

Recommendation	Reference Number	Action	Original Due Date	Progress Status	Comments/Updates
1. The health board must review the MIU waiting areas and ensure suitable seating alternatives are implemented, both in the short and longer-term.	Healthcare Inspectorate Wales (HIW)/2025/41/MD1/1	The risk around having inadequate seating and size of the waiting room are on the Health Board Risk Register. As a service we will review the risk and escalate the risk as appropriate. Responsible - Directorate Manager & Lead Consultant Nurse	30/09/2025	Fully complete (Awaiting approval)	Risk register review completed and escalated Risk ID 3784 rated 12. A Bid for replacement of seating is also recorded on capital prioritisation group (470)
1. The health board must review the MIU waiting areas and ensure suitable seating alternatives are implemented, both in the short and longer-term.	Healthcare Inspectorate Wales (HIW)/2025/41/MD1/2	The service is planning to develop an appointment system at Morriston Hospital MIU so that some suitable patients can be transferred to the ED (Morriston Hospital Emergency Department) MIU, therefore reducing the number of patients waiting. Responsible - Directorate Manager, Lead Consultant Nurse, Matron for ED, Matron for MIU, Service Manager & Clinical Director	30/01/2026	Partially complete (Overdue)	Expected completion date 31st January 2026 - Update 27.01.2026, The Morriston MIU appointment system has now been set up and is fully operational. A key challenge has been that Morriston and Neath Port Talbot MIUs currently operate on separate digital systems. Digital Services are arranging support to implement the most suitable unified appointing system as soon as possible. The revised expected completion date is 1st March 2026
2. The health board must review the data highlighting the attendance of higher acuity patients, and the delays in transfer of care to other hospitals. This should be used to ensure the unit is appropriately staffed, patients are appropriately managed in line with their needs, and the arrangement for transferring patients is completed in a timely manner.	Healthcare Inspectorate Wales (HIW)/2025/41/MD2/1	The risk of inappropriate attendances to the unit is highlighted on the risk register. As a service we will review risk and escalate as appropriate. Responsible - Directorate Manager, Lead Consultant Nurse & Matron	30/09/2025	Fully complete (Awaiting approval)	Risk Register Review completed and risk updated. Workforce review to ensure appropriate staffing levels and appropriate skill mix is underway. Expected completion 31st January 2026 - This remains on track for completion by end of January 2026. Update 27.01.2026 - The workforce paper has been completed from a service perspective and is scheduled for submission to the Service Group by 1st February 2026.
2. The health board must review the data highlighting the attendance of higher acuity patients, and the delays in transfer of care to other hospitals. This should be used to ensure the unit is appropriately staffed, patients are appropriately managed in line with their needs, and the arrangement for transferring patients is completed in a timely manner.	Healthcare Inspectorate Wales (HIW)/2025/41/MD2/2	The service will complete a workforce review to ensure appropriate staffing levels and appropriate skill mix available for the duration of the unit's opening times. Responsible - Directorate Manager, Lead Consultant Nurse & Matron	30/01/2026	Fully complete (Awaiting approval)	Expected completion 30th January 2026. Update 27.01.2026 The workforce paper has been completed from a service perspective and is scheduled for submission to the Service Group by 1st February 2026.

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3. The health board must prioritise communication with the local highway authority to address the urgency of need to replace all red hospital traffic signs in the locality, to blue hospital signs, in the interest of public safety.	Healthcare Inspectorate Wales (HIW)/2025/41/MD3/1	The health board has been working with the local authority to ensure appropriate signage. This revision of signage from the Red 'H' signage to Blue 'No A&E' has been completed on the local roads however the red H signage indicating an that there is an Accident and Emergency Department on the trunk and motorways remain unchanged. Funding has been secured, timeline of works still to be confirmed. Delivery of this is dependent on the Welsh Government. We will contact the relevant body for an expected date of completion. Responsible - Directorate Manager / Health Board Capital Planning Team	30/09/2025	Partially complete (Overdue)	Signage completed on local roads. Correspondence received from Capital that contracts of works have been agreed. Materials ordered and installation date is pending. Estimated date of completion 30.01.2026 Information received 26.01.2026 from SWTRA via Capital confirms works will be completed on Friday 27th February 2026
4. The health board must develop and implement a full communication plan for the MIU. This must Clearly identify and communicate which types of patients are appropriate for Minor Injuries Unit (MIU) care Review effectiveness of communication around services available at the MIU Improve communication with communities to ensure that they are fully informed and aware of the services Ensure that those attending have made the right and safe choice to receive MIU care and treatment in the right place, at the right time, and are treated and cared for by appropriate clinicians.	Healthcare Inspectorate Wales (HIW)/2025/41/MD4/1	A review and significant changes to the digital information regarding the scope of MIU have been completed in recent weeks, including website content and regular social media posts. The assurance monitoring will continue. Consideration is being giving to immediate feedback to people who are inappropriately attending. Responsible - Health Board Communications Team and MIU Senior Team	28/10/2025	Fully complete (Awaiting approval)	See action to recommendation 3 in respect of the road signage. Completed (Website review and social media)
5. The health board must review and improve access to services to ensure that those patients advised to attend the MIU in Neath Port Talbot receive equitable and timely care to those attending main Emergency Departments when presenting with appropriate conditions. Consideration should be made to which patient groups are advised to attend Neath Port Talbot MIU.	Healthcare Inspectorate Wales (HIW)/2025/41/MD5/1	Issue generally occurs when patients outside of the advertised scope present to the MIU. Responsible - Health Board Communications Team and MIU Senior Team	28/10/2025	Fully complete (Awaiting approval)	See action to recommendation 4 in respect of communication regarding the scope of MIU. Completed (Website review and social media)

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5. The health board must review and improve access to services to ensure that those patients advised to attend the MIU in Neath Port Talbot receive equitable and timely care to those attending main Emergency Departments when presenting with appropriate conditions. Consideration should be made to which patient groups are advised to attend Neath Port Talbot MIU.	Healthcare Inspectorate Wales (HIW)/2025/41/MD5/2	There is a SOP in place for interhospital transfers. Service to review clinical criteria and effectiveness of controls. Responsible - Clinical Director, Lead Consultant Nurse, Matron, Directorate Manager	30/01/2026	Fully complete (Awaiting approval)	The SOP is in place and is scheduled for an up-to-date service review and final sign-off by 28th February 2026.
5. The health board must review and improve access to services to ensure that those patients advised to attend the MIU in Neath Port Talbot receive equitable and timely care to those attending main Emergency Departments when presenting with appropriate conditions. Consideration should be made to which patient groups are advised to attend Neath Port Talbot MIU.	Healthcare Inspectorate Wales (HIW)/2025/41/MD5/3	As a possible additional measure, the Health Board are currently considering the introduction of an internal emergency transfer vehicle for interhospital transfers. Responsible - Associate Service Director AECHO	30/01/2026	Fully complete (Awaiting approval)	Following review, the outcome is that we are unable to provide an interhospital transfer vehicle. A Standard Operating Procedure is already in place for managing interhospital transfers, and the associated risk has been recorded on the risk register.
6. The health board should maintain an ongoing review of the risks recorded in the register, considering staff feedback and the insights presented in this report, and ensure the implementation of appropriate and timely action plans to mitigate these risks.	Healthcare Inspectorate Wales (HIW)/2025/41/MD6/1	The service will review the risk register and escalate via the governance structure as appropriate. Responsible - Directorate Manager, Lead Consultant Nurse & Matron	30/09/2025	Fully complete (Awaiting approval)	Risk Register Review complete
7. The health board must risk assess the paediatric waiting area and appropriately mitigate risks related to poor staff oversight.	Healthcare Inspectorate Wales (HIW)/2025/41/MD7/1	The service will carry out a risk assessment of this and applying appropriate mitigations. Responsible - Lead Consultant Nurse & Matron	30/09/2025	Fully complete (Awaiting approval)	Risk reviewed and appropriate mitigations in place

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8. The health board must evaluate and enhance security measures within the MIU to ensure the safety of both staff and patients, considering the rising frequency of violent and threatening incidents directed at staff.	Healthcare Inspectorate Wales (HIW)/2025/41/MD8/1	The service will evaluate level of violence and aggression in the MIU which will include a review of the trend. Responsible - Head of Quality & Safety for Morriston Service Group	30/09/2025	Fully complete (Awaiting approval)	The service presented its paper to the Q&S Committee on 08.01.2025 and has submitted a bid to the Health Board Capital Group to secure funding for enhanced CCTV coverage within MIU and for the purchase of body cameras for staff. The Q&S Committee has recommended a Health & Safety review of the unit, which will be presented to Board. A review of the unit's lockdown procedure will also be arranged with the Neath Port Talbot site management team. Expected completion 30.01.2026.
8. The health board must evaluate and enhance security measures within the MIU to ensure the safety of both staff and patients, considering the rising frequency of violent and threatening incidents directed at staff.	Healthcare Inspectorate Wales (HIW)/2025/41/MD8/2	Health Board will review the above and if appropriate develop an improvement plan. Responsible - Service Group Directors	30/01/2026	Partially complete (Overdue)	The service presented its paper to the Q&S Committee on 08.01.2025 and has submitted a bid to the Health Board Capital Group to secure funding for enhanced CCTV coverage within MIU and for the purchase of body cameras for staff. The Q&S Committee has recommended a Health & Safety review of the unit, which will be presented to Board. A review of the unit's lockdown procedure will also be arranged with the Neath Port Talbot site management team.
9. The health board must develop, implement and maintain a robust system for the management of sterile materials, to ensure expired stock is removed from use and replaced appropriately.	Healthcare Inspectorate Wales (HIW)/2025/41/MD9/1	This issue was resolved by the service during the inspection. The unit has ceased to use any items from CSDU and now use single use products only that have clear expiry dates marked. There is a comprehensive checking system in place (including an expiry date check). All staff have been reminded of the importance of these checks. Responsible - Matron	28/10/2025	Fully complete (Awaiting approval)	Completed - Check list uploaded as evidence
10. The health board must consider completing regular audits of MIU records to establish and address any inconsistency in documentation.	Healthcare Inspectorate Wales (HIW)/2025/41/MD10/1	The service carries out an audit of all Emergency Nurse Practitioners and Triage nurses' documentation annually. Feedback is given on an individual basis following audits with areas for improvement identified and actions to correct at that time. Responsible - Matron	28/10/2025	Fully complete (Awaiting approval)	In place. - Evidence of audit attached

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11. The health board must review and consider staff feedback about medical support for paediatric patients, and should include assessing staffing risks, and ensure trained support and advice is available regarding paediatric patients, addressing any gaps in expertise as needed.	Healthcare Inspectorate Wales (HIW)/2025/41/MD11/1	There is not consistent paediatric medical cover at Neath Port Talbot Hospital site. A standard operating procedure is being produced to guide staff actions when responding to a paediatric emergency. Responsible - Patient Safety Lead – Resuscitation	30/09/2025	Fully complete (Awaiting approval)	The Paediatric protocol has been published on COIN (see attached). Current compliance stands at 63%, reflecting an improvement from 49% at time of inspection. The service will collaborate with the Patient Safety Lead to develop a plan for continued improvement in compliance to a target level of 85%.
11. The health board must review and consider staff feedback about medical support for paediatric patients, and should include assessing staffing risks, and ensure trained support and advice is available regarding paediatric patients, addressing any gaps in expertise as needed.	Healthcare Inspectorate Wales (HIW)/2025/41/MD11/2	Current paediatric immediate life support compliance is 49%. The MIU will work to improve this compliance to target level of 85% with the support of Morriston Service Group via workforce planning Responsible - Matron & Clinical Nurse Manager.	30/01/2026	Fully complete (Awaiting approval)	Workforce planning review expected to be completed by 30.01.2026. Update 27.01.2026. The workforce plan and accompanying paper have been completed from a service perspective and are scheduled for submission to the Service Group by 1st February 2026. Paediatric Immediate Life Support (PILS) compliance currently stands at 59.5%, an improvement from the previous level of 49%. The service will continue to focus on increasing compliance to reach the target level of 85%
12. The health board must ensure safe and prompt patient transfers to suitable settings and implement mitigations to manage their safety whilst they are waiting.	Healthcare Inspectorate Wales (HIW)/2025/41/MD12/1	The workforce at the MIU will be reviewed to ensure that there will be an appropriate level of trained staff to mitigate the risk to patients whilst they are waiting. Responsible - Directorate Manager, Lead Consultant Nurse & Matron	30/01/2026	Fully complete (Awaiting approval)	See action to recommendation 4 in respect of communication regarding the scope of MIU. See action to recommendation 5 in respect of consideration of transfer arrangements.
13. The health board must review and update the Service Level Agreements to ensure they are current and effectively address the needs of all patients while maintaining clear communication with the healthcare provider for the patients' usual place of residence.	Healthcare Inspectorate Wales (HIW)/2025/41/MD13/1	The service will draft a paper to include relevant data regarding out of area attendance. Responsible - Directorate Manager, Lead Consultant Nurse & Matron	30/09/2025	Fully complete (Awaiting approval)	Engagement has taken place with external service providers. The workforce planning paper will include all pertinent data relating to out-of-area activity to support informed decision-making. Expected completion 30.01.2026. This remains on track for completion. The workforce plan and accompanying paper have now been finalised from a service perspective and are scheduled for submission to the Service Group by 1st February 2026.

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13. The health board must review and update the Service Level Agreements to ensure they are current and effectively address the needs of all patients while maintaining clear communication with the healthcare provider for the patients' usual place of residence.	Healthcare Inspectorate Wales (HIW)/2025/41/MD13/2	The health board will review and ensure the Service Level Agreement is reviewed, the quarterly LTA meetings with neighbouring Health Boards will also be utilised to reiterate the criteria of patients that can be seen in MIU. Responsible - Health Planning & Partnership Team	30/01/2026	Fully complete (Awaiting approval)	Update 27.01.2026 - Health Board commissioning team confirmed that rebasing exercise for LTA contracts underway with completion planned in time for 2026/2027.
14. The health board must review the staff feedback regarding senior managers and ensure a secure platform is provided to listen to staff and take action to address concerns where appropriate.	Healthcare Inspectorate Wales (HIW)/2025/41/MD14/1	Improved onsite visibility and accessibility by the Senior Clinical and Non-Clinical Management Team. Plans to be updated at the next staff meeting. Responsible - Directorate Manager	30/09/2025	Fully complete (Awaiting approval)	This action has been completed. The initiative has been successfully implemented and will remain subject to ongoing review and refinement as needed
15. The health board must allocate dedicated time for clinical development beyond mandatory training, to ensure staff can enhance their professional skills despite the unit's high clinical demands.	Healthcare Inspectorate Wales (HIW)/2025/41/MD15/1	The service will develop a paper regarding Emergency Nurse Practitioner non-clinical time for consideration by Morriston Service Group. Responsible - Lead Consultant Nurse	29/08/2025	Fully complete (Awaiting approval)	Draft paper completed pending final draft prior to panel submission. Expected completion 30.01.2025. Update 27.01.2026 - The workforce plan and accompanying paper have been completed from a service perspective and are scheduled for submission to the Service Group by 1st February 2026.
16. The health board must review the staffing establishment to ensure the MIU always has the right number of staff available each shift and with an appropriate staff skill mix.	Healthcare Inspectorate Wales (HIW)/2025/41/MD16/1	The MIU is currently attempting to recruit into all vacancies and vacancy control forms have been submitted. Responsible - Matron & Clinical Nurse Manager.	28/10/2025	Fully complete (Awaiting approval)	Recruitment process underway and currently going through approval process on tracs.
16. The health board must review the staffing establishment to ensure the MIU always has the right number of staff available each shift and with an appropriate staff skill mix.	Healthcare Inspectorate Wales (HIW)/2025/41/MD16/2	These are pending approval from the Morriston Service Group, within current health board recruitment guidance. Responsible -Morriston Service Group & Corporate Vacancy Scrutiny Panel	11/08/2025	Fully complete (Awaiting approval)	The vacancy process is underway and pending final approval. The expected completion date is 30 November 2025, subject to the required approvals. Staffing levels at the MIU are risk assessed daily against the agreed roster. In addition, the Health Board is undertaking a broader review of workforce establishment, which is expected to conclude in the next financial year.
16. The health board must review the staffing establishment to ensure the MIU always has the right number of staff available each shift and with an appropriate staff skill mix.	Healthcare Inspectorate Wales (HIW)/2025/41/MD16/3	The service will develop a workforce plan and escalate to the health board via the governance structure. Responsible - Directorate Manager, Lead Consultant Nurse & Matron	30/01/2026	Fully complete (Awaiting approval)	The workforce plan and accompanying paper have now been finalised from a service perspective and are scheduled for submission to the Service Group by 1st February 2026.