedback from the service and myself and my colleague truly appreciate someone visiting her during her admission.

”



## You Said We Did April 2025 - March 2026

### Ward Welcomers – Children’s Hospital for Wales

Following feedback from patients and wards about visiting times for Owl ward, volunteers were introduced to support at the entrance to Owl Ward. They have been helping to admit visitors as directed by staff, providing a calm, reassuring and welcoming presence on arrival and reminding visitors of hand hygiene procedures, and ward-specific infection control measures. So far the role is being piloted during evenings and weekends.



### DrEaMing Champions - Prehab2Rehab, Enhanced Recovery After Surgery

It was identified by the Prehab2Rehab Team that the DrEaMing agenda (Eat, Drink Mobilise within 24 hours after your surgery) could be supported by volunteers. A volunteer role was developed with a volunteering pathway to support the Prehab2Rehab journey.

The Project implemented its first phase with volunteers (including those with lived experience of surgery themselves) starting in Autumn 25. They visited the surgical ward championing the DrEaMing aims; prompting, supporting and encouraging patients to Drink, Eat and Mobilise post-surgery, while being a friendly face and providing company to those without visitors.

# Voluntary Services

## Interactive Touch Table

Following feedback from patients and wards about boredom and lack of engagement, Voluntary Services introduced a loan process for its 3 Interactive Touch Table devices; located at St David's Hospital, Llandough Hospital and Lakeside Wing.



## Feedback

“The screen has been invaluable. It is used daily by staff to help groups & 1:1 work. Allowing us to support patients with all sorts of disabilities to engage in material based on the screen and internet as well. The touch screen and ability to move the screen to so many angles, heights etc. is so good. It's been particularly good at helping us engage those with dementia and the physical disabilities that often come with this.”

## Digital Library Trolley

Following feedback from patients and the Trolley Volunteers for patients requests for audio books, several donated tablets have been re-purposed with Audio Books. This builds on the success of the Trolley which visits wards at UHW and UHL with activity packs, individual DVD players and books.

April 25 - March 26 saw over 1000 books and 28 DVD players loaned to patients, and over 400 activity packs given out.

## Feedback

“This volunteer project has been a great help for my learning, creativity, communication skills and being part of contributing to society.  
From a volunteer”

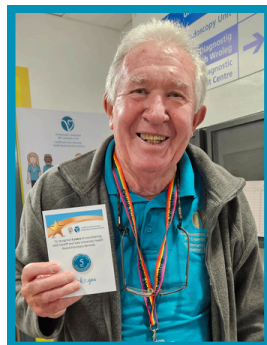
“I cannot praise their respect, dignity, courtesy and total professionalism  
From a patient”

“When we engage in activities with them, they feel valued, heard, and cared for—like part of a family. One of them told me she hadn't laughed that much in a very long time and that it was her best day at the day centre so far. Moments like these remind me that making a meaningful difference in even one person's life is the greatest impact  
From a volunteer”

# Voluntary Services

## Relaunch of the Volunteer Recognition Programme

Recognition of important volunteer milestones have been relaunched, with Volunteers receiving certificates for 6 months, badges for 1, 2, 5, 10 and 20 years of volunteering with CVUHB.



## Assemble - CVUHB Voluntary Services' Volunteer Management Software

- Better tracking of volunteer hours and impact reporting
- App enables volunteers to easily access Rotas, latest news and updates
- Alert and notification system
- Volunteer Profiles allow team building and safe communication between volunteer teams

## April 2026 - March 2027



### Emergency Unit Volunteers

- Grow the Emergency Unit Volunteer Team.
- Supporting a new area of the Emergency Unit.
- Collaboration with Education Team.



### Patient Voice Volunteers

- Recruit a team of Patient Voice Volunteers to support with the Feedback Team's Agenda and Voluntary Services Team's Measuring What Matters feedback.
- Recruitment will cover all hospital sites.

# Voluntary Services



## Arts & Crafts Volunteers

- Grow the Arts & Crafts Volunteer Team.
- Focus on 1:1 activities at the bedside for University Hospital of Wales.
- Focus on group activities in Day Rooms at University Hospital Llandough.



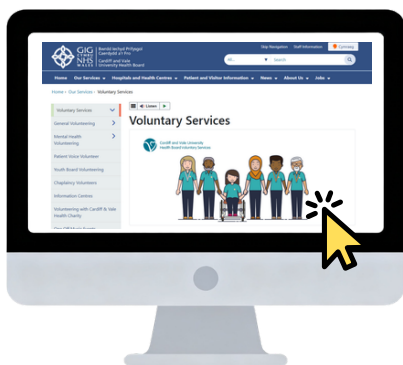
## Health Charity Volunteers

- Collaborate with the Health Charity to launch new volunteer roles.



## Green Spaces

- Supporting 2 new areas with Green Space Volunteers.



**Visit the website for more information**

# Unpaid Carers



The aim of the Unpaid Carers Information Service is to raise awareness of unpaid carers highlighting the issues they face, and to act as a signposting service helping unpaid carers find services and support in their communities. We also work in partnership with voluntary organisations and local authority partners in the Vale of Glamorgan and Cardiff, to consider how we can provide better information and guidance for unpaid carers.

## Unpaid Carer Support Worker Pilot

In November 2025 an Unpaid Carer Support Worker was appointed to undertake a pilot project in UHL. The role, funded by Cardiff and Vale Regional Partnership Board, aims to help support unpaid carers through the hospital discharge process, providing them with information and improving their experience. They are also raising awareness of unpaid carers with staff and the public and helping unpaid carers access the help they need both in hospital and in their community. Since starting in the role the Unpaid Carer Support Worker has made network connections with Ward Managers, Hospital Discharge, Adult Mental Health, Palliative Care Teams, Third Sector organisations such as Headways and Adferiad, as well as both Local Authorities Unpaid Carer Teams.



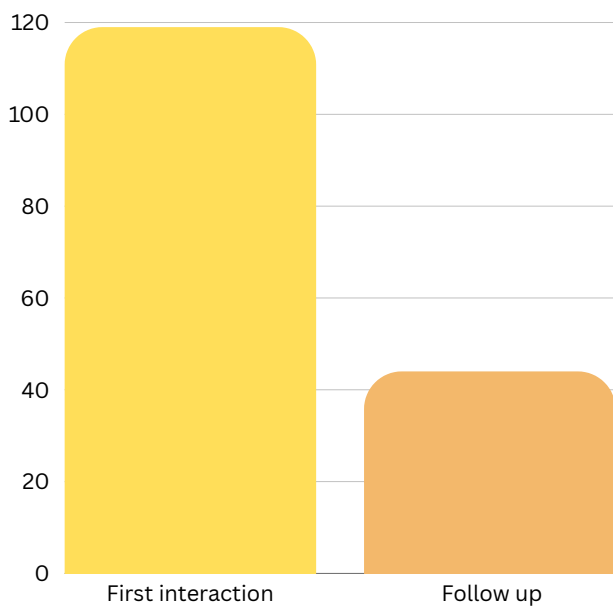
In mid-November the Unpaid Carer Support Worker began undertaking ward visits to 5 wards in UHL;

**East 6 – Acute Medical Care of the Elderly**  
**East 8 - Acute Medical Care of the Elderly**  
**Stroke Rehabilitation Centre (SRC)**  
**West 8 – Spinal Ward**  
**West 10 – Neuro Ward**

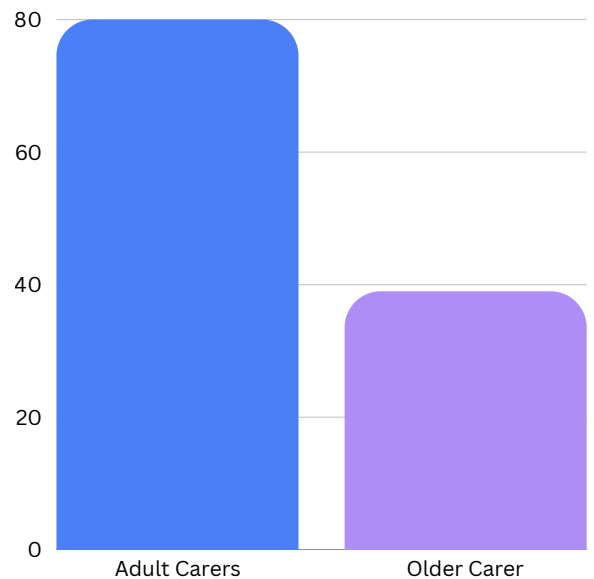
These wards were identified through discussions with Ward Managers and the Discharge Team, and chosen due to the likelihood that there would be a high number of carers supporting the patients seen on these wards.

# Unpaid Carers

Between November 2025 and March 2026 the Unpaid Carer Support Worker has undertaken **163** interactions with unpaid carers.



This has been broken down to **119** initial/first interactions and **44** follow-ups



Of the **119** initial/first interactions, **80** were Adult Carers and **39** were Older Adult Carers.

## You said we did:

### Mental Health Unpaid Carer drop in sessions

The Unpaid Carer Support Worker met with CAV Mental Health staff and the Adferiad Team who both highlighted the need for support for unpaid carers looking after someone with a Mental Health condition.

In response a regular drop-in sessions have been created specifically for unpaid carers looking after someone with a Mental Health condition. These sessions will be run in partnership with the CAV Mental Health Teams and Third Sector organisations, who support unpaid carers looking after someone with a Mental Health condition, in the community.

**Do you look after someone, unpaid, who could not cope without your support?**

**Do you want information on the services available to you as an unpaid carer?**

Come to our drop-in session and find out what support is available to you as a carer!

**Information Centre** (in the main hospital, opposite the old art gallery)

**Wednesday, 22<sup>nd</sup> April 2026**  
12pm - 1.30pm

Or contact us:  
029 21845692  
pe.cav@wales.nhs.uk

Joined by: **Adferiad**

SCAN ME

Self-referral Form

Cardiff and Vale University Health Board  
Unpaid Carer Information Service  
South Wales Organised Carers in the Community (SWOC) Charity Ltd

GIG NHS  
Bristol South West  
Cardiff and Vale University Health Board

## Priorities 2026/27

### Unpaid Carer Support Worker Project



- The Unpaid Carer Support Worker has assessed capacity and will be introducing ward visits to West 2, in addition to the 5 wards already being supported.
- A comprehensive communications plan has been developed to ensure we're raising awareness of unpaid carers and the support we can provide throughout the year.
- Evaluation of the pilot at 6 and 12 months.

### Young Carers



- Results of a recent staff survey relating to young carers is due to be published. This will feed into the Action Plan for the year on how we can improve the support for young carers in healthcare.
- Work in partnership with Tu Vida and Local Authorities to develop a training package specifically for healthcare staff on who young carers are, the challenges they face and how we can support them.

### GP Champions & John's Campaign



- To look at current capacity within the team to increase the number of GP Surgeries and Wards engaged in our Unpaid Carer Accreditation Schemes.
- To develop staff resources to be used to help identify unpaid carers and signpost them to the most relevant services as well as informing them of their rights to a carer's assessment.



**For more information on the team  
and support for unpaid carers please  
scan the QR Code**



At present, the Chaplaincy and Spiritual Care Team consists of eight chaplains in contracted posts and three bank chaplains, representing a range of faiths and denominations.

## **Contracted Chaplains**

- Revd Jason Tugwell – Chaplaincy Manager
- Fr Peter Davies – Roman Catholic Priest
- Sr Gill Kane – Roman Catholic Chaplain
- Sr Amina Shabaan – Muslim Chaplain
- Imam Farid Khan – Muslim Chaplain
- Revd Sangkhuma Hmar – Protestant Chaplain
- Pastor Benjamin Tugwell – Protestant Chaplain
- Revd Caroline John – Protestant Chaplain

## **Bank Chaplains**

- Pastor Sandy Howells
- Revd Desmond Kitto
- Fr John Thomas

## **Volunteers**

The service is also supported by seven Chaplaincy volunteers who provide befriending and spiritual support.

Their contribution aligns with and complements the work of the chaplaincy team across the various Health Board sites.

## **Service Developments and Initiatives - Referral QR Code**

During the past year, the team introduced a QR code referral system.

This initiative enables a faster and more responsive approach to chaplaincy referrals, improving access to spiritual and pastoral support for both patients and staff.

# Chaplaincy Services

## Services Delivered and Impact

### Patient and Family Support

It has been a privilege for the team to support a number of wedding blessing services during the year. One particularly significant service took place at the Velindre Cancer Centre, where the father of the bride was a patient whose prognosis meant he was unlikely to attend his daughter's wedding. In response, the team developed and delivered a bespoke "Father of the Bride giving away" ceremony, creating a deeply meaningful and memorable moment for the family involved.



### Staff Support and Memorial Services

The team continued to offer memorial services and books of condolence in remembrance of staff members who sadly passed away during the year. Alongside these services, chaplaincy staff provided ongoing pastoral support to colleagues during periods of bereavement.



### Training and Awareness

The Chaplaincy team continues to deliver chaplaincy awareness sessions for departments across the Health Board. During the year, the team was also invited to deliver an awareness session to trainee midwives and maternity students, supporting education and understanding of spiritual care within clinical practice.



### Services and Events

Throughout the year, the team delivered a range of services to mark significant occasions, including:

- Annual Tree of Remembrance services for the Paediatric Intensive Care Unit and Neonatal Intensive Care Unit, which were again a resounding success, with over 200 attendees at each service.
- Ongoing support for monthly baby committal services.
- Delivery of quarterly memorial services at Thornhill Crematorium.



### Civic and Community Contribution

For the third consecutive year, the Chaplaincy Manager was invited to lead the Lord Mayor's annual Christmas Memorial Service held at Thornhill Crematorium, reflecting the continued recognition of the team's expertise and contribution beyond the Health Board.



# Chaplaincy Services

## Feedback and Thanks

During the reporting year we have had 15 cards and letters of thanks to the team. A selection of comments from those is shared below.

“ Thank you to all the Chaplains at UHW. Thank you for continuing your visits, care and prayers. Thank you all, you have no idea how important these visits have been.

“ Thank you for your care when I was an inpatient in ITU and ENT. I am now much better. I am very grateful for your visits while I was in hospital.

## Statistics

During the reporting year, the Chaplaincy and Spiritual Care Team supported a significant number of patients, families and staff across the Health Board.

- End of Life prayers and Blessings: 279 (adult) 28 (paediatric)
- Sacrament of the Sick (Roman Catholic): 305
- Communion Services/Bedside Services/Roman Catholic Mass/Friday and Islamic prayers: 1651 people in attendance over the year.
- Patient and families supported: 5726
- Staff supported: 6943

**2026/2027** The Chaplaincy and Spiritual Care Team aim to develop new ward-based promotional posters to raise awareness of the service and further strengthen the visibility of the chaplaincy team across all sites. These posters will provide information about the range of services available, introduce individual chaplains, and clearly explain how to contact the department.

In addition, the team would like to increase the number of volunteers supporting the Chaplaincy service. While volunteer support is in place, expanding the volunteer base remains an important priority to help enhance befriending and spiritual support provision across the organisation.

## The first service of its kind in Wales

The Eye Retrieval Service within Cardiff and Vale University Health Board was launched on World Sight Day in October 2025. Delivered in partnership with NHS Blood and Transplant, the service ensures that corneal donation continues to transform the lives of patients in need, offering people the life-changing gift of sight.

Within Cardiff and Vale University Health Board, Jessica Becker (Cardiff and Vale UHB - Patient Experience) and Nicole Crimmings (Cardiff and Vale UHB - Patient Experience) (pictured below) have joined the Bereavement Support Team as Bereavement and Tissue Donation Specialist Nurses.”



The cornea is the clear outer layer at the front of the eye and plays a crucial role in focusing light, enabling clear vision. Damage to the cornea can result in significant sight loss or blindness.

Currently, around 6,000 patients are waiting for a corneal transplant, with an average waiting time of approximately two years. There is a national shortage of corneas available for transplantation, creating an urgent need to support and contribute to national donation efforts.

Each year, almost 4,000 lives across the UK are transformed through eye donation. Most people, regardless of age, can be considered for eye donation, including individuals with poor eyesight or some types of cancer.

# NHSBT Corneal Donations

## Since commencing the Eye Retrieval Scheme....

**207  
Clinically  
suitable  
donors**

(In addition, hundreds more patients were clinically assessed by the team and deemed unsuitable for donation). Each case was carefully scrutinised to ensure there were no contraindications to donation, safeguarding the safety and suitability of tissue for all potential recipients.”

**64 families  
approached**

Bereaved families were contacted by telephone within approximately 12 hours following the death of their loved one, to offer our sincere condolences, provide bereavement support, and sensitively discuss the opportunity to support eye donation.”

**42  
families  
consented**

Families demonstrated exceptional kindness, selflessness and bravery in the hours following the loss of their loved one, choosing to support the meaningful gift and lasting legacy that eye donation can bring.”

**22  
individuals**

**have donated their eyes following their death giving the gift of sight**

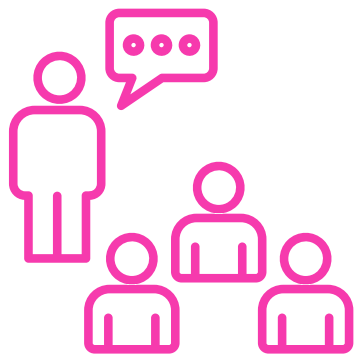
(The 20 additional consented donors did not go ahead due to a variety of unforeseen circumstances requiring more streamlining of our processes).

## Service Set Up

Establishing the service required the team to draw on a wide range of skills and substantial, diverse nursing experience, carefully prioritising how best to implement this positive change within UHW with both passion and determination

## Hospital Engagement

“Timely identification of death and referral remains critical, as there is a 24-hour window from the time of death to complete the complex eye donation process. It is therefore essential that members of the multidisciplinary team notify the Eye Retrieval Service of deaths on wards and units as soon as practicable, enabling the prompt commencement of the potential eye donation pathway.”



As a result, we prioritised staff education and the promotion of the service. An initial focus was placed on five wards identified through hospital data as having the highest number of deaths. Over a number of months, the team has worked proactively with each area to raise awareness and provide education about the service. Engagement from multidisciplinary teams has been positive, with staff demonstrating openness, receptiveness and a willingness to support the service wherever possible. While establishing new referral behaviours has taken time, referrals are now beginning to increase, contributing to a more efficient and effective service.”

Understanding the process following a death within the hospital and accessing medical notes were key initial priorities in establishing the service. The team within the Bereavement Office played a pivotal role in supporting our learning and development during this early phase, and their guidance and support were invaluable

# NHS BT Corneal Donations

A strong and vital working relationship has been established with the Mortuary team at UHW. Their ongoing communication, professionalism and support in facilitating in-house eye retrievals, while ensuring dignity and respect for patients, has been integral to the success of the service to date.”

In line with national guidance, all deaths must be referred to the Medical Examiner for review and agreement of the consultant’s proposed cause of death. This scrutiny represents gold-standard practice and is essential for eye donation to proceed safely. We have received excellent support from the Medical Examiner’s team, who have provided effective communication and, where required, expedited reviews to support timely donation.

For cases requiring referral to the Coroner, we have again experienced significant support. Approval has been granted through a blanket ‘no objection’ agreement from HM Senior Coroner (subject to agreed caveats) to allow eye retrieval. This approach has already proven beneficial and is expected to further streamline the service as it continues to develop.

“In developing the service, we have drawn on the expertise and advice of a wide range of stakeholders, including our managers, the Executive Director of Nursing, Volunteer Services, Specialist Nurses for Organ Donation, the North Midlands Eye Retrieval Scheme, members of the public, and bereaved families. The insight and support offered through these collaborations have been invaluable in shaping and strengthening the service.”

## Education

Education has been fundamental in getting the aims and objectives of our service known. Education sessions and forums attended:

- Nurse preceptorship course
- Emergency Department fortnightly focus and senior nurse lunchtime teachings
- ITU spotlight meeting
- Surgical Nurses forum
- NHSBT stakeholders group

## Planned and Ongoing Educational Opportunities

- Palliative care collaboration
- Medical staff induction
- Acute medicine teaching

# NHS BT Corneal Donations

## General Public

Talking openly about death and donation remains a sensitive subject and is not always a common or comfortable discussion within our communities. However, the Eye Retrieval Service aims to help change this narrative by encouraging people to have open conversations about their end-of-life wishes, including donation preferences. By supporting these discussions earlier, we can help reduce the emotional burden placed on families at a time of bereavement.



To support this approach, an information leaflet about the Eye Retrieval Service has been included within the bereavement pack provided to all bereaved families at UHW. Feedback on this initiative has been positive, with families reporting that the information was helpful and reassuring. This has also contributed to increased understanding and subsequent support for eye donation where appropriate.

Across the hospital, eye donation story leaflets have been displayed to help raise awareness and encourage understanding. These include the story of a daughter who supported her mother's decision to donate her eyes, and that of a young mother who received a corneal transplant and regained the gift of sight.

While there remains much work to do to further engage and reach the wider public, both locally and nationally, we view this as an important and positive opportunity. We look forward to continuing this work and building greater awareness and openness around eye donation in the future.

For further information, we encourage colleagues to visit the Eye Retrieval Service pages on SharePoint. If you have any questions about the Eye Retrieval Service or eye donation, please do not hesitate to contact the team directly via email at [tissue.donation.cav@wales.nhs.uk](mailto:tissue.donation.cav@wales.nhs.uk).”



**Scan the QR code to register your decision today to donate Organs, Tissue and Eyes. It takes only 2 minutes.**

# Enquiries

The Enquiries Team, which was launched June 2025, is a dedicated point of contact for members of the public who need general information or support relating to Health Board services.



The team is able to help with enquiries about accessing services and contact departments, support people who need guidance on where to find specific information, or aren't sure who to contact, and liaise with Clinical Teams to help resolve patient enquiries.

## Between June 2025 and March 2026 we have.....



taken **2782** Patient Enquiries



responded to **504** General Enquiries



answered **1059** phone calls

Over the last ten months the team has gathered data on the types of enquiries that they are receiving. The most common themes have been:

- Unable to get hold of department to change/cancel appointment
- Requesting test results
- Follow up appointment queries
- Waiting list enquiries

“

Thank you I really appreciate this! Good news - see what happens you intervened and now finally some news and hope.

”

“

Thank you so much for this - it really makes a difference to have this communication and help

”

# Patient Feedback

## Collecting feedback

In relation to surveying, there are various ways we collect feedback from patients, staff and the wider public, about the services we provide. These include:

- Website hosted surveys
- Kiosk surveys
- Tablet surveys
- Postal surveys and paper-based feedback forms
- Telephone surveys
- SMS surveys
- Feedback in Focus sessions

When gathering this feedback we have two main methods: routine and bespoke.

Pre-Covid, the main bulk of our routine feedback was collected via paper surveys and kiosks. Areas would be sent survey packs, which would be completed each month and returned to the Patient Experience team.

This information was then scanned, input and fed back to the Clinical Board Managers in the form of a summary report, at the beginning of the following month. Kiosks, such as the 'HappyOrNot' brand, were also distributed around various hospital areas to passively collect feedback.

However, since October 2022, we have gathered the bulk of our routine feedback via electronic surveys accessed via SMS link, QR code and/or URL. This is managed through our **Civica Experience Platform** and, to a lesser extent, through Microsoft Forms.

One distinct advantage of electronic surveying over traditional paper surveys, is the feedback is available straightaway, as there's no input delay. However, we also recognise that there are various disadvantages e.g. greater drop-out.

In addition to routine surveying, we also work with teams on bespoke feedback projects, which can range from simply providing advice to coordinating projects from start to finish.

# Patient Feedback

## 1. The Civica Experience Platform

The **Civica Experience platform** is a software package provided and supported by the third-party, Civica, and is nationally referred to as the **Civica 'Once for Wales' System**. This platform has, for the past three years, been used by most Welsh Health Boards as their primary software platform for collecting and collating feedback.

The platform itself enables us to design electronic surveys, provide user access, generate alerts, collate feedback, upload previous feedback, thematically analyse and report findings. Whilst the system is used across Wales, each platform is local and tailored to the Health Board's needs and the services used by each may vary.

We use our Civica Experience platform as our main hub to collect and collate feedback from all sources e.g. paper, SMS links, tablets, kiosks, posters and webpages.

## 2. How we gather survey feedback.

As previously mentioned, we use the platform to gain feedback from patients, staff and the public via routine and bespoke surveying.

### I. Routine surveying via SMS

Since implementing the Civica Experience platform in **October 2022**, we have routinely surveyed patients daily via SMS. Patients receive their text message 3 days post-discharge/appointment, which includes a clickable survey link.

We currently survey **up to 1000 patients per day** (600 General hospital, 200 Emergency Department and 200 Mental Health patients) and those surveyed are randomly selected and exclusions do apply e.g. under 18s.

Since May 2025, the **People's Experience Survey (PES)** has been our main questionnaire for all routine surveying and has been incorporated, to some extent, into other survey designs since. The PES is a validated survey and is composed of two sets of questions: core and protected characteristics questions.

# Patient Feedback

Below are examples of the core questions asked in the PES:

1. Did you feel well cared for?
2. Were you treated with dignity and respect?
3. Were you able to communicate in your preferred language?
4. Did you feel that you were listened to?
5. Were you involved as much as you wanted to be in decisions about your care?
6. How would you rate your overall experience?
7. Was there anything particularly good about your experience you would like to tell us about?
8. Was there anything particularly bad about your experience you would like to tell us about?

To aid accessibility, the PES is available in the top 10 languages in the Cardiff and Vale area (based on WITS translation data 2024/2025), which includes:

- English
- Welsh
- BSL
- Simplified Chinese
- Bengali
- Persian
- Polish
- Arabic
- Urdu
- Kurdish Sorani



## II. Routine surveying via other methods

In addition to surveying via SMS, we also passively gain feedback via kiosks, tablets, posters, bedside stickers, webpage links and other resources.

In February 2023, we introduced our '**Bedside survey**' across our main hospital sites, which enables patients, family and friends to leave feedback during a hospital stay, appointment or visit. Posters and stickers are distributed around the ward/unit and at the bedside. These display a QR code, telephone number, email address, and invite patients to share their experiences of using our services.

# Patient Feedback

For those requiring special assistance in completing the questionnaire, a dedicated telephone helpline is available from 10:00am – 1:00pm, Monday to Friday and a dedicated email address has also been created to manage feedback enquiries.

This survey currently utilizes a slightly modified version of the PES and is also available in the top 10 local languages.



**Figure 1.** Bedside survey poster and sticker design.

The Bedside survey has been recently extended to cover the **Children’s Hospital for Wales** and so gives the opportunity for children, young people and parents to leave feedback on their experiences via their own bespoke surveys.



**Figure 2.** Feedback poster used in Rainbow Ward, Children’s Hospital for Wales.

In addition to the ‘Bedside survey’ we also collect feedback via kiosk, electronic table, webpage link and other resources e.g. business cards, information packs. This may be to supplement routine surveying or as part of a bespoke project.

We have been using kiosks and tablets for many years, but our new range of devices came into use in October 2024.

**Figure 3.** Our feedback kiosks



# Patient Feedback

Currently, our kiosk network hosts the **K1 survey**, which is a short, easy read design with 'smiley face' options. However, any survey can be loaded onto our electronic devices. Questions currently asked include:

1. How would you rate the care you have received?
2. What was good?
3. What could be improved?
4. Do you have any further comments?
5. Are you a: (various response options available: patient, carer etc)

### **III. Bespoke surveying.**

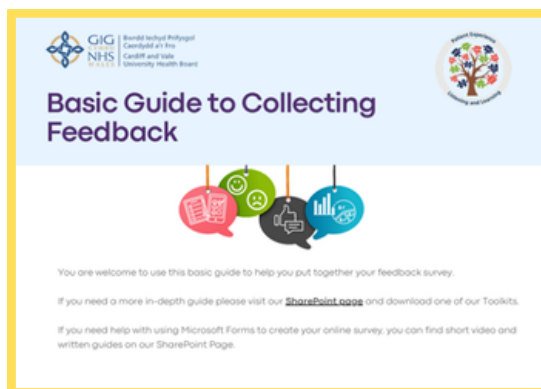
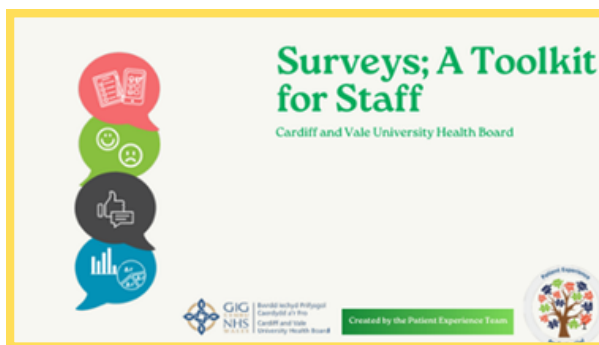
In addition to routine surveying, we also work with teams on bespoke projects. This can range from simply offering advice to coordinating projects from start to finish.

We have worked on many bespoke projects and below are just a few examples:

- ACHD Evaluation Day survey
- Bereavement Services survey
- Catering survey
- CAR T-cell Therapy survey
- Dementia, DKAS survey
- Familial Hypercholesterolaemia survey
- Infant Feeding survey
- Music and Art Therapy survey
- Neurology Outpatient survey
- Pelvic Health Hub survey
- Rehabilitation survey
- Radiology Department survey
- South Wales Neuroendocrine Tumour (NET) Service survey
- Tuberous Sclerosis Complex survey
- Weight Management service survey

# Patient Feedback

We have also produced various resources and guides to help Health Board staff create their own survey designs and plan their own bespoke feedback projects. These are available for all staff on our Patient Experience SharePoint pages. Resources include our Feedback and Surveys toolkits, Guides for building electronic surveys and our Basic Guide to Collecting Feedback



### 3. What do we do with the feedback received?

As a team, we review all feedback received on a weekly basis, generating summary reports which are passed to the Patient Experience Manager and/or relevant area and project senior leads. These reports give a breakdown of each survey question, in both tabular and chart form, with comments being listed alphabetically by location. Any safeguarding, concerning comments or recurring themes are also fed back directly to the relevant team/manager as soon as identified e.g. IPC, Maintenance.

Feedback is also used locally to report to Board and other working groups, providing indicators of performance and satisfaction. Feedback received from National surveys, such as the People's Experience Survey (PES), also populate the **Beacon dashboard**, which is used for benchmarking across Wales.

# Patient Feedback

## 4. Examples of feedback received

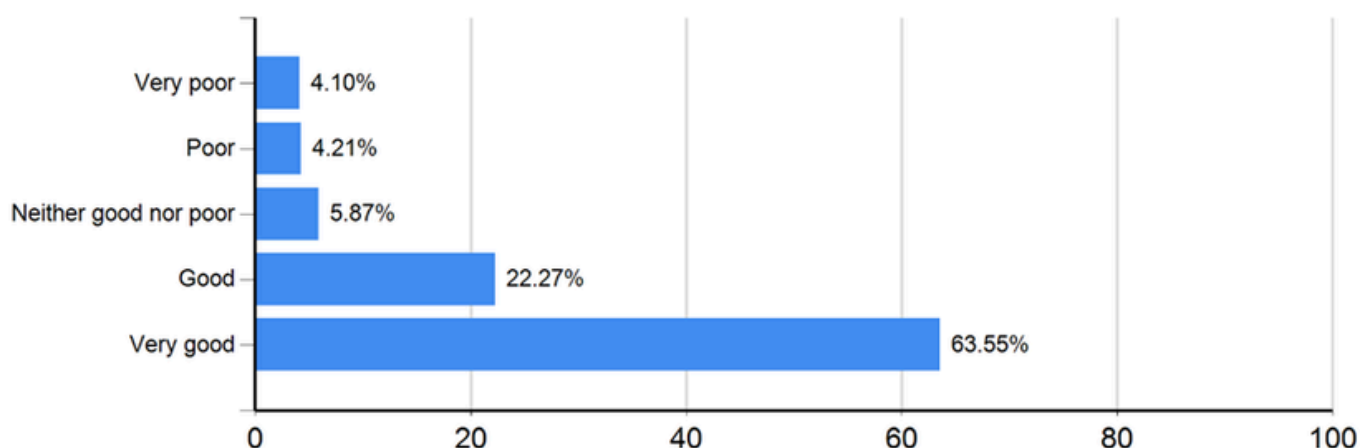
Below are a few examples of the feedback we've received over the past 12 months, from various surveying methods.

### a) Routine surveying via SMS

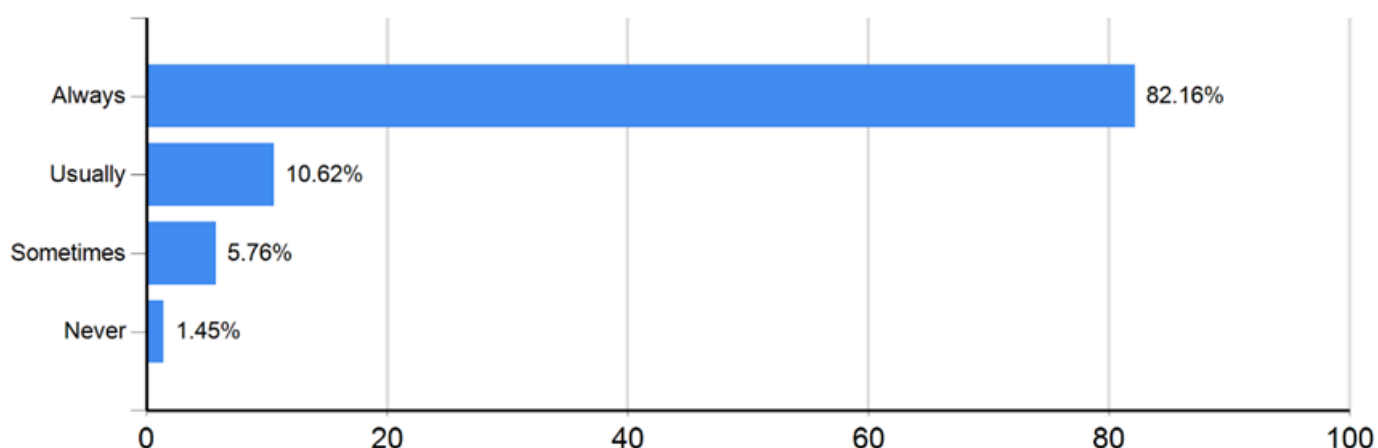
In the past 12 months, we have sent over **192,000** texts, with an overall response rate of **17%**.

Since introducing the **People's Experience Survey** as our main feedback survey in May 2025, we have received **29465** partial/full survey completions. Of those, **25772** respondents have gone on to answer the rating question: 'How would you rate your overall experience?', with the question receiving a satisfaction score of **84%**.

**Figure 4.** Breakdown of responses to the PES rating question: **How would you rate your overall experience?** Based on feedback from patients discharged: 04/05/2025 – 31/03/2026.

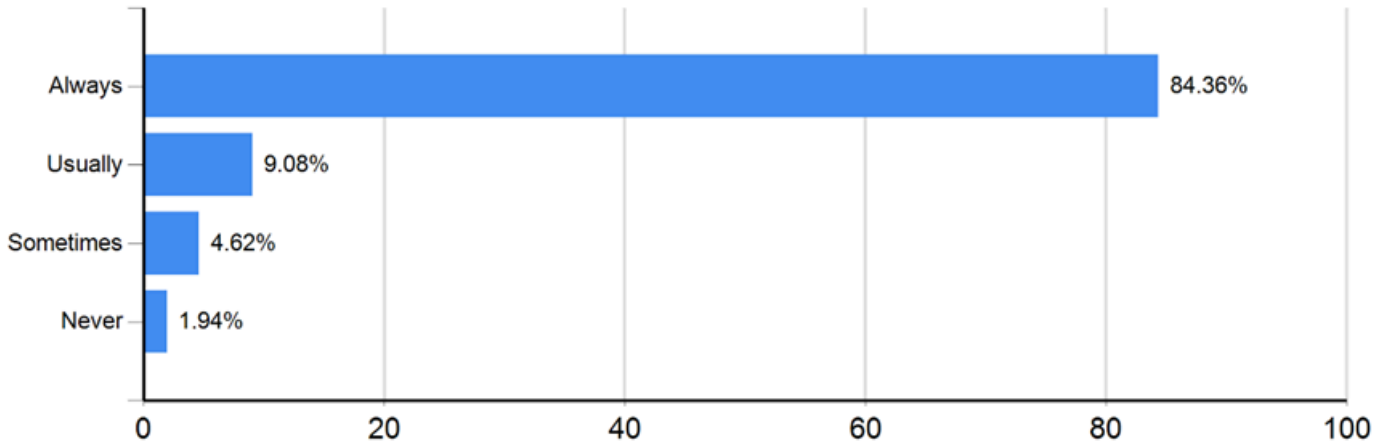


**Figure 5.** Breakdown of responses to the PES question: **Were staff kind and caring?** Based on feedback from patients discharged: 04/05/2025 – 31/03/2026.

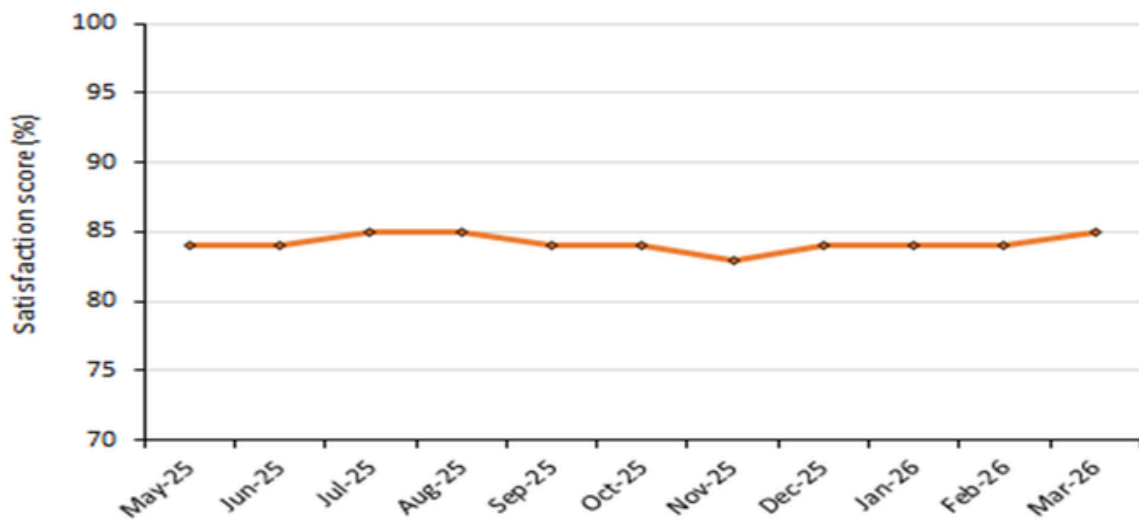


# Patient Feedback

**Figure 6.** Breakdown of responses to the PES question: **Whilst in our care did you feel safe?** Based on feedback from patients discharged: 04/05/2025 – 31/03/2026.



**Figure 7.** Satisfaction score by month, for the PES rating question: **How would you rate your overall experience?** Based on feedback from patients discharged: 04/05/2025 – 31/03/2026.



**Figure 8.** Examples of comments received with the PES survey. Based on feedback from patients discharged during March 2026.

Six speech bubble boxes containing patient comments from the PES survey:

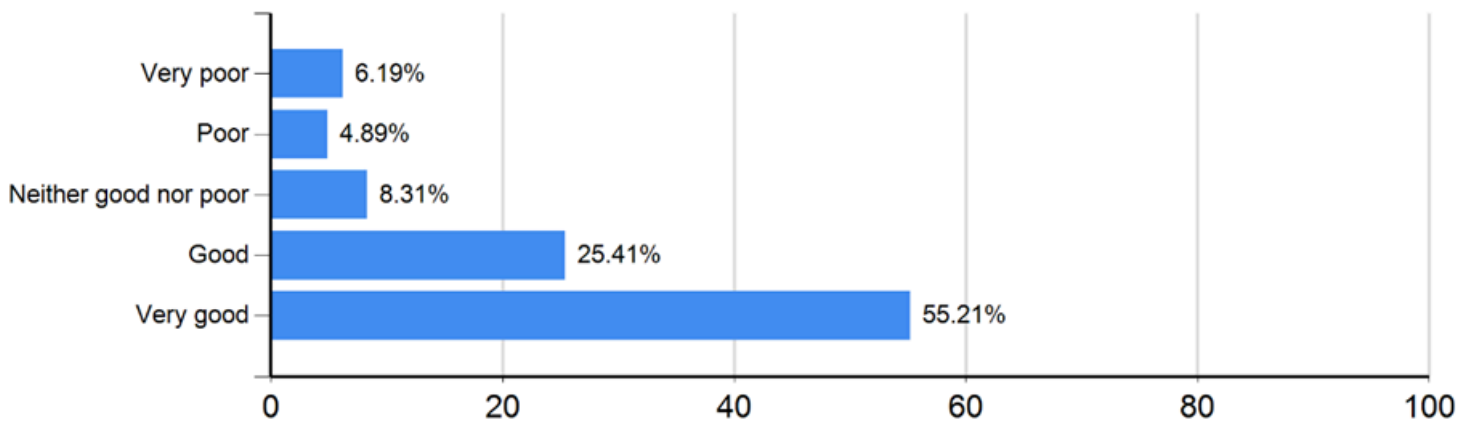
- The staff were amazing, Dr's always on hand for any problems, my care was outstanding.
- The wait and lack of seats, 9 hrs waiting!
- The staff worked hard and were very busy.
- Parking can be a challenge especially drop off for lung patients... more spaces be great.
- There was one patient that would shout very loudly at the staff most days which made me feel apprehensive.
- My son had a major operation here and the treatment he received was brilliant.

# Patient Feedback

## b) Routine surveying via other methods – Bedside survey

Since moving to the **People's Experience Survey** in July 2025, we have received **825** partial/full survey completions via the Bedside survey. Of those, **614** respondents have gone on to answer the rating question: '**How would you rate your overall experience?**', with the question receiving a satisfaction score of **80%**.

**Figure 9.** Breakdown of responses to the Bedside survey rating question. Based on feedback from those discharged: 21/07/2025 – 31/03/2026.



**Figure 10.** Examples of comments received with the Bedside survey. Based on feedback from those discharged: 21/07/2025 – 31/03/2026.

All of the midwives were reassuring and caring during an anxious time. Their care was professional and friendly.

Didn't feel there was enough counselling time with family or dr/ nurse time with family.

Very friendly staff. Some staff went above and made great efforts to support me.

Yes, nobody was keeping us informed had to go and find nurses and ask had they forgotten patient.

Not given a blanket when asked as there wasn't any left.

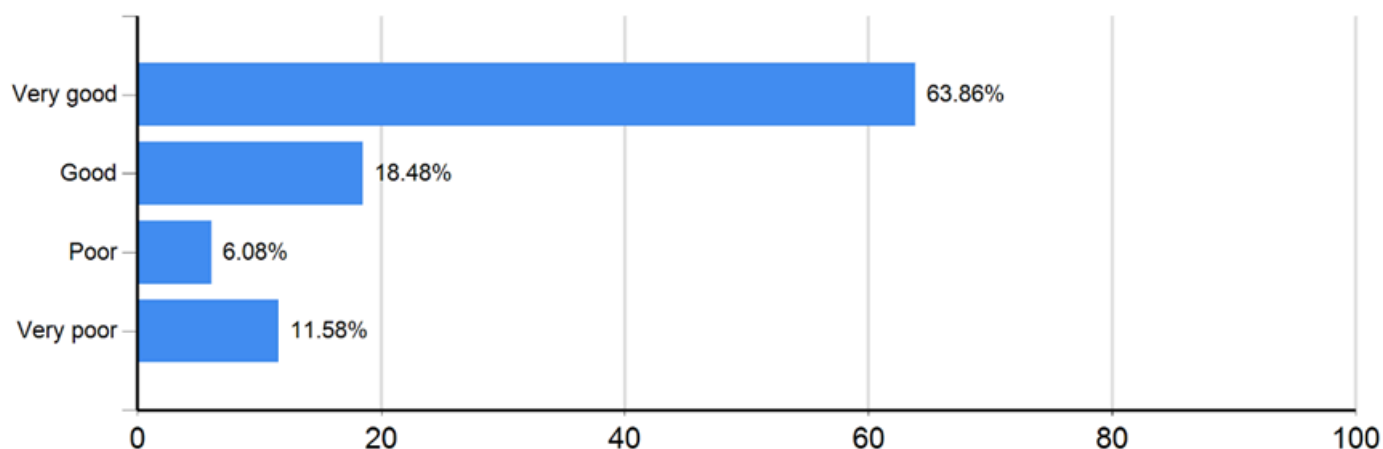
Staff was very helpful and considerate.

# Patient Feedback

## c) Routine surveying via other methods – Kiosk survey

Over the past 12 months, we have received **1710** partial/full survey completions. Of those, **1710** respondents have answered the rating question: ‘**How would you rate the care you have received?**’, with **82%** giving the responses ‘**Very good**’ and ‘**Good**’.

**Figure 11.** Breakdown of responses to the kiosk rating question. Based on feedback received 01/04/2025 – 31/03/2026.



**Figure 12.** Examples of comments received with the Kiosk survey. Based on feedback received 01/04/2025 – 31/03/2026.

- Please allocate special parking space for pregnant women. Thanks.
- State of hospital is a disgrace, but the staff are world class!
- Waiting times... appointment 3.45, still here 17.25!
- More than happy with service I get today. Thanks for all staff.
- Staff should not assume people don't have disabilities by the way they look.
- It's impossible to find any departments as terrible signage. I drove for 10 minutes with a sick patient.

# Patient Feedback

## 5. Plans for feedback going forward

In addition to the day-to-day administration of our local Civica platform, there are a number of initiatives we would like to move forward with in the coming year.

Some of these include:

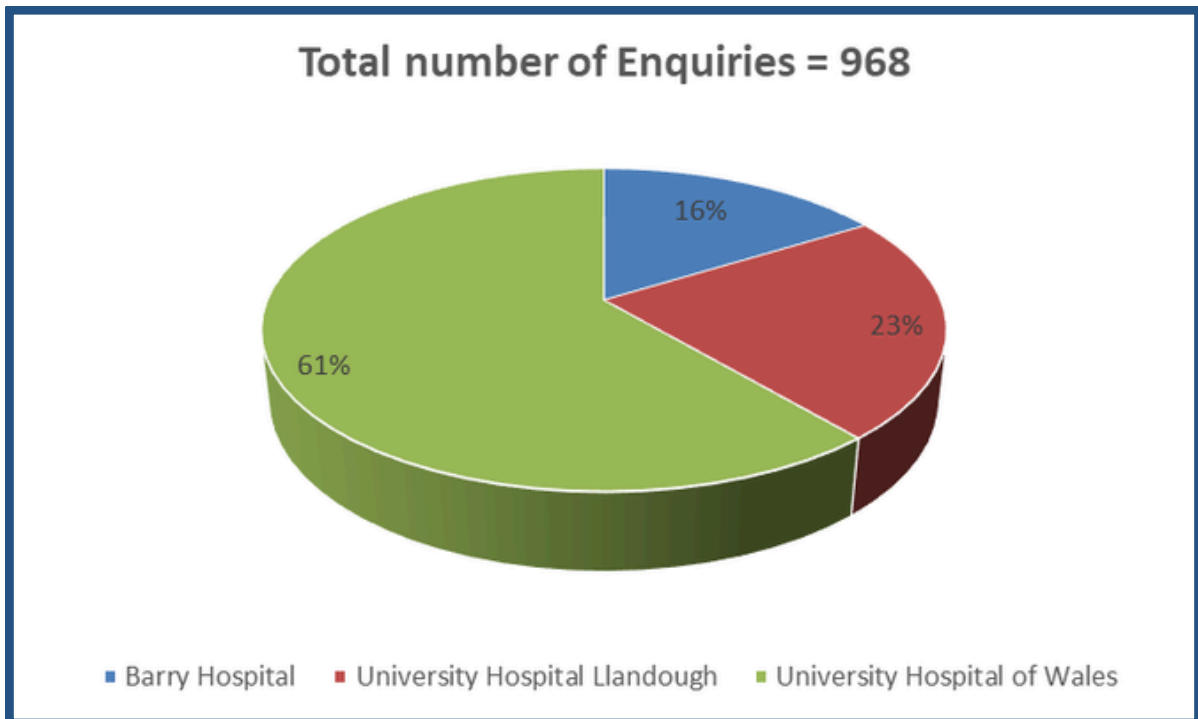
1. Migrate the UHBs Patient Stories library and future stories onto the Civica platform, for sharing with other Health Boards.
2. Streamline all bespoke survey designs to incorporate the PES core questions. Review previous bespoke/routine designs and explore whether these can be mapped to the new questions or the designs need to be modified to align.
3. Increase survey accessibility by making all routine surveys available in the top 10 languages in Wales i.e. K1 survey, Maternity National surveys.
4. Work on a dedicated landing page template for use with all surveys designs and all available languages.
5. Continue to liaise with the UHBs Volunteer team to build a team of survey volunteers to help gather feedback for both routine and bespoke surveys.
6. Implement and further develop the National surveys, such as:
  - Endoscopy survey
  - Maternity (Phases 1-4) surveys
  - Neonatal survey
  - Listening to People survey
  - Research Participant survey
7. Expand the use of Civica reporting features with network users.
8. Implement the 'Action Manager' platform feature to the growing network of users.
9. Implement the 'Event Driven Alerts' platform feature to the growing network of users.
10. Explore the benefits of setting up an API between Civica and the UHB.

# Information and Support Centres

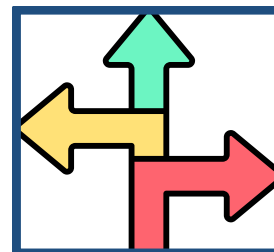
The Information and Support Centres provide information, support and signposting for patients, carers, visitors and staff on a wide range of health issues including:

- Cancer
- Long-term health conditions
- Financial support, grants and welfare benefits
- Support for carers and their families
- Public health
- Local and national services supporting health and wellbeing

## April 2025 - March 2026



**27,105**  
leaflets ordered



**22,839** people have  
asked for directions

# Information and Support Centres

With the support of Macmillan, the Macmillan Information and Support Centre in the University Hospital of Wales was refurbished this year making it a welcome and calm environment for patients, carers and visitors. All three Information and Support Centres were reawarded the Macmillan Quality Environment Mark in August 2025.



We worked in partnership with Cardiff Council Libraries to bring four new library book vending machines to University Hospital Llandough and University Hospital of Wales. Over 400 books have been borrowed in the first 9 months!



# SUMMARY

This Annual Patient Experience Report demonstrates the breadth, depth and impact of the Patient Experience function across Cardiff and Vale University Health Board during April 2025 to March 2026. It provides assurance that the voices of patients, families, carers, volunteers and staff are actively listened to, valued and used to inform meaningful service improvement, in line with the NHS Wales People's Experience Framework.

Throughout the year, the Patient Experience Team and its services have delivered compassionate, person-centred support across a wide range of areas, including bereavement, chaplaincy and spiritual care, unpaid carers, volunteering, accessibility and inclusive communication, patient feedback, enquiries, information and support centres, digital storytelling, and the Eye Retrieval Service. These services collectively support people at some of the most vulnerable moments in their lives, while also strengthening learning, engagement and quality improvement across the organisation.

The report highlights strong partnership working with clinical boards, third sector organisations, local authorities, volunteers and national partners. It also evidences a continued commitment to addressing health inequalities, improving accessibility, supporting lived experience, and embedding feedback into organisational learning and assurance processes.

Patient feedback data and lived experience stories consistently show high levels of kindness, dignity and respect across Health Board services, while also identifying opportunities for improvement. These insights underpin a proactive approach to “you said, we did” improvements, service development and future planning.

Looking ahead, priorities for 2026/27 focus on consolidating progress, strengthening assurance, expanding volunteer and carer support, embedding accessible standards, growing digital storytelling, and further aligning patient experience activity with quality improvement and population needs.

The Patient Experience Team remains committed to ensuring that learning from experience continues to shape services, culture and behaviours across Cardiff and Vale University Health Board—supporting safe, compassionate, inclusive and person-centred care for everyone we serve.



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Caerdydd a'r Fro  
Cardiff and Vale  
University Health Board



# Thank you for reading

Produced by the Patient Experience Team  
April 2026