## **ABUHB Maternity Services Inspection: Immediate Improvement Plan**

Service:	The Royal Gwent Hospital
Area:	Ward B4, Ward B5 and Labour Ward
Date of Inspection:	2nd – 4th September 2019

## Delivery of safe and effective care

Improvement needed	Regulation / Standard	Service action	Responsible officer	Timescale
<u>Finding</u>				
The inspection team considered the arrangements for the checking of emergency equipment on Ward B4, B5 and the Labour Ward.	2.1 Managing Risk and Promoting Health and			
We found that checks of equipment used in a patient emergency were insufficient. Checks were inconsistent and not recorded as being carried out on a daily basis. We found this in relation to the following equipment:	Safety 2.9 Medical Devices, Equipment and			
Neo-natal resuscitaires	Diagnostic Systems			

It was of concern to find that this issue had been brought to the attention of the health board through a HIW Maternity inspection in July 2019, with a recommendation to ensure that improvements were to be made across all wards and departments within the health board. <u>Improvement needed</u> The health board must provide HIW with details of the action it will take to ensure that checks of the neo-natal resuscitaires are carried out on a daily basis in line with their policy.		The issue of equipment checks was raised as part of the HIW review of Maternity Services in Nevill Hall Hospital, so it is disappointing that checking was found to be non-compliant following their review of Royal Gwent Hospital, as formal communication had been issued to staff highlighting the importance of a minimum of daily checks. Further formal communication has been issued to the Midwifery Teams in RGH reinforcing the requirement of safety checks of equipment. The Senior Midwifery Managers are also checking compliance with the daily checks on a weekly basis, addressing any deficits immediately.	Head of Midwifery	Addressed
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Quality of Management and Leadership				
Improvement needed	Regulation / Standard	Service action	Responsible officer	Timescale
Finding				
The inspection team considered the arrangements for patient confidentiality and adherence to Information Governance General Data Protection Regulations (2018) on Ward B4, B5 and the Labour Ward.	t r b d d d d d d d d d d d d d d d d d d			
We found within Ward B4 that patient information was not being securely managed or stored, to prevent unauthorised access and to uphold patient confidentiality. This included the following:				
A trolley containing patient records on the postnatal ward which was unlocked and located within a patient/visitors assessable corridor.				
It was of concern to find that this issue had previously been brought to the attention of the health board following a HIW inspection in July 2019, with a recommendation to ensure that improvements were required across all wards and departments within the health board.				
Improvement needed				

The health board must provide HIW with details of the action it will take, to ensure that there are appropriate systems in place, which protects patient confidentiality, and prevents unauthorised access to patient records at all times.		Head of Midwifery	ADDRESSED
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Health Board Representative:

Name (print): Deb Jackson

Role: Head of Midwifery

Date: 12<sup>th</sup> September 2019