

Betsi Cadwaladr UHB

Despite some signs of improvement during the HIW/Wales Audit office joint review, significant challenges remain for the health board in developing a clear plan for how clinical services in North Wales should be reshaped, and strengthening learning and quality improvement.

HIW wrote to the health board expressing concerns over the leadership of its mental health service, and potential impact on patient care, with specific reference to community mental health services. Challenges also remain for the health board in ensuring that it can provide a safe and effective standard care in the Ablett Unit. Some of the issues we found at Ablett were also apparent during our visit in June 2014, despite the health board providing assurance that these issues would be resolved.

Three of the four hospital inspections resulted in immediate assurance issues having to be addressed. Two hospitals were able to take immediate action on the day of the inspection to address these issues. We also had to write to the health board to seek further assurances on its improvement plan relating to our Learning Disability inspections from 2015/16. This was because the health board provided us with limited assurances in its initial response. The health board's second response was more comprehensive and accepted by HIW.



Hospitals

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| ✓ Patients were happy with the care received | ✗ Several issues around staffing recruitment and retention |
| ✓ One inspection found good practice around infection control | ✗ Ward environments should be more dementia friendly, including more use of pictorial signage |
| ✓ Staff were open and engaging and helped patients in a dignified manner | ✗ Standards of medicines management were not acceptable at Wrexham Maelor, with medication being stored in a fridge that was not safe and secure |
| ✓ We saw good practice using volunteers to spend time talking with patients | ✗ Inconsistent management of patients waiting to be admitted from an ambulance into hospital at Wrexham |
| ✓ Good arrangements for patients and their families to give feedback on their experiences | |

Mental Health

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| ✓ Positive staff groups who told us they felt supported by management | ✗ Significant concerns at the Ablett Unit leading us to conclude that the environment of the two wards we visited was not fit for purpose, and not conducive to providing safe care. |
| ✓ Good evidence of individualised patient focused care | ✗ We made recommendations about medicines management arrangements across several of our inspections |
| ✓ All legal documentation was completed to a the required standard | ✗ Concerns about the medical support arrangements for Bryn Hesketh due to it being a stand-alone ward |
| ✓ The refurbishment of Bryn Hesketh had improved the dementia friendliness of the hospital | |

GP

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| ✓ Patients gave positive feedback about their care and about practice staff | ✗ Practices need to update their websites and leaflets with the most up to date information |
| ✓ Arrangements to promote safe and effective patient care at most practices | ✗ The health board should consider reviewing the practice development plans of managed practices |
| ✓ Staff teams were patient centred and committed to delivering a high quality service to their patients | |
| ✓ Robust internal communication systems to ensure that there were no unnecessary delays in processing referrals, correspondence and test results | |

Dental

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| ✓ Patients were treated with dignity and respect | ✗ There was a lack of adequate emergency equipment in many practices |
| ✓ Patients were clear about treatment costs and options | ✗ Practices could improve the way they provide patients with feedback following suggestions submitted |
| ✓ Most practices were well run with effective systems to support practice management and leadership | ✗ Various issues with record keeping |