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NHS
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Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Ein cyf/Our ref: HD//886
Gofynnwch am/Please ask for: Claire Pickett
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Date: 21st December 2018

Springfield
Ysbyty Cyffredinol Llwynhelyg
Heol Abergwaun, Hwlfordd,
Sir Benfro, SA61 2PZ

Springfield
Withybush General Hospital
Fishguard Road, Haverfordwest
Pembrokeshire, SA61 2PZ

**Mr M Layton
H M Senior Coroner for the areas of Carmarthenshire and
Pembrokeshire
Coroner's Office
Town Hall
Hamilton Terrace
Milford Haven
Pembrokeshire
SA73 3JW**

Dear Mr Layton

Inquest touching upon the death of Mr Gerwyn Thomas

Further to the issue of a Regulation 28 report in respect of the above inquest, which was received by the Health Board on 6th November 2018 please see below the Health Board's response to each of your recommendations.

May I take this opportunity to express my sincere condolences to Mrs Thomas on the loss of her husband.

The matters of concern that you raised are as follows, with the Health Board's responses underneath:

1. The acute dietetic service lacks sufficient staff to respond to referrals in a timely way.

The dietetic service is actively working to address the staffing deficit in acute services via the following actions:

Swyddfeydd Corfforaethol, Adeilad Ystwyth,
Hafan Derwen, Parc Dewi Sant, Heol Ffynnon Job,
Caerfyrddin, Sir Gaerfyrddin, SA31 3BB

Corporate Offices, Ystwyth Building,
Hafan Derwen, St Davids Park, Job's Well Road,
Carmarthen, Carmarthenshire, SA31 3BB

Cadeirydd / Chair
Mrs Bernardine Rees OBE

Prif Weithredwr / Chief Executive
Mr Steve Moore

Bwrdd Iechyd Prifysgol Hywel Dda yw enw gweithredol Bwrdd Iechyd Lleol Prifysgol Hywel Dda
Hywel Dda University Health Board is the operational name of Hywel Dda University Local Health Board

Mae Bwrdd Iechyd Prifysgol Hywel Dda yn amgylchedd di-fwg Hywel Dda University Health Board operates a smoke free environment

- Pro-actively working to recruit to pending and existing acute dietetic vacancies to ensure the substantive service capacity is maintained. It has not been possible to recruit to vacancies in the acute team in recent months due to very low numbers of suitable applicants, therefore locum dietetic resource is being used while efforts to recruit substantive staff continue.
- During November and December it has not been possible to secure adequate locum support to cover existing acute service vacancies; this has necessitated contingency arrangements to ensure patients at the greatest risk are rapidly flagged to dietetics for prioritisation and an enhanced ward based nutritional care pathway has been initiated to reduce the risk of not having timely dietetic access.
- Recognising the lack of acute dietetic staffing, and with Executive approval, the service has attempted to 'over recruit' to increase acute dietetic staffing above establishment; unfortunately to date this has not led to an increase in staffing because of the low number of applicants as indicated above. Recruitment of dieticians is a recognised current challenge for Health Boards across Wales and services have recommended an increase in the number of commissioned training places.
- To address the staffing shortfall sustainably, dietetics have proposed an increase in acute dietetic staffing in the service submission to the Health Board intermediate plan, with an incremental increase in registered dieticians and unregistered dietetic support workers.

2. The use of the diagnostic tool to assess a patient's nutritional need, which nursing staff apply when a patient is admitted, requires training. When wrongly applied, this diagnostic tool will give an unreliable assessment. Training in the use of this diagnostic tool should be made mandatory for all nursing staff.

- In October 2018 the dietetic team initiated a programme of refresher training for Registered Nursing staff in Adult In-Patient locations regarding the current Nutrition Screening Tool which is used to screen a patient's risk of malnutrition. Additional training sessions have also been provided by the Dietetic team for ward nursing teams when requested.
- The NHS Wales Food Record Chart: All Wales E Learning programme is a mandated E-learning module. This was established to support the introduction of the All Wales Hospital Nutrition Care Pathway (of which nutrition risk screening is the first step) and the All Wales Food Chart.
- The Health Board will be asked to approve the adoption of a different Nutrition Screening Tool for Adult In-Patient services as part of the All Wales project to digitise nursing documentation in secondary care. The proposed tool has been submitted via the National Dietetic and

Nutritional Group as the recommended evidenced based tool. The new screening tool as a component of the wider documentation project aims to be ready for full implementation by November 2019.

- The preparation phase for implementing the new screening tool in Hywel Dda University Health Board will provide the opportunity to undertake a wide scale nutrition screening training for nurses within adult In-Patient areas. The proposed nutrition screening tool, as with the current tool, identifies a patient's malnutrition risk, patients screened at high risk require dietetic referral to enable a full nutritional assessment to be undertaken

3. When a treating doctor identifies a need for a patient to be referred to the acute dietetic service, nursing staff should act upon this referral and in circumstances where nursing staff believe that such a referral is unnecessary this should be discussed at a multi-disciplinary team meeting.

The Head of Nursing at Glangwili General Hospital has sent a memo to all ward staff detailing the action required by the Coroner and how they are to achieve this. She will be asking for every nurse to read the memo and sign to say they have done so and understand their responsibilities. This will then be shared with the wider nursing teams through the Heads of Nursing at the other sites across the Health Board.

I hope the actions outlined above will satisfy you that appropriate steps have been and are being taken to create a robust dietetic service within the Health Board and that patient safety remains an upmost priority for all staff within the Health Board.

Yours sincerely



Steve Moore
Chief Executive