

Inspection Summary Report

Glanrhyd Hospital, Angelton Clinic, Cwm Taf
University Health Board

Inspection date: 14 -16 November 2022

Publication date: 15 March 2023



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



We identified a number of areas that required significant improvement particularly around Medication Management, Care Planning and Governance and Leadership. Due to concerns about patient safety, we issued an Immediate Assurance letter, where we write to the service immediately after our inspection with our findings requiring urgent remedial action.

Significant improvements were also required in the completion of clinical documentation to accurately and clearly record the care provided at the hospital.

The governance and audit processes at the hospital were inadequate and failed to monitor and maintain quality and safety at the hospital.

We found a dedicated staff team that were committed to providing a high standard of care to patients. We saw staff interacting with patients respectfully throughout the inspection.

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 unannounced inspection at Angelton Clinic, Glanrhyd Hospital, Cwm Taf Morgannwg University Health Board on the evening of 14 November 2022 and the following days of 15 and 16 November 2022. We reviewed Angelton Clinic, Wards 1 and 2 in this inspection.

Angelton Clinic provides a service for older people with serious and enduring mental health diagnoses and dementia.

Our team for the inspection comprised of two HIW Healthcare Inspectors, three clinical peer reviewers and one patient experience 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

We found a dedicated staff team that were committed to providing a high standard of care to patients. We saw staff interacting with patients respectfully throughout the inspection.

Where the service could improve

- Providing health information on the wards for patients and visitors.

What we found this service did well

- Staff interacted and engaged with patients respectfully
- Good team working and motivated staff
- Effective patient and family feedback processes.

Patients told us:

Patients provided us with the following comments:

Patients told us that staff were kind and looked after them well.

Delivery of Safe and Effective Care



Overall Summary

Whilst the physical environment at Angelton Clinic was overall maintained to a good standard, we identified several areas that require action. We also raised a significant number of improvements required in most areas, these included ligature risk assessments, medication management, care planning and audit activity. Due to the volume and nature of issues raised, HIW was not fully assured patients consistently receive safe and effective care.

Where the service could improve

- Individualised care planning and recording/access of patient notes
- Security of the internal ward entry doors
- Medications management including locking of medication fridges
- Environmental issues including flooring on both wards needing to be replaced and general maintenance issues on the wards.

HIW highlighted the following serious issues which required immediate action by the health board to prevent significant harm to patients, members of the public and staff. Please note this list is not exhaustive and full details are contained in Appendix B:

- Ligature risks at the setting were not effectively managed
- Care plans were not being audited, records lacked evidence of patient involvement, and detailed and comprehensive decision making
- Medication fridges were not routinely locked.

What we found this service did well

- Physical health assessments and monitoring were being completed.

Quality of Management and Leadership



Overall Summary

There was a clear organisational structure at the hospital. Staff engaged positively with our inspection and demonstrated a clear commitment to improvement. However, we noted a number of areas of improvement required in overall governance arrangements. The significance of these findings, along with the Safe and Effective Care, and Care Planning sections of this report, highlights the need for improvement in governance to support patient safety.

Where the service could improve

- Governance and audit processes at the hospital must improve to adequately monitor and maintain quality and safety at the hospital
- Completion of mandatory training
- Completion of supervision and appraisals.

HIW highlighted the following serious issues which required immediate action by the health board to prevent significant harm to patients, members of the public and staff. Please note this list is not exhaustive and full details are contained in Appendix B:

- Overall governance arrangements including poor access to patient records and no minute taking of any meetings.
- Patient care plans were not regularly being assessed and monitored by the health board
- Risk assessments not being completed regularly
- Mandatory training compliance is low.

What we found this service did well

- Introduction of wellbeing champion for staff and patients
- Research and data analysis on falls.

Staff told us:

Staff provided us with the following comments:

Staff told us that the activities co-ordinator helps support staff and patients at the hospital by providing a variety of different activities for the 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 health board to undertake urgent action. These concerns are outlined in the appendices and outline the action taken by the health board 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 health board to confirm action has been taken in line with management responses documented in the improvement plan. We also ask health board to provide documented evidence of action taken and/or progress made.

