

**Item: 08**

**Title:** Performance against our annual plan Quarter 4 2024/2025

<b>Gweithredu / Action required -</b>	To note and discuss
<b>Amseru / Timing</b>	Routine
<b>Argymhelliad / Recommendation</b>	To note and discuss as required.
<b>Risg / Risk</b>	<p>Inability to effectively deliver, report on, and communicate our impact risks significant reputational damage in addition to failure to meet our obligations with the Health and Social Care (Quality and Engagement)(Wales) Act, remit letter and our Framework Document with our Partnership team within Welsh Government.</p> <p>These risks are monitored through the performance and risk reporting frameworks and escalated through the appropriate sources of assurance.</p>
<b>Cyllid / Finance</b>	Within budget
<b>Amcan Cynllun Corfforaethol / Corporate Plan Objective</b>	All objectives within Annual Plan 2024 -2025
<b>Ecwiti, Amrywiaeth a Chynhwysiant / Equity, Diversity &amp; Inclusion</b>	Any major policy, process changes, project or events are assessed for their impact on different communities using our updated Integrated Impact Assessment.
<b>Cyfathrebu / Communications</b>	<p>Please tick one of the following boxes if this activity will have an impact on:</p> <p><b>Internal:</b> our people <input checked="" type="checkbox"/></p>

	<b>External:</b> our customers/partners/stakeholders ☒ <b>External:</b> our organisation's reputation ☒
<b>Cymeradwyaeth / Approval/Clearance</b>	Ben Eaton
<b>Trafodaethau/ Penderfyniadau Blaenorol / Previous discussions/decisions</b>	Monthly Tim Arwain meetings and regular Executive meetings.  Service Delivery Group  Board meetings – September 2024, Jan 2025.
<b>Awdur/ Cyflwyno / Author/presenting</b>	Ben Eaton
<b>Dyddiad / Date</b>	21/05/2025
<b>Cefndir / Background</b>	
<p>This routine report aims to provide the Board with a summary of our performance for the business year 2024-2025 and a comprehensive overview of organisational performance and outcomes from the final quarter of 2024-2025.</p> <p>A more detailed assessment of the annual performance and information is being developed as part of our annual report and accounts.</p> <p>This paper presents a thorough analysis of activities, measurable achievements, and the impact of our work on people and communities from January to the end of March 2025.</p> <p>Looking ahead, this paper will be read in connection with a suite of organisational dashboards that will visually summarise and represent key information. These dashboards will support future Board reports by enabling a sharper focus on the most significant highlights. A separate</p>	

paper contains the details of the planned approach to and examples of the types of dashboards that will be available.

## Manylion / Detail

### Key performance indicators and achievements in 2024-2025

The progress we made in 2024–2025 reflects the continued growth, ambition, and impact of Llais across Wales. We engaged with more people than ever before, amplified their voices through meaningful representation and advocacy, and strengthened our presence across key health and social care forums. Our efforts to respond to consultations, support service users, and drive service improvements have laid strong foundations for future work. Delivery against our strategic objectives was high across all five priority areas, with clear momentum carried into 2025–2026. The objectives and initiatives rolling forward reflect both the scale of our ambition and our commitment to continuous improvement—ensuring that Llais remains a vital, people-focused part of the health and social care landscape in Wales.

We have:

- Engaged with over 43,000 people, 16,500 more than last year.
- Took part in 915 engagement activities (324 more than last year) with 190 of those being engagements at health and social care premises (117 more than last year)
- Made 560 representations to decision makers, an increase of over 400. Further work is underway to ensure consistency of data recording in this area.

- Responded to 21 consultations or calls for evidence, feeding in what the communities of Wales said to help shape future services.
- Involvement in a total of 484 service changes.
- Through Llais representation at 416 formal meetings/networks (182 more than last year) we have helped make sure that people's voices were considered by a broad range of organisations across the country.
- In total our complaints advocacy service has been contacted by 3,568 people (25.57% more than last year).
- We have supported 1,723 people with their enquiries (38% more than last year) and;
- helped people to take forward 1,845 concerns or complaints (20% more than last year).
- This is the second year our complaints advocates have supported people with social services complaints, around 19% of the complaints we supported related to social services. Up by 4% from the year before.

### **Progress against our strategic objectives within the Annual Plan**

Of the planned objectives within the five priority areas, we successfully delivered:

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93% of priority 1 objectives – national conversation

91% of priority 2 objectives – Push for services

99% of priority 3 objectives – Working Together

90% of priority 4 objectives – Use of technology

87% of priority 5 objectives – Grow and improve as an organisation

### **Objectives and initiatives rolled over into 2025-2026**

1.5.1 Gain a better understanding of what the Quality and Safety Committees across Wales' NHS are doing in relation to the Act (Candour) by end of Q4	4.5 Get support from Centre for Digital Public Services and Digital Health and Care Wales in developing our Digital Strategy
2.2.1 Map working groups we are on vs All-Wales (policy and primary care), WG, NHS Exec, NHS Primary Care etc etc	5.1 Create a locations Strategy
2.3 Advance research and policy development to find out more about All-Wales priorities and call on decision makers to take action.	5.4 Introduce the new CRM system – Phase 1
2.4.3 Create a service Change Dashboard and make it publicly available	5.6 Create our Net Zero Aim
2.5.6.1 Design and/or procure unconscious bias and cultural competency/cultural sensitivity training for our people.	5.6.1 Establish Net Zero reporting

2.5.8 Redesign how we capture and use the data that we hold about our people and our services	5.7.7 Review our 'end-user' IT contract
2.9 Develop our complaints advocacy & enquiries service.	5.8.4 Create and deliver the internal comms plan
3.4 Host a complaints summit	5.13 Review and improve the recruitment process

## Overview of quarter 4 performance 2024/2025

Region	Engage-ment activities	Visits	Representations	Open consultation	Average Open advocacy cases	No. engaged with
Cardiff & Vale	3	1	1	0	130	44
Cwm Taf Morgannwg	13	6	3	0	89	423
Gwent	7	0	5	5	239	162
Powys	4	1	4	4	123	84
NPT & Swansea	9	1	17	0	167	451
North Wales	15	0	15	0	246	402
West Wales	4	1	8	0	129	93
TOTALS	55	10	53	9	1123	1659

The themes of what people have told us during this period are:

### Needs improvement

(\*) = a new or strengthened insight

Theme	Key Issues and Insights
<b>GP services</b>	- Ongoing difficulty accessing appointments across regions.

	- Reports of being delisted from GP lists without warning or explanation. *	
	- Concerns about staff rudeness and poor communication at GP practices. *	
<b>Mental health services</b>	- Delays in ADHD diagnosis and inconsistent referral processes.	
	- Gaps in medication reviews and continuity of care, particularly in secondary services.*	
	- Lack of access to Care Coordinators for individuals with ongoing mental health needs.	
<b>Cancer care pathways</b>	- Ongoing inconsistency in treatment scheduling and communication between providers.	
	- Concerns about lack of support for families during treatment.	
	- Continued issues with clarity of pathways between Velindre and local health boards.	
<b>Waiting times</b>	- Extended delays for orthopaedic and gynaecological treatment, including hysterectomy.*	
	- 5 year wait times for hearing aids in some areas.*	
	- Long waits for follow-up care, especially after initial assessments or diagnoses.	
<b>Transport and accessibility</b>	- Inadequate public transport options in rural areas.	

	- Lack of affordable or accessible parking near health and care sites.	
	- Ongoing demand for mobile health units to support isolated communities.	
<b>Social care challenges</b>	- Delays in initial assessments and unclear funding processes.	
	- Reports of social care clients being incorrectly directed to Llais for complaints.*	
	- Carers still report insufficient support following hospital discharge.	
<b>Staffing concerns</b>	- Staff shortages impacting service delivery across sectors.	
	- Positive feedback on staff dedication, with concerns about burnout and retention.	
<b>Integration of services</b>	- Fragmented coordination between health and social care providers.	
	- Gaps in communication between sectors make it difficult for people to navigate support.	
	- Stronger calls this quarter for truly joined-up, person-centred approaches. *	
<b>Advocacy Cases (Quantitative)</b>	<p>568 new cases opened between January and March 2025.</p> <p>The most common issues included:</p> <p>GP services – 91 cases (e.g. access, delisting, and communication issues)</p> <p>Mental health – 67 cases (including CAMHS access and care coordination)</p>	

	<p>Hospital care and treatment delays – 44 cases (e.g. discharge concerns, misdiagnoses)</p> <p>Emerging pressures:</p> <p>Multiple concerns about unsafe hospital discharges</p> <p>gender services</p> <p>transport difficulties - particularly in Powys and West Wales.</p> <p>Open cases at the end of March: 1,114 across all regions.</p>	
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## What's working well

Across the final quarter of 2024-2025, several encouraging developments have continued to shape our work and reinforce the value of a people-centred approach to health and social care.

- Frontline staff professionalism and compassion remain strong themes in feedback, particularly in relation to cancer services, palliative care, and community mental health teams. People frequently described staff going “above and beyond” despite service pressures.
- Dementia-friendly initiatives in Neath Port Talbot & Swansea and West Wales continue to receive positive feedback, particularly appreciation for memory cafés and support groups helping people stay connected and informed.

- Using local forums and Llais Local events helped gather views from a more diverse cross-section of communities, including people with learning disabilities and carers. This quarter saw increased participation from individuals who may not usually engage with formal consultations.
- Partnerships with third-sector organisations—particularly with Alzheimer’s Society, Neurodivergent Wales, and Powys Carers Service—enabled targeted work to progress, including local pilot projects, information events, and awareness-raising activities.
- Feedback on hybrid engagement methods—including telephone interviews, WhatsApp messages, and pop-up stalls- was positive, especially from people who are digitally excluded or need more accessible ways to participate.
- People valued being kept informed after participating, with several regions piloting new follow-up processes to “close the loop” and show how feedback has made a difference. This approach helped build trust and encouraged further involvement.

Overall, these examples reflect the importance of flexibility, partnership, and empathy in delivering high-quality, person-led engagement and advocacy.

## Representations

Between January and March 2025, over 180 representations were made to health and social care services through our complaints advocacy and engagement activity. These representations reflect real-

time concerns raised by the people and communities, particularly around access, quality, and continuity of care.

A summary of the themes, issues and actions/representations are:

Theme	Key issues	Actions taken
Workforce Pressures and Access	Ongoing shortages in GP and mental health teams. Patients reported difficulty getting appointments and a lack of continuity.	Representations were raised on workforce planning, recruitment strategies, and availability transparency.
Discharge and follow-up care ★ (Stronger sentiment)	More reports of unsafe or rushed hospital discharges, with carers left unclear on next steps or entitlements.	Referred to health boards and social care partners, requesting earlier discharge planning and carer-inclusive approaches.
Communication and coordination failures	Poor communication about appointments, treatment options, and updates. Inconsistent advice between services.	Representations included calls for clearer written information, better triaging, and feedback protocols.
Delays in diagnosis and treatment ★ (Stronger sentiment)	Long waits reported for ADHD, orthopaedics, and gynaecological procedures like hysterectomy and endometriosis.	Referred to planners and commissioners to review bottlenecks and streamline high-pressure pathways.
Inaccessible and unwelcoming services	Neurodivergent individuals described environments as noisy, overstimulating, or unsuitable for their needs.	Advocacy for sensory-friendly adaptations and inclusive frontline staff training.
Transport and rural access	Persistent challenges with travel and cost, especially in Powys,	Representations supported mobile units and called for funding

	West Wales and rural North Wales.	for rural transport support schemes.
Support for unpaid carers ★ (New theme)	Carers reported being left out of care decisions and being under-supported after discharge.	Representations made to recognise better and involve carers in discharge plans and follow-up support.
Gender identity services ★ (New theme in open engagement)	Individuals raised issues with confusing pathways, long waits, and a lack of inclusive information.	Early-stage representations called for clearer guidance, inclusive service access, and navigation support.

## Representation impact

Here are some examples of how our representations have had an impact on individuals, the community or national policies.

### Cwm Taf Morgannwg – Health profile for people with learning disabilities

- **Background:** Through partnership working on our priority areas, we were aware of Health Profiles. A Health Profile provides health and social care staff with key information they need to help them provide safe, and person-centred healthcare for people with a learning disability.
- **Representation:** In a meeting with the health board we raised awareness on how the health profile could be used better in primary care and how much benefit it has for people with learning disabilities (as they had told us).

- **Outcome:** The health board committed to briefing all GP practices and social workers so they are aware of what, how and when to encourage the use of Health Profiles.
- **Impact:** A proactive step towards improving inclusion and access to services based on use of existing and useful methods.

### **Powys – Gender services representation**

- **Background:** Llais supported a client through the Putting Things Right Complaints process and then the Public Services Ombudsman for Wales (PSOW) processes about a complaint relating to access to services that were not provided through the Local Gender Team.
- **Representation:** Llais use the information from the complaint to make a representation to the local health board.
- **Outcome:** The health board agreed that within 6 months, the prescribing and monitoring of hormone treatments would be transferred to the Local Gender Team, improving access via local clinics.
- **Impact:** This change benefits not only the individual but also future patients across Powys.

### **Project highlights and outcomes:**

#### **Improving dementia care in diverse communities (West Wales, Neath Port Talbot and Swansea)**

In partnership with the Alzheimer's Society, CYCA, and PLANED, we delivered targeted engagement with ethnically diverse communities. The insights from this engagement has directly informed local

dementia strategies and carer support initiatives in Neath Port Talbot, Swansea and Carmarthenshire.

### **Minor Injuries Unit community engagement – Llanelli (West Wales)**

Following concerns about the future of Prince Philip Hospital's Minor Injuries Unit, Llais ran drop-in events and gathered over 100 comments. This work fed into Hywel Dda University Health Board's pre-consultation phase, demonstrating our ability to co-ordinate community voices during service change.

### **Cancer pathway co-design – Nevill Hall Hospital (Gwent)**

Llais supported patient-informed planning workshops for the redevelopment of the cancer unit. This helped define priority improvements such as reducing the number of referral steps and ensuring clearer communication pathways between services.

### **Llais Local – Flintshire and Cymmer (North Wales & Neath Port Talbot and Swansea)**

Local drop-ins and café-based events captured lived experience from older people, carers, and people with learning disabilities. These activities will feed into regional reports and influence upcoming local service redesign discussions.

### **Engagement with service providers – Access & Discharge Planning (Powys)**

As part of sustained influencing work, Llais convened forums to surface barriers in access and post-discharge care. The result was a stronger role for Llais in local strategic planning groups, bringing people's voices into decision-making spaces.

## **Children and Young People's mental health pathways (Gwent, Cardiff & Vale)**

Engagement with young people and families highlighted a persistent support gap between schools and Children and Adolescent Mental Health Services. While not a discrete project, and his work has shaped strengthened dialogue with education stakeholders and could lead to future joint initiatives.