

Inspection Summary Report

St David's Independent Hospital, Mental Health
Care Limited

Inspection date: 19,20 and 21 June 2023

Publication date: 21 September 2023



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

Digital ISBN 978-1-83504-534-3
© Crown copyright 2023



Significant improvements had been made since our last inspection in 2019. There were well- defined systems and processes in place at the hospital to ensure that the hospital focussed on continually improving its services.

We found a dedicated staff team that were committed to providing a high standard of care to patients.

We observed staff interacting with patients respectfully throughout the inspection. Patients we spoke to told us they were receiving good care.

Staff were positive about the support and leadership they received, and staff described a positive culture around reporting and learning from incidents.

However, some improvements are required in relation to mandatory training compliance.

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 independent mental health inspection at St David's Independent Hospital, on 19, 20 and 21 June 2023.

Our team for the inspection comprised of two HIW Healthcare Inspectors, three 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

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

- Replace worn furniture in the lounge room and upstairs corridor
- Update the 'You said we did' notice board.

What we found this service did well

- Staff interacted and engaged with patients respectfully
- Good team working and motivated staff
- Good activities programme for patients.

Patients told us:

Patients provided us with the following comments:

“More communication around change”

Delivery of Safe and Effective Care



Overall Summary

There were established processes and audits in place to manage risk, health and safety and infection control. This enabled staff to continue to provide safe and clinically effective care. However, some improvements are required in relation to updating policies and compliance with mandatory training.

Excellent standard of care planning which reflected the domains of the Welsh Measure. Care plans were well detailed, individualised, and reflected a wide range of MDT involvement and there was clear and documented evidence of patient involvement.

Where the service could improve

- Upstairs corridor requires re-painting.

What we found this service did well

- Good standard of care planning
- Safe and effective medication management
- Comprehensive and detailed Positive Behavioural Support Plans.

Patients told us:

Patients provided us with the following comments:

“I would like to see my care plan”.

Quality of Management and Leadership



Overall Summary

We observed a committed staff team who had a good understanding of the needs of the patients at the hospital. There was dedicated and passionate leadership displayed by the hospital manager and deputy manager. However, some improvements are required in updating policies and compliance with mandatory training.

We found an effective governance structure in place in terms of regular audit activities and meetings to discuss incidents, complaints and issues related to patient care.

Significant improvements had been made since our last inspection in 2019. These improvements related to minimising the use of agency staff, a more robust induction package was in place, and staff were auditing and completing observation levels in accordance with guidelines.

We found a friendly, professional, and kind staff team who demonstrated a commitment to providing high quality care to patients.

Where the service could improve

- Mandatory training compliance
- Review and update policies.

What we found this service did well

- Recruitment and retention of staff
- Good induction process in place for new staff
- Strong leadership provided to staff by the hospital manager and deputy manager.

Staff told us:

Staff provided us with the following comments:

Staff told us that they enjoyed working at the setting and all staff said they worked well together and felt supported by the hospital management team.

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.

