Inspection Summary Report

Morris Ward, Wrexham Maelor Hospital, Betsi Cadwaladr University Health Board Inspection date: 12 and 13 September 2023

Publication date: 14 December 2023



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

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We found the provision of care on Morris ward to be safe and effective with staff attending to patients in a calm and reassuring manner.

There were comprehensive policies and procedures in place to support the safe and effective delivery of care.

There was a multidisciplinary approach to the provision of care with good communication between staff.

Most of the patients and relatives spoken with during the inspection commented positively on the care and treatment provided. However, two patients told us that they were not always involved in making decisions about their care and that care was not always provided in a sensitive and timely way. One patient told us that they were not always treated with dignity and respect.

There was good management and leadership on the ward with staff, in general, commenting positively on the support that they received from the management team.

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 <u>website</u>.

Healthcare Inspectorate Wales (HIW) completed an unannounced inspection of Morris Ward, Wrexham Maelor Hospital, Betsi Cadwaladr University Health Board on 12 and 13 September 2023.

Our team, for the inspection comprised of two HIW Healthcare Inspectors, two clinical peer reviewers and one patient experience reviewer. 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 <u>website</u>.



Quality of Patient Experience



Overall Summary

We found the quality of patient experience to be generally good. The majority of patients and their relatives spoken with during the inspection expressed satisfaction with the care and treatment received. Patients told us that staff were kind and caring. We observed good interactions between staff and patients, with staff, generally, supporting patients in a dignified and respectful manner. We saw staff attending to patients in a calm and reassuring manner. However, two patients and their relatives told us that they were not always involved in discussions around care planning and discharge arrangements and that care was not always provided in a sensitive and timely way. One patient told us that they were not always treated with dignity and respect.

Where the service could improve

- Ensure that assessment and care planning is consistent and reflective of the care provided and that supporting documentation, such as dietary and fluid intake charts and catheter care records, are accurately maintained
- Family involvement in the planning and provision of care
- Ensure that staff treat patients with dignity and respect at all times
- Ensure that staff respond to patients in a timely way
- Provision of lounge or quiet room on the ward for patients and relatives to use
- Review the provision of bathroom facilities on the ward
- Continue to engage with the local authority with a view to improving the availability of suitable social care provision in order to facilitate timely patient discharge.
- Promote the use of Welsh on the ward.

What we found this service did well

- Good interactions between staff and patients
- Food provision

Delivery of Safe and Effective Care



Overall Summary

We found the provision of care on Morris ward to be safe and effective and the staff team were committed to providing patients with compassionate, safe and effective care.

Suitable equipment was available and being used to help prevent patients developing pressure sores and to prevent patient falls. The ward was clean and tidy, and arrangements were in place to reduce cross infection. There were formal medication management processes in place.

Patient care needs had been assessed by staff and staff monitored patients to promote their wellbeing and safety. However, we found that documentation did not always reflect the care provided. We also found that fluid balance charts and catheter care documentation were not being completed consistently.

Where the service could improve

- Some aspects of risk management
- Some aspects of care documentation
- Deprivation of Liberty Safeguards (DoLS) assessments not always documented
- Consider the use of red trays to identify those patents who required assistance with eating and drinking and provide specialist equipment, such as plates and cutlery, to promote and maintain patient independence
- Repair or replace the damaged chairs within the corridor outside the ward entrance.

What we found this service did well

- Provision of person-centred care
- Risk management
- Multidisciplinary working
- Provision of activities
- Dementia support worker
- Dementia cafe
- Medication management
- Infection prevention and control.

Quality of Management and Leadership



Overall Summary

We found good management and leadership on the ward, with staff, in general, commenting positively on the support that they received from the management team.

Most staff members told us that they were generally happy in their work and that an open and supportive culture existed.

Where the service could improve

- Some aspects of staff training to include Duty of Candour training
- Move to electronic records management system.

What we found this service did well

- Good support and oversight by ward manager
- Good auditing and reporting processes.

Staff told us:

"Good teamwork and staff go above and beyond to care for our patients and families. The tea rooms has played a huge role in this too. The benefits are priceless."

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.

