

Inspection Summary Report

Epynt and Y Bannau Wards, Brecon War Memorial Hospital - Powys Teaching Health Board

Inspection date: 26 and 27 September 2023

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

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The quality of patient experience was good on both wards and patients and their relatives spoken with during the inspection expressed satisfaction with the care and treatment provided.

The care provided on both wards was person centred and of good quality.

Staff on both wards were committed to providing patients with compassionate, safe and effective care. However, we found that improvements were required in relation to some aspects of infection prevention control, medication management and record keeping.

There was good management on both wards with staff commenting positively on the support that they received from the management team. However, we found that improvement was required around staff supervision and some elements of staff training

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 inspection at Brecon War Memorial Hospital, Powys Teaching Health Board on 26 and 27 September 2023. The following hospital wards were reviewed during this inspection:

- Epynt ward - 15 beds - GP and Consultant led - providing specialist rehabilitation services and is the stroke rehabilitation centre for south Powys
- Y Bannau ward - 15 beds - GP led - providing general medical and palliative care services.

Our team, for the inspection comprised of three HIW Healthcare Inspectors, four clinical peer reviewers and one patient experience reviewer (who spent time speaking with patients on both wards). 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 the quality of patient experience to be good on both wards. 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 supporting patients in a dignified and respectful manner. We saw staff attending to patients in a calm and reassuring manner. However, we found some aspect of the environment on both wards that required improvement.

Where the service could improve

- Provide information on how to raise a concern or make a complaint and replace the information relating to the Community Health Council with information relating to Llais
- Refurbish the palliative care facilities on both wards to make them less clinical in appearance and more comfortable for patients and relatives
- Develop the outside garden space for use by patients and visitors on Y Bannau ward
- Repair the emergency call bell on Y Bannau ward and the call bell in the bathroom on Epynt ward
- Provide additional aids to support individuals with dementia e.g clocks, calendars etc
- Provide additional stroke rehabilitation chairs on Epynt ward
- Explore the use of alternative areas for storage on both wards and the charging of medical equipment on Epynt ward.

What we found this service did well

- Good interactions between staff and patients
- Food provision

Patients told us:

“Thumbs up for the staff.”

“Staff outstanding at all levels.”

“Staff have encouraged me to be as independent as I can.”

Delivery of Safe and Effective Care



Overall Summary

We found the provision of care on both wards to be generally safe and effective and the staff team were committed to providing patients with compassionate, safe and effective care. However, we found that improvement was required in relation to aspects of infection control, medication management and record keeping.

Suitable equipment was available and being used to help prevent patients developing pressure sores and to prevent patient falls. The wards were 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.

Where the service could improve

- Some aspects of medication management
- Some aspects of infection prevention and control
- Some aspects of record keeping and auditing of care documentation
- Review the timings of MDT meetings to ensure that GPs are able to attend
- Ensure that the DOLS process is robust and in line with the pathway.

What we found this service did well

- Provision of person-centred care
- Risk management
- Multidisciplinary working.

Patients told us:

“Every single person involved in running this hospital from cleaning staff to nursing have been kind, respectful, helpful and need that respect back. They work under stress most days due to staff shortage. Keep giving them the pay they deserve.”

Quality of Management and Leadership



Overall Summary

We found good management and leadership on both wards, with staff commenting positively on the support that they received from the management team. However, we found that improvement was needed around staff supervision and some elements of staff training.

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 mandatory training, sepsis and Duty of Candour training
- Move to electronic records management system
- Ensure that regular staff meetings are conducted on Y Bannau ward
- Ensure that staff have regular appraisals
- Ensure that staff are aware of how to access policies and procedures on the intranet.

What we found this service did well

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

Staff told us:

“Need further training on Trac and ESR. Need a formal band 7 induction programme.”

“Crib sheet, or training around external services for discharge planning.”

“On Y Bannau, the nurse call system has broken down over recent weeks. A temporary solution is in place however the ward no longer has an emergency call bell. This potentially places patients and staff at risk in event of an emergency.”

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.

