

Inspection Summary Report

St Non & St Caradog, Canolfan Bro Cerwyn,
Withybush Hospital, Hywel Dda University
Health Board

Inspection date: 16 - 18 October 2023

Publication date: 18 January 2024



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

Digital ISBN 978-1-83577-451-9
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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.

Patient care plans reflected individual needs and risks and were being maintained to a good standard.

Suitable protocols were in place to manage risk, health and safety and infection control.

The statutory documentation we saw verified that the patients were legally detained.

Staff were positive about the support and leadership they received.

However, some improvements are required in relation to mandatory training compliance and a review around staffing vacancies and safe staffing levels should take place.

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 Withybush Hospital, Bro Cerwyn, Hywel Dda University Health Board on 16, 17 and 18 October 2023. The following hospital wards were reviewed during this inspection:

- St Caradog - Adult acute admissions mental health
- St Non - Older persons mental health.

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. Staff demonstrated a caring, kind, and compassionate attitude towards patients.

There was a range of suitable activities at the hospital and within the community for patients to access.

The range of information at the hospital could be improved for patients and families.

Where the service could improve

- Patient gluten free menus need to be reviewed and improved
- Information displayed on wards for patients.

- **What we found this service did well**

Staff interacted and engaged with patients respectfully

- Good team working and motivated staff
- Activities and groups for patients provided by occupational therapy team
- Patients spoke highly of staff and told us that they were treated well.

Patients provided us with the following comments:

"Well looked after', the nurses are a good team who do everything they can to help me".

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Delivery of Safe and Effective Care



Overall Summary

Whilst the overall physical environment on both wards was maintained to a good standard, we identified some improvements.

We found that staff were completing clinical processes and documentation as required.

There were established processes and audits in place to manage risk, infection control, and health and safety. This enabled staff to continue to provide safe and clinically effective care. However, some improvements are required in relation to making the outdoor areas a pleasant and safe place for patients to use.

The health board also need to engage with the staffing group around use of personal alarms and how staff can be supported in feeling safe whilst working in a remote area.

Where the service could improve

- COSHH equipment is stored correctly
- Maintenance of the hospital grounds
- Staff safety and use of personal alarms
- Compliance with fridge temperatures on St Non ward.

What we found this service did well

- Safe and effective medicine management.
- De-escalation skills of staff when managing patient behaviours.

Patients told us:

Patients provided us with the following comments:

"Everyone is' kind here and not just to me but to others as well'. 'I feel safe'.

Quality of Management and Leadership



Overall Summary

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

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

However, improvements are required in staffing numbers to ensure that staff feel safe and are meeting the demands of the patient groups.

Where the service could improve

- Completion rates of Immediate Life Support and mandatory training on both wards
- Staffing numbers on both wards.

What we found this service did well

- Strong leadership provided to staff by the ward managers
- Motivated and patient focussed team.
- Resilient and supportive staffing group.

Staff told us:

Staff provided us with the following comments:

“Staff team are very patient focussed and support the patients. Management supports the staff and that’s the culture the ward manager breeds”.

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.

