

# Inspection Summary Report

Ward B5 and Ward T5, University Hospital of  
Wales, Cardiff and Vale University Health  
Board

Inspection date: 07 and 08 March 2023

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



Patients provided very positive feedback about the care and treatment provided to them on both Ward B5 and Ward T5.

We found staff treated patients with respect and kindness and patients appeared to be well cared for. Information for patients and their carers was available, however, we saw little evidence of this being made available in the Welsh language.

Generally, we saw arrangements were in place to provide patients with safe and effective care. We found good arrangements were in place to prevent patients from developing pressure and tissue damage and to prevent falls. However, we found improvements were needed around some aspects of care such as medicines management and infection prevention and control.

A suitable management structure was in place and clear lines of reporting and accountability were described and demonstrated. Staff feedback was generally positive regarding their immediate 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 inspection at the University Hospital of Wales, Cardiff and Vale University Health Board on 07 and 08 March 2023. The health board was provided with a 24 hour notice period owing to the nature of the wards with the intention to allow time for COVID safe arrangements to be put in place for the inspection.

The following hospital wards were reviewed during this inspection:

- Ward B5 - 27 beds providing care for patients with acute or chronic renal disease
- Ward T5 - 20 beds providing care for patients having kidney transplants and for patients having pancreas transplants.

Our team, for the inspection comprised of three HIW Senior Healthcare Inspectors, two Clinical Peer Reviewers and one Patient Experience Reviewers. 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

Patients provided very positive feedback about the care and treatment provided to them.

We found staff treated patients with respect and kindness and overall made efforts to protect their privacy and dignity when providing care.

While we saw information for patients was available, this was not displayed in a way that made it easy to see. There were limited communication aids available on the ward. In addition, we saw little evidence of an 'Active Offer'.

Patients appeared well cared for and we found staff responded promptly to patients' requests for assistance.

The health board had an up-to-date complaints procedure which was in keeping with Putting Things Right.

## Where the service could improve

- The health board must take suitable action to review the provision of communication aids on both wards
- The health board must take suitable action to promote the 'Active Offer'
- The health board must take suitable action to review the review the information available on the wards and how this may be displayed more clearly.

## What we found this service did well

- We saw many examples of staff treating patients with respect and kindness
- We found patients' pain was well managed
- We found staff responded promptly to patients' requests for assistance.

**Patients told us:**

*“(B5) I have no complaints I think they work to become a good team on any shift.”*

*“(B5) ...the staff are always informative patient and kind.”*

*“(T5) Upsetting time for me but the staff cheered me up when I was down.”*

*“(T5) All staff are excellent including cleaners, dinner ladies etc. knowledgeable, friendly and caring.”*

*“(T5) Every single staff member I have spent time with has been outstanding - never rushed me - I've never felt a burden and I cannot praise them enough.”*

**We asked what could be done to improve the service. Patients told us:**

*“(B5) TV available for each patient.”*

*“(B5) Have a treatment plan in place and can be adjusted as continuous care.”*

*“(T5) Headphones and remotes for TVs. More servicing of tech equipment. More checks on ward temperature.”*

*“(T5) Am not keen on the doctor rotation system, I would prefer one on one.”*

*“(T5) Waiting lists need to be shorter.”*

# Delivery of Safe and Effective Care



## Overall Summary

We found the hospital and the wards were accessible. However, both wards were cluttered with equipment, and we identified estates related issues that needed to be addressed.

We found good arrangements were in place to prevent patients from developing pressure and tissue damage and to prevent patient falls. We also found good arrangements were in place to meet the nutritional and hydration needs of patients.

Generally, arrangements were in place to provide patients with safe and effective care. However, we found improvements were needed, some of which required the health board to submit an immediate improvement plan to HIW describing the action taken to address these. These related to medicines management, waste management and the handling of infected/soiled linen.

## Where the service could improve

Immediate assurances:

- We found some medicines used on Ward T5 were not securely stored and not managed safely
- We found clinical waste generated by Ward B5 and infected/soiled linen from Ward T5 was not stored safely whilst waiting to be collected for disposal.

In addition to the above immediate assurances, this is what we recommend the service can improve:

- The health board must review the storage provision on both wards and take action to ensure it is sufficient
- The health board must take suitable action to address the outstanding Estates issues on both wards
- The health board must take suitable action to promote staff compliance with its infection control policies and procedures
- The health board must take suitable action to reassure staff when they report concerns, these will be addressed as appropriate
- The health board must take suitable action to ensure staff handle patient information in a way that protects patient confidentiality.

## What we found this service did well

- We found good arrangements were in place to prevent patients on the ward from developing pressure and tissue damage, to prevent patient falls and to meet the nutritional and hydration needs of patients
- We saw a well-attended multi-disciplinary team (MDT) meeting which was effectively managed
- Staff we spoke with demonstrated a good awareness of safeguarding procedures.

# Quality of Management and Leadership



## Overall Summary

A suitable management structure was in place and clear lines of reporting and accountability were described and demonstrated.

Senior staff described a system of audit to monitor the quality and safety of services provided on the wards. Given some of our findings the health board needs to consider whether the quality and safety monitoring arrangements on both wards need to be strengthened.

Staff responses were generally positive regarding their immediate and senior managers.

The health board had a comprehensive mandatory training programme, and generally staff training compliance was good. However, we identified poor compliance with mandatory resuscitation training and safe moving and handling training.

In addition, compliance with staff appraisals needed to be improved.

## Where the service could improve

Immediate assurances:

- We identified poor compliance with mandatory resuscitation training and safe moving and handling training, which meant we were not assured there were a sufficient number of staff who had the required up to date skills.

In addition to the above immediate assurances, this is what we recommend the service can improve:

- The health board must review the quality and safety monitoring arrangements to ensure they are strengthened where needed
- The health board must take suitable action to improve compliance with conducting staff appraisals.



## What we found this service did well

- The majority of staff made positive comments about their immediate and senior managers
- The majority of staff told us they would recommend their organisation as a place to work.
- Generally, compliance with staff training was good for many topics.

### Staff told us:

*“It has been a refreshing experience to work in this department in the last year after ... years of working in the NHS. Culture being developed is extremely positive, always opportunities for continuous improvement.”*

*“The ward is a great environment and we’re very supported. Conscious efforts are made even when the skill mix isn’t great on a given shift - we pull together and make things work.”*

*“Staff morale horrendous at the moment. Never known it so bad. Between the fight over pay, increasing workload and staff shortages it is not a good job to have.”*

*“Really enjoy working for this directorate. I feel I have been supported in my progression...”*

### We asked what could be done to improve the service. Staff told us:

*“I feel more staff on the floor, 6 ... instead of 4 health care support workers, or 1 more nurse would help provide safer dialysis. It will also help provide more time for nurses to effectively communicate and work with other teams to improve care and make discharge planning run more smoothly...[and] allow the ward staff time to be able to mentally be able to accept and implement service improvements and changes on the ward to make the ward a better environment for both patients and staff to be in.”*

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

