

Inspection Summary Report

Pengorof Surgery, Powys Teaching Health Board

Inspection date: 26 July 2023

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

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Patients, in the main, told us that they were happy with the service they received from Pengorof Surgery. We observed professional and courteous interactions between staff and patients throughout the inspection. The practice was physically accessible for all and there were good processes in place for the triage of patients.

The practice demonstrated that patients received safe and effective care according to their needs. The environment itself was visibly clean and there were good mechanisms in place for medicines management, infection control and in keeping up to date with clinical guidelines.

We identified some areas which required strengthening in relation to staff immunisation and aspects of record keeping.

The practice was well organised, with appropriate structure in place to deliver its services to patients. There was evidence of good training and education for some staff groups and we saw examples of positively scored audit activities. Although, we recommended the practice formalises its approach to audit and quality improvement.

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 at Pengorof Surgery, part of the Ystragynlais Group Practice, Powys Teaching Health Board on 26 July 2023.

Our team for the inspection comprised of two HIW Senior Healthcare Inspectors, a general practice (GP) peer reviewer and a practice manager peer reviewer. The inspection was led by a HIW Senior Healthcare Inspector.

During the inspection we invited patients or their carers to complete a questionnaire to tell us about their experience of using the service. A total of 28 were completed. We also spoke to staff working at the service during our inspection. Feedback and some of the comments we received appear throughout the report.

Where present, quotes in this publication may have been translated from their original language.

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 observed professional and courteous interactions between staff and patients throughout the inspection. The practice was physically accessible for all and there were good processes in place for the triage of patients. Overall, the patient feedback provided to us through our HIW questionnaire was positive.

The practice should ensure that aspects of language and communication requirements are strengthened to further promote the patient experience.

Where the service could improve

- The practice must ensure that verbal consent for intimate examinations and offer of a chaperone is always recorded
- The practice should ensure that they are familiar with and implement provisions of the Welsh language 'Active Offer'
- The practice should ensure that language and communication needs are routinely recorded on patient medical records to ensure needs are met responsively.

What we found this service did well

- There was plentiful health promotion on display, which was linked to regular clinics to support patient wellbeing
- Patient feedback provided to the HIW questionnaire was overall positive
- There was a well organised system for home and home care visits.



Before our inspection we invited the practice to hand out HIW questionnaires to patients to obtain their views on the service provided at the practice. We received 26 completed questionnaires. Responses were mainly positive across all areas. Most respondents who answered rated the service as very good (12/24) or good (10/24).

Patients told us:

"Always very helpful doctors, nurses and receptionists"

"Very excellent GP, I am pleased with the service they provided"

We asked what could be done to improve the service. Comments included the following:

"To be told about latest way we can use facilities available i.e. not expect us to be able to access technical information."

Delivery of Safe and Effective Care



Overall Summary

There was a breadth of processes in place to help ensure patients received safe and effective care according to their level of need. The environment was visibly clean and there were good mechanisms in place for medicines management, infection prevention and control and keeping up to date with clinical guidelines.

The practice should ensure that staff immunisation records are maintained to fully promote staff wellbeing and, whilst record keeping was maintained to an overall good standard, some aspects could be further strengthened.

Where the service could improve

- The practice must ensure that it maintains a record and review log of staff immunisations.
- The practice must ensure that these aspects of record keeping are strengthened.

What we found this service did well

- The environment was visibly clean and well organised in all areas
- There were good medicine management processes, including checks of medical emergency equipment
- There were good mechanisms in place to update staff on the latest clinical guidelines



Quality of Management and Leadership

Overall Summary

We found a well organised and structured service, with a good delegation of responsibilities for clinical staff. There was evidence of good training and development opportunities amongst some staff groups and appraisals were completed for all staff to a good standard.

Whilst we saw examples of positive audit activities, the practice should ensure that a local audit plan is created based on clinical and non-clinical priorities of the practice.

Where the service could improve

- The practice should create a formal, local audit plan based on clinical and non-clinical audit priorities of the practice.

What we found this service did well

- There was good delegation of duties and responsibilities, particularly to GP staff
- Patient complaints were responded to in a comprehensive manner
- There was a good clinical training provision at the practice, with a good retention of staff upon completion of training.

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.

