

HIW Inspection Workbook

ADDITONAL NOTES/OBSERVATIONS

Inspection type (e.g. GP, dental, hospital,	
mental health etc)	
Health Board / Organisation / Registered	
provider (delete as applicable)	
Hospital / Service / Practice (delete as	
applicable)	
Ward / Unit (where applicable)	
Tracker reference	
Date(s) of inspection	
Completed by	

Date

(Tick as applicable)

- Staff interview 0
- Patient interview/discussion 0
- Other observation

Area/ward	
Name of interviewee/role/identifier	
Time and date	

Majors

Date

Patient journey information available in patient rooms.

Nurse witnessed being aggressive with an elderly patient who wouldn't roll over on the trolley. Patient in distress.

Patient journey information available in majors waiting area food and drink available from vending machine

Me bay in majors has three chairs patients in having iv treatment no privacy

Majors waiting 5 toilets 2 out of use cleaner struggling to keep clean

Curtains not being shut on cubicles

Patient lying naked on bed with just a nappy on not covered

Majority of patients seemed comfortable and settled

Housekeeping qr code to request additional cleaning jobs

(Tick as applicable) Staff interview Patient interview/discussion Other observation Area/ward Name of interviewee/role/identifier Time and date	 Staff interview Patient interview/discussion Other observation Area/ward Name of interviewee/role/identifier 		
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(Tick as applicable)	
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Patient interview/discussion	
o Other observation	
Area/ward	
Name of interviewee/role/identifier	
Time and date	

Page **4** of **8**

Date

(Tick as applicable)	
o Staff interview	
 Patient interview/discussion 	
o Other observation	
Area/ward	
Name of interviewee/role/identifier	
Time and date	

Page **5** of **8**

Date

(Tick as applicable)	
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 Staff interview Patient interview/discussion 	
 Other observation 	
Area/ward	
Name of interviewee/role/identifier	
Time and date	

Page **6** of **8**

Date

(Tick as applicable)	
o Staff interview	
Patient interview/discussion	
Other observation	
Area/ward	
Name of interviewee/role/identifier	
Time and date	

Page **7** of **8**