Inspection Summary Report

Forest View Medical Centre, Cwm Taf Morgannwg University Health Board

Inspection date: 12 July 2023

Publication date: 16 October 2023



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

Digital ISBN 978-1-83504-903-7 © Crown copyright 2023















Patients provided mixed feedback about the service provided by the practice.

The main frustrations they expressed were around their difficulty in being able to contact the practice and to obtain an appointment at a time to suit them. However, from the comments we received there had been some improvement in this regard more recently.

While we saw systems and processes were being introduced with the intention of providing patients with safe and effective care, there was a lack of evidence to show the effectiveness of these.

A Clinical Practice Manager and a Business Practice Manager were in post and both were clear about their roles and responsibilities within the practice. Staff provided mixed feedback about the management and leadership at the practice.

Comprehensive and up-to-date policies were readily available to support staff in their roles.

Overall, we saw good compliance 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 Forest View Medical Centre, Cwm Taf Morgannwg University Health Board on 12 July 2023.

Our team for the inspection comprised of one HIW Senior Healthcare Inspector, one Practice Manager Peer Reviewer and one GP Peer Reviewer. The inspection was led by the HIW Senior 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

Patients provided mixed feedback about the service provided by the practice.

The main frustrations expressed by patients were around their difficulty in being able to contact the practice and to obtain an appointment at a time to suit them. However, from the comments we received there had been some improvement in this regard more recently.

Where the service could improve

- Arrangements need to be made to identify patients who are carers and to signpost them to relevant information and support
- Arrangements need to be made to evaluate the effectiveness of the changes made to the appointment system
- Arrangements need to be made to ensure Care Navigators are suitably supported in their roles.

What we found this service did well

- Staff at the practice treated patients with dignity and respect and we saw measures were taken to protect their privacy
- The practice had a multidisciplinary team approach to providing services and employed an Advanced Mental Health Practitioner, an Advanced Nurse Practitioner, an Advanced Paramedic and engaged a Physiotherapist
- Most patients who provided feedback told us they were given enough time to explain their healthcare needs and the GP had explained things well.

Patients told us:

- "Appointments are difficult to get."
- "It is difficult to get past reception but when you get to see a doctor the care is great."
- "It has been difficult in getting through to the surgery via telephone and not always easy to get an appointment. However, the last experience I had was much improved. When I get to see the GP, the treatment given is 100%."
- "The service has improved over the last few weeks. I was now able to get face to face appointment at a time suitable for me."
- "I find the main problems are being able to book the initial appointments to see a doctor. Confusion over repeat prescriptions and although ringing and calling at the surgery not being able to access my results after hospital tests."
- "I found the doctors I have seen polite and competent. However, getting an appointment has been extremely difficult."
- "Difficulty in getting phone calls answered and appointments take weeks to get. I feel that receptionists should have some experience in health care. I feel uneasy telling them my problem before seeing a doctor."

Delivery of Safe and Effective Care



Overall Summary

While we saw systems and processes were being introduced with the intention of providing patients with safe and effective care, there was lack of evidence to show the effectiveness of these.

We identified improvements were needed in relation to safe and effective care and required the practice to take immediate action in relation to emergency equipment and drugs.

Where the service could improve

Immediate assurance:

 The practice was required to provide HIW with details of the action to demonstrate staff were aware of the correct process for conducting checks of the emergency equipment, staff were aware of the location of all the emergency equipment and drugs and to monitor compliance with the process. A suitable immediate improvement plan was submitted to HIW within the agreed timescale.

In addition to the above immediate assurance, this is what we recommend the service can improve:

- A general risk assessment needs to be conducted and recorded, and an action plan implemented to control any risks identified
- Arrangements need to be made to show best practice, national and professional guidelines are being regularly discussed and shared with the clinical team.

What we found this service did well

- The practice premises was visibly well maintained, clean and free from obvious hazards
- Effective arrangements were described and demonstrated in relation to safeguarding
- We saw an effective records management system and the patient records we reviewed were clear, legible and of good quality.

Quality of Management and Leadership



Overall Summary

A Clinical Practice Manager and a Business Practice Manager were in post and they were responsible for the day-to-day operation of the practice. Both were clear about their roles and responsibilities within the practice.

At the time of our inspection, the GP Partners and the managers described the practice was in period of transition. They described the challenges they faced, and the action being taken to make improvements where needed.

Staff provided mixed feedback about the management and leadership at the practice.

Comprehensive and up-to-date policies were readily available to support staff in their roles. However, records showed over 50% of staff had not read some of the polices.

Overall, we saw good compliance with mandatory training. However, not all staff were listed on the training matrix provided to us. In addition, most staff were due to attend update training on most topics within one month or less.

Where the service could improve

- Action needs to be taken to respond to the less favourable staff responses described in this report
- Arrangements need to be made to demonstrate staff are aware of the content of the practice's written policies and procedures
- Action needs to be taken to ensure new staff are recruited safely and to demonstrate that existing staff are suitable to work at the practice
- Action needs to be taken to ensure all staff are recorded on the training matrix
- Arrangements need to be made to show the effectiveness of the improvements implemented by the practice and how feedback has been shared with the wider practice team.

What we found this service did well

- Comprehensive and up-to-date written policies were available to support staff in their work
- The Clinical Practice Manager demonstrated a good understanding of the Duty of Candour and staff told us they understood their roles in meeting the Duty standards.

Staff told us:

"Excellent patient care is at the fore front of the practices mind. We have excellent staff including admin and the care Navigation team. The service needs improvement by employing more staff as there are departments within the practice that are really struggling, as a team and as individuals. This is having a detrimental effect on the wellbeing of staff."

"Staff wellbeing is at a low and has been for the at least the past 4 years. Management and GP partner decision making and process improvement or changes have been often slow in the past or last minute impacting on staff and patient. Staff workload pressures are not always acknowledged and managed. Communication between management to staff and practice to patients in the past has very poor."

"It is an uncomfortable environment not knowing from one day to the next if you're doing the right thing. Unapproachable management."

"Having to do online mandatory training in own time is very difficult when you have a busy home life. No time allocated in work time."

"Having been through turbulent period which has been difficult for everyone the general feeling is one of optimism and positive change."

"There is a desire by everyone working here to provide the best care possible for our patients."

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.

