

Inspection Summary Report

Nantymoel Surgery, Cwm Taf Morgannwg
University Health Board

Inspection date: 3 August 2023

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

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Overall, we found Nantymoel Surgery was committed to providing a caring, professional and positive experience to their patients.

There was level access to the practice, allowing wheelchair users or those with mobility issues to access the facilities easily.

The team were dedicated, hardworking and committed to providing patients with safe and effective care in an environment that was clean and tidy. Processes were in place to assure the privacy and dignity of the patient was upheld.

We found the quality of management and leadership at the surgery to be robust with clear lines of accountability. The staff team worked well together and there was a dedicated and committed practice management and senior team.

We did identify issues that were dealt with under our immediate assurance process, relating to out of date training in basic life support and medical emergencies, expired medical items, equipment checks, and storage of clinical waste.

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 Nantymoel Surgery, Cwm Taf Morgannwg University Health Board on 3 August 2023.

Our team for the inspection comprised of two HIW Healthcare Inspectors, two clinical peer reviewers and a practice manager peer reviewer. 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 Nantymoel Surgery 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.

The general environment was clean and tidy. There was level access to the practice allowing wheelchair users or those with mobility issues to access the facilities easily. The waiting room was spacious and the treatment areas were all situated on the ground floor.

All patients who responded to the questionnaire rated the service as 'very good' or 'good' and commented positively in the questionnaire.

Where the service could improve

- Forwarding all documents electronically to ensure there is an audit trail.

What we found this service did well

- Signposting patients through health promotion material and the availability of various services
- Staff worked well together within a close knit community
- Patient access to other disciplines such as mental health and physiotherapy
- Patient feedback was positive.

Patients told us:

“I find the service especially great at all times. No complaints at all.”

“Lovely receptionist so helpful, supportive and friendly. Credit to the surgery.”

“Staff are always polite, friendly and helpful.”

“Very friendly staff with very good professional attitude, always helpful.”

“Amazing staff very accommodating”

Delivery of Safe and Effective Care



Overall Summary

The team at the surgery were dedicated, hardworking and committed to providing patients with safe and effective care in an environment that was clean. All treatment rooms were of a good size and were well equipped.

Our review of patient medical records found these to be generally comprehensive, clear, and easy to navigate with appropriate Read coding.

Whilst areas of good practice were seen, we did identify a small number of issues in relation to the storage of clinical waste, disposal of expired items of sterile items and medication. These issues were dealt with under HIW's immediate assurance process.

Immediate assurances

- There were expired items in the emergency equipment bag and doctors' medical bag
- There was not a robust system for the management of sterile materials
- The contents of the emergency equipment bag were incomplete
- There were no checks of the emergency equipment includes checking dates of the contents of the bag
- Clinical waste was not stored safely and securely in an area not accessible to patients.

Where the service could improve

- Keep records of the temperature checks of fridges
- Patient medical records need to record where the consultation took place
- Carry out regular IPC audits with actions that recorded and cleared.

What we found this service did well

- Patient medical records were clear and comprehensive with relevant read coding generally
- There was a documented business continuity plan
- Management of patients in mental health crisis.



Quality of Management and Leadership

Overall Summary

We found the quality of management and leadership at the surgery to be robust with clear reporting lines and a dedicated and committed practice management and senior team.

Staff discussion, although regular, was almost solely informal in nature.

The practice policies and procedures were stored on a shared drive accessible to all staff and were all in date with named staff responsible for amending these documents.

There were issues relating to the lack of basic life support training for the majority of staff. These issues were dealt with under HIW's immediate assurance process.

Immediate Assurances

- The majority of staff were out of date with training in basic life support and medical emergencies appropriate to their role.

Where the service could improve

- Provide job descriptions relevant to the role of staff
- Introduce a formal feedback process
- Staff mandatory training compliance
- Practice nurse supervision.

What we found this service did well

- Managing the complaints process
- Policies and procedures were up to date
- The practice worked closely within the local cluster.

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.

