

Inspection Summary Report

Welsh Institute of Chiropractic Clinic,
Pontypridd

Inspection date: 13 April 2023

Publication date: 18 July 2023



This summary document provides an overview of the outcome of the inspection



It was clear that staff at the Welsh Institute of Chiropractic clinic were all committed to providing a positive experience for patients. All patients that completed a HIW questionnaire rated the service provided by the clinic as very good.

The building was well maintained, both internally and externally. The practice was also fully accessible with a spacious waiting area, ground floor treatment rooms and a disabled toilet.

From our inspection findings, it was evident that staffing levels were appropriate to maintain patient safety within the clinic.

Suitable processes were in place to manage and review risks to help protect the health and safety of patients, staff and visitors at the clinic.

We saw evidence of a comprehensive register of policy and procedures in place at the clinic. All were up to date and reviewed regularly.

All staff were fully compliant with mandatory training.

Note the inspection findings relate to the point in time that the inspection was undertaken.



What we did

Full details on how we inspect the NHS and regulate independent healthcare providers in Wales can be found on our [website](#).

Healthcare Inspectorate Wales (HIW) completed an announced inspection of the Welsh Institute of Chiropractic Clinic, Pontypridd on 13 April 2023.

Our team for the inspection comprised of a HIW Healthcare Inspector and a clinical peer reviewer.

This summary version of the report is designed for members of the public.

A full report, which is designed for the setting, and describes all findings relating to the provision of high quality, safe and reliable care that is centred on individual patients can be found on our [website](#).



Quality of Patient Experience



Overall Summary

We found staff at the Welsh Institute of Chiropractic Clinic to be committed to providing high quality care to patients, whilst maintaining their privacy and dignity. The environment was suitable for the services provided and offered full accessibility throughout the clinic.

Staff at the clinic were committed to gaining feedback from patients. Patient surveys could be obtained from the reception desk and there was also a suggestion box in the waiting area.

What we found this service did well

- Feedback within patient questionnaires was positive, with patients rating the environment and care received as ‘very good’.
- A good range of patient information was clearly displayed in the waiting area of the clinic.
- Documents including the patient guide and complaints procedure were available bilingually.

Patients told us:

“It was excellent.”

“Very thorough and good information provided.”

Delivery of Safe and Effective Care



Overall Summary

A range of policies and procedures was available, which promoted the delivery of safe and effective care to patients. All policies were detailed, up to date, and contained regular dates for review.

It was evident that the clinic was in a good state of repair, both internally and externally and was fit for purpose for all aspects of the treatments being provided.

We saw that patient records were clear, legible and up to date.

What we found this service did well

- The environment was suitable for the services provided and we witnessed no environmental hazards which would pose a risk to staff or patients visiting the clinic.
- All patient records were clear, accurate and legible.
- All staff were fully compliant with Safeguarding training.

Quality of Management and Leadership



Overall Summary

We saw evidence of clear lines of accountability and management structures in place at the clinic. Staffing levels were adequate for the services provided and we confirmed there was an appropriate skill mix for the treatment offered.

All staff were up to date with mandatory training, and we saw evidence of a comprehensive training matrix in place to keep track of this.

Where the service could improve

- We require staff to ensure minutes are recorded for all staff meetings.

What we found this service did well

- The statement of purpose and patient's guide was up to date and contained all relevant information in accordance with the Independent Health Care (Wales) Regulations 2011
- There was evidence of good compliance with staff mandatory training.

Next steps

Where we have identified improvements and immediate concerns during our inspection which require the service to take action, these are detailed in the appendices of the full inspection report.

When we identify concerns that pose an immediate risk to patient safety we ask the service to undertake urgent action. These concerns are outlined in the appendices and outline the action taken by the service to protect patient safety and approved by us. We also provide a detailed table of improvements identified during the inspection where we require the service to tell us about the actions they are taking to address these areas and improve the quality and safety of healthcare services. In addition we outline concerns raised and acknowledge those resolved during the inspection.

At the appropriate time HIW asks the service to confirm action has been taken in line with management responses documented in the improvement plan. We also ask services to provide documented evidence of action taken and/or progress made.

