

Briefing paper: Health, Social Care and Sport Committee 14th February 2019

Healthcare Inspectorate Wales

Healthcare Inspectorate Wales (HIW) welcomes the opportunity to attend Committee in order to discuss our role; to describe how the organisation has developed since the independent review undertaken in 2015, and to consider how it might develop further in light of the proposed NHS Wales (Quality and Governance) Bill.

1. About us

Our [Annual Report](#) for 2017-18 provides a summary of the activities of the organisation during the year. The Committee will find details of our budget and our people. It summarises the findings from each of our main inspection programmes during the year. It also provides a one page summary for each Health Board and Trust describing the work undertaken in their area during the year.

In June 2018 we published our [Strategic Plan](#) to cover the period 2018-2021. This plan is based on feedback from stakeholders and extensive input from our staff. It describes how we will build our work around four key objectives

- To maximise the impact of our work to support improvement in healthcare
- To take action when standards are not met
- To be more visible
- To develop our people and organisation to do the best possible job.

Our strategy recognises the developments in healthcare following the Parliamentary Review of Health and Social Care and publication of 'A Healthier Wales' by the Welsh Government. It commits us to actively consider how we may need to adapt our approach to inspect, with our partners, new models of integrated care, and it challenges us to ensure that we give sufficient attention to preventative services.

The final document which we be of interest to the Committee is our [Operational Plan](#) for 2018-19. This describes how we will deliver the first year of our Strategic Plan.

2. Taking forward recommendations from the independent review in 2015

Appendix one provides an update on progress against the recommendations of the Marks Review of Healthcare Inspectorate Wales "The Way Ahead: To become an inspection and improvement body". The recommendations of the report fell into three main categories: recommendations relating to how we work; recommendations relating to the work we do; and recommendations relating to how we work with others. The order of our progress update reflects this grouping.

Healthcare Inspectorate Wales

January 2019

Appendix 1

Progress against the recommendations of the Marks Review of Healthcare Inspectorate Wales “The Way Ahead: To become an inspection and improvement body”, 2015

HOW WE WORK

No	Marks Review Recommendation	Response	Commentary
3	HIW should publicise its equality and human rights approach to its inspection activities and protect and promote the interests of people from diverse backgrounds and those who are often marginalised and socially excluded.	Accepted and implemented	Our approach to equality and human rights is published on our website. http://hiw.org.uk/about/plans/EqualityandHumanRights/?lang=en
5	HIW and the Welsh Government should explore the usefulness of audit tools developed by the Royal College of Physicians and consider whether they should be built into the new Health Standards which are being developed; and whether they could contribute to HIW's inspection programmes.	Accepted and implemented	When developing our methodology for inspections HIW draws on established professional best practice from a variety of sources and this can include those tools and checklists developed by the Royal Colleges. Representatives of the Royal Colleges may be invited to sit on HIW's Stakeholder Reference Groups when new methodologies are being developed.
19	HIW, after consulting with stakeholders, should publish a Statement of Risk outlining its approach to regulation and inspection. It should explain the minimum frequency of inspections and reviews it will carry out of both NHS and independent sector bodies and put this within the context of its capacity to meet these targets.	Accepted and implemented	HIW does not operate frequency rules in determining NHS inspections. These are undertaken on the basis of risk. Our website includes further detail on how we use information on risk to focus our inspection activity. http://hiw.org.uk/about/plans/operating/?lang=en
6	HIW should develop a proportionate risk-based inspection programme informed by its collation and analysis of intelligence.		
14	HIW should further develop and publish a Communications Strategy, which will allow it to communicate more effectively with the public. It will be able to provide evidence that it is delivering a highly valuable service on their behalf. Increased interaction with patients and service users		HIW has considerably improved the way in which it interacts with the public, but there is still more to do. The Strategic Plan for 2018-21 includes one objective to increase our impact and a second to increase our visibility. Both of these are relevant here.

	through multi-media formats will provide valuable information to support target led inspections of services where concerns are raised.		HIW has updated its website and significantly refreshed its annual report format to make it easier to understand and digest by patients and the public.
15	HIW should include more information in its Annual Report on the outputs and efficiency of work processes which serve patients, service users and other stakeholders. The number of customer care measures should be minimised, to allow scarce resources to be used to evaluate significant outcomes.		We continue to use a commitment matrix to demonstrate how the work that we undertake relates to our original public commitments. We produce easy read versions of major reports to ensure that they reach the widest range of interests. We have proactively engaged with the media, in particular the BBC and this has resulted in a BBC item explaining the role of HIW https://www.bbc.co.uk/news/uk-wales-44438510
16	HIW to evaluate the effectiveness of their inspection and review models, to not only gain a better understanding of the performance of healthcare providers, but also as a means to help them improve the quality of inspection activities. Providers should have the opportunity to give feedback on whether HIW's scrutiny of their service is useful, and to what extent it helps them identify those aspects which need to be improved.	Accepted in principle	HIW has previously reviewed the learning from its programmes of work such as the examination of learning and themes from homicide reviews. We use stakeholder reference groups to advise and challenge us in new and/or significant areas of work such as primary care inspections and mental health. With regard to the effectiveness of inspections attribution of cause and effect is difficult to achieve. However, our strategic plan includes a commitment to review and improve the way in which we follow-up on our inspections. We also aim to improve the way in which we communicate whether or not improvements have been made.
17	HIW to measure the outcomes of its most important areas of inspection: showing how its inspections have had a significant impact on the safety and quality of healthcare services by helping providers improve their performance.		

WHAT WE DO

8	<p>HIW should expand peer, thematic and special reviews as they can improve the quality of care for patients and service users across Wales. Thematic and special reviews in particular should be further developed as they can identify solutions to problems in one service or locality that can be taken up by the whole of the sector. At the same time the regulation and inspection of healthcare services should not be compromised.</p>	<p>Mostly accepted and implemented</p>	<p>Peer Review for the NHS in Wales is overseen by the NHS collaborative. The framework set out for peer review includes a process to enable matters of concern to be escalated to HIW.</p> <p>HIW continues to undertake thematic and special reviews. Most recently these have covered Community Mental Health Services (to be published February 2019), Substance Misuse Services (July 2018) http://hiw.org.uk/reports/natthem/2018/substancemisuse/?lang=en and Hospital Discharge (August 2018) http://hiw.org.uk/reports/natthem/2018/patientdischarge/?lang=en .</p> <p>HIW also undertakes special reviews and investigations. Most recently the review of <i>“Abertawe Bro Morgannwg University Health Board’s handling of the employment and allegations made against Mr W”</i> http://hiw.org.uk/docs/hiw/reports/290118kwreviewen.pdf?lang=en</p>
10	<p>In relation to work in Mental Health and Learning Disability settings HIW should:</p> <ul style="list-style-type: none"> • increase the volume of inspections of NHS inpatient facilities to better protect the interests of patients who have a mental health problem or learning disability • focus its inspection model more on evaluating patient outcomes and less on scrutinising whether appropriate processes have been followed. 	<p>Accepted and implemented</p>	<p>HIW continues to ensure that it undertakes inspections of NHS inpatient facilities. In addition to HIW’s core programme it carried out a thematic review with CSSIW on Learning Disabilities in 2016 and over the last year has been undertaking a thematic review of community mental health teams.</p> <p>HIW’s inspection, visit and review approach is clearly focused on examining the quality of the patient experience. Although HIW also looks at specific process issues (particularly with regard to whether legal requirements have been met) this is done within the context of the care received.</p>

12	HIW should refresh its Statement of Purpose to make it patient and citizen focused. The public should clearly understand that its role is to ensure they receive the best quality treatment and care, as well as protect them from being harmed. Also, the Statement of Purpose may want to give greater emphasis to HIW's role of promoting Wales-wide improvements and innovation in healthcare, that it could be much more than an inspector of individual services.	Accepted and implemented	<p>HIW has redesigned and refreshed the Annual Report layout, the presentation of the Strategic Plan and Operational Plan and updated its website.</p> <p>HIW has also built better relationships with the media in Wales to ensure better coverage of work and of HIW' purpose more generally.</p> <p>https://www.bbc.co.uk/news/uk-wales-44467315</p>
21	HIW should review the implementation and effectiveness of LHBs and Trusts service user strategies, in line with the Welsh Government's guidance A Framework to Assure Service User Experience, to determine whether they are genuinely involving patients and carers as a means of improving the safety and quality of services.	Accepted in principle	<p>This could be considered as a potential thematic review, but would need to be prioritized alongside other proposals.</p> <p>HIW reviews consider patients' experience and the extent of patient involvement in their own care as a matter of course.</p>
25	HIW should always carry out follow-up actions when inspection results indicate this is necessary and in the most serious instances of service failure, should be more robust in the use of its enforcement powers, and publish data on how it has used these powers in its Annual Report.	Accepted and implemented	<p>HIW has a strategic approach to follow up, including conducting follow up visits. Our follow-up and assurance policy is published on our website.</p> <p>http://hiw.org.uk/docs/hiw/publications/180711followuppolicyen.pdf</p> <p>We have clear processes set out for managing situations where independent providers are not meeting regulatory requirements.</p> <p>http://hiw.org.uk/providing/enforce/?lang=en</p> <p>We are a member of the tripartite escalation and intervention arrangements for the NHS.</p> <p>https://gov.wales/topics/health/nhswales/escalation/?lang=en</p>
27	HIW should consider the value of developing a framework for assessing the quality and safety of all healthcare services. The framework could reflect significant patient outcomes, and be aligned with new refreshed Health Standards, the self-assurance systems that health bodies use to measure their own performance and clinical indicators used by professional regulators and Royal Colleges. The framework should be common to the work of both HIW and CSSIW as patients and service users are increasingly receiving integrated health and social care	Accepted in principle	<p>Patients are at the centre of all HIW inspection activity. We consider matters relating to</p> <ul style="list-style-type: none"> • Patient Experience • Quality and Safety • Leadership, Management and Governance <p>in all of our inspections.</p> <p>We inspect against the Health and Care Standards and recognized best practice standards. Our approach is set out on our website</p> <p>http://hiw.org.uk/about/whatwedo/inspect/?lang=en</p> <p>In principle we accept the recommendation that inspection</p>

	<p>services. Clear information would be provided to members of the public and inspection reports and results would encourage improvement and innovation by providers.</p>		<p>frameworks should be aligned across health and social care. This is complex since CIW and HIW operate within different legislative frameworks. However, we work together on specific issues such as Learning Difficulties and Community Mental Health Services. We are currently collaborating on a CIW review of reablement and we have undertaken an exploratory project on healthcare support for people living in care homes</p> <p>http://hiw.org.uk/reports/natthem/2018/carehomereport/?lang=en</p>
28	<p>HIW should scrutinise whether:</p> <ul style="list-style-type: none"> • Health bodies are providing the most effective clinical treatments to patients. Patients not only want to benefit from being looked after in line with essential life maintaining care such as being fed, hydrated and being assisted with going to the toilet as necessary, but they also want to receive the best available clinical treatments. • Lessons promoted by the 1000 Lives Improvement programme are being delivered during the course of individual inspections or reviews; or they could be the subject of national thematic reviews. 	Rejected	<p>HIW tests whether care and treatment is provided against the published standards. It is not HIW's role to test the effectiveness of clinical treatments. That is a matter for other bodies, such as NICE.</p> <p>When conducting thematic reviews HIW draws on best practice from a number of sources including 1000 Lives Improvement.</p>
36	<p>HIW should carry out more national thematic reviews of healthcare services. All providers across Wales should be following international benchmark standards of good care and HIW's role would be to scrutinise whether each health body is implementing them; and if they are continuously self-assessing their performance in order to drive up standards of care. It would be testing whether the self-assessments of performance are valid or not and by working with Public Health Wales and other expert bodies, identify lessons from highly successful providers which could benefit all patients and service users if implemented across the whole of Wales.</p>	Accepted and implemented	<p>HIW has implemented a programme of national thematic reviews. These have been set out in the HIW Strategic and Operational Plans. We have recently been provided with additional resources which will enable us to expand the number of thematic reviews we undertaken.</p>

40	HIW should validate whether Health Boards and Trusts are following benchmarks of best practice and performance managing healthcare services to the highest possible standards.	Accepted and implemented	HIW reviews draw on established published standards and best practice in developing methodologies for standard inspections and for thematic reviews.
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WORKING WITH OTHERS

1b	Where appropriate, HIW and the WAO should jointly scrutinise the governance and leadership of health bodies, in particular measuring the extent to which their activities are driven by the goal of continuously improving services and aspiring to achieve world-class standards.	Accepted and implemented	HIW attends Board meetings annually to summarise issues arising from our work and matters for the Board to consider. We also attend Board and Committee meetings during the course of the year to observe their operation. During the course of the year HIW Relationship Managers work closely with the equivalent audit leads in the Wales Audit Office to share relevant findings and test conclusions.
38	Where appropriate HIW should give priority to carrying out joint reviews with the WAO of the governance, leadership and performance of LHBs and Trusts; and consider asking the PSOW to offer his expertise.		
2	HIW should continue to share information and coordinate inspections and reviews with the WAO, Community Health Councils, professional regulators and Medical Royal Colleges in order to avoid duplication and enhance the impact of their activities.	Accepted and implemented	HIW works closely to share information and co-ordinate activity with Wales Audit Office, Community Health Councils (CHC), other professional regulators and others. Formal methods include <ul style="list-style-type: none"> • Inspection Wales Programme • Summits of bodies involved in the scrutiny and assurance of healthcare in Wales • Membership of the Wales Advisory Forum of the GMC • Regular bi-lateral meetings supported by Memoranda of Understanding
4	HIW can make a major contribution to the safety and care of patients by holding boards to account for the clinical performance of doctors through the medical revalidation process. Therefore it should give high priority to working with the General Medical Council to ensure that Health Board leadership and governance of Responsible Officer Regulations is effective.	Accepted and implemented	HIW works closely with the General Medical Council as members of the GMC Advisory Forum for Wales, and through regular bilaterals. We have a memorandum of understanding with the GMC which is published on our website. http://hiw.org.uk/about/workingwithother/mou/gmcmou/?lang=en
7	HIW should formalise its agreements with the following bodies:	Accepted and implemented	

	<p>(i) The General Pharmaceutical Council, which is the principal regulator of the pharmacy profession in Wales; and report on the effectiveness of pharmacy regulation across Wales in its Annual Report;</p> <p>(ii) The General Optical Council, which is the principal regulator of the optical profession in Wales; and report on the effectiveness of optical regulation across Wales in its Annual Report.</p>		<p>(i) HIW has agreed a Memorandum of Understanding with the General Pharmaceutical Council.</p> <p>(ii) HIW undertook a thematic review of Ophthalmology and the General Optical Council was on the stakeholder group for this review.</p>
30	<p>The collaborative information system consists of Concordat Cymru, Healthcare Summits and the NHS Wales Escalation Arrangements and there may be scope for clarifying how they complement each other as well as assessing whether there is any overlap and duplication of effort. HIW, Welsh Government and other bodies should consider if the current information system is as streamlined and efficient as it could be. Also, it will be useful in future to take stock and evaluate the success of the information sharing system and determine whether any changes are needed.</p>	Accepted and implemented	<p>There is a clear process for sharing information and escalating concerns where appropriate:</p> <ul style="list-style-type: none"> - At a bilateral level MoU's help to underpin the regular sharing of information - Twice a year professional regulators will meet prior to the Summits to consider the intelligence they hold - One of the professional regulation bodies will then represent that discussion at the broader Summits - The discussions from the Summits then form part of the considerations at the NHS Escalation and Intervention meetings.
31	<p>The collaborative early warning system should become the central organising principle of the work of Concordat Cymru. It must have high status and profile amongst all members and its aims and methods of working should be published across the whole of the health and social care sector.</p>	Rejected	<p>This is the purpose of the NHS Wales Escalation and Intervention Framework.</p>
32	<p>HIW should evaluate the effectiveness of the early warning system and include this in its Annual Report.</p>	Rejected	<p>HIW is a part of the NHS Wales Escalation and Intervention Framework and it would therefore not be appropriate for it to undertake an evaluation of its effectiveness.</p>
33	<p>HIW should increase collaboration with third sector organisations which offer advice and advocacy to patients and carers to gather more information about any concerns they may have about the quality of healthcare services e.g.</p>	Accepted and implemented	<p>HIW continues to liaise and network with the third sector to keep up to date with the unique information of special associations and interest groups such as RNIB and AHL. Where HIW conducts thematic and/or specialist reviews HIW includes the third sector</p>

	Carers Wales, MIND Cymru and Citizens Advice Cymru.		within its review advisory/steering groups.
34	HIW and CHCs to hold listening events in local communities as well as involve experts by experience in their inspection teams when an in–depth review of a particular hospital or LHB is taking place.	Accepted and implemented	<p>HIW has a closer working relationship with the CHC since signing the Operating Protocol. This includes HIW placing reliance on the CHCs' intelligence gathering from different sources. Lay reviewers are used in HIW's inspections to ensure the patient perspective is captured.</p> <p>HIW is still exploring the idea of holding listening events and will discuss this further with CHCs when they have been able to progress further in the development of their corporate strategy, planning and standards.</p>
41	HIW and CSSIW should work together to develop an integrated inspection framework to scrutinise the performance of health and social care organisations. The aim would be to assess the quality of integrated care, whether people are receiving seamless services when they move between primary care, hospitals and social care in registered settings.	Accepted and implemented	<p>As discussed in recommendation 27 HIW and CSSIW work together on a theme by theme basis developing approaches appropriate to the subject.</p> <p>The inspectorates also undertake joint work in (Deprivation of Liberty Safeguards) DOLS and publish a joint report. They have worked together on a joint review of Learning Disability Services.</p>