



## Llais activity and impact

### Highlight report

April - June 2024

#### **Engagement – RAG Green – On track**

Our Strategic Plan and our Annual Business Plan 24/25 aim to involve and hear from more people year on year. Last year 26,726 people engaged with us, through 518 engagement activities and 71 on site visits, to have their say on health and social care across Wales.

Our engagement is not normally linear throughout the year. We will have lots of national and regional level events happening across the summer as well as regional priorities, Llais locals, fora and strategic equality plan actions, and the bulk of the visiting programmes are planned to start in Q2, allowing time for appropriate engagement with settings beforehand.

- **4,505 people have engaged with us in our first quarter**
- **Over 200 national and community engagement activities**

This includes, for example:

- a national event to launch our 3 year strategic plan [A National Conversation](#),
- our involvement at:
  - the Mental Health and Wellbeing Show Cardiff
  - Coleg Gwent Health and Wellbeing Roadshow
  - Refugee Garden Party Knighton

- Pride events nationally and regionally, eg., in Swansea and Llanelli
- Dementia Awareness Day West Wales
- Everywoman Festival.

- **A range of visits to health and social care settings to hear from people while they are receiving services, including:**

- Barry Hospital, Vale out of hours service
  - Cardiff Royal Infirmary, out of hours service
  - Glasfryn Care Home (learning disabilities)
  - Glen Care Home, Newport (Myrtle House)
  - Llandrindod Wells Hospital
  - Llandrindod Wells Medical Practice
  - Llanfyllin Medical Group Practice
  - Mountains Care Home
  - Royal Glamorgan Hospital
  - Royal Gwent Hospital
  - Tywyn Hospital
  - University Hospital of Wales Emergency Department
- In support of our strategic aim 3 - Working together better we have **engaged with over 350 different partner organisations** and have represented people and communities at a wide range of meetings, networks and groups locally, regionally and nationally so that organisations are listening to the voices of people and communities. This has included things like:
    - Bi-annual Healthcare Summits
    - National Office for Care and Support Strategic Advisory Group
    - Joint Commissioning Committee Emergency Medical Retrieval and Transfer Service working group
    - Dental Reform Programme: dental access portal development
    - Royal College of Nursing 'Corridor Care'

- Patient Experience Pharmacy Working Group
- Regional Partnership Board meeting
- Local Health Board public board meetings
- Quality, Safety and Patient Experience committee meetings.

## **The things we have heard most about during this quarter are shown below:**

We hear regularly about the value people place on the care and support provided by hard working health and social care staff, both when things go well for them as well as sometimes when there are problems overall.

Some of the main concerns and issues we have heard most about during this quarter include:

- Access to mental health services is taking too long and is too complicated
- Diagnosis times for Autism Spectrum Disorder and other neurodevelopmental issues takes years
- Failure for services (health and social care) to work together in a person focused way
- Poor access to dentistry services – appointments and registering for NHS dentistry
- Poor access to gender services, especially in some rural areas
- Poor access to GP appointments or having to wait too long
- Poor hospital discharge practices
- Support for carers and planned care is not good enough
- Waiting too long for planned treatment
- Poor experiences of waiting for care and treatment in an emergency.

## **What we are doing about what we are hearing:**

When things are working well for people overall, eg., we have heard positive feedback from people about their experiences in the Emergency Department at the University Hospital of Wales, our Llais representatives

share these examples with other services to support learning and improvement across Wales.

| <b>Theme</b>  | <b>Some of the ways we are acting on what we are hearing...</b>  |
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| <p>Access to mental health services taking too long and is too complicated.</p> | <ul style="list-style-type: none"> <li>• Priority for 5 of our regions with planned projects to explore more in depth views, make representations and celebrate good practice.</li> <li>• Met with chair of the Mental Health Committee Welsh Government and continuing to engage to inform policy development</li> <li>• Fed back people’s views, and influenced the development of, the Draft Suicide and Self-harm Strategy, draft Mental Health Strategy, Health and Social Care Bill</li> </ul>             |
| <p>Poor experiences of A&amp;E / Emergency Departments</p>                      | <ul style="list-style-type: none"> <li>• Co-ordinated all-Wales programme of work to be discussed, planned and delivered in Q3 ahead of ‘winter pressures’. Work programme may include: coordinated visits to all Emergency departments, representations and meetings with Health Boards, reviewing ‘winter plans’, inform and influencing discussion at Regional Partnership Boards, Quality and Safety Committees, NHS Executive, WAST and communications cluster to include good practice sharing.</li> </ul> |

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| <p>Diagnosis times for Autism Spectrum Disorder and other neurodevelopmental issues takes years.</p> | <ul style="list-style-type: none"> <li>• Representation on each Regional Partnership Boards where we represent.</li> <li>• Coproduced a survey with Behaviour Support Hub (Cwm Taf Morgannwg) to explore peoples experiences of children’s mental health, respite opportunities, and neurodevelopmental assessments. The survey will run Aug-Sep and findings taken forward with Local Authorities.</li> </ul> |
| <p>Failure for services (health and social care) to work together in a person focused way.</p>       | <ul style="list-style-type: none"> <li>• Regionalised plans for increasing knowledge and awareness.</li> <li>• Work with Regional Partnership Boards (where we represent people’s views and experiences) to develop actions to improve integration.</li> <li>• Representation on accelerated cluster approach being trialed in North Wales</li> </ul>  |
| <p>Poor access to dentistry services – appointments and registering for NHS dentistry.</p>           | <ul style="list-style-type: none"> <li>• Identified as an all-Wales priority.</li> <li>• Local visits, surveys and projects to gather views</li> <li>• Completed commissioned research into dentistry access: Research findings, representations, policy statement, communications plan, creation of a resource signposting people to how they can sign up for NHS dentistry planned for September.</li> </ul> |

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|  | <ul style="list-style-type: none"> <li>• Involvement and informing Digital Health and Care Wales pilot re expansion of digital centralised waiting list</li> <li>• Conversation with UK wide partners on issues faced across the UK and how learning can be shared.</li> </ul>  |
| <p>Poor access to gender services, especially in some rural areas.</p> | <ul style="list-style-type: none"> <li>• Attended Pride Cymru to explore more views.</li> <li>• Plans to attend more Pride events across Wales in the summer to increase our understanding.</li> <li>• Representations to be made to all Local Health Boards and asking for action to be taken.</li> <li>• Informing and Influencing the LGBTQ+ action plan and active participant in the network.</li> </ul>   |
| <p>Poor access to GP appointments or having to wait too long.</p>      | <ul style="list-style-type: none"> <li>• Commissioned and started GP access research for those with communications needs.</li> <li>• Involvement and influenced the Older Peoples commissioners round table, learning from the event to be shared through comms channels. Follow event in September to explore progress.</li> <li>• Engagement with representative groups and others with an interest in the area to focus on common goals and actions</li> </ul> |

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|  | <ul style="list-style-type: none"> <li>• Planned assessment of GP closures to inform policy statement on GP access.</li> <li>• Representing patient views on multiple service changes across Wales involving GP service change.</li> </ul>  |
| <p>Poor hospital discharge practices.</p>                      | <ul style="list-style-type: none"> <li>• Engaging with the Carer Aware project to understand carer experiences</li> <li>• Gwent region developed an impact survey to further find our people's experience of being discharged.</li> <li>• Added as an emerging/watch topic</li> </ul>   |
| <p>Support for carers and planned care is not good enough.</p> | <ul style="list-style-type: none"> <li>• Identified as an all Wales priority</li> <li>• Regional priority in West Wales and Powys regions with planned projects to explore and gather more insights, make representations and celebrate good practice.</li> <li>• Attended carer aware conference, formed some partnership working, representations to be made.</li> <li>• Planned research in Jan 2024 to enhance our understanding.</li> <li>• Cardiff and Vale are working with Voices Adfocad to develop an Unpaid Carers Assembly event</li> </ul> |

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| <p>Waiting too long for planned treatment.</p> | <ul style="list-style-type: none"> <li>• West Wales commissioned research into waiting times for treatment</li> <li>• Planned discussions with NHS Executive on waiting times and monitoring/performance plans in Wales.</li> </ul> |
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## Representations – RAG **GREEN** – On track

Strategic Priority 2, Push for services that meet people’s need includes our aim to speak up to make health and services better, more inclusive, easier to access, and focused on what people in Wales need. One of the ways we do this is through representations.

Last year, while understanding and using our new powers of representation we recorded 159 representations in total.

**We have recorded 105 Representations this quarter** which should be used by decision makers to shape services.

There is more on the impact of these representations in the IMPACT section below.

**We made 36 responses to open consultations**, including Llais’ involvement in service changes, and responses made to external consultations on regional matters. Last year we made 150 responses in total. With the introduction of new guidance around service change handling we expect to see our involvement with service change decrease and change in nature.

### **We made 5 responses to national consultations:**

1. Professional Standards Authority’s good practice guidance documents for regulators
2. Putting Things Right process - where we led 3 x All-Wales workshops to develop a response which will influence the new Putting Things Right process



3. Draft Suicide and Self-harm Strategy
4. Draft Mental Health Strategy
5. Health and Social Care Bill

## **Research**

### **7 pieces of research underway, including national research on**

- Access to dentistry
- Access to GP services
- Perception of Pharmacy Services
- Integration of Pharmacy Services into the broader healthcare system

Regional pieces of research include:

Cwm Taf Morgannwg – nursing provision in special schools

West Wales – waiting times for treatment

Gwent – community services for older people

The research pieces' outcomes will enhance our understanding of the subject and policy statements and representations will be made accordingly. In addition communication clusters will be formed around each topic to continue the conversation and bring organisations together to listen to what people want from these services.

**Complaints advocacy – RAG Green – Manageable level of cases.**

**2,569 people continue to be supported by our complaints advocacy service**

Recurring subjects in our advocacy work:

- Primary care services
- Neurodiversity assessments
- Mental health services
- Assessments for care
- Cases involving children

Most of the themes involving our advocacy work match the themes we are hearing through our engagement apart from those that involve children and child protection.

In line with strategic priority 3, working together, objective – “**Engage more young people** we’re making it a priority to listen to and work with more groups and bodies that represent young people. We will get their advice on how to improve our own services to help us find out what young people really need and want from their health and social care.”

We are developing a children and young people’s programme of work that will be led by the regional Director for Gwent and overseen by the Strategic Director for Communication and Engagement. The scoping of the programme will continue throughout August. The programme will start in September.

## **IMPACT**

*Clear and easily understood communication of service changes we’ve influenced, showing how people’s involvement led to making services better* is an intended outcome of annual plan objective 2 ‘push for services that meet people’s needs’.

Here are a few real-world examples of where our work has had an impact between April and June that may be publicly communicated as part of the communications plan:

- **Shared learning from complaints**

As a result of supporting a client to raise a complaint that was considered by the Public Service Ombudsman Wales, and highlighting worrying communication issues between staff and confused responsibilities for flagging changes in patients conditions on a ward, the learning was shared beyond the Chief Executive of the Health Board, to Welsh Government, Healthcare Inspectorate Wales, the General Medical Council and the British Medical Association so that all parties could drive improvement in practice across Wales through their roles.

- **GP practice makes improvements to service**

As a result of representations made by Llais a GP Practice has made changes to the way it protects data and information, and introduced arrangements to regularly seek a second opinion if a patient doesn't want to follow medical advice.

To support shared learning the practice also held a whole team development session to review the guidelines for breathlessness.

- **User representation on Expert Advisory Committee.**

Through our constructive partnership approach with Betsi Cadwaladr University Health Board, and acting in the interests of affected families, an Expert Advisory Committee will be created to oversee the changes arising from the Royal College of Physicians independent investigation report on care and treatment of mental health patients. In line with our recommendations, there will be an independent Chair, Tawel Fan Families representatives, current service user & carer representatives and third sector representatives involved with the committee.

## **Communications overview**

In the first quarter of this financial year, our social media presence has been increasing.

Our page and profile reach is **2,720,616** for this period. We have **860** new fans and followers with consistently high engagement rates on all social media platforms. This indicates that the content we are producing resonates with our audience.

We have been building our social media personas based on the insights data we are gathering to support effective, targeted campaigns that answer the questions of our followers.

We are looking to build our social media campaigns across Q.2 in line with the Communication Strategy, working closely with our regional teams to communicate the purpose and impact of our work in Llais.

Much of this quarter has involved planning with the regional teams to support their priority areas of work. We have delivered social media training and accompanying guidance to drive quality across regional Facebook pages and communicate messages that matter to our followers.

We have provided focused support around the application of the Llais brand guidelines, working to develop templates and processes that are foundational to ongoing internal communication and prompt, clear, and relevant external communication of our work.

Our website was visited by **6,800** users this quarter, with **27,000** total page views. We have developed the volunteer section of the website to support our multimedia volunteer marketing campaign and are continuing to develop the website in line with good practice in accessibility.

Our earned media coverage continues to build, with **131** pieces during this time – **94** online and **37** print. The potential audience reach is **930,838,094**. We have developed a draft media engagement protocol to support our spokespeople when reinforcing the Llais message when we are directly approached for comment. The coverage earned during this time has resulted in

We have met with and provided assets to the NHS and Local Authority communications teams in Wales, reminding them of their duty to promote our work under Section 17 of the Health and Social Care (Quality and Engagement) (Wales) Act and developing our ongoing ways of working together. As a result, more of these bodies understand who we are, what we do, and are beginning to proactively raise public awareness of our services.