








## Summary of Healthcare Inspectorate Wales Progress Against Action Plans

All actions completed	Actions planned and in progress to be completed by the deadline.	Actions not being progressed and actions have passed the deadline.
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Date of Inspection	Inspection	Action Plan Update	RAG RATING
June 2017	Health Centre Station Road - Cymmer	All actions completed	
	Ravenhill Dental Surgery	Update 25.3.21 - All actions completed	
	Cwmbwrla Dental Surgery	Update 25.3.21 - All actions completed	
April 2018	Gupta Dental Surgeons	All actions completed. The HB and Dental Practice Advisor (DPA) worked closely with this Practice to develop an Action Plan. HIW confirmed this Practice is no longer a concern following the updates they have received.	
	Dunes Dental Care	Update 25.3.21 - All actions completed (AP due for sign off)	
	Neath Teeth Orthodontics	Update 25.3.21 - All actions completed	
June 2018	Gorseinon Dental Practice	Update 25.3.21 - All actions completed	
October 2018	Sketty Road Dental	Update 25.3.21 - All actions completed	
January 2019	Alfred Street Primary Care Centre	Update 25.3.21 - All actions completed  191025 - Greenhill Medical Centre.docx	
June 2019	National Review of Maternity Services	Update 24.3.21 - The action plan was submitted to HIW on 19 March 2021, following approval by the Executive Nurse. Continuing to work towards completing the outstanding actions  Maternity Services AP.docx	

July 2019	Cwmafan Health Centre	Update 7.10.2020 - Two actions outstanding, required by estates. This is included on the HB's Risk Register and actions have been taken to mitigate risk, which is now low due to reduced footfall.	
August 2019	Cefn Coed Hospital	<p>All actions completed except:</p> <ol style="list-style-type: none"> <li>1. The closure of the smoking room on Fendrod Ward. Delayed due to Covid-19 Pandemic. Update: Smoking cessation scheme is underway and the removal of the internal ward smoking room is an integral part of this initiative. External smoking shelter and ciglow (igniters) have been installed. Will continue with planned decommissioning – Delayed due to Covid 19</li> <li>2. The health board must consider what improvements can be made to improve the clinic rooms on both wards Update: Both wards will have new stable-doors fitted - Fitting by external contractor delayed due to Covid19</li> </ol> <p>Latest Improvement Plan attached</p>  <p>CCH Clyne Fendrod update july</p>	
October 2019	NPTH Birth Centre	<p>24.3.21 – Updated action plan received</p> <p>Outstanding Action: If curtains to be removed, alternative solution to hide medical gases to be sourced. Update: This action is currently outstanding – plan is to source a single pair of curtains in order to replace when main curtains are being cleaned on a rotational basis. Revised date for completion April 2021 - Work was stalled due to Covid so this action will be completed once a suitable supplier /product has been sourced.</p>  <p>HIW Birth Centre AP- July 2020.docx</p>	
October 2019	Greenhill Medical Centre	Update 24.3.21 - All actions completed	
November 2019	Skewen Medical Centre	Update 24.3.21 – Confirmed - All actions completed	

		 Skewen Medical Centre - AP.docx	
January 2020	Morrison Hospital Paediatric Services	<p>24.3.21 – Updated Action Plan received :</p> <ol style="list-style-type: none"> <li>1. To ensure that up-to-date health promotion information is available for patients of all ages - Update March 2021 - this action remains ongoing – plan to take to Bay Youth to progress – June 2021</li> <li>2. Consider ward layout and dignity of patients/parents/carers (Covid-19 delays) – Update delayed action partly due to COVID – Morrison and CYP have recommenced meetings to plan Single point of access &amp; accommodation for adolescents – Sept 2021</li> <li>3. To ensure that signage within the wards is reviewed to ensure that it is easy for patients and their carers/families to locate the facilities.- Update March 2021; remains outstanding – aim for completion by July 21</li> <li>4. The HB must ensure it continues to identify, monitor and act on any risks identified due to the environment to ensure that patient’s health, safety and welfare are promoted and protected - Update March 2021; assurance audits now completed monthly by matron and ward sister and reported at the Professional nursing forum Weekly risk meeting now in place. In March 2021 CYP established Q &amp; S safety forum – COMPLETED</li> <li>5. The policy for the promotion of safety and prevention of abduction of babies is reviewed - Update March 2021; Policy revised – planning table top abduction drill for April 2021</li> <li>6. Emergency Bell needs to be heard across the ward (Covid-19 delays) - Update March 2021; action outstanding due to the cost – to escalate to core team</li> <li>7. Rebreather bags are easily accessible in every bay - Update March 2021 these are stored on all resuscitation trollies – simulation training in place – Completed</li> <li>8. MDT working group has been set up re the approach to Sepsis 6 - Update March 2021 sepsis pathway group established –plan to implement September 2021. Implemented NEWS Cymru charts for 16 years &amp; above in March 21</li> <li>9. Pain Management recording to be audited - update March 2021 – pain tool audit commencing April 21</li> <li>10. PILS &amp; EPALS training - Update March 2021; PILS &amp; EPALS training remains a challenge due to cancelled courses – add to risk register</li> </ol>  25.3.21 - Updated Plan.docx	
January 2020	Morrison Hospital ED/AMAU	HIW revisited and were overall happy with the progress.	

		 ED and AMAU Immediate Improven  ED and AMAU Improvement Plan (C	
September 2020	Gorseinon Hospital	Update 24.3.21 – updated AP attached One Action Due by July 2021 Confirm plans to train senior staff as clinical supervisors and restart the programme last done in 2018 Update: The matron has undertaken supervision with all the clinical staff apart from 2 x band 5s who will be scheduled in for supervision in the coming weeks. The acting band 7 is undertaking a Clinical supervision course so will be able to support the matron in a more sustainable way moving forward   20025 - Gorseinon Improvement Plan.d	
September 2020	Morrison Orthopaedic Surgery (Ward B)	Improvement Plan accepted by HIW   Imp Plan Final.docx	
September 2020	Morrison Cardiac Ward	No Improvements required following HIW visit	
November 2020	Singleton Hospital (Oncology)	 HIW improvement plan - W12 Final.doc	
November 2020	NPTH Minor Injuries Unit	Update 26.3.21 – All actions completed   AP Update 26 March 2021.docx	
March 2021	Morrison ED	Immediate improvement notice issued following check in relation to mandatory training. A review was undertaken in terms of the actual position of the training compliance and how incomplete/inaccurate information had been provided to HIW during the Quality Check. The Workforce & Information Systems Manager reviewed the compliance of mandatory training in the Emergency Department and this information was uploaded to HIW on Friday 19 March 2021.	

