

## **The National Assembly for Wales' Health and Social Care Committee**

### **Inquiry into the work of Healthcare Inspectorate Wales (HIW) Submission by the Chief Inspector, Care and Social Services Inspectorate Wales**

#### **Introduction**

1. The role of the Care and Social Services Inspectorate Wales (CSSIW) is to encourage the improvement of social care, early years and social services by regulating, inspecting and reviewing services. We provide professional advice on care and social services issues to Welsh Ministers and policy makers. Our aim is to raise standards, improve quality, promote best practice and tell people about social care.
2. Our work covers the whole of Wales. We review services at both a national and local level so we can provide public assurance about the quality of services, suggest ways of improving services, and help safeguard the interests of service users and their carers. We inspect and review the performance of local authorities on specific topics, eg safeguarding. We regulate and inspect services for everyone from the very young to older people.
3. The delivery of better social care services for the people of Wales is absolutely dependent on effective collaboration and partnerships between health and social care services. CSSIW and its fellow inspectorates in Wales are committed to promoting, supporting and monitoring progress with this objective. This means designing our methodologies and processes so that they can properly assess and report on services that increasingly cross organisational and geographical boundaries. This also means that we need to demonstrate that we can work effectively and efficiently with other inspectorates, including HIW. This submission will concentrate on the effectiveness of our working relationship with HIW, focusing on progress with collaboration and information sharing between the two inspectorates. The next section outlines the main components of our work together and highlights the progress made. This is followed by a more critical assessment of the strengths and challenges for HIW in achieving an effective working relationship with CSSIW and the other inspectorates.

#### **Progress with collaboration and information sharing**

4. Joint and collaborative working between HIW and CSSIW has, in various forms, been developing and strengthening for a number of years. The two inspectorates collaborated to coordinate and strengthen their respective inspections of adult protection in 2009-10. Both reports were published on the same day with a joint press release and a joint

statement on the key issues across health and social care in Wales arising from the inspections. <sup>1</sup>At a regional level, HIW regularly invite CSSIW colleagues to attend the annual summits in which evidence and intelligence concerning the performance of health boards is brought together to inform future inspection and review programmes. These and other examples of joint working were framed and supported by the concordat for bodies regulating and auditing health and social care published in 2005. In order to move joint working on to the next level, HIW and CSSIW, together with colleagues from the Wales Audit Office (WAO) and Estyn, signed, in January 2011, a strategic agreement to share information and to coordinate the planning and delivery of work. <sup>2</sup>This provides the framework for the programme of joint work coordinated through the *Inspection Wales* Programme.

5. Significant progress with collaborative working has been achieved through *Inspection Wales*. This includes:
  - the launch of a joint website for the inspectorates;
  - the delivery of joint training;
  - the use of common induction material for new staff;
  - the agreement of an information sharing protocol;
  - the identification of a programme of joint inspections and reviews; and (very recently)
  - the agreement of a protocol for the joint handling of serious concerns in local government and health sectors.

HIW, as a full member of Inspection Wales, has contributed to the progress made and to the plans for further development of joint working between the inspectorates.

6. For the last two years CSSIW and HIW have worked together to produce a joint report on the operation of the Deprivation of Liberty Safeguards (under the Mental Capacity Act 2005). Both organisations have a statutory responsibility to report on progress in health and social care respectively. The production of a joint report is a tangible demonstration of a willingness to work together in an area of common interest and with a subject matter that requires an overview across the sector. <sup>3</sup>The two inspectorates have also worked closely for many years in relation to investigations into circumstances where a service user known to mental health services is involved in a homicide. HIW lead on this, but involve CSSIW in the investigation as necessary.
7. The two inspectorates collaborated successfully to review the National Services Framework for Older People in Wales (NSF), publishing a joint review in January 2012.<sup>4</sup>

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<sup>1</sup> Adult Protection and Safeguarding in Wales, Key issues across Health and Social Care in Wales, March 2010.

<sup>2</sup> Working Collaboratively to Support Improvement A Strategic Agreement between Care & Social Services Inspectorate Wales (CSSIW) Estyn Healthcare Inspectorate Wales (HIW) Wales Audit Office' January 2011.

<sup>3</sup> Deprivation of Liberty Safeguards, Annual Monitoring Report for Health and Social Care, March 2013.

<sup>4</sup> Growing Old My Way, A review of the impact of the National Services Framework for Older People in Wales, January 2012.

8. A further significant example of joint work between CSSIW and the inspectorates, including HIW, is our work in relation to the quality of safeguarding practice in Pembrokeshire. Concerns about the quality of safeguarding practice in education and youth services in Pembrokeshire arose following a joint inspection of education services by Estyn, including inspectors from CSSIW and WAO in June 2011. In November 2011, HIW joined CSSIW, Estyn, Her Majesty's Inspectorate of Constabulary (HMIC) and Her Majesty's Inspectorate of Probation (HMIP) to review the interagency arrangements and practice to safeguard and protect children in Pembrokeshire. As part of this review HIW made a valuable contribution by reviewing the cases of alleged abuse (including potential abuse) by health staff over a four year period.
9. These are only two examples of several where HIW have contributed to joint work on inspections and reviews

### **The effectiveness of collaboration and information sharing by HIW - strengths and challenges.**

#### **Lack of a statutory framework**

10. CSSIW's work in local government is required to reflect the statutory provisions of the Local Government (Wales) Measure 2009, which placed a duty upon the relevant regulators to share information and established a coordinating role for the Auditor General for Wales. There is no equivalent statutory requirement in relation to the health sector. Much can be achieved through voluntary agreements and protocols, as demonstrated by the Inspection Wales programme. The challenge is the extent to which those voluntary arrangements will suffice for the future. It is entirely understandable that HIW, like any organisation, will, in extremis, focus on those priorities that deliver its statutory responsibilities. Building a requirement for collaboration and information sharing across health and social care in future legislation would set a clear direction for the inspectorates. It would also, of course, raise the need to plan for the way in which resources will be allocated to that priority.

#### **Capacity**

11. Our experience of joint work with HIW is that a genuine commitment to collaboration and information sharing is constrained by the capacity to deliver competing priorities. This is particularly the case in relation to engagement with CSSIW in our more routine evaluative work delivered by our three regional teams. This work is increasingly concerned with services such as reablement in which health and social services are working closely together. The role of strategic commissioning across health and social care and the delivery of effective joint service responses needs to be at the core of adult social services. It appears to be more difficult for HIW to participate in discussions and meetings about

this work than it is for them to engage with us about thematic or national reviews. This relates to the lack of time available for joint work given the demands on HIW to deliver its own programme of routine evaluative work.

### **The model for delivering inspections and reviews**

12. HIW sets out a three year programme that is revised and updated as circumstances and priorities change. Central to the delivery of the programme is the use of a pool of 200 or so external reviewers - health and social care professionals and members of the public, to support the delivery of its programme. This model delivers up to date expertise from the front line to the inspection team and, through the three year programme, gives a sense of direction beyond one business year. This approach, however, raises some challenges which are discussed below.
13. The dependency on external reviewers can, at times, mean that the core team at HIW can appear short of knowledge and experience of health and social care. Individuals who are very experienced and skilled in designing and planning the delivery of an inspection do not necessarily have the familiarity with the subject matter that can help to convey credibility and authority. This may not be a concern for inspection teams on site, which largely consist of external reviewers; but it can be problematic for others who engage with the inspectorate outside of inspection fieldwork. At times, it can appear that HIW have difficulty in fielding the right person at the right time, this includes meetings and discussions about joint work and joint interests. At other times, for example at the annual summits, the evidence presented for the conclusions reached about the performance of health services is not always clear and persuasive. It can also be difficult to follow through and see how the outcomes from the summits are driving improvement for patients.
14. The need for HIW to deliver its core programme of activities every year to help ensure that safe and quality healthcare services are provided to the citizens of Wales, can be in tension with its desire to deliver other aspects of its three year programme. This feature is not unique to HIW. All the inspectorates need to manage competing demands and a reordering of priorities can be an entirely appropriate response to circumstances. The challenge for HIW, CSSIW and the other inspectorates is to respond to the agenda for health and social care integration that has been given further impetus recently by the Minister for Health and the Deputy Minister for Social Services. A searching examination of models, methodologies, and resources across all the relevant inspectorates, including HIW, is a prerequisite to further progress.

### **Conclusion**

15. This brief submission has described the progress and some of the challenges in the information sharing and collaboration between HIW and CSSIW. While it has made some critical comments, these need to be seen in a context of genuine and strenuous effort on the part of the two inspectorates to work effectively together. The positive examples noted in the first part of this paper could be supplemented by many more and the *Inspection Wales* programme is a groundbreaking endeavour. Building for the future, however, requires development of the legal framework, resource capacity and business models for both HIW and its partner inspectorates.