

Inspection Summary Report

Riverside Surgery, Primary Care Resource
Centre, Swansea Bay University Health Board

Inspection date: 1 August 2023

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

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Practice staff were dedicated and committed to providing patients with safe and effective care. We noted that the practice had good leadership and clear lines of accountability. The staff team worked very well together.

There was a process in place to attempt to reduce the waiting times for patients calling the practice by telephone.

The practice was clean, well maintained and clutter free. The practice had comprehensive and up to date policies and procedures.

Medical records reviewed were found to be generally of a good standard.

Patient responses received through HIW questionnaires were generally positive

Whilst areas of good practice were noted, we did identify an issue in relation to the regular checks of emergency drugs and equipment. This issue was dealt with under HIW's Immediate Assurance process.

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 Riverside Surgery, Swansea Bay University Health Board on 1 August 2023.

Our team for the inspection comprised of one HIW Senior Healthcare Inspectors, a clinical peer reviewer and a practice manager peer reviewer. The inspection was led by a 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

Patient responses received through HIW questionnaires were generally positive, with respondents rating the service as 'good' or 'very good'.

There was a good supply of health promotion information available and on display to patients. 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. There was also a children and toddler area in the waiting room.

The practice had put a process in place to attempt to reduce the waiting times for patients calling the practice by telephone.

Whilst the reception and waiting area were calm, the reception desk was within the waiting room and there was potential for conversations to be overheard.

The process surrounding the offer of chaperones could be improved.

Where the service could improve

- Displaying and recording the offer of a chaperone
- Providing further privacy for patients at the reception desk.

What we found this service did well

- Supply of health promotion information to patients
- Installing a new telephony system
- Level access for patients to the practice.

Patients told us:

“The team are exceptional - a glowing team an asset not only to the practice but the NHS. Top class service and always has been.”

“More afternoon late appointments needed for workers long wait to get through to practice.”

“The phone system is like a lottery. The available telephone queue fills up in micro-seconds, the message says you are in a queue, but the receptionist is not actually answering the phones! It would be better to be honest and admit that or deal with the queue.”

“Always happy with my doctor, sometimes can't get to see him.”

Delivery of Safe and Effective Care



Overall Summary

Overall, we found practice staff to be dedicated and committed to providing patients with safe and effective care. The practice was clean, well maintained and clutter free. All treatment rooms were well equipped and of a good size.

Whilst areas of good practice were noted, we did identify a small number of issues including linking medication to diagnosis. We also found an issue in relation to the regular checks of emergency drugs and equipment. This issue was dealt with under HIW's Immediate Assurance process.

Medical records reviewed were found to be generally of a good standard.

Immediate assurance:

- The emergency equipment and drugs had not been evidenced as checked between 23 December 2022 and 4 April 2023. Whilst the checking document stated that these checks should be carried out on the first of each month, this was not in accordance with the Resuscitation Council (UK) requirement to check these items weekly.

Where the service could improve

- Link medication to specific diagnoses.

What we found this service did well

- Ensure all the areas within the practice were clean, well maintained and clutter free
- A clear flow of information within the practice from partners and to partners and management
- Well controlled medicines management.



Quality of Management and Leadership

Overall Summary

We noted that the practice had good leadership and clear lines of accountability. The staff team worked very well together and were committed to providing a high standard of care for their patients.

There was evidence of a comprehensive induction process, with good compliance to staff recruitment procedures. However, there were gaps present in mandatory training compliance.

The practice had comprehensive and up to date policies and procedures.

Team meetings were taking place with the relevant team leads.

Where the service could improve

- Staff compliance with mandatory training
- Advertising the complaints and feedback process and the results of the feedback.

What we found this service did well

- Clear management of the practice
- Up to date policies and procedures
- Staff recruitment well managed.

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.

