

Inspection Summary Report

Diagnostic Imaging Department
Werndale Hospital, Carmarthen

Inspection date: 28 and 29 June 2022

Publication date: 30 September 2022



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



Staff were committed to provide patients with a good experience when visiting the Diagnostic Imaging Department at Werndale Hospital.

We found good compliance with the Ionising Radiation (Medical Exposure) Regulations 2017 and appropriate arrangements were in place to promote the safety and wellbeing of patients having X-ray procedures. However, some of the written employer's procedures require further details to be added.

Staff told us the organisation encouraged teamwork and was supportive. Staff were also positive regarding their immediate line manager and senior managers.

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 of the Diagnostic Imaging Department at Werndale Hospital, Carmarthen on 28 and 29 June 2022.

Our team, for the inspection comprised of two HIW Senior Healthcare Inspectors and a Senior Clinical Diagnostic Officer from the Medical Exposures Group (MEG) of the UK Health Security Agency (UKHSA), who acted in an advisory capacity.

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 were committed to provide patients with a good experience when visiting the diagnostic imaging department. This was confirmed by patients who made comments to HIW.

Suitable arrangements were in place to promote the privacy and dignity of patients and we saw staff treating patients with respect and kindness.

Information was available to patients on how to provide feedback and how to raise a concern about their care.

What we found this service did well

- Comments received from patients confirmed they were highly satisfied with their experience of visiting the department
- Staff placed an emphasis on promoting the privacy and dignity of patients
- A good system was in place to share patient feedback with staff.

Patients told us:

“Felt very comfortable and reassured with the staff and whole experience I had in imaging.”

“Staff made me feel relaxed and involved in my examination and I felt that I was in safe hands.”

“Staff were very helpful. Top service.”

“The radiographer that assisted me was helpful, professional and friendly.”

“... it was an excellent experience, so caring and looked after me so well!”



Delivery of Safe and Effective Care

Overall Summary

We found good compliance with the Ionising Radiation (Medical Exposure) Regulations 2017 and appropriate arrangements were in place to promote the safety and wellbeing of patients having X-ray procedures.

We found suitable arrangements were in place to promote effective infection prevention and control and decontamination within the department.

What we found this service did well

- A range of clinical and IR(ME)R audits had been conducted and good systems were in place to conduct follow up audits and share findings with relevant staff.

Where the service could improve

- Some of the written employer's procedures require further details to be added to reflect national guidance and support staff with clear procedures to follow
- The employer should make suitable arrangements to confirm with individuals entitled to act as referrers that they can access referral guidelines.

Patients told us:

“X-ray equipment ... looked new which gave me confidence in the service at Werndale.”



Quality of Management and Leadership

Overall Summary

The hospital director was the designated employer under IR(ME)R and clear lines of reporting and responsibilities under IR(ME)R were described and demonstrated.

The employer had suitable written procedures in place to identify individuals to act as duty holders under IR(ME)R and for the analysis, recording and reporting of accidental or unintended exposures.

Comments made by staff confirmed the organisation encouraged teamwork and was supportive. Staff also made positive comments regarding their immediate line manager and senior managers.

What we found this service did well

- A good system was in place to share learning from incidents relating to medical exposures
- We found good staff training compliance in relation to IR(ME)R and other mandatory training
- Staff made positive comments regarding the action taken by the organisation on health and wellbeing.

Where the service could improve

- Letters of entitlement sent to orthopaedic consultants should refer to all the duty holder roles that they may perform
- Arrangements should be made to make staff aware of on call radiologists who can provide advice 'out of hours'.

Staff told us:

- *“I am extremely happy within my workplace and although we have busy and stressful moments and days, I am always supported by colleagues and management.”*

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.

