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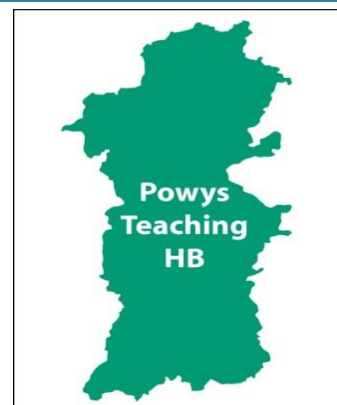
# Powys Teaching Health Board Annual Report from Healthcare Inspectorate Wales 2014-15

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## Purpose

Healthcare Inspectorate Wales (HIW) is the lead independent inspectorate for healthcare in Wales. Its purpose is to provide independent and objective assurance on the quality, safety and effectiveness of healthcare services making recommendations to healthcare organisations to promote improvements.



This annual report has been produced by HIW as a summary of the activity that HIW carried out between 1 April 2014 and 31 March 2015 in the Powys Teaching Health Board area.

The outcomes we seek to influence as a result of our activity within this and other health boards are that:

- Citizen experience of healthcare is improved
- Citizens are able to access clear and timely information on the quality, safety and effectiveness of healthcare services in Wales
- Citizens are confident that inspection and regulation of the healthcare sector in Wales is sufficient, proportionate, professional, co-ordinated, and adds value.

## Overview

During 2014-15 HIW focussed its inspection programme to create broad coverage across the NHS by type of setting and speciality. During the year HIW has conducted 21 visits within Powys Teaching Health Board, these included 6 Dignity and Essential Care Inspections (DECI), 8 dental inspections, 4 GP inspections and 3 other types of visits (1 Laser, 1 Mental Health Act and 1 Mental Health Unit). The locations and dates of these visits are set out below.

## Key Themes

### **Dignity & Essential Care Inspections (DECI)**

DECI provide the core of HIW's inspection approach in NHS Wales. We have significantly increase our presence and visibility in the NHS and ensured that our findings are reported in a timely and constructive fashion which supports improvement.

Dignity and Essential Care Inspections consider four domains:

- **Patient Experience**

We continued to listen to the voice of the patient (adult and child). We established a larger pool of lay reviewers who received enhanced support and communication from HIW staff and helped us to ensure that the patients' perspective was reflected in our work.

- **Fundamentals of Care**

Our inspections continued to focus on delivery of fundamental aspects of care and patient outcomes in all healthcare settings. We have kept this under review and worked with the Welsh Government during its review of the Standards for Health Services in Wales – which incorporate the fundamental aspects of care, to ensure that we continue to align our approach with expectations of the NHS in Wales.

- **Management and Leadership**

We have enhanced our review of management and leadership to test cultures in services and organisations and to review how NHS organisations monitor their internal performance against fundamental standards of dignity and essential care.

- **Quality and safety**

We recognise the potential vulnerability of anyone accessing healthcare services and have ensured that our routine work programmes, inspection tools and work practices focussed on the extent to which healthcare service organisations provide appropriate support to ensure patients and service users in potentially vulnerable situations are safeguarded.

## **Inspection Themes:**

The following key themes were identified from our inspections during 2014-15.

- **Quality of the patient experience:**

Overall, the patient feedback received by HIW has been positive ,with staff found to be polite, conscientious, professional and respectful.

- **Delivery of the fundamentals of care**

Overall, we found motivated, hard working staff delivering the fundamentals of care. Despite this, our inspection activity did identify some consistent themes concerning aspects of the delivery of the fundamentals of care. These themes and the action required from the health board are set out below.

*Respecting people* – To ensure that sufficient steps are taken to safeguard the privacy and dignity of patients.

*Rest, sleep & activity* – To minimize, as far as is practicable, the impact of environmental disturbances.

*Ensuring comfort, alleviating pain* – To ensure that appropriate pain documentation is used and that it contains sufficient detail to explain the reasons for decisions made in this respect.

*Personal hygiene, appearance & foot care* – To ensure that foot health is properly managed by being assessed and monitored using a best practice tool for doing so. Also, to ensure that maintaining foot health for diabetics is a core element of their care planning.

*Eating & drinking* – To ensure that patients are provided with an opportunity to wash their hands before eating.

- **Quality of staffing, management and leadership**

Overall, we found committed and experienced teams of staff providing care to patients. This was despite some weaknesses in ward leadership found during some inspections. Our inspection activity did, however, identify some consistent themes concerning the quality of staffing, management and

leadership. These themes and the action required from the health board are set out below.

*Staffing levels* – To ensure that wards are adequately staffed and that staffing levels are linked to patient acuity levels and take account of current guidance in this respect.

*Staff training* – To ensure that staff are given access to meaningful training opportunities which develop their competence and continue to stimulate learning. Where online training is used, there needs to be a system of follow up and evaluation of the effectiveness of the learning. To keep up to date and accurate records of staff training.

- **Delivery of a safe and effective service**

Overall, we found systems for monitoring safe service delivery embedded into the daily practice of ward managers. We also found that staff were actively working to reduce key risks such as falls. Despite this, our inspection activity did identify some consistent themes concerning the delivery of safe and effective care. These themes and the action required from the health board are set out below.

*Audit and clinical effectiveness* – To ensure there are effective arrangements in place, that they are carried and the results acted upon. This includes sharing outcomes with staff, patients and the public.

*Medicines management* – To ensure that all staff understand the correct procedures to follow regarding the storage and administration of medication to ensure compliance with local policy and Nursing and Midwifery Council (NMC) guidelines

*Documentation* – To ensure that all staff understand and follow the principles for maintaining consistently high standards of record keeping.

## **NHS and/or Private dental practice inspections**

HIW inspects dental services in Wales. We do this to provide independent and objective assurance of the quality, safety and effectiveness of these services. Where necessary, we also make recommendations to promote improvement.

Our inspections of Dental Practices in Wales began in August 2014. Our routine programme of dental inspections means that HIW will inspect each dental practice at least once every three years. If we receive information that a dentist might not be

meeting the required standards , we might inspect more often.

Our inspections are carried out by an experienced HIW inspection manager together with an external reviewer who is a dentist with recent hands on experience of dentistry.

During our inspections we look at the following areas:

- **Patient Experience** – we ask patients what they think about the practice
- **Standards** – we examine how the practice is meeting required standards relating to specific areas of dentistry
- **Management and leadership** – we look at how the practice is run. We check that there are relevant policies and procedures to ensure that staff and patients are safe
- **Practice environment** – we look at the building and facilities at the practice to check that it is fit for purpose and safe for patients and staff

We inspect NHS dentists, dentists who do private work and dentists who do a mixture of private and NHS work. We check that dentists are meeting NHS standards and, where applicable, the legal requirements of the Private Dentistry (Wales) Regulations 2008 and the Private Dentistry (Wales) (Amendment) Regulations 2011.

#### **Inspection themes:**

- **Patient Experience**  
Overall, the feedback received by HIW has been positive, with patients reporting high levels of satisfaction with the services provided. Despite this, our inspection activity did identify some consistent themes concerning the patient experience. These themes and the action required from the health board are set out below.

*Complaints* – To ensure that information for patients on how to make a complaint is accessible and consistent with the requirements of relevant guidance, standards and regulations.

*Patient feedback* – To ensure that practices have effective arrangements in place to seek and act upon patient feedback.

- **Delivery of the standards for health services in Wales**

Overall, practices were found to be providing services that were consistent with the standards for health services in Wales. Despite this, our inspection activity did identify some consistent themes concerning the delivery the standards for health services in Wales. These themes and the action required from the health board are set out below.

*Medical histories* – To ensure that up to date medical histories should be obtained for all patients and countersigned by the dentist to confirm they have been read and acted upon.

*Equipment* – To ensure that equipment is appropriately stored to maintain its sterility..

*Infection control* – To ensure the effectiveness of infection control arrangements, including the training of staff in this area.

- **Management and Leadership**

Overall, practices were well managed and lead, with dedicated staff teams. We identified weaknesses in the on-site leadership at the corporately owned practices we visited.. Whilst individual practice reports have identified areas for improvement, no specific themes have emerged in this respect.

- **Quality of the environment**

Overall, practice premises were found to provide safe environments for patients to receive treatment. Whilst individual practice reports have identified areas for improvement, no specific themes have emerged in this respect.

## **General Practice Inspections**

In October 2012 the Welsh Government published ‘Learning for the future – Taking forward and building on recommendations from the Robert Powell investigation’. This document detailed 9 action points, one of which was a requirement that HIW undertake a rolling programme of reviews to test the effectiveness of governance arrangements within Local Health Boards for assuring the quality of primary care.

During 2013, we reviewed the procedures and processes currently in place to assure the quality of primary care, together with information received from Local Health Boards as to their governance arrangements in this area. Our conclusions from this analysis informed the development of an inspection programme of GP Practices.

This inspection programme independently tested the service actually provided to patients by their GP. The inspections were designed to draw on existing information

and self assessment tools to reduce burden for GPs and add value to those processes currently in use. We worked in a collaborative and complimentary way with Community Health Councils who already conduct site visits to GP Practices.

We established a reference group to obtain the views of a range of stakeholders including GPs, Nurses, Practice Managers, Local Health Boards, Welsh Government, Public Health Wales and Community Health Councils. This group has provided feedback on our plans to and will continue to meet to provide challenge and advice as the programme develops.

During 2014-15 we piloted this inspection programme firstly in one specific Local Health Board, and then across Wales. These inspections focussed on the themes identified by the Welsh Government in response to the Robert Powell case, namely:

- Better communication and involvement with patients and their families
- Accessing and managing medical records
- Improving communication to ensure continuity of care
- Dealing with concerns and complaints following the death of a patient.

In future years we plan to conduct different thematic inspections of GP practices and will develop these plans in consultation with the Stakeholder Reference Group.

### **Inspection themes:**

#### **Patient Experience**

Overall, practices were found to be providing a high standard of service, with the feedback HIW received from patients being generally very positive. Whilst individual practice reports have identified areas for improvement, no specific themes have emerged in this respect.

#### **Delivery of Standards for Health Services in Wales**

Overall, practices were found to be providing services that were consistent with the standards for health services in Wales. Despite this, our inspection activity did identify some consistent themes concerning the delivery the standards for health services in Wales. These themes and the action required from the health board are set out below.

*Patient Feedback* – To ensure practices consider methods for all patients to provide feedback.

*Communication* – To ensure practice information is available in a variety of formats to meet the needs of new and existing patients.

To ensure all staff are aware of their rights and responsibilities in escalating concerns about patient care, outside of normal channels and management structures, should the need arise.

*Complaints* – To ensure the contact details of the Community Health Council should be included in the practice complaints procedure. To review the informal complaints logs as a way to identify themes and improve services.

*Record keeping* – To ensure that patient records are routinely audited to ensure the standard of record keeping is maintained.

### **Management and Leadership**

Overall, practices were well managed and lead, with dedicated staff teams. Whilst individual practice reports have identified areas for improvement, no specific themes have emerged in this respect.

### **Quality of Environment**

Overall, practice premises were found to provide safe environments for patients to receive treatment. Whilst individual practice reports have identified areas for improvement, no specific themes have emerged in this respect.

## **Mental Health**

The Health Board's Mental Health Services are managed by neighbouring Health Boards, however the estates are still managed by Powys.

### **Issues:**

- Brecon War Memorial, August 2014 - The environment is in need of update, in particular there were a number of trip hazards due to worn out flooring that posed a potential risk to older people that are cared for on the ward (August 2014). Health Board stated that they would review the environment/flooring.
- Deprivation of Liberty Safeguard documentation was unavailable on the ward. Staff could not, therefore, evidence that patients were being detained in line with the requirements of this legislation .
- Bronllys Hospital, June 2014 - Significant issues were identified concerning the unscheduled admission of patients to the mental health ward 'out-of-hours'. Patients from the South Powys area are required to be admitted to a hospital in Pontypool, this can have a significant detriment to patient's well-being when they require transportation over this distance. Bronllys Hospital, June 2014. We again raised concerns regarding the purpose of the 'Time Out'



room, which appears to be a seclusion room that can not be locked. The Health Board committed to reviewing the purpose of the room and furnishing it appropriately.

## **Noteworthy Practice**

A number of noteworthy practices were identified during the course of our inspections. Some of these are highlighted below.

### **DECI**

As a result of a well managed, efficient team coupled with a highly efficient process from initial appointment through to operation we found notably high levels of patient satisfaction on Elan day surgery unit at Llandrindod Wells County War Memorial Hospital.

As a result of the health boards' own record keeping review, brand new patient documentation had been designed and was implemented across their hospitals in February 2015.

### **GP**

Overall, we found that GP's demonstrated a wide range of well developed skills due to the need for them to be able to respond to and care for minor injuries, serious illness, enduring illness and inpatient care in this rural population with remoteness from District General Hospital services.

## **Governance and Accountability**

Powys Teaching Health Board's core aim is to improve the quality and range of services available to local people and to ensure timely access to safe and appropriate health services where needed.

The health board may wish to consider the extent to which it is meeting these in the context of the inspection activity HIW has undertaken during 2014/15. Important for HIW will be to get a sense of whether our findings have been a catalyst for the health boards own audit and quality assurance activity, or if the health boards actions in response to our recommendations have been limited to the sites we have inspected.

This will be a factor for consideration during our 2015/2016 inspection programme as part of HIW's broader evaluation of the arrangements the health board has in place to monitor and ensure the effectiveness of its services. In this respect, HIW will give consideration to, but not be limited by, the following issues in relation to systems for audit and clinical effectiveness:

- The extent to which front-line professionals, both clinical and managerial who deal directly with patients, are sufficiently empowered to speak up and take action if they identify issues similar to those found in this inspection, and in line with the requirements of their own professional conduct and competence.
- The extent to which there is a culture of openness and learning within the Health Board that supports staff to identify and solve problems.
- The extent to which the Board has the right information to monitor the quality of care across all clinical interventions and take swift action when there are shortcomings.

## Engagement

During 2014-15, HIW's Chief Executive, Kate Chamberlain, along with Robin Bradfield - the Relationship Manager - met with the Chief Executive and Chair of Powys Teaching Health Board on 27 November 2014.

During 2014-15, Robin Bradfield has attended one quality and safety committee meeting at the health board on 9 October 2014 and has attended two meetings at the Welsh Audit Office with the health boards performance audit leads.

During 2014-15, HIW has issued 2 letters to the health board. One concerned patient falls at Brecon War Memorial Hospital and the other concerned infection control at Knighton Hospital. In both cases, HIW received sufficient assurance from the health board that appropriate action had been taken to address the issues identified.

## Special Reviews and Investigations

During 2014-15 HIW did not undertake any special reviews or investigations within the health board.

## Follow Up and Immediate Assurance

### Follow Up

HIW issued a report following each inspection, with each report containing a plan that makes recommendations for improvement. In all cases the health board / practices submitted timely improvement plans setting out their responses to recommendations therein. Each response was individually evaluated and found to provide HIW with sufficient assurance. This was because the improvements identified had either been addressed and/or there was evidence to demonstrate that progress was being made by the health board / practices in response to the recommendations for improvement. HIW wrote to the health board / practices to advise them of the outcome of this evaluation.

HIW will continue to monitor the progress that health boards / practices make in addressing any recommendations made as a result of its inspection activity. Where actions within improvement plans remain outstanding and/or in progress, there is also an expectation that the health board / practice will provide HIW with updates, to confirm when these matters have been addressed.

### Immediate assurance

HIW has issued three immediate assurance letters as a result of its inspection activity in Powys Teaching Health Board. Two concerned issues identified during DECI inspections and one from issues identified during a dental inspection. In each case a timely response was received from the health board / practice. Also, each response was evaluated and provided HIW with sufficient assurance. This was because the improvements identified had either been addressed and/or there was evidence to demonstrate that progress was being made by the health board / practice in response to the immediate concerns. HIW wrote to the health board / practices to advise them of the outcome of this evaluation.

## Inspections Activity

### National Health Service

Inspection Type	Location linked report	Date
Dental inspections	<a href="#">Mr M J Taylor Dental Practice</a>	18/11/2014
	<a href="#">IDH Dental Company, Crickhowell</a>	20/11/2014
	<a href="#">Orchard Corner Dental Practice</a>	15/12/2014
	<a href="#">IDH Builth Wells Dental Practice</a>	05/02/2015
	<a href="#">Rhayader Dental Practice</a>	11/03/2015
	IDH Dental Company, Brecon	17/03/2015
	<a href="#">Cloverly Dental Practice</a>	25/03/2015
	<a href="#">Powell's Dental Surgery</a>	26/03/2015
Dignity and Essential Care Inspections	<a href="#">Brecon War Memorial</a>	08/10/2014
	<a href="#">Llandrindod Wells County War Memorial</a>	06/11/2014
	<a href="#">Montgomery County Infirmary</a>	04/12/2014
	<a href="#">Victoria Memorial Hospital</a>	20/01/2015
	<a href="#">Ysbyty Bro Ddyfi, Machynlleth</a>	17/02/2015
	<a href="#">Llanidloes and District War Memorial Hospital</a>	24/02/2015
GP inspections (pilot inspections, not published)	Newtown Medical Centre	21/10/2014
	Glantwymyn Health Centre	23/10/2014
	Llanfyllin Group Practice	24/11/2014
	Caereinion Medical Practice	12/01/2015

## Independent Health Care

<b>Inspection Type</b>	<b>Location linked report</b>	<b>Date</b>
Laser	<a href="#">Gavin Steele Tattoo Studio, Newtown</a>	03/07/2014
Mental Health Act	<a href="#">Phoenix House</a>	28/01/2015
Mental Health Unit	<a href="#">Phoenix House</a>	28/01/2015

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