

Inspection Summary Report

Abertillery Group Practice, Aneurin Bevan
University Health Board

Inspection date: 12 June 2023

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

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Overall, we found that Abertillery Group Practice worked hard to provide a caring and professional service to patients in a friendly and helpful manner. Processes were in place to assure the privacy and dignity of the patient were always upheld.

There was level access to the practice allowing wheelchair users or those with mobility issues to access the facilities easily. Over half of the patients completing the HIW questionnaire were frustrated at access to appointments.

The team were dedicated, hardworking and committed to providing patients with safe and effective care in an environment that was clean, tidy and free from visible hazards. The practice had very good leadership and clear lines of accountability. The staff team worked very well together. Staff had access to appropriate training opportunities to fulfil their professional obligations.

We did identify a small number of issues in relation to the storage of medication, expired medical items and equipment checks.

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 announced inspection of Abertillery Group Practice, Aneurin Bevan University Health Board on 12 June 2023.

Our team for the inspection comprised of two HIW Healthcare Inspectors, two clinical peer reviewers 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 Abertillery Group Practice to be committed to providing a positive experience for their patients. We observed patients being greeted in a friendly, professional and courteous manner by staff who strived to meet their individual needs. We found there were processes in place to assure the privacy and dignity of the patient was always upheld. We also saw evidence that trained chaperones were available if required.

The overall environment was clean and tidy. There was level access to the practice allowing wheelchair users or those with mobility issues to access the facilities easily. The waiting room was spacious, and the treatment areas were all situated on the ground floor.

The practice had a good supply of health promotion material available, much of which was bilingual. Patients could also access this information digitally.

Arrangements were in place for patients who wished to communicate through the medium of Welsh, however we recommended that staff wear 'Iaith Gwaith' badges to advertise this further. We were advised that where a language other than English or Welsh was required, every effort would be made to facilitate this.

We found over half of the patients completing the HIW questionnaire were frustrated at access to appointments.

Where the service could improve

- Access to appointments
- Welsh speaking staff to be provided with 'Iaith Gwaith' badges.

What we found this service did well

- Patients were treated in a caring and friendly manner within surgeries that preserved their dignity
- Access to written and digital health promotion materials
- Good facilities for patients with disabilities to access to the practice.

Patients told us:

“The difficulty in getting appointments has prevented me from attempting to phone for my blood results. Each time I rang I was given a different answer e.g. nurse is on leave, the GP needs a review with you or the nurse needs a review with you. I gave up trying.”

“Impossible to get appointment, by 8.15 all gone, only emergencies left, then you have to prove it’s an emergency, always a locum doctor who hasn’t read my notes and end up spending the time going through everything again, told on phone one subject per appointment, can’t book double appointment, it’s too many patients now it’s been merged with another doctors, care is slipping i’ve been with the practice my entire life, i’ve never thought more about a change in surgeries “

“Awful service!!! I need to be on the phone at 8am to get an appointment (more often than not the appointments have gone by the time they get to you on the phone). Very Bad if you haven’t got a phone eg. Elderly people as you definitely won’t get an appointment any other way. We the patience should have the choice of being able to book an appointment at any time of the day within surgery opening hours. And leave ringing at 8 in the morning for emergency appointments only. Non-emergency should be able to book appointments when needed.“

“Waited seven days to see nurse for bloods and ECG after seeing doctor, could not breath no treatment given near on 3 weeks before results and next appointment with doctor, next time will go to A&E.”

“Thoroughly disillusioned with GP surgery problems. I feel as if I am a nuisance asking for an appointment. I dread to phone for an appointment this isn’t right to have to feel this way. It needs to change and go back to how it used to be when you could book an appointment without all the hassle.”

Delivery of Safe and Effective Care



Overall Summary

Overall, we found the team at Abertillery Group Practice were dedicated, hardworking and committed to providing patients with safe and effective care in an environment that was clean, tidy and free from visible hazards. All treatment rooms were of a good size and were well equipped.

Risk assessments were being undertaken regularly and there was evidence of appropriate policies and procedures.

Patient medical records that we reviewed were found to be clear and easy to navigate, however some improvements were required with appropriate read coding and completion of records by locums.

Whilst areas of good practice were seen, we did identify a small number of issues in relation to the storage of medication, expired medical items and equipment checks. These issues were dealt with under HIW's Immediate Assurance process.

Immediate assurances:

- Inappropriate storage of medication
- Expired items present within some clinical areas and the emergency equipment bag
- Comprehensive checklist required for the medications and equipment in the emergency bag.

Where the service could improve

- Managers to ensure all staff are aware of their roles and responsibilities
- Ensure a consistent approach to record keeping
- Ensure staff complete the level of safeguarding training relevant to their role.

What we found this service did well

- Adherence to cold chain storage procedures
- Policies and procedures in place and current
- Good compliance with IPC guidelines and requirements.

Patients told us:

“Would like to ring any time of the practice hours and make an appointment”

“I am elderly and I need time to get ready, can't just rush for an appointment this isn't considered when booking appointment”

“Should be open Saturdays”

“It would be easier to book appointments on a different day instead of ringing between 8am and 9am for same day appointments”

Access it is the problem due to travelling to work when the phone lines are open for appointments and then having to leave work early in order to secure an appointment.



Quality of Management and Leadership

Overall Summary

We found the practice had very good leadership and clear lines of accountability. The staff team worked very well together and were committed to providing a high standard of care for their patients. Staff had access to appropriate training opportunities to fulfil their professional obligations. They were encouraged and supported to undertake further relevant training to develop their careers.

There was evidence of a clear recruitment and induction process, followed by regular supervision and annual appraisals. Our review of staff mandatory training compliance found this to be good overall with some gaps present.

All staff meetings did not occur due to contracted changes with opening hours, however important information was being shared to all. We recommended the development of a formal process for team meetings that were minuted and disseminated accordingly.

Where the service could improve

- Formalise a process for team meetings to include all staff
- Implement a process to display outcomes of patient feedback that influenced improvements made at the practice.

What we found this service did well

- Robust management structure in place at the practice
- Regular appraisals taking place for most staff
- Good access to training to allow for continued professional development.

Staff told us:

“Very good working environment with approachable and friendly staff who handle the external pressures of the demand very well. “

“All work hard with the resources we have.”

“The clinical room could do with a new floor as it is loose and uneven in places. We are all working to our best given the amount of staff that we have within our practice.”

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.

