

# Inspection Summary Report

Brynheulog Ward, Montgomery County  
Infirmary, Powys Teaching Health Board  
Inspection date: 21 and 22 November 2023  
Publication date: 22 February 2024



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

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The quality of patient experience was good on Brynheulog ward. Patients and their relatives told us they were very happy with the care and treatment provided.

The care provided was person centred, and focused on the needs of the individual patients. The care was good quality, and staff 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 and medication management.

There was good management on the ward with staff commenting positively on the support that they received from the ward manager. There was also a culture of continuous improvement, to improve services for patients. However, we found that improvement was required with regards to 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 of Brynheulog ward, Montgomery County Infirmary, Powys Teaching Health Board on 21 and 22 November 2023.

Brynheulog Ward is a 15 bed ward providing general medical, rehabilitation and palliative care services. This includes specialist stroke and neuro rehabilitation for patients across North Powys.

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 [website](#).



# Quality of Patient Experience



## Overall Summary

We found the quality of patient experience to be good. Patients and their relatives spoken with during the inspection told us they were very happy 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.

## Where the service could improve

- Improve signage to the ward
- Install an electronic door to ward
- Storage of equipment.

## What we found this service did well

- Good interactions between staff and patients with staff attending to patient needs in a discreet and professional manner
- Patients were treated with dignity, respect, and compassion
- Patients were attended to promptly when they needed assistance.

**Patients told us:**

*“Staff go the extra mile to ensure that patients are advised about changes at home and supported in communicating with loved ones - empathetic care and positive attitude.”*

*“Always clean, staff very attentive.”*

*“More places like Newtown Hospital please.”*

# Delivery of Safe and Effective Care



## Overall Summary

We found the provision of care on Brynheulog 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 generally clean and tidy, and arrangements were in place to reduce cross infection.

Patients' 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 infection prevention and control
- Implement a system of staff prompts for pressure area care and continence management
- Ensure that evaluation records are reflective of the care given
- Ensure that a second nurse signs to confirm syringe driver checks
- Some aspects of medication management
- Ensure social worker involvement in MDT
- Ensure that DOLS are reviewed prior to expiry of authorisation.

## What we found this service did well

- Provision of person centred and individualised care
- Care plans and supporting documentation easy to navigate
- 1 to 1 care provision and supporting documentation.



# Quality of Management and Leadership

## Overall Summary

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

There was an ethos of continual improvement, and a commitment to deliver a high standard of care to patients.

Staff told us that they were happy in their work and that an open and supportive culture existed.

## Where the service could improve

- Ensure that all staff complete mandatory training.

## What we found this service did well

- Good support and oversight by the ward manager
- Good auditing and reporting processes
- Management of concerns and incidents.

## 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.

