

# Inspection Summary Report

Meddygfa Hafan Iechyd, Betsi Cadwaladr  
University Board

Inspection date: 14 November 2023

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

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Overall we found evidence that Meddygfa Hafan Iechyd provided safe and effective care.

We found a patient-centred staff team who were committed to providing the best services they could.

The day to day management of the practice is the responsibility of the practice manager, who was extremely committed and dedicated to the role.

Safeguarding arrangements at the practice were effective and staff were knowledgeable on the processes.

Good practice in the maintaining of staff training, employment checks and vetting. We also found suitable governance procedures in place to support the effective running of the practice.

The practice was situated in a spacious building and offered good accessibility for all patients.

The whole practice environment was clean and tidy.

We found the clinical team were very knowledgeable, professional and demonstrated their understanding on where and how to access advice and guidance.



## 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 Meddygfa Hafan Iechyd, Betsi Cadwaladr University Health Board on 14 November 2023.

Our team for the inspection comprised of a HIW Healthcare Inspector, a general practitioner, 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 that staff at Meddygfa Hafan Iechyd was committed to providing a positive experience for patients.

We observed staff greeting patients in a polite and friendly manner both in person and on the telephone.

All the patients who completed a HIW questionnaire rated the service provided by the practice as very good or good.

We found there were systems and processes in place to ensure patients were being treated with dignity and professionalism.

## Where the service could improve

- Ensure all patients with carer responsibilities are supported
- Develop and implement a formal protocol for reception care navigation.

## What we found this service did well

- Fully bilingual service offered
- Staff at the practice treated patients with dignity and respect, and we saw measures were taken to protect their privacy
- There was good disabled access to the building. Wheelchair users could access all consulting rooms, the reception, waiting area and toilet facilities
- Patients who provided feedback told us they were given enough time to explain their healthcare needs, and the GP had explained things clearly.

**Patients told us:**

Patients provided us with the following comments:

*" It was running late but the service itself is great. Courteous staff, always Welsh and a Nurse who listens and answers questions brilliantly."*

*" I always feel welcomed by the dispensary team, my prescriptions are always ready on time, and always very helpful."*

*"The reception staff are always polite and helpful. I have also been in contact with the practice manager who helped me and offered me support and gave me the information that I needed."*

# Delivery of Safe and Effective Care



## Overall Summary

We found a staff team who were very patient centred, and committed to delivering a quality service.

The practice appeared to be well maintained and equipped to provide the services they deliver.

All areas were clean and free from any visible hazards.

The sample of patient records we reviewed were of good standard.

## Where the service could improve

- Undertake IPC audit and nominate an IPC lead
- Develop a unified system for managing correspondence
- Ensure carpets are removed and disposable curtains provided in all consulting rooms
- Ensure all consulting rooms have a height adjustable examination couch
- Consider having a dedicated prescribing clerk(s) to manage prescription requests.

## 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

We found Meddygfa Hafan Iechyd to have very good leadership and clear lines of accountability. There was a strong ethos and culture to provide a high standard of patient care.

The practice appeared to be well managed by a committed and dedicated practice manager who was open and approachable, which enabled staff to be confident to raise issues.

The staff team was very well supported by the leadership team.

We observed staff supporting each other and working very well together as a team.

Staff had access to appropriate training opportunities in order to fulfil their roles.

The clinical team were very knowledgeable, professional and demonstrated their understanding on where and how to access advice and guidance.

## Where the service could improve

- Ensure all staff complete Duty of Candor training.

## What we found this service did well

- We witnessed all staff, clinical and non clinical, working very well together as part of a team
- Good staff induction process in place
- Practice managed by a committed and dedicated practice manager.

## 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 service to provide documented evidence of action taken and/or progress made.

