Meeting Date	**24 October 2019**	**Agenda Item**	**5.2**
Report Title	**External Inspections Report**		
Report Author	Hazel Lloyd, Head of Patient Experience, Risk & Legal Services		
Report Sponsor	Gareth Howells, Director of Nursing & Patient Experience		
Presented by	Hazel Lloyd, Head of Patient Experience, Risk & Legal Services		
Freedom of Information	Open		
Purpose of the Report	This report provides the Committee with a summary in respect of activity relating to external inspections and letters from inspectorates from August 2019 to 11th October 2019.		
Key Issues	• Cwmavon Health Centre was inspected by HIW on 22nd August 2019. An improvement plan has been returned to HIW. • An unannounced inspection was carried out by Healthcare Inspectorate Wales (HIW) in Tawe Clinic – Clyne & Fendrod Wards, Cefn Coed Hospital on 19 – 21 August 2019. The inspection report is attached as Appendix 1. • HIW Annual Report 2018 – 2019 (Appendix 2). A newsletter has been developed to share the learning from the report and also the investigations undertaken within the former ABMU Health Board. • Welsh Risk Pool Report on Radiology Services has been received (Appendix 3) and no factual accuracies issues idenitifed. Reasonable or substantial assurance was reported by WRP against the criteria assessed.		

Specific Action Required ***(please choose one only)***	**Information**	**Discussion**	**Assurance**	**Approval**
	☐	☐	☒	☐

Recommendations	Members are asked to: • **NOTE** the contents of the report.

EXTERNAL INSPECTIONS

1. INTRODUCTION

This report provides the Committee with a summary in respect of activity relating to external inspections and letters from inspectorates from August to 11th October 2019.

2. External Inspections

An unannounced inspection was carried out by Healthcare Inspectorate Wales (HIW) in Tawe Clinic – Clyne & Fendrod wards, Cefn Coed Hospital on 19 – 21 August 2019. The inspection report is attached as **Appendix 1.**

HIW reported that they found a dedicated staff team that were committed to providing a high standard of care to patients and observed staff interacting with patients respectfully throughout the inspection. They stated that the out-dated design of Cefn Coed Hospital impacts negatively upon the patient experience and provides difficulties for staff working in the environment.

HIW have requested the Health Board to review its mental health service provision to ensure the environments of care are developed, to reflect current and future provision of mental health care.

In terms of positive findings, HIW found:

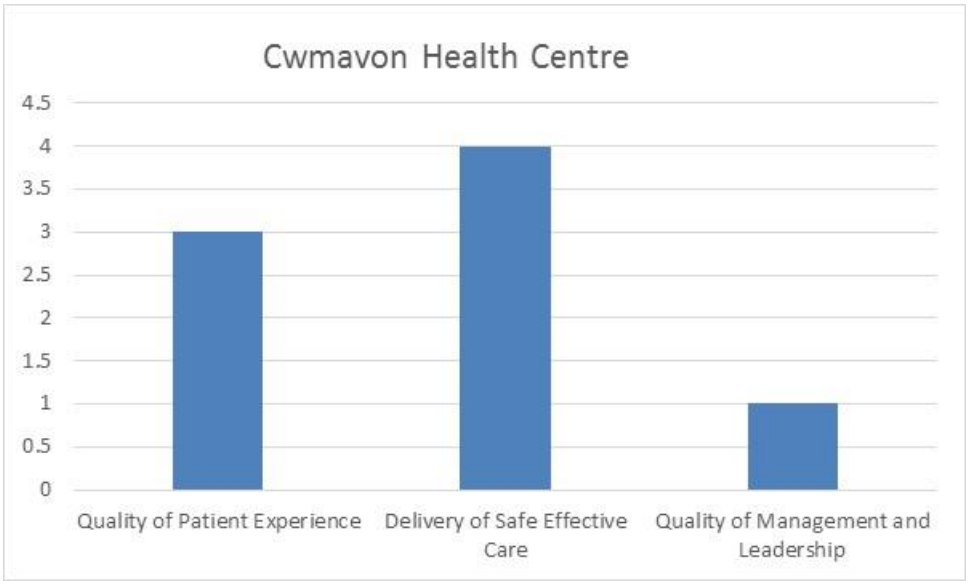
- Staff interacted and engaged with patients respectfully
- Patients were provided with a good range of therapies and activities
- Good team working and motivated staff
- Established governance arrangements.

In terms of service improvement HIW found:

- The environment of care that impacts upon patient privacy and dignity
- The environment of care for staff to manage the safety of the wards
- The layout of the clinic rooms and storage of medication
- Record keeping and the completion of clinical documentation.

2.1 Correspondence with Inspectorates

Correspondence Summary	
Date	**Correspondence Details**
14/8/2019	The Health Board sent to HIW the final improvement plan in relation to the inspection of Cwmavon Health Centre on 22nd August 2019. The

	recommendations regarding the subjects highlighted within the report are set out in the graph below: 
7.10.19	The Health Board received a draft Inspection Report following the unannounced HIW inspection of Cefn Coed Hospital on 19-21st August 2019.

2.2 HIW Annual Report

HIW's Annual Report is attached as Appendix 2. During 2018/19, twenty inspections were carried out across the services provided by ABMU Health Board:

Dental Practices – 13

GP Surgeries – 3

Acute Hospitals – 2

Mental Health 2

Dental & GP Practices

The Learning from the Practice inspections has been shared with other practices across the Health Board.

Main issues identified by HIW included:

- gaps in checking emergency trollies;
- safety certificates and training certificates were not always available for inspection or in date; and

- the record of maintenance of equipment was not always available for review.

Action has been taken to learn from the inspections. The Primary Care & Community Services Unit Quality Assurance visiting program has been revised to support practices more ahead of inspections.

Acute Hospitals

Two inspections were carried out, one in Minor Injuries Unit (MIU) in Neath Port Talbot Hospital and the other in Surgical Services in Morriston Hospital. Both inspections resulted in immediate improvement notices being issued relating to:

Minor Injuries Unit, NPT Unit

• Resuscitation equipment/medication checks to be consistently undertaken;

• Portable electrical equipment to be routinely tested for safety; and

• Delay in routine referral for patients to fracture clinic.

Immediate action was taken in respect of the above findings and during the August Q&S Committee meeting a presentation and patient story was received by the Committee in relation to the improvements made following the inspection. A corporate quality assurance visit was undertaken on 28th August 2019.

Surgical Services, Morriston

HIW were not assured that a safe and consistent approach to Venous Thromboembolism "VTE" risk assessment and associated prophylaxis was being used by medical and nursing staff.

Mental Health Services

Two mental health inspections were carried out, one in Cefn Coed Hospital and the other in Community Mental Health Team Service which resulted in an immediate improvement notice.

The improvement notice related to the availability of risk assessments. Immediate action was taken which strengthened the completion and sharing/discussions of the risk assessments within the Community Teams.

Review of the Handling of the Employment of Kris Wade

HIW published their review of the former Abertawe Bro Morgannwg University Health Board's handling of the employment and 3 allegations of sexual assault. HIW considered a wide range of evidence and concluded that there was nothing in Mr Wade's training, supervision or

occupational Health records which would have indicated he was unsuitable to work in a care setting.

24 recommendations were made from the report which mainly related to safeguarding and HR processes. The Health Board developed an improvement plan of 74 actions of which 67 of the actions have been completed and the remaining actions are on target to complete in accordance with the timeline set for completion.

HIW raised an all-Wales issue for Welsh Government to consider in relation to how the renewal of Disclosure and Barring services (DBS) checks for NHS staff can be facilitated across Wales as an important part of Safeguarding.

2.3 Welsh Risk Pool Radiology Review (WRP)

WRP completed an all Wales review of radiology services, report attached as **Appendix 3.** Former ABMU Morriston and PoWH radiology services were reviewed and either reasonable or substantial assurance was reported by WRP.

Recommendations for Morriston relate to:

- Timeliness of formal reporting, resource is an issue and WRP recommended every effort be put into obtaining and managing sufficient resources to enable prompt turnaround timescales.

- Culture - Audit results presented demonstrated that there can be some misinterpretation between the definition of what should be reported as 'urgent' and that under the 'red star' criteria. It is recommended that clarity and consistence is achieved in this regard and that the process is audited for compliance.

The improvement plan will be monitored through the Unit's Q&S meeting and Health Board's Quality and Safety Forum and the findings will be reported to the Health Board's Quality and Safety Committee in October 2019

3. Recommendations

Members are asked to:

- **NOTE** the contents of the report.

Governance and Assurance		
Link to Enabling Objectives ***(please choose)***	**Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities**	
	Partnerships for Improving Health and Wellbeing	☒
	Co-Production and Health Literacy	☐
	Digitally Enabled Health and Wellbeing	☐
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	☐
	Partnerships for Care	☒
	Excellent Staff	☐
	Digitally Enabled Care	☐
	Outstanding Research, Innovation, Education and Learning	☐
Health and Care Standards		
(please choose)	Staying Healthy	☐
	Safe Care	☒
	Effective Care	☐
	Dignified Care	☐
	Timely Care	☐
	Individual Care	☐
	Staff and Resources	☐
Quality, Safety and Patient Experience		
The report sets out the findings of inspections by Healthcare Inspectorate Wales. Action plans are in place to reduce the risk of occurrence within the Health Board and the Independent Contractor Services. The Risk and Assurance team will monitor all action plans submitted to HIW.		
Financial Implications		
No implications for the Committee to be notified of.		
Legal Implications (including equality and diversity assessment)		
No implications for the Committee to be notified of.		
Staffing Implications		
No implications for the Committee to be notified of.		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
No implications for the Committee to be notified of.		

Report History	Standing agenda item for Quality and Safety Committee
Appendices	Appendix 1. Healthcare Inspectorate Wales (HIW) in Tawe Clinic – Clyne & Fendrod Wards, Cefn Coed Hospital on 19 – 21 August 2019 – Inspection Report Appendix 2 – HIW Annual Report 2018-19 Appendix 3 – WRP Radiology Review Report