

# Inspection Summary Report

Cross Hands and Tumble Medical Partnership,  
Hywel Dda University Health Board

Inspection date: 11 May 2023

Publication date: 25 Aug 2023



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

Digital ISBN 978-1-83504-587-9  
© Crown copyright 2023



Overall, we found staff at Cross Hands and Tumble Medical Partnership to be committed to providing a helpful and professional service for their patients.

The practice was situated in a spacious building, owned by the local health board. The waiting area and treatment rooms were spacious, however due to the layout of the patient toilets, these did not offer full access. Patients had access to a free car park and level access throughout the setting. A hearing loop was also installed and a translation service available.

We saw a wide range of patient information available in the practice waiting area, the majority of which was available bilingually. There were also arrangements in place for patients wishing to communicate through the medium of Welsh, however we recommended that staff wear 'Iaith Gwaith' badges to advertise this service further.

A review of practice risk assessments highlighted that environmental, health and safety and infection prevention and control risk assessment had not yet been completed for the practice.



The practice had a comprehensive catalogue of policies in place. All were in date and subject to regular reviews.

We reviewed staff files and noted that all staff were out of date with Basic Life Support training. We raised this as an immediate concern with the practice. The practice manager has since provided assurance that training has been arranged for all staff.

We were also told that several staff members had not been DBS checked since beginning work at the practice. This was also raised as an immediate issue with the requirement to ensure all staff are DBS checked imminently.

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 Cross Hands and Tumble Medical Partnership, Hywel Dda University Health Board on 11 May 2023.

Our team for the inspection comprised of two HIW Healthcare Inspectors and two clinical peer reviewers. The inspection was led by a HIW Healthcare Inspector.

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 Cross Hands and Tumble medical practice to be committed to providing a caring, professional, and positive experience to patients. Throughout the inspection we witnessed staff speaking to patients and their carers in a kind and helpful manner.

There was a range of health promotion information available for patients in the waiting area, the majority of which was displayed bilingually. There were also arrangements in place for patients wishing to communicate through the medium of Welsh, however we recommended that staff wear 'laith Gwaith' badges to advertise this service further.

The practice offered good access with a patient car park, level access, a hearing loop system and telephone translation service provided by the local health board.

## Where the service could improve

- Practice manager to provide evidence of receipt of privacy screens to ensure these are available in all treatment rooms.
- The practice must ensure that all relevant staff complete chaperone training and remain up to date with this at all times.
- Practice manager to order 'laith Gwaith' badges for all Welsh speaking staff to wear.

## What we found this service did well

- The practice offered good access with a patient carpark, level access, a hearing loop installed and the availability of a translation service.
- Staff were proactive in upholding patient's rights, such as, arranging for patients with ASD to attend appointments at quieter times and ensuring preferred names and pronouns were used when treating transgender patients
- The majority of patients who completed HIW questionnaires felt they could access the right healthcare at the right time.

**Patients told us:**

Patients provided us with the following comments:

*“Service depends on who is on duty and who you speak to/see”.*

*“Parking is often really difficult, especially if coming with children.”*

# Delivery of Safe and Effective Care



## Overall Summary

We were assured that patients attending Cross Hands and Tumble Medical Partnership received safe and effective care. All clinical rooms were an appropriate size and generally kept tidy. However, we did identify environmental hazards, which required immediate action by the practice to promote patient safety.

We reviewed a sample of patient records. All were legible and of a good quality. Our review of the practice's risk assessments showed us an environmental risk assessment, a health and safety risk assessment and an infection prevention and control (IPC) risk assessment needed to be developed for the practice.

## Where the service could improve

- The floor in the male patient toilet was very uneven and should be repaired or replaced.
- The flooring in the corridor and all consultation rooms should be changed to ensure adequate cleaning.
- Arrangements should be made for the damp in certain treatment rooms and the broken light fixture to be fixed imminently.
- An environmental risk assessment, a health and safety risk assessment and an IPC risk assessment for the practice must be completed.
- All treatment rooms must have an effective and easily accessible panic alarm system in place.

## What we found this service did well

- Our review of patient records showed that they were maintained to a good standard.
- The practice had comprehensive and up to date safeguarding policies and procedures in place.

# Quality of Management and Leadership



## Overall Summary

From discussions with practice staff, it was clear they were committed to providing good patient care and were eager to carry out their roles effectively.

We saw evidence of regular staff meetings taking place and minutes being recorded. The practice also had a comprehensive register of policies in place. All were in date and easily accessible for staff through a shared drive.

We identified improvement was needed in relation to aspects of the recruitment process and staff training compliance, which required immediate action by the practice.

## Where the service could improve

- Pre-employment checks for all staff must include a Disclosure and Barring Service (DBS) check appropriate to their roles and all current staff must have an up-to-date DBS check on file.
- Basic Life Support training must be booked imminently for all staff and evidence of completed training kept in staff files.
- Staff complete and be up to date with all mandatory training.
- Staff to complete a clinical waste audit and IPC audit for the practice.

## What we found this service did well

- We saw evidence of a clear management structure in place at the practice.



## 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 health board to undertake urgent action. These concerns are outlined in the appendices and outline the action taken by the health board 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 health board to confirm action has been taken in line with management responses documented in the improvement plan. We also ask health boards to provide documented evidence of action taken and/or progress made.

