



## Y PWYLLGOR ANSAWDD, DIOGELWCH A PHROFIAD QUALITY, SAFETY AND EXPERIENCE COMMITTEE

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| <b>DYDDIAD Y CYFARFOD:<br/>DATE OF MEETING:</b>  | 11 June 2024   |
| <b>TEITL YR ADRODDIAD:<br/>TITLE OF REPORT:</b>  | Withybush Creche Care Inspectorate Wales (CIW)<br>Inspection Report and Update |
| <b>CYFARWYDDWR ARWEINIOL:<br/>LEAD DIRECTOR:</b> | Andrew Carruthers, Executive Director of Operations                            |
| <b>SWYDDOG ADRODD:<br/>REPORTING OFFICER:</b>    | Rob Elliott, Director of Estates, Facilities and Capital<br>Management         |

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Er Sicrwydd/For Assurance

### ADRODDIAD SCAA SBAR REPORT

#### Sefyllfa / Situation

The purpose of this paper is to update the Quality, Safety, and Experience Committee following the Care Inspectorate Wales (CIW) inspection of the creche at Withybush General Hospital on 26 March 2024 and 12 October 2023 and the subsequent action plans developed to address the recommendations of CIW.

#### Cefndir / Background

CIW are the independent regulator of social care and childcare in Wales. CIW register, inspect and take action to improve the quality and safety of services for the wellbeing of the people in Wales. As part of their work they undertake inspections of childcare facilities including creche facilities annually and make recommendations if any elements of their assessment do not meet [The Child Minding and Day Care \(Wales\) Regulations \(2010\)](#) or the [National Minimum Standards for Regulated Childcare for children up to the age of 12 years](#).

Whilst there are creche facilities on the Glangwili General Hospital (GGH) and Prince Phillip Hospital (PPH) sites, these are both privately operated creche facilities. On these site Health Board Hospital staff benefit from discounts as part of a lease arrangement between the Health Board and the private operator.

At WGH however the creche has been established historically as an NHS facility where the Health Board is the employer for all staff involved and provides the appropriate facilities etc. for the creche to operate safely and effectively.

#### Asesiad / Assessment

The full CIW inspection report can be found:

- [Inspection Report Withybush Hospital Creche October 2023](#)
- [Inspection Report Withybush Hospital Creche March 2024](#)

The Health Board has established a Control Group chaired by the Executive Director of Nursing to:

- Gain assurance on the implementation of the improvement actions agreed to address the recommendations made by the Care Inspectorate Wales (CIW) following their inspections of the Creche at WGH in October 2023 and March 2024.
- Ensure arrangements are in place for the management of future CIW inspection visits, receipt of reports and process for ensuring timely response to CIW.
- Ensure appropriate communication is established (as a result of the inspection reports) with parents using the Creche and staff working in the Creche.
- Ensure management of safeguarding arrangements

In addition, a Scrutiny Group, a sub-group of the Control Group, chaired by the Assistant Director of Nursing, has been established to ensure that the proposed improvement actions are taken within agreed timescales and that there is evidence that the actions have been fully implemented.

Attached at Appendix 1 and Appendix 2 are the full action plans to address the recommendations made by CIW. These have been updated with actions completed up to 30 May 2024.

Key issues contained within the action plans are as follows:

- Three actions relating to the absence of a Responsible Individual (RI). The application for RI is progressing. The requirement for Enhanced DBS and medical check required have been completed. The RI applicant now has an interview with CIW on 6 June. Other options for RI support have been explored with Pembrokeshire Local Authority and the Creche provider located on the Glangwili Hospital site, but confirmation has been received indicating that the RI cannot cover 2 separate organisations.
- The Control Group has been assured that the Supervision of crèche staff processes are now in place.
- The Control Group have been advised that Appraisal process (currently Amber) is now being progressed to achieve an 85% target by 2 of July 2024.
- A recommendation relating to Staffing forecast tools/staff ratios/annual leave cover have now been resolved. To meet the recommendation for staff ratios the Control Group made the decision to cease the school taxi service. Notice letters were issued parents/guardians on the 15 May. The Head of Facilities had responded to all queries/concerns individually (4 received). The Control Group was assured that a contingency arrangement was available with the provision of after school clubs. This taxi service ceased on the 22 May 2024.
- Despite the limited response from parents and guardians the following is likely to be the impact on Crèche numbers:
  - Five children who previously used the after school provision have now withdrawn from the Creche (3.30-5pm). All of these children are from Health Board staff.

- In addition, a further five children who used the day care provision have also been withdrawn this month. The waiting list is being urgently reviewed to determine the impact of the above and how this will affect the financial standing of the Creche. This will be considered at Scrutiny and Control Groups when this is fully known so that appropriate decisions can be made on service sustainability. The potential financial impact issue will also be added into the Risk Assessment process.
- The waiting list for children wishing to join the Creche facility appears to cover the majority of the vacancies created above but this does need to be urgently reviewed as noted.
- In line with Minimal Standards 15.4(DC), suitable contingency arrangements are now in place to cover emergencies and unexpected staff absences, and planned absences of the creche manager.
- The Control Group are reviewing the risk statement, controls, and remaining gaps and will consider the future business model for the service in the short, medium and long term.

#### Argymhelliad / Recommendation

The Quality, Safety and Experience Committee is asked to receive assurance that processes are in place to ensure monitoring of timely implementation of actions to address the recommendations of CIW and that consideration is being given to the management of future CIW inspections.

| <b>Amcanion: (rhaid cwblhau)</b><br><b>Objectives: (must be completed)</b>                                 |  |
|--|--|
| Committee ToR Reference:<br>Cyfeirnod Cylch Gorchwyl y Pwyllgor:   | 3.16 Provide assurance on the delivery of action plans arising from investigation reports and the work of external regulators.   |
| Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol:<br>Datix Risk Register Reference and Score:                 |  |
| Parthau Ansawdd:<br>Domains of Quality<br><a href="#">Quality and Engagement Act (sharepoint.com)</a>      | 7. All apply   |
| Galluogwyr Ansawdd:<br>Enablers of Quality:<br><a href="#">Quality and Engagement Act (sharepoint.com)</a> | 1. Leadership<br>2. Culture and valuing people   |
| Amcanion Strategol y BIP:<br>UHB Strategic Objectives:   | 1. Putting people at the heart of everything we do<br>2. Working together to be the best we can be<br>3. Striving to deliver and develop excellent services<br>5. Safe sustainable, accessible and kind care |

|   |  |
|---|--|
| Amcanion Llesiant BIP:<br>UHB Well-being Objectives:<br><a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022</a> | 2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS |
|---|--|

| <b>Gwybodaeth Ychwanegol:<br/>Further Information:</b>  |  |
|---|--|
| Ar sail tystiolaeth:<br>Evidence Base:  | <ul style="list-style-type: none"> <li>• <a href="#">The Child Minding and Day Care (Wales) Regulations (2010)</a></li> <li>• <a href="#">National Minimum Standards for Regulated Childcare for children up to the age of 12 years</a></li> <li>• <a href="#">Inspection Report Withybush Hospital Creche October 2023</a></li> <li>• <a href="#">Inspection Report Withybush Hospital Creche March 2024</a></li> </ul> |
| Rhestr Termau:<br>Glossary of Terms:  |  |
| Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Ansawdd, Diogelwch a Phrofiod:<br>Parties / Committees consulted prior to Quality, Safety and Experience Committee: |  |

| <b>Effaith: (rhaid cwblhau)<br/>Impact: (must be completed)</b> |  |
|---|--|
| <b>Ariannol / Gwerth am Arian:<br/>Financial / Service:</b>     | Contained within the body of the report. |
| <b>Ansawdd / Gofal Claf:<br/>Quality / Patient Care:</b>        | Not applicable                           |
| <b>Gweithlu:<br/>Workforce:</b>                                 | Contained within the body of the report. |
| <b>Risg:<br/>Risk:</b>  | Contained within the body of the report. |
| <b>Cyfreithiol:<br/>Legal:</b>                                  | Contained within the body of the report. |
| <b>Enw Da:<br/>Reputational:</b>                                | Not applicable                           |
| <b>Gyfrinachedd:<br/>Privacy:</b>                               | Not applicable                           |
| <b>Cydraddoldeb:<br/>Equality:</b>                              | Not applicable                           |

# Care Inspectorate Wales: Inspection Report Withybush Hospital Creche October 2023 - Action plan

Inspection origin: Care Inspectorate Wales (CIW)

Date of inspection: 12/10/2023

Inspection lead: Cathie Steele

Inspection team: Claire Lohse, Jill Richards, Rob Elliott

Date action plan generated: 31st May 2024

## Recommendations & actions


| Ref  |   | Recommendation   | Priority | Lead           | Site                       | Service                                    | Regulation             | Clinical priority | Theme | Actions | Status             |
|--|---|--|----------|----------------|----------------------------|--|------------------------|-------------------|-------|---------|--------------------|
| Care Inspectorate Wales (CIW)/ 2023/13 8/MD1 |  | Leaders must make proper provision to ensure that staffing arrangements enable staff to supervise children appropriately and ensure records always accurately reflect all staff caring for children at any one time. | Must do  | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Reg 20</a> | NO                | Safe  | 2/2     | All Fully Complete |

| Ref  | Action  | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status           |
|--|---|----------------------------|--|-----------------|-------------|------------|---------------------------|
| Care Inspectorate Wales (CIW)/ 2023/13 8/MD1/1 | To develop a staffing forecast tool to ensure that staff and child ratio are maintained and monitored | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 02/05/2024  | 03/05/2024 | Fully complete (Approved) |

| Comments/Updates  | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|---|-------|----------|-----------------------------|-------------------------------|
| <p>This links with Other origin/2024/139/MD4/1 (inspection March2024)<br/>02/05/2024 - a database has been developed which will be monitored by the responsible officer and hotel service managers on a daily basis.</p> <p>08/05/2024 A room sheet documenting the children on site is in place and a staffing list is also in place. Further work is required to provide assurance from the Creche Manager rather than re-assurance that levels are maintained.<br/>Daily visits by Soft FM Manager being undertaken.</p> <p>15/05/2024 A ratio forecast tool is in place and support to the Creche Manager for completion of this tool is being provided by an admin assistant within the Directorate. The forecast tool is available a week in advance.<br/>Evidence to be provided to demonstrate action is complete.</p> <p>20/05/2024 See evidence for Care Inspectorate Wales (CIW)/2024/139/MD4/1</p> <p>29/05/24 twice daily visits to replace daily visits to confirm staff child ratios are being maintained. If any deficiencies are identified additional support will be provided by Soft FM Officer or Manager. x5 Bank staff have been appointed and planned to start end June 24.</p> | None  | None     | 1                           |                               |


| Ref  | Action   | Site                       | Service                                    | Responsibility   | Date raised | Due date   | Progress status           |
|--|--|----------------------------|--|------------------|-------------|------------|---------------------------|
| Care Inspectorate Wales (CIW)/2023/138/MD1/2 | To explore options to ensure that ratios are maintained during school collection times and to put in place remedial action | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Jill Richards | 02/05/2024  | 31/05/2024 | Fully complete (Approved) |

| Comments/Updates  | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|---|-------|----------|-----------------------------|-------------------------------|
| <p>This links with action Other origin/2024/139/MD4/2 (inspection March2024)</p> <p>02/05/2024 - whilst the options are being explored, there will be close monitoring of the ratios during the school collection period to ensure that ratios requirements are not breached.</p> <p>15/05/2024 - parents have been given notice that the school pick up service will stop from 22/05/2024. Evidence to be provided to demonstrate action is complete.</p> <p>24/05/24 as school pick up service ceased, the staffing ratios are unaffected now. Action complete.</p> | None  | None     | 0                           |                               |

| Ref  |   | Recommendation   | Priority | Lead           | Site                       | Service                                    | Regulation             | Clinical priority | Theme       | Actions | Status      |
|--|---|--|----------|----------------|----------------------------|--|------------------------|-------------------|-------------|---------|-------------|
| Care Inspectorate Wales (CIW)/ 2023/13 8/MD2 |  | Ensure Care Inspectorate Wales is informed of any significant changes to the service | Must do  | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Reg 31</a> | NO                | Information | 1/1     | In progress |


| Ref  | Action  | Site                       | Service                                    | Responsibility   | Date raised | Due date   | Progress status    |
|--|---|----------------------------|--|------------------|-------------|------------|--------------------|
| Care Inspectorate Wales (CIW)/ 2023/13 8/MD2/1 | To develop standard operating procedure for reporting of significant changes and events to Care Inspectorate Wales which meets the requirement of Regulation 31 | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Jill Richards | 16/05/2024  | 31/07/2024 | Partially complete |

| Comments/Updates  | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|---|-------|----------|-----------------------------|-------------------------------|
| <p>15/05/2024 Work is underway to develop a suite of control documents for the creche. The control documents must meet the organisations corporate standards and be approved through agreed routes.</p> <p>29/05/24 meeting with Christine James, Policy Administrator arranged for 30.05.24 to progress development of control documentation</p> <p>30/05/24 - agreed with CJ that overarching policy document required which would link to other key HB and AW policies. CJ to advise governance and ratification pathway. Reporting of significant changes to CIW to be incorporated in policy document. For now, reg 31 can be satisfied by emailing the lead inspector as was demonstrated by the recent change to school taxi pick up service (evidence attached)</p> | None  | None     | 1                           |                               |

| Ref  |   | Recommendation   | Priority | Lead           | Site                       | Service                                    | Regulation             | Clinical priority | Theme       | Actions | Status      |
|--|---|--|----------|----------------|----------------------------|--|------------------------|-------------------|-------------|---------|-------------|
| Care Inspectorate Wales (CIW)/ 2023/13 8/MD3 |  | Ensure the statement of purpose is regularly reviewed and reflects a current and accurate reflection of the service provided | Must do  | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Rge 15</a> | NO                | Information | 1/1     | In progress |

| Ref  | Action   | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status |
|--|--|----------------------------|--|-----------------|-------------|------------|-----------------|
| Care Inspectorate Wales (CIW)/ 2023/13 8/MD3/1 | To complete the online self assessment of service statement through the CIW portal | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 16/05/2024  | 31/07/2024 | In progress     |

| Comments/Updates   | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|--|-------|----------|-----------------------------|-------------------------------|
| <p>This links with Care Inspectorate Wales (CIW)/2024/139/MD5/1</p> <p>03/05/2024 This is an online form which requires CIW log in and therefore until Responsible Officer fully appointed this cannot be completed</p> <p>29/05/24 - Interview for RI status scheduled for 06/06/24 after which application will be made for access to self assessment tool</p> | None  | None     | 0                           |                               |

| Ref  |   | Recommendation  | Priority | Lead           | Site                       | Service                                    | Regulation             | Clinical priority | Theme     | Actions | Status      |
|--|---|---|----------|----------------|----------------------------|--|------------------------|-------------------|-----------|---------|-------------|
| Care Inspectorate Wales (CIW)/2023/138/MD4 |  | Ensure all staff working at the nursery receive regular supervisions and appraisals | Must do  | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Reg 29</a> | NO                | Workforce | 3/3     | In progress |

| Ref  | Action   | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status           |
|--|--|----------------------------|--|-----------------|-------------|------------|---------------------------|
| Care Inspectorate Wales (CIW)/2023/138/MD4/1 | To remind all staff of their responsibility to have supervision every 12 weeks as a minimum and to develop a calendar of regular supervision for each member of staff within the creche. | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 16/05/2024  | 17/05/2024 | Fully complete (Approved) |

| Comments/Updates   | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|--|-------|----------|-----------------------------|-------------------------------|
| <p>This links with Care Inspectorate Wales (CIW)/2024/139/MD2/1</p> <p>02/05/2024 all staff within the creche have had a supervision session since the inspection.</p> <p>15/05/2024 Evidence to be provided to demonstrate action is complete.</p> <p>16/05/2024 Table of names and dates of supervision attached as evidence confirming all supervisions are in date</p> <p>20/05/2024 Review of evidence undertaken. A signature sheet that each staff signs with the manager would provide additional assurance.</p> <p>29/05/2024 Evidence now attached to demonstrate compliance</p> | None  | None     | 3                           |                               |

| Ref  | Action  | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status           |
|--|---|----------------------------|--|-----------------|-------------|------------|---------------------------|
| Care Inspectorate Wales (CIW)/2023/138/MD4/2 | To develop a programme of quarterly audit to check that supervision has been undertaken to meet the requirements of the regulations | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 16/05/2024  | 17/05/2024 | Fully complete (Approved) |

| Comments/Updates  | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|---|-------|----------|-----------------------------|-------------------------------|
| <p>This links with Care Inspectorate Wales (CIW)/2024/139/MD2/2</p> <p>02/05/2024 Fortnightly meetings have been arranged between the Responsible Officer and the Creche Manager. Supervision and appraisal compliance and the audit findings will be discussed in these meetings.</p> <p>15/05/2024 Evidence to be provided to demonstrate action is complete.</p> | None  | None     | 1                           |                               |



| Ref  | Action  | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status |
|--|---|----------------------------|--|-----------------|-------------|------------|-----------------|
| Care Inspectorate Wales (CIW)/2023/138/MD4/3 | To undertake appraisals for all staff within the creche and ensure that the Health Board target of 85% as a minimum is achieve. | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 16/05/2024  | 02/07/2024 | In progress     |

| Comments/Updates  | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|---|-------|----------|-----------------------------|-------------------------------|
| This links with Care Inspectorate Wales (CIW)/2024/139/MD2/3 Creche Team Leader attend PADR training on the 31st May. 29/05/2024 - PADR record and forward schedule attached. Current compliance 37.5%. Predicted over 85% within target due date 30/05/24 trajectory demonstrates completion of target by timescale. | None  | None     | 1                           |                               |

| Ref  |   | Recommendation   | Priority | Lead           | Site                       | Service                                    | Regulation             | Clinical priority | Theme     | Actions | Status             |
|--|---|--|----------|----------------|----------------------------|--|------------------------|-------------------|-----------|---------|--------------------|
| Care Inspectorate Wales (CIW)/2023/138/MD5 |  | Ensure all suitability checks are completed on all staff and files are always available for inspection | Must do  | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Reg 28</a> | NO                | Workforce | 1/1     | All Fully Complete |



| Ref   | Action   | Site                       | Service                                    | Responsibility   | Date raised | Due date   | Progress status             |                               |
|---|--|----------------------------|--|------------------|-------------|------------|-----------------------------|-------------------------------|
| Care Inspectorate Wales (CIW)/2023/138/MD5/1  | Working with recruitment and retention colleagues, to have a clear list of suitability checks to be undertaken prior to commencement of employment which will be kept on the individual employment file. | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Jill Richards | 16/05/2024  | 31/05/2024 | Fully complete (Approved)   |                               |
| Comments/Updates  |  |                            |  |                  | Risks       | Barriers   | Number of uploaded evidence | Reject reason (if applicable) |
| <p>This links with Care Inspectorate Wales (CIW)/2024/139/MD3/1 02/05/2024 suitability checks have been agreed on an all Wales basis and checks are provided by NHS Wales Shared Services. However work is required to ensure that these meet the requirements within the regulation and national standards</p> <p>29/05/2024 - Regulation 28 requires the following</p> <p>Sch 1, Part 2, 32 Confirmation of suitable integrity and good character to look after children (references)</p> <p>Sch 1, Part 2, 33 Qualification, skills and experience necessary to look after children (evidence of qualification)</p> <p>Sch 1, Part 2, 34 Physically and mentally fit to look after children (Occ Health approval)</p> <p>Sch 1, Part 2, 35 Enhanced criminal record certificate (DBS)</p> <p>These checks are in line with HB policy pre-employment checks</p> <p>One current member of staff became a creche assistant from another role and HB policy is that in this instance additional references are not required. There is a reference on file but not in relation to a childcare role. CIW inspector is aware and has not requested that we acquire a further reference.</p> |  |                            |  |                  | None        | None       | 0                           |                               |



| Ref  |  | Recommendation  | Priority  | Lead           | Site                       | Service                                    | Regulation                 | Clinical priority | Theme | Actions | Status      |
|--|--|---|-----------|----------------|----------------------------|--|----------------------------|-------------------|-------|---------|-------------|
| Care Inspectorate Wales (CIW)/ 2023/13 8/SD6 |  | Ensure all incidents, accidents and pre-existing injuries are signed by staff and parents | Should do | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Standard 5</a> | NO                | Safe  | 1/1     | In progress |

| Ref  | Action   | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status |
|--|--|----------------------------|--|-----------------|-------------|------------|-----------------|
| Care Inspectorate Wales (CIW)/ 2023/13 8/SD6/1 | To update the process that is currently in place to ensure it aligns best practice | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 03/05/2024  | 31/05/2024 | In progress     |

| Comments/Updates   | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|--|-------|----------|-----------------------------|-------------------------------|
| <p>29/05/24 - advice has been sought from LA regarding type of documentation required to be maintained and advice received including the stipulation that accident records should show a body map. Also guidance from HB H&amp;S colleagues sought. Their advice is to utilise an 'off the shelf' accident book and also an individual record sheet per child. On course to be completed by deadline.</p> <p>30/05/24 means of recording in place at present, however parents / guardians do not countersign at present. New replacement book on order, but will not arrive by deadline, aiming to complete by w/c 03/06/24.</p> | None  | None     | 0                           |                               |



| Ref  |  | Recommendation  | Priority  | Lead           | Site                       | Service                                    | Regulation                  | Clinical priority | Theme | Actions | Status             |
|--|--|---|-----------|----------------|----------------------------|--|-----------------------------|-------------------|-------|---------|--------------------|
| Care Inspectorate Wales (CIW)/ 2023/13 8/SD7 |  | Ensure there is a record of previous medication dosages | Should do | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Standard 11</a> | NO                | Safe  | 1/1     | All Fully Complete |

| Ref  | Action   | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status           |
|--|--|----------------------------|--|-----------------|-------------|------------|---------------------------|
| Care Inspectorate Wales (CIW)/ 2023/13 8/SD7/1 | To update the process that is currently in place to ensure it aligns best practice | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 03/05/2024  | 31/05/2024 | Fully complete (Approved) |

| Comments/Updates  | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|---|-------|----------|-----------------------------|-------------------------------|
| 29/05/24 - Proposed RI has confirmed that these records are currently in place and up to date. Evidence cannot be attached as is child specific and would breach confidentiality<br>30/05/24 records currently in place and up to date. For completeness, a specific record book will be ordered and implemented. | None  | None     | 0                           |                               |



| Ref  |  | Recommendation   | Priority  | Lead           | Site                       | Service                                    | Regulation                 | Clinical priority | Theme           | Actions | Status      |
|--|--|--|-----------|----------------|----------------------------|--|----------------------------|-------------------|-----------------|---------|-------------|
| Care Inspectorate Wales (CIW)/2023/138/SD8 |  | Ensure that positive behaviour management strategies are developed | Should do | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Standard 9</a> | NO                | Person Centered | 2/2     | In progress |

| Ref  | Action  | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status |
|--|---|----------------------------|--|-----------------|-------------|------------|-----------------|
| Care Inspectorate Wales (CIW)/2023/138/SD8/1 | To review the positive behaviour management policy and ensure it reflect current best practice. | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 16/05/2024  | 30/06/2024 | In progress     |

| Comments/Updates  | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|---|-------|----------|-----------------------------|-------------------------------|
| <p>This links with Care Inspectorate Wales (CIW)/2024/139/SD7/1</p> <p>03/05/2024 The creche does have positive behaviour management policy in the prospectus. This will be reviewed</p> <p>15/05/2024 Work is underway to review the positive behaviour management policy and also bring it in line with Health Board corporate standards.</p> <p>29/05/2024 - Policy has been reviewed by OM and recommendations made</p> <p>29/05/2024 - JR to meet with Christine James to approve governance of documentation (30/05/24)</p> | None  | None     | 0                           |                               |



| Ref  | Action  | Site                       | Service                                    | Responsibility  | Date raised                 | Due date   | Progress status               |
|--|---|----------------------------|--|-----------------|-----------------------------|------------|-------------------------------|
| Care Inspectorate Wales (CIW)/2023/138/SD8/2                 | To ensure all staff have received and are following the updated positive behaviour policy (once approved) | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 16/05/2024                  | 31/07/2024 | In progress                   |
| Comments/Updates   |   |                            | Risks                                      | Barriers        | Number of uploaded evidence |            | Reject reason (if applicable) |
| This links with Care Inspectorate Wales (CIW)/2024/139/SD7/2 |   |                            | None                                       | None            | 0                           |            |                               |

| Ref  |  | Recommendation   | Priority  | Lead           | Site                       | Service                                    | Regulation                  | Clinical priority | Theme       | Actions | Status      |
|--|--|--|-----------|----------------|----------------------------|--|-----------------------------|-------------------|-------------|---------|-------------|
| Care Inspectorate Wales (CIW)/2023/138/SD9 |  | Create an operational plan which is regularly reviewed to reflect the current running of the setting | Should do | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Standard 14</a> | NO                | Information | 1/1     | In progress |



| Ref   | Action  | Site                       | Service                                    | Responsibility | Date raised | Due date   | Progress status             |                               |
|---|---|----------------------------|--|----------------|-------------|------------|-----------------------------|-------------------------------|
| Care Inspectorate Wales (CIW)/ 2023/13 8/SD9/1  | To create an operational plan which reflects current running of the creche and ensure that the operational plan meets the organisational corporate standards for control documents. | Withybush General Hospital | Estates, Facilities and Capital Management | Simon Chiffi   | 16/05/2024  | 28/06/2024 | Partially complete          |                               |
| Comments/Updates  |   |                            |  |                | Risks       | Barriers   | Number of uploaded evidence | Reject reason (if applicable) |
| 24/05/2024 Current Creche Prospectus has been reviewed but requires input and advice from Policy Team to address future corporate format. Current document attached as evidence<br>29/05/2024 JR to meet with CJ for advice re governance of document |   |                            |  |                | None        | None       | 1                           |                               |

| Ref   | Recommendation   | Priority  | Lead           | Site                       | Service                                    | Regulation                  | Clinical priority | Theme       | Actions | Status             |
|---|--|-----------|----------------|----------------------------|--|-----------------------------|-------------------|-------------|---------|--------------------|
| Care Inspectorate Wales (CIW)/ 2023/13 8/SD10 | Ensure maintenance checks records are available and kept on the premises | Should do | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Standard 22</a> | NO                | Information | 1/1     | All Fully Complete |

| Ref  | Action   | Site                       | Service                                    | Responsibility | Date raised | Due date                    | Progress status               |
|--|--|----------------------------|--|----------------|-------------|-----------------------------|-------------------------------|
| Care Inspectorate Wales (CIW)/2023/138/SD10/1  | To consider the mechanism for ensuring that evidence of annual / routine maintenance checks e.g. water, heating etc undertaken in the Creche are readily available to the CIW inspection team. | Withybush General Hospital | Estates, Facilities and Capital Management | Mr Simon Day   | 16/05/2024  | 31/05/2024                  | Fully complete (Approved)     |
| Comments/Updates   |  |                            |  | Risks          | Barriers    | Number of uploaded evidence | Reject reason (if applicable) |
| This links with Care Inspectorate Wales (CIW)/2024/139/SD8/3 15/05/2024 To include evidence of previous checks complete as evidence for this action. |  |                            |  | None           | None        | 7                           |                               |

| Ref   | Recommendation   | Priority  | Lead           | Site                       | Service                                    | Regulation                 | Clinical priority | Theme           | Actions | Status      |
|---|--|-----------|----------------|----------------------------|--|----------------------------|-------------------|-----------------|---------|-------------|
| Care Inspectorate Wales (CIW)/2023/138/SD12 | Ensure parents are fully informed about changes to the setting, children's progress, routines and practices. | Should do | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Standard 6</a> | NO                | Person Centered | 2/2     | In progress |

| Ref   | Action  | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status           |
|---|---|----------------------------|--|-----------------|-------------|------------|---------------------------|
| Care Inspectorate Wales (CIW)/2023/138/SD12/1 | To remind staff that the daily report must be completed | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 16/05/2024  | 16/05/2024 | Fully complete (Approved) |

| Comments/Updates   | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|--|-------|----------|-----------------------------|-------------------------------|
| <p>This links with Care Inspectorate Wales (CIW)/2024/139/SD9/1</p> <p>The prospectus states that each parent will receive a daily report.</p> <p>15/05/2024 Evidence to be provided to demonstrate action is complete.</p> <p>24/05/2024 Prospective RI has viewed evidence that reports to parents are being completed and has confirmed that in the under 2s room this has always been the case. All staff have been reminded of the importance of ensuring the reports are prepared and passed to parents. Notices have been placed on staff noticeboard</p> | None  | None     | 1                           |                               |

| Ref   | Action  | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status |
|---|---|----------------------------|--|-----------------|-------------|------------|-----------------|
| Care Inspectorate Wales (CIW)/2023/138/SD12/2 | To undertake weekly spot checks to ensure daily reports to parents are completed. They will continue weekly until there is evidence that practice is routine. | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 16/05/2024  | 28/06/2024 | In progress     |



| Comments/Updates   | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|--|-------|----------|-----------------------------|-------------------------------|
| This links with Care Inspectorate Wales (CIW)/2024/139/SD9/2 15/05/2024 Evidence to be provided to demonstrate action is complete. | None  | None     | 0                           |                               |

| Ref   | Recommendation  | Priority  | Lead           | Site                       | Service                                    | Regulation | Clinical priority | Theme     | Actions | Status      |
|---|---|-----------|----------------|----------------------------|--|------------|-------------------|-----------|---------|-------------|
| Care Inspectorate Wales (CIW)/2023/138/SD13 | Ensure staff responsible for handling food have appropriate food hygiene training | Should do | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management |            | NO                | Workforce | 1/1     | In progress |

| Ref   | Action   | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status |
|---|--|----------------------------|--|-----------------|-------------|------------|-----------------|
| Care Inspectorate Wales (CIW)/2023/138/SD13/1 | To undertake a check of staff training records to identify where training is required and put in place a training plan | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 16/05/2024  | 31/05/2024 | In progress     |

| Comments/Updates   | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|--|-------|----------|-----------------------------|-------------------------------|
| This links with Care Inspectorate Wales (CIW)/2024/139/SD12/1 30/05/24 This training is available as an online module and all creche staff have been provided with the link in line with the training plan | None  | None     | 0                           |                               |



# Care Inspectorate Wales: Inspection Report Withybush Hospital Creche March 2024 - Action plan

Inspection origin: Care Inspectorate Wales (CIW)


Date of inspection: 26/03/2024

Inspection lead: Cathie Steele

Inspection team: Claire Lohse, Jill Richards, Rob Elliott

Date action plan generated: 31st May 2024

## Recommendations & actions

| Ref  |   | Recommendation  | Priority | Lead           | Site                       | Service                                    | Regulation            | Clinical priority | Theme     | Actions | Status      |
|--|---|---|----------|----------------|----------------------------|--|-----------------------|-------------------|-----------|---------|-------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/MD1 |  | The provider must ensure they nominate suitable responsible individuals, in a timely manner, who have the knowledge and understanding of the childcare regulations and national minimum standards to meet the needs of children. The provider must ensure they are compliant with the regulations and ensure staff are able to provide care with sufficient resources to ensure children are safeguarded. | Must do  | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Reg 9</a> | NO                | Workforce | 2/2     | In progress |

| Ref  | Action  | Site                       | Service                                    | Responsibility | Date raised | Due date   | Progress status             |                               |
|--|---|----------------------------|--|----------------|-------------|------------|-----------------------------|-------------------------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/MD1/1   | To ensure that the relevant checks, including enhanced disclosure check, have been undertaken on and application made for the member of staff identified as being the Responsible Individual. | Withybush General Hospital | Estates, Facilities and Capital Management | Mr Peter Jones | 02/05/2024  | 31/05/2024 | Fully complete (Approved)   |                               |
| Comments/Updates   |   |                            |  |                | Risks       | Barriers   | Number of uploaded evidence | Reject reason (if applicable) |
| <p>02/05/2024 Disclosure check application submitted. Currently check in progress - stage 4. Awaiting outcome. Tracking number E0852140970<br/>- Application to be responsible individual is being prepared for submission.</p> <p>08/05/2024 Enhanced disclosure check is now completed<br/>- Responsible individual is completing application. Assistance will be sought from Local Authority Senior Child Care Development Officer in the application.</p> <p>15/05/2024 Responsible individual agreed to submit their application by 21/05/2024. Medical certificate from GP has been requested and will be collected next week.</p> |   |                            |  |                | None        | None       | 1                           |                               |



| Ref   | Action  | Site                       | Service                                    | Responsibility   | Date raised | Due date   | Progress status             |                               |
|---|---|----------------------------|--|------------------|-------------|------------|-----------------------------|-------------------------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/MD1/2  | To provide Responsible Individual with resources to ensure they have the knowledge and understanding of the childcare regulations and national minimum standards to meet the needs of children. This will include peer support through Local Authority. | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Jill Richards | 02/05/2024  | 30/06/2024 | In progress                 |                               |
| Comments/Updates  |   |                            |  |                  | Risks       | Barriers   | Number of uploaded evidence | Reject reason (if applicable) |
| <p>08/05/2024 Senior Child Care Development Officer in the Local Authority has been approached and has agreed to provide support to the Responsible Individual.</p> <p>21/05/2024 - Responsible Individual (RI) applicant had Teams communication with Senior Child Care Development Officer and received guidance and support for application. This was followed up with email communication</p> <p>23/05/2024 - RI applicant has confirmed she has access to National Minimum Standards and the Childminding and Day Care Regulations (Wales) 2010 and protected revision time discussed</p> <p>29/05/2024 - Confirmed date for RI interview as 06/06/2024. Revision time scheduled for 05/06/24 pm</p> |   |                            |  |                  | None        | None       | 0                           |                               |



| Ref  |   | Recommendation  | Priority | Lead           | Site                       | Service                                    | Regulation             | Clinical priority | Theme     | Actions | Status      |
|--|---|---|----------|----------------|----------------------------|--|------------------------|-------------------|-----------|---------|-------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/MD2 |  | The provider must ensure all staff working at the setting receive regular supervisions and appraisals | Must do  | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Reg 29</a> | NO                | Workforce | 3/3     | In progress |

| Ref  | Action   | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status           |
|--|--|----------------------------|--|-----------------|-------------|------------|---------------------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/MD2/1 | To remind all staff of their responsibility to have supervision every 12 weeks as a minimum and to develop a calendar of regular supervision for each member of staff within the creche. | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 02/05/2024  | 17/05/2024 | Fully complete (Approved) |

| Comments/Updates   | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|--|-------|----------|-----------------------------|-------------------------------|
| 02/05/2024 all staff within the creche have had a supervision session since the inspection.<br>15/05/2024 Evidence to be provided to demonstrate action is complete. | None  | None     | 3                           |                               |



| Ref  | Action  | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status           |
|--|---|----------------------------|--|-----------------|-------------|------------|---------------------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/MD2/2 | To develop a programme of quarterly audit to check that supervision has been undertaken to meet the requirements of the regulations | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 02/05/2024  | 17/05/2024 | Fully complete (Approved) |

| Comments/Updates   | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|--|-------|----------|-----------------------------|-------------------------------|
| 02/05/2024 Fortnightly meetings have been arranged between the Responsible Officer and the Creche Manager. Supervision and appraisal compliance and the audit findings will be discussed in these meetings.<br>15/05/2024 Evidence to be provided to demonstrate action is complete. | None  | None     | 1                           |                               |


| Ref  | Action  | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status |
|--|---|----------------------------|--|-----------------|-------------|------------|-----------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/MD2/3 | To undertake appraisals for all staff within the creche and ensure that the Health Board target of 85% as a minimum is achieve. | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 02/05/2024  | 02/07/2024 | In progress     |

| Comments/Updates   | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|--|-------|----------|-----------------------------|-------------------------------|
| <p>02/05/2024 Creche Manager will require support initially to undertake the appraisals until they have completed the Health Board training for appraisals and have confidence to undertake the appraisal to the required standard.</p> <p>15/05/2024 Creche Manager to complete appraisal training on 31/05/2024 and then be supported by senior staff in directorate with completing appraisals until Creche Manager is competent and confident in undertaking appraisals.</p> <p>29/05/2024 - PADR record and forward schedule attached. Current compliance 37.5%. Predicted over 85% within target due date</p> <p>30/05/24 trajectory demonstrates completion of target by timescale.</p> | None  | None     | 1                           |                               |

| Ref  |   | Recommendation  | Priority | Lead           | Site                       | Service                                    | Regulation             | Clinical priority | Theme     | Actions | Status             |
|--|---|---|----------|----------------|----------------------------|--|------------------------|-------------------|-----------|---------|--------------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/MD3 |  | The provider must ensure all suitability checks are completed on all staff before they start working at the setting and files are always available for inspection | Must do  | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Reg 28</a> | NO                | Workforce | 1/1     | All Fully Complete |

| Ref  | Action   | Site                       | Service                                    | Responsibility   | Date raised | Due date   | Progress status             |                               |
|--|--|----------------------------|--|------------------|-------------|------------|-----------------------------|-------------------------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/MD3/1   | Working with recruitment and retention colleagues, to have a clear list of suitability checks to be undertaken prior to commencement of employment which will be kept on the individual employment file. | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Jill Richards | 02/05/2024  | 31/05/2024 | Fully complete (Approved)   |                               |
| Comments/Updates   |  |                            |  |                  | Risks       | Barriers   | Number of uploaded evidence | Reject reason (if applicable) |
| <p>02/05/2024 suitability checks have been agreed on an all Wales basis and checks are provided by NHS Wales Shared Services. However work is required to ensure that these meet the requirements within the regulation and national standards</p> <p>24/05/2024 required checks as detailed in CM&amp;DC(W)Regs 2010 sch 1 Part 2 are references (32) Qualifications (33) health fitness (34) enh DBS (35). Internal applicants are not generally required to provide further references. This to be addressed with Resourcing Team colleagues for future appointments.</p> <p>29/05/2024 - Regulation 28 requires the following</p> <p>Sch 1, Part 2, 32 Confirmation of suitable integrity and good character to look after children (references)</p> <p>Sch 1, Part 2, 33 Qualification, skills and experience necessary to look after children (evidence of qualification)</p> <p>Sch 1, Part 2, 34 Physically and mentally fit to look after children (Occ Health approval)</p> <p>Sch 1, Part 2, 35 Enhanced criminal record certificate (DBS)</p> <p>These checks are in line with HB policy pre-employment checks</p> <p>One current member of staff became a creche assistant from another role and HB policy is that in this instance additional references are not required. There is a reference on file but not in relation to a childcare role. CIW inspector is aware and has not requested that we acquire a further reference.</p> |  |                            |  |                  | None        | None       | 0                           |                               |



| Ref  |   | Recommendation   | Priority | Lead           | Site                       | Service                                    | Regulation             | Clinical priority | Theme | Actions | Status             |
|--|---|--|----------|----------------|----------------------------|--|------------------------|-------------------|-------|---------|--------------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/MD4 |  | The provider must ensure there are adequate staffing arrangements in place at all times during the day to ensure staff supervise children appropriately, promote and make proper provision for the welfare of children and ensure records always accurately reflect all staff caring for children at any one time. | Must do  | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Reg 20</a> | NO                | Safe  | 2/2     | All Fully Complete |

| Ref  | Action  | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status           |
|--|---|----------------------------|--|-----------------|-------------|------------|---------------------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/MD4/1 | To develop a staffing forecast tool to ensure that staff and child ratio are maintained and monitored | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 02/05/2024  | 03/05/2024 | Fully complete (Approved) |



| Comments/Updates  | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|---|-------|----------|-----------------------------|-------------------------------|
| <p>02/05/2024 - a database has been developed which will be monitored by the responsible officer and hotel service managers on a daily basis.</p> <p>08/05/2024 A room sheet documenting the children on site is in place and a staffing list is also in place. Further work is required to provide assurance from the Creche Manager rather than re-assurance that levels are maintained.<br/>Daily visits by Soft FM Manager being undertaken.</p> <p>15/05/2024 A ratio forecast tool is in place and support to the Creche Manager for completion of this tool is being provided by an admin assistant within the Directorate. The forecast tool is available a week in advance. Evidence to be provided to demonstrate action is complete.</p> | None  | None     | 1                           |                               |

| Ref  | Action   | Site                       | Service                                    | Responsibility   | Date raised | Due date   | Progress status           |
|--|--|----------------------------|--|------------------|-------------|------------|---------------------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/MD4/2 | To explore options to ensure that ratios are maintained during school collection times and to put in place remedial action | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Jill Richards | 02/05/2024  | 31/05/2024 | Fully complete (Approved) |

| Comments/Updates   | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|--|-------|----------|-----------------------------|-------------------------------|
| <p>02/05/2024 - whilst the options are being explored, there will be close monitoring of the ratios during the school collection period to ensure that ratios requirements are not breached.</p> <p>15/05/2024 - parents have been given notice that the school pick up service will stop from 22/05/2024. Evidence to be provided to demonstrate action is complete.</p> <p>24/05/24 School pick up service ceased, no affect on staffing ratios.</p> | None  | None     | 0                           |                               |




| Ref  |   | Recommendation  | Priority | Lead           | Site                       | Service                                    | Regulation             | Clinical priority | Theme       | Actions | Status      |
|--|---|---|----------|----------------|----------------------------|--|------------------------|-------------------|-------------|---------|-------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/MD5 |  | The provider must ensure they complete the Self-Assessment of Service Statement | Must do  | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Reg 17</a> | NO                | Information | 1/1     | In progress |

| Ref  | Action   | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status |
|--|--|----------------------------|--|-----------------|-------------|------------|-----------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/MD5/1 | To complete the online self assessment of service statement through the CIW portal | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 03/05/2024  | 31/07/2024 | In progress     |

| Comments/Updates   | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|--|-------|----------|-----------------------------|-------------------------------|
| <p>03/05/2024 This is an online form which requires CIW long in and therefore until Responsible Officer fully appointed this cannot be completed.</p> <p>29/05/24 - Interview for RI status scheduled for 06/06/24 after which application will be made for access to self assessment tool</p> | None  | None     | 0                           |                               |



| Ref  |   | Recommendation   | Priority | Lead           | Site                       | Service                                    | Regulation             | Clinical priority | Theme       | Actions | Status      |
|--|---|--|----------|----------------|----------------------------|--|------------------------|-------------------|-------------|---------|-------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/MD6 |  | The provider must ensure they inform Care Inspectorate Wales of any significant changes to the service | Must do  | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Reg 31</a> | NO                | Information | 1/1     | In progress |

| Ref  | Action  | Site                       | Service                                    | Responsibility   | Date raised | Due date   | Progress status |
|--|---|----------------------------|--|------------------|-------------|------------|-----------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/MD6/1 | To develop standard operating procedure for reporting of significant changes and events to Care Inspectorate Wales which meets the requirement of Regulation 31 | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Jill Richards | 03/05/2024  | 31/07/2024 | In progress     |



| Comments/Updates  | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|---|-------|----------|-----------------------------|-------------------------------|
| <p>15/05/2024 Work is underway to develop a suite of control documents for the creche. The control documents must meet the organisations corporate standards and be approved through agreed routes.</p> <p>29/05/24 meeting with Christine James, Policy Administrator arranged for 30.05.24 to progress development of control documentation</p> <p>30/05/24 - agreed with CJ that overarching policy document required which would link to other key HB and AW policies. CJ to advise governance and ratification pathway. Reporting of significant changes to CIW to be incorporated in policy document. For now, reg 31 can be satisfied by emailing the lead inspector as was demonstrated by the recent change to school taxi pick up service (evidence attached)</p> | None  | None     | 1                           |                               |

| Ref  | Recommendation   | Priority  | Lead           | Site                       | Service                                    | Regulation                 | Clinical priority | Theme           | Actions | Status      |
|--|--|-----------|----------------|----------------------------|--|----------------------------|-------------------|-----------------|---------|-------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/SD7 | Ensure that positive behaviour management strategies are developed | Should do | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Standard 9</a> | NO                | Person Centered | 2/2     | In progress |

| Ref  | Action  | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status |
|--|---|----------------------------|--|-----------------|-------------|------------|-----------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/SD7/1 | To review the positive behaviour management policy and ensure it reflect current best practice. | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 03/05/2024  | 30/06/2024 | In progress     |



| Comments/Updates  | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|---|-------|----------|-----------------------------|-------------------------------|
| <p>03/05/2024 The creche does have positive behaviour management policy in the prospectus. This will be reviewed</p> <p>15/05/2024 Work is underway to review the positive behaviour management policy and also bring it in line with Health Board corporate standards.</p> <p>29/05/2024 - Policy has been reviewed by OM and recommendations made</p> <p>29/05/2024 - JR to meet with Christine James to approve governance of documentation (30/05/24)</p> | None  | None     | 0                           |                               |

| Ref  | Action  | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status |
|--|---|----------------------------|--|-----------------|-------------|------------|-----------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/SD7/2 | To ensure all staff have received and are following the updated positive behaviour policy (once approved) | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 03/05/2024  | 31/07/2024 | In progress     |

| Comments/Updates | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|------------------|-------|----------|-----------------------------|-------------------------------|
| None             | None  | None     | 0                           |                               |

| Ref  | Recommendation   | Priority  | Lead           | Site                       | Service                                    | Regulation                  | Clinical priority | Theme       | Actions | Status             |
|--|--|-----------|----------------|----------------------------|--|-----------------------------|-------------------|-------------|---------|--------------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/SD8 | Ensure maintenance checks records are available and kept on the premises | Should do | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Standard 22</a> | NO                | Information | 3/3     | All Fully Complete |



| Ref  | Action  | Site                       | Service                                    | Responsibility  | Date raised  | Due date        | Progress status                    |                                      |
|--|---|----------------------------|--|-----------------|--------------|-----------------|------------------------------------|--------------------------------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/SD8/1   | To ensure creche staff are aware of the mechanisms for reporting maintenance requirements and develop a process for monitoring completion of work | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 03/05/2024   | 30/05/2024      | Fully complete (Approved)          |                                      |
| <b>Comments/Updates</b>  |   |                            |  |                 | <b>Risks</b> | <b>Barriers</b> | <b>Number of uploaded evidence</b> | <b>Reject reason (if applicable)</b> |
| 15/05/2024 - A poster / flyer will be developed so that creche staff are aware of mechanisms for reporting maintenance work. |   |                            |  |                 | None         | None            | 1                                  |                                      |

| Ref   | Action   | Site                       | Service                                    | Responsibility  | Date raised  | Due date        | Progress status                    |                                      |
|---|--|----------------------------|--|-----------------|--------------|-----------------|------------------------------------|--------------------------------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/SD8/2  | To complete premise inspections using the Health Board's work place inspection form and repeat the inspection every six months | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 03/05/2024   | 30/05/2024      | Fully complete (Approved)          |                                      |
| <b>Comments/Updates</b>   |  |                            |  |                 | <b>Risks</b> | <b>Barriers</b> | <b>Number of uploaded evidence</b> | <b>Reject reason (if applicable)</b> |
| 30/05/24 Prospective RI has been booked on management training to enable her to be able to visually inspect the site. In meantime, Hotel Services team will undertake inspection checklist.<br>30/05/24 visual inspection made on 30/05/24. Checklist uploaded as evidence. |  |                            |  |                 | None         | None            | 1                                  |                                      |



| Ref   | Action   | Site                       | Service                                    | Responsibility | Date raised | Due date                    | Progress status               |
|---|--|----------------------------|--|----------------|-------------|-----------------------------|-------------------------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/SD8/3  | To consider the mechanism for ensuring that evidence of annual / routine maintenance checks e.g. water, heating etc undertaken in the Creche are readily available to the CIW inspection team. | Withybush General Hospital | Estates, Facilities and Capital Management | Mr Simon Day   | 16/05/2024  | 31/05/2024                  | Fully complete (Approved)     |
| Comments/Updates  |  |                            |  | Risks          | Barriers    | Number of uploaded evidence | Reject reason (if applicable) |
| 15/05/2024 To include evidence of previous checks complete as evidence for this action. |  |                            |  | None           | None        | 7                           |                               |

| Ref  | Recommendation   | Priority  | Lead           | Site                       | Service                                    | Regulation                 | Clinical priority | Theme           | Actions | Status      |
|--|--|-----------|----------------|----------------------------|--|----------------------------|-------------------|-----------------|---------|-------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/SD9 | Ensure parents are fully informed about changes to the setting, children's progress, routines and practices. | Should do | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Standard 6</a> | NO                | Person Centered | 2/2     | In progress |



| Ref  | Action  | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status           |
|--|---|----------------------------|--|-----------------|-------------|------------|---------------------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/SD9/1 | To remind staff that the daily report must be completed | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 03/05/2024  | 16/05/2024 | Fully complete (Approved) |

| Comments/Updates  | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|---|-------|----------|-----------------------------|-------------------------------|
| The prospectus states that each parent will receive a daily report.<br>15/05/2024 Evidence to be provided to demonstrate action is complete.<br>24/05/2024 RI has viewed evidence that reports to parents are being completed and has confirmed that in the under 2s room this has always been the case. All staff have been reminded of the importance of ensuring the reports are prepared and passed to parents. Notices have been placed on staff noticeboard | None  | None     | 1                           |                               |

| Ref  | Action  | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status |
|--|---|----------------------------|--|-----------------|-------------|------------|-----------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/SD9/2 | To undertake weekly spot checks to ensure daily reports to parents are completed. They will continue weekly until there is evidence that practice is routine. | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 03/05/2024  | 30/06/2024 | In progress     |

| Comments/Updates  | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|---|-------|----------|-----------------------------|-------------------------------|
| 15/05/2024 Evidence to be provided to demonstrate action is complete. | None  | None     | 0                           |                               |



| Ref   |  | Recommendation   | Priority  | Lead           | Site                       | Service                                    | Regulation                  | Clinical priority | Theme | Actions | Status             |
|---|--|--|-----------|----------------|----------------------------|--|-----------------------------|-------------------|-------|---------|--------------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/SD10 |  | Ensure all staff undertaking school runs have received paediatric first aid training | Should do | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Standard 10</a> | NO                | Safe  | 1/1     | All Fully Complete |

| Ref   | Action   | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status    |
|---|--|----------------------------|--|-----------------|-------------|------------|--------------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/SD10/1 | To undertake a check of staff training records to identify where training is required and put in place a training plan | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 03/05/2024  | 30/05/2024 | Unable to complete |

| Comments/Updates  | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|---|-------|----------|-----------------------------|-------------------------------|
| 15/05/2024 Evidence to be provided to demonstrate action is complete.<br>30/05/24 as school run has ceased 22/05/24, this action is therefore no longer required. All staff are trained in paediatric first aid in any event. | None  | None     | 0                           |                               |



| Ref   |  | Recommendation   | Priority  | Lead           | Site                       | Service                                    | Regulation                  | Clinical priority | Theme | Actions | Status      |
|---|--|--|-----------|----------------|----------------------------|--|-----------------------------|-------------------|-------|---------|-------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/SD11 |  | Ensure staff encourage all children to wash their hands before eating food | Should do | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management | <a href="#">Standard 10</a> | NO                | Safe  | 2/2     | In progress |

| Ref   | Action  | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status |
|---|---|----------------------------|--|-----------------|-------------|------------|-----------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/SD11/1 | Creche manager to issue reminder to all staff and undertake regular spot observational checks | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 03/05/2024  | 30/05/2024 | Overdue         |

| Comments/Updates  | Risks | Barriers | Number of uploaded evidence | Reject reason (if applicable) |
|---|-------|----------|-----------------------------|-------------------------------|
| Update 30/05/24 staff have been reminded regarding children washing hands before eating, spot observational audit scheduled, aiming for completion spot check audits by w/c 03/06/24. | None  | None     | 0                           |                               |



| Ref  | Action  | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status           |                             |                               |
|--|---|----------------------------|--|-----------------|-------------|------------|---------------------------|-----------------------------|-------------------------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/ SD11/2   | To identify creche staff to become hand hygiene champions | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 16/05/2024  | 14/06/2024 | Fully complete (Approved) |                             |                               |
| Comments/Updates   |   |                            |  |                 |             | Risks      | Barriers                  | Number of uploaded evidence | Reject reason (if applicable) |
| E.W and G.W. have volunteered to be hand hygiene champions for the setting. Gemma plans to adopt previous tools used during Covid - such as the handwashing song, posters, stickers, to be sourced by C.L. C.L to source dispensers that have an appeal to children. Dispensers arrived on site today 23/05/2024 and will be installed ASAP. |   |                            |  |                 |             | None       | None                      | 0                           |                               |

| Ref   | Recommendation  | Priority  | Lead           | Site                       | Service                                    | Regulation | Clinical priority | Theme | Actions | Status             |
|---|---|-----------|----------------|----------------------------|--|------------|-------------------|-------|---------|--------------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/SD12 | Ensure staff responsible for handling food have appropriate food hygiene training | Should do | Mr Rob Elliott | Withybush General Hospital | Estates, Facilities and Capital Management |            | NO                | Safe  | 1/1     | All Fully Complete |



| Ref   | Action   | Site                       | Service                                    | Responsibility  | Date raised | Due date   | Progress status             |                               |
|---|--|----------------------------|--|-----------------|-------------|------------|-----------------------------|-------------------------------|
| Care Inspectorate Wales (CIW)/ 2024/13 9/ SD12/1  | To undertake a check of staff training records to identify where training is required and put in place a training plan | Withybush General Hospital | Estates, Facilities and Capital Management | Ms Claire Lohse | 03/05/2024  | 31/05/2024 | Fully complete (Approved)   |                               |
| Comments/Updates  |  |                            |  |                 | Risks       | Barriers   | Number of uploaded evidence | Reject reason (if applicable) |
| Update 30/05/24 This training package is available as an online module and all creche staff have been provided with the link. |  |                            |  |                 | None        | None       | 2                           |                               |

