

Easy Read: What You Told Us About Our Strategy (2026–2030)



What is this about?



Healthcare Inspectorate Wales (**HIW**) checks the safety and quality of healthcare across Wales.



We are working on our new **Strategy** for 2026 to 2030.

A **strategy** is a plan. It explains what we want to do and how we will do it.



The survey to collect your views started on **Monday 8th September 2025** and ended **Monday 1st December 2025**.

Hard Words

Hard words will be highlighted in **blue**, and a description will be in a box under the sentence. All hard words are also explained on page 19.

About this work



- We asked people across Wales to tell us what they think about healthcare.



- We did this for 12 weeks.



- We wanted to hear your experiences and ideas.



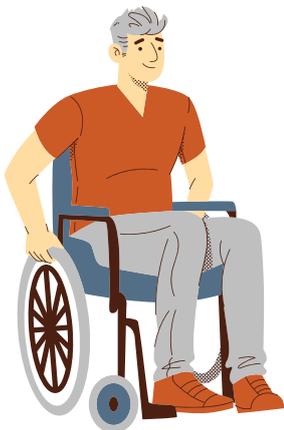
- **2,353** people took part.
- **1,384** people filled in the full survey.

Who took part



People who shared their views included:

- patients
- unpaid carers
- people who work in healthcare
- people who have retired
- dental staff
- care home staff
- local councils
- groups who speak up for others (**advocacy organisations**)
- disabled people
- health boards and NHS Trusts



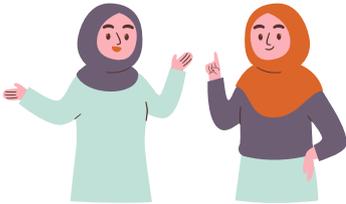
Advocacy organisations are groups who help people speak up for what they need.

How we listened

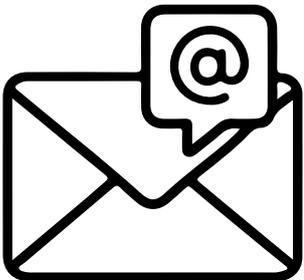
We used different ways to hear from you:



- an online survey in English and Welsh



- events where we met people face to face



- email newsletters



- social media



- group discussions with **Age Cymru, Fair Treatment for the Women of Wales, and the Birth Partner Project** (These groups help us hear from older people, women, mothers, and families)

Our Purpose

Our **Purpose** is the reason we exist.



- We check the safety and quality of healthcare across Wales.

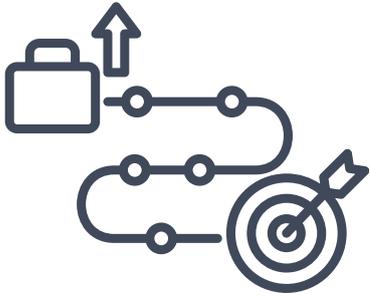


- **924 people** agreed with this purpose.



- **813 people** said nothing was missing or unclear.

Our Vision



A **Vision** is what we want the future to look like.



- We want a future where healthcare in Wales is safe, effective, and high-quality for everyone.

Your views on our 4 priorities



We have written down four important things for our strategy. These are called our **priorities**.



People agreed with our priorities:



1. Putting People First – 81% agreed



2. Learning and Working Together – 81% agreed



3. Investing in Our People – 82% agreed



4. Taking Action That Matters – 88% agreed



What You Told Us Matters Most

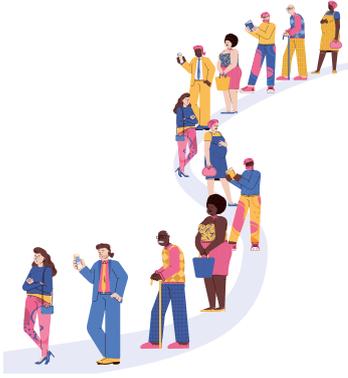
Below are the main things you told us.

1. Access to Services

You told us:

- It is still hard to get GP appointments





- People wait too long for tests and **referrals**.

A referral is when a doctor or health worker sends you to see another health professional to get more help, tests, or treatment.



- Rural areas face more problems, like long travel times.



- Transport is a big barrier for older and vulnerable people.



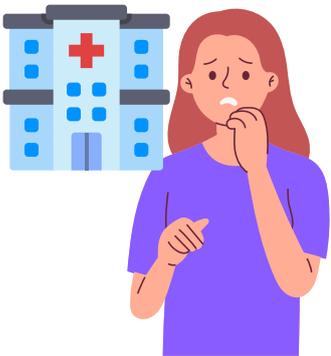
- When GPs are too busy, people use emergency care because nothing else is available.

2. Quality and Safety of Care



You said:

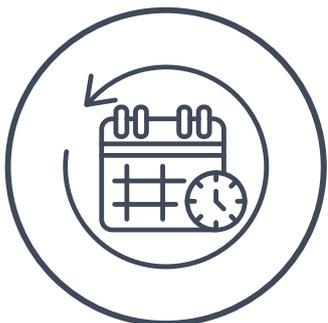
- Care is not the same in every area.
- Some services worry people, like emergency care, maternity care, **inpatient** wards, and mental health.



Inpatient means care you get when you stay overnight in hospital.



- Some people do not get help with pain'.
- Some people do not get **follow-up care**.



Follow-up care means care you receive after your first treatment.



- Staff shortages make it hard to give good care.
- Staff feel tired.

3. Communication and Working Together



You told us:

- Information about patients is not shared well between services.
- There is no single electronic record for patients.



- People get different advice from GPs, hospitals, and phoning 111.



- Families feel left out and unsure about what will happen next.



- People want clear information about their care and rights.



4. Inclusion, Welsh Language, and Fairness

You said:



- Welsh language services must be easier to get.
- There are not enough bilingual staff.



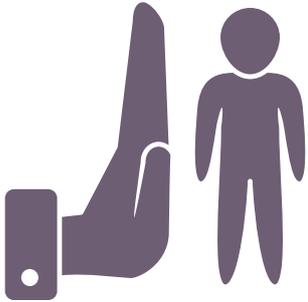
- Some people cannot get online (**digital exclusion**).

Digital exclusion happens when people cannot use online services easily, for example because they have no internet or device.



- There are not enough **interpreters**.

An interpreter is a person who helps people who speak different languages to understand each other.

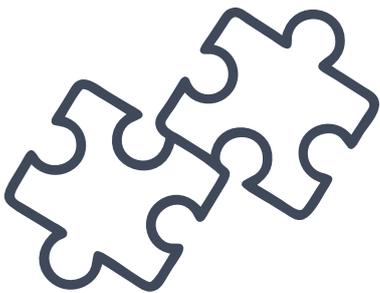


- Some ethnic minority groups do not feel included.



- People want care that respects different cultures.

5. Joined-Up Working



You told us:

- Services feel separate and not connected.



- This affects care when people leave hospital.



- People want health, social care, and community groups to work together better.

6. Trust, **Accountability**, and Engagement

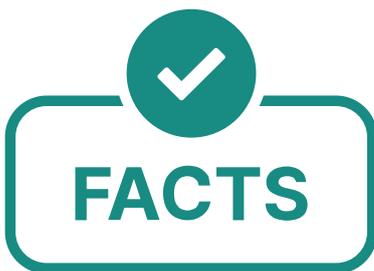


Accountability means someone taking responsibility for their actions.



You told us:

- People are unsure if their feedback leads to change.



- People want honesty and clear updates.



- People want someone to take responsibility when things go wrong.



- Above all, people want to be listened to and treated with respect.



7. Workforce Wellbeing

Staff told us:

- They feel undervalued.



- Recruitment freezes make work harder.



- They want support for their wellbeing.



- They want fair pay.



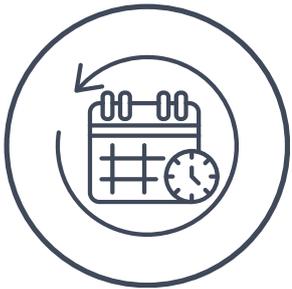
- A positive workplace helps staff stay and do their best.



8. Mental Health and Women's Health

People said:

- there is not enough mental health support

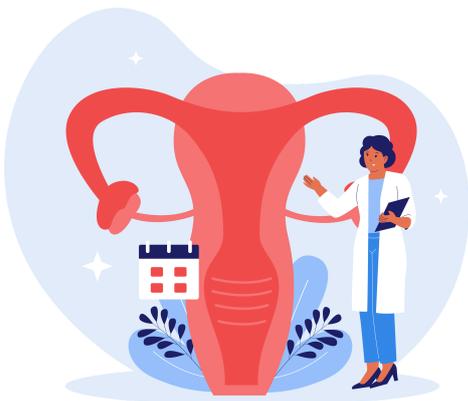


- There is poor **follow-up**.

Follow-up care means care you receive after your first treatment.



- Medication side effects worry people.

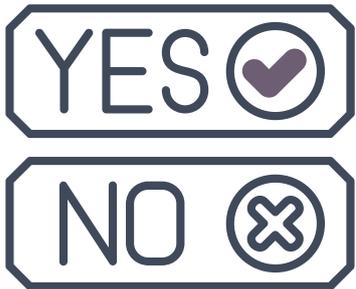


- Women's health needs more focus, including menopause and **endometriosis**.



Endometriosis is a health condition where tissue like the lining of the womb grows outside the womb. It can cause pain.

- **Consent** needs to be better explained and respected.



Consent means saying “yes” to treatment or care after someone has explained it to you in a way you understand.

9. Funding and Resources

People said:

- Services do not have enough money to do their work well.
- Funding should support care in communities, not only hospitals.





- Money should follow the patient and what they need.



Next Steps - What We Will Do



- We will use your feedback to guide our main priorities, like access, communication, safety, **inclusion**, and staff wellbeing



Inclusion means making sure everyone can take part.



- We will use your ideas to improve how we collect information and listen to patient experiences.



- We will also work better with the NHS and with **independent providers**.



Independent providers are healthcare services that are not part of the NHS.



- We will share these findings with health boards and partners.



- The final Strategy will be published on 1 April 2026.

Hard words

Some words in this document might be hard to understand. This page explains what those words mean in a simple way.



Strategy

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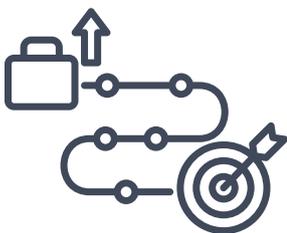
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Purpose

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Vision

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Priorities



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Referral

A **referral** is when a doctor or health worker sends you to see another health professional to get more help, tests, or treatment.

Inpatient

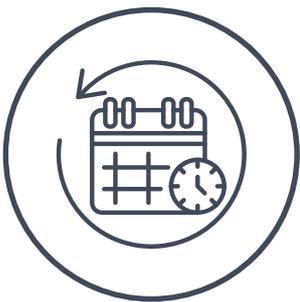
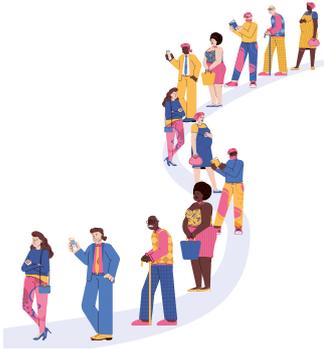
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Digital Exclusion

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Accountability



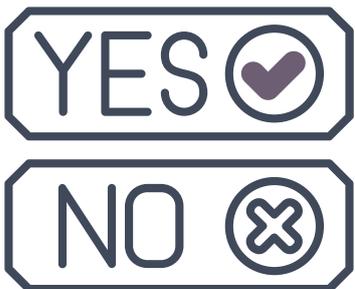
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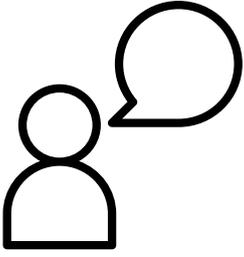
Inclusion

Inclusion means making sure everyone can take part.



Independent provider

Independent providers are healthcare services that are not part of the NHS.



How to contact HIW

By post



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