

Inspection Summary Report

Diagnostic Imaging Department, University
Hospital of Wales, Cardiff and Vale University
Health Board

Inspection date: 14 and 15 November 2023

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

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Compliance with the Ionising Radiation (Medical Exposure) Regulations (IR(ME)R) 2017 was good. There had been a significant improvement in the structure, content and consistency of IR(ME)R documentation.

There were effective arrangements were in place to provide patients with safe and effective care. Efforts were also seen to ensure that patients' privacy was protected.

Patient responses in the questionnaire were positive across all areas, with all who answered rating the service as 'very good' or 'good'. Feedback from staff was generally positive with some negative responses and comments from staff.

Staff were able to describe the knowledge, skills and training to undertake their roles and scope of practice. Staff training records, competencies, entitlement and scope of practice were clearly documented.

There were some minor issues that needed to be addressed.

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 Ionising Radiation (Medical Exposure) Regulations inspection of the Diagnostic Imaging Department at the University Hospital of Wales (UHW), Cardiff and Vale University Health Board on 14 and 15 November 2023. During our inspection we looked at how the department complied with the Regulations and met the Health and Care Quality Standards.

Our team for the inspection comprised of two HIW Senior Healthcare Inspectors, one HIW Healthcare Inspector and two Senior Clinical Diagnostic Officers from the Medical Exposures Group (MEG) of the UK Health Security Agency (UKHSA), who acted in an advisory capacity. 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

Staff were seen speaking to patients in a polite, friendly and professional manner, showing dignity and respect to the patients. Efforts were also seen to ensure that patients' privacy was protected.

Patients would be informed about the waiting times when they arrived if there was a delay, during our inspection patients were seen to be dealt with promptly with no delays. Information was displayed in reception for the benefit of the patients on their journey through the department.

The department were participating in Project SEARCH, a charity that helps young adults with a learning disability or autistic spectrum disorder (ASD) find paid employment through internships and work experience.

What we found this service did well

- Ensuring that patients' privacy and dignity was protected
- No significant waiting times noted for those patients waiting within the department for their appointments on the day of inspection
- Displaying relevant posters relating to the patient journey.

Patients told us:

“The Primary Care stage of the NHS is struggling and after witnessing two critical incidents with neighbours (strokes) where an ambulance was not available for nine hours (!) I am fearful that in similar circumstances I may not be helped either. At my age (79) this has created a sense of fear and anxiety that the system is broken and can no longer be relied upon.

“I appreciate staff and economic factors influence availability of specialist staff and equipment.”

“The nurse doing the procedure was particularly pleasant and empathetic, able to insert the odd amusing comment so as to put me at ease. An excellent experience.”

“Excellent”

“I was pleased to see integration of learning disabled / autistic staff on the unit. This needs to be the normal not the occasional.”

Delivery of Safe and Effective Care



Overall Summary

There was good compliance with the Ionising Radiation (Medical Exposure) Regulations (IR(ME)R) 2017. The employer had written procedures and protocols in place as required under IR(ME)R. There had been a significant improvement from previous inspections in the structure, content and consistency of IR(ME)R documentation.

We also found effective arrangements were in place to provide patients with safe and effective care. This included arrangements to promote effective infection prevention and control and decontamination within the department.

Staff we spoke to were aware of the health board's policies and procedures in relation to safeguarding. Staff could describe the actions they would take should they have any concern or following an incident.

There were some minor issues that needed to be addressed.

Where the service could improve

- Introduce a standard template for audits including who was responsible for the audit on an audit schedule
- Ensure that the estates works are completed in a timely manner
- Including the interventional radiologists from other health boards needing to be added to the entitlement matrix.

What we found this service did well

- The employer's procedures were well written
- Clear entitlement process, showing good lines of accountability
- Staff aware of what to do in the event of an incident or concern.



Quality of Management and Leadership

Overall Summary

The Chief Executive of the health board was the designated employer under IR(ME)R and clear lines of delegation and responsibilities were described and demonstrated.

Staff we spoke with described the knowledge, skills and training required to undertake their respective roles and scope of practice within the department. Staff training records, competencies, entitlement and scope of practice were clearly documented and linked with the appropriate equipment training records.

Whilst feedback from staff was generally positive, there were some negative responses and comments from staff.

The department's compliance with the health board's value-based appraisal system needed to be improved.

Where the service could improve

- Increase staff compliance with the value-based appraisal.

What we found this service did well

- Positive management and governance
- Good competency and mandatory training compliance
- Shared learning from incidents with staff.

Staff told us:

{Need a} New patient bay

I feel extremely support. I have received help during a difficult period in my life and without the support and help of the managers I would have been lost. I am very grateful.

There is regulary inadequate supplies of clean scrubs available for staff to wear in theatres. There are issues finding mop heads and/or handles on a regular basis to appropriately clean floors.

I feel drained and that there isn't anyone to talk to about it as it can just get brushed away. This is a UHB problem too many mangers and not enough people on the floor.

Although it is a busy department there are excellent training opportunities.

Patients are rushed through the department. There's not enough time to clean the equipment or give good patient care because you know you probably have 5 people waiting. The department feels chaotic and staff are stressed which then reflects onto patient care.

Great place to work! Good support from management.

I find the department an extremely supportive and positive place to work. Senior management are excellent at signposting to employee wellbeing services and I find them non-judgmental and supportive. There is a culture of continuous service improvement and junior staff are encouraged to be a proactive part of this.

New online systems have made the workload extremely hard and difficult to understand. The workload is also highly demanding however, they are working towards solutions to bring on more staff eg in CT

I feel like there's lots of support available.

A member of staff recently applied for a higher banded role and was advised that the application did not meet the criteria to be considered for interview as did not have the relevant qualification even thou the application said that relevant suitable experience would be acceptable.

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.

