



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	24th November 2020	Agenda Item	4.2
Meeting	Quality and Safety Committee		
Report Title	External Inspections Report		
Report Author	Hazel Lloyd, Head of Patient Experience, Risk & Legal Services		
Report Sponsor	Pam Wenger, Director of Governance		
Presented by	Hazel Lloyd, Head of Patient Experience, Risk & Legal Services		
Freedom of Information	Open		
Purpose of the Report	<p>This report provides the Nursing & Midwifery Board with:</p> <ul style="list-style-type: none"> • The Healthcare Inspectorate Wales (HIW) Annual Report 2019/20; • Health Board's Learning from inspections newsletter and; • a summary in respect of activity relating to external inspections and letters from inspectorates from 1st September 2020 to 10 November 2020. 		
Key Issues	<ul style="list-style-type: none"> • HIW's Annual Report for 2019/20 is attached as Appendix 1 • HIW have completed a national review of maternity services across Wales. Singleton and NPT maternity services were inspected as part of the review and the Chair, Chief Executive, Medical Director and Director of Nursing were also interviewed. The report is expected to be published in Q3 of 2020/21. • A Learning from Inspections Newsletter has been developed attached as Appendix 2 to help promote learning and action following the inspection findings. • A Tier 1 inspection of Gorseinon Hospital took place on 4 September 2020. No immediate improvement plan is required. One issue relating to clinical supervision was identified. The final report was received on 1 October 2020. 		

	<ul style="list-style-type: none"> • A Tier 1 inspection of Morriston Hospital Ward B was carried out on 9 September 2020. The completed improvement plan was accepted by HIW as sufficient assurance and the final report was issued on 1 October 2020. • A Tier 1 inspection of Morriston Hospital, Cyril Evans Ward was carried out of 9 September 2020. No improvement plan is required and two suggestions were made for consideration. Final report received 7 October 2020. • A Tier One quality check was carried out in Singleton Hospital (Oncology) on 3 November 2020. No feedback has been received to date. • A Tier 1 inspection at Neath Port Talbot Hospital MIU is due on 17 November 2020. The evidence request has been completed and returned to HIW. 			
Specific Action Required <i>(please choose one only)</i>	Information	Discussion	Assurance	Approval
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Recommendations	<ul style="list-style-type: none"> • The Quality and Safety Committee is requested to note the contents of the report 			

External Inspections

1. Purpose

This report provides the Quality and Safety Committee with HIW's Annual Report for 2019/20, a summary in respect of activity relating to external inspections and letters from inspectorates from 1 September 2020 to 10 November 2020.

2. Healthcare Inspectorate Annual Report 2019/20

HIW's Annual Report for 2019/20 is attached as **Appendix 1** and was embargoed until 20th October 2020. 2019/20 marked the second year of the Inspectorates three-year strategy 'Making a Difference' aiming to encourage improvement in healthcare by doing the right work at the right time in the right place; ensuring what they do is communicated well and makes a difference.

During the year HIW responded to sources of intelligence that indicated failings in quality governance and maternity services at Cwm Taf Morgannwg University Health Board. As a result, an urgent joint review of governance arrangements with Audit Wales highlighting a number of fundamental issues and weaknesses and making a number of recommendations for improvement. HIW then commenced a national review of maternity services across Wales and Singleton and NPT maternity services were inspected as part of the review and the Chair, Chief Executive, Medical Director and Director of Nursing were also interviewed. The report is expected to be published in Q3 of 2020/21.

Across Wales HIW have identified concern relating to recurring themes from inspections relating to:

- medicines management and safe storage of medicines in hospitals and GP practices;
- infection prevention and control standards are not always met;
- resuscitation equipment is at times not maintained
- DBS checks are not always carried out;
- record keeping in relation to staff immunisation could be improved;
- patients reported problems booking appointments to see a doctor;
- Dental practices recurring theme to the assessment in 2018/20 relating to infection control and ensuring suitable arrangements are in place to protect patients and staff in a medical Emergency;
- Maintenance and refurbishment of wards was an issue in mental health and
- Variability of the quality of care plans varied considerably.

Many of the learning points identifies across NHS Wales apply to the findings in Swansea Bay University Health Board. A Learning from Inspections Newsletter has been developed attached as **Appendix 2** and subject to any comments received from the Nursing & Midwifery Board members, by 25th November 2020, will be issued in the Health Board.

HIW reports and improvement plans are received at the Health Boards Quality & Safety Governance Group and plans monitored to completion. To strengthen learning from

inspections a Local Learning Brief from Inspections will be issued following each HIW inspection, where learning is identified, using the Alerts module in Datix to distribute the learning across the organisation. As part of the Health Board's Quality Assurance Framework there is a process to undertake internal reviews of services and undertake reviews following HIW Inspections to review the actions taken to improve.

3. External Inspections

3.1 HIW Inspections in 2020/21

Due to the Covid-19 Pandemic, HIW's inspection programme has changed and the inspections will be carried out in three tiers.

- Tier 1 will mean the investigations are carried out offsite via virtual interviews.
- Tier 2 will consist of offsite and limited onsite investigations where necessary.
- Tier 3 will represent a more traditional onsite inspection.

HIW are currently planning their work on a quarterly basis and have provided the provisional planned programme of Quality Checks for the Q3 of 2020/21:

Setting	Type	Confirmation & Information Request	Quality Check Data
Singleton Hospital (Oncology)	Hospital	20-Oct-20	03-Nov-20
Llansamlet Surgery, Swansea	GP	27-Oct-20	10-Nov-20
Neath Port Talbot hospital (MIU)	MIU	03-Nov-20	17-Nov-20
Morrison Hospital	ED	23-Nov-20	08-Dec-20

The focus of the HIW key lines of enquiry with the Tier 1 inspections has been to:

- ensure that there are sufficient numbers of appropriately trained staff on the ward to provide safe and effective care
- ensure that the risk of infection is assessed and managed to keep patients, visitors and staff safe
- ensure ward environment is safe and protects patients from harm, and maintain patient dignity

3.2.Tier 1 Inspections

Since 1st September 2020 to 10th November 2020 a total of four Tier 1 Inspections have been carried out.

3.2.1 Gorseinon Hospital Tier 1 Inspection

A Tier 1 Quality Check was carried out on 4 September 2020 and HIW found that the overall service provided safe and effective care.

In terms of positive findings, HIW found:

The hospital has been following the COVID-19 Infection Prevention and Control and the Use of Personal Protective Equipment (PPE) guidance produced by the Health Board to help protect against the transmission of coronavirus throughout the ward. A specialist Infection Control Nurse has been visiting the ward weekly throughout the COVID19 pandemic to

ensure that policies and procedures are being complied with. The nurse also undertakes weekly checks of the ward in relation to infection control and the Ward Manager confirmed that all issues raised by the nurse have subsequently been addressed.

Changes have been made to the environment of the ward due to the onset of Covid-19, and risk assessments are undertaken to ensure the ward is safe and suitable.

Staff have added their names to the top of their PPE equipment such as visors, to help improve communication with patients and to help make it easier to identify staff members providing their care.

The hospital has continued to ensure patient needs are met and that patients are involved in discussions about their care. Activities are planned to help engage patients and aid with their recovery. During lockdown and visiting arrangements, patients were able to stay in touch with their families virtually using I-pads gifted to the hospital.

Management arrangements are in place to ensure that there are sufficient numbers of appropriately trained staff on the ward to provide safe and effective care. The amount of staff on shift increased during the COVID-19 pandemic due to the higher level of needs of patients at the hospital. It was noted that staff have been flexible and shown a willingness to adapt and take on extra responsibilities.

In terms of service improvement, HIW suggested the following improvements:

- Staff last received clinical supervision under previous management in 2018. The ward manager confirmed that plans were in place to train senior staff as clinical supervisors and restart the programme; HIW would expect this to be implemented as a priority to help develop staff (due date 2 January 2021).

3.2.2 Morriston Hospital Orthopaedic Surgery, Ward B

A Tier 1 Inspection was carried out on 9 September 2020.

In terms of positive findings, HIW found:

Evidence of up to date infection control policies, including COVID-19 infection control policies, such as the COVID-19 Patient Testing and Management Pathway and the Adult Patient Pathway for Patients Recovering from COVID-19. HIW were satisfied that the Health Board were reviewing COVID-19 cases to identify learning and that they had a plan to adopt the All Wales Methodology once approved by the Nosocomial1 Group. There was good evidence of hand hygiene and regular audits and PPE management was well organised.

Good communication between staff and patients, patients included in plan of care.

A pilot in relation to visitors had been introduced on the ward, to help with patient mood, especially for those patients who have been on the ward for a considerable time.

Staff well-being sessions had been arranged in the hospital gym, to support the well-being of staff during the pandemic.

Staff shortages have been covered by nurse practitioners, nurses from the fracture clinic and with the assistance of student nurses, through the pandemic. There have not been any instances of staffing below the requirements of the Nurse Staffing Levels (Wales) Act 2016.

In terms of service improvement, HIW suggested the following improvements:

- A review of Falls Prevention, following a deep dive that was completed for patients over 65. No evidence was provided on the action taken as a result of the score being under 50%
- An action plan to be put in place following the Ward Fundamentals of Care Safety Audit that had been undertaken on 14 Jul 2020. The audit showed that nutritional assessments had not been completed on three patients. There were no written records of any action taken as a result of this
- To review staff training levels for Safeguarding Children Level 2 (current training levels are 45.1%) by December 2020

HIW advised that the improvement plan provided them with sufficient assurance.

3.2.3 Morriston Hospital Cardiac, Cyril Evans Ward

A Tier 1 Inspection was carried out on 9 September 2020.

HIW found that the service provided safe and effective care. It was noted that ward function had changed since the start of the pandemic and staff had embraced this change with enthusiasm. HIW noted that ward management were proud of the adaptability demonstrated by staff.

The following positive evidence was received:

During the COVID-19 pandemic, ward IPC audits have been supplemented by additional audits, which are undertaken by the local IPC group, who are staff not based on the ward. These audits scored positively in a number of areas.

There are facilities on the ward to isolate patients with COVID-19 where required, and that isolation risk assessments are carried out. This includes identifying the level of risk of transmission and ensuring staff use the correct PPE. Non-COVID-19 related infection rates on the ward appear to be appropriately managed.

Safe staffing has been maintained at all times and the temporary rostering of an additional nurse on each shift during the height of the pandemic has helped the ward team to further support patient needs.

PPE Management was well organised.

No specific improvements were identified.

3.2.4 Singleton Hospital Oncology

A Tier One quality check was carried out on 3 November 2020.

No feedback has been received – awaiting the draft findings report.

4. Correspondence with Inspectorates

Correspondence Summary	
Date	Correspondence Details
30/09/2020	The action plan in respect of the Wade Review was submitted to HIW
14/10/2020	Following the CHC Report of Healthcare Services at HMP Swansea, the completed Action Plan was submitted to HIW
16/10/2020	Following the publication of the Healthcare Inspectorate Wales review of healthcare services for young people, the updated action plan was submitted to HIW
05/11/2020	HIW notified of attendees for inspection in NPTH MIU on 17/11/2020

5. Recommendations

The Quality & Safety Committee is requested 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	<input type="checkbox"/>
	Co-Production and Health Literacy	<input type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input checked="" type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input checked="" type="checkbox"/>
Outstanding Research, Innovation, Education and Learning	<input checked="" type="checkbox"/>	
Health and Care Standards		
(please choose)	Staying Healthy	<input checked="" type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input checked="" type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input checked="" type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
Quality, Safety and Patient Experience		
This report sets out findings from the HIW Annual Report 2019/20 and a Newsletter to share the learning across the Health Board to improve.		
Financial Implications		
No implications to note.		
Legal Implications (including equality and diversity assessment)		
No implications for the Quality and Safety Committee to note.		
Staffing Implications		
No implications for the Quality and Safety Committee to note.		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
No implications for the Quality and Safety Committee to be notified of.		
Report History	Quality and Safety Committee Agenda	
Appendices	Appendix 1: HIW Annual Report 2019/20 Appendix 2: Learning from Inspections Newsletter	