Healthcare Inspectorate Wales

Annual Report
2004-05

Supporting improvement through inspection and review
## Contents

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foreword by the Chief Executive of Healthcare Inspectorate Wales</td>
<td>4</td>
</tr>
<tr>
<td>The Setting up of Healthcare Inspectorate Wales</td>
<td>5</td>
</tr>
<tr>
<td>- Our Powers</td>
<td>5</td>
</tr>
<tr>
<td>- Our Role and Independence</td>
<td>6</td>
</tr>
<tr>
<td>- Our Staff</td>
<td>7</td>
</tr>
<tr>
<td>Achievements in 2004-05</td>
<td>9</td>
</tr>
<tr>
<td>- Developing our Approach</td>
<td>9</td>
</tr>
<tr>
<td>- Delivering a Programme of Routine Inspections</td>
<td>9</td>
</tr>
<tr>
<td>- Investigations and Special Reviews</td>
<td>10</td>
</tr>
<tr>
<td>- Working in Partnership</td>
<td>11</td>
</tr>
<tr>
<td>- Improving Communication</td>
<td>11</td>
</tr>
<tr>
<td>- Defining our Commitment to Equality, the Voluntary Sector and the Welsh Language</td>
<td>12</td>
</tr>
<tr>
<td>Looking forward to 2005-06</td>
<td>14</td>
</tr>
<tr>
<td>- The Healthcare Standards for Wales</td>
<td>14</td>
</tr>
<tr>
<td>- The Wales Concordat</td>
<td>15</td>
</tr>
<tr>
<td>- Appointing Peer and Lay Reviewers</td>
<td>15</td>
</tr>
<tr>
<td>- Independent Healthcare</td>
<td>15</td>
</tr>
<tr>
<td>Annex 1</td>
<td>17</td>
</tr>
</tbody>
</table>
It gives me great pleasure to publish this, the first Annual Report for Healthcare Inspectorate Wales.

The Inspectorate came into operation on the 1st April 2004 and during these initial twelve months much work has been undertaken to recruit a team of full time staff and to develop key policies and procedures. With these foundations in place I believe that Healthcare Inspectorate Wales is ready to take forward its strategic vision of making a significant contribution to providing assurance about and improving the quality of healthcare services, while at the same time strengthening the voice of patients and the public.

Healthcare Inspectorate Wales' focus is very much on improving the patient experience and ensuring that patients are at the centre of the way services are planned and delivered. The fact that Wales now has its own healthcare inspectorate is testimony to the importance placed on ensuring a clear focus on the needs of the people of Wales and the delivery of healthcare services that ensure these diverse and often unique requirements are met.

We undertook the first of our inspections in November 2004, in line with our published programme. Feedback from organisations reviewed to date has been positive and we will continue to work together with NHS organisations to improve the quality and safety of patient care.

We look forward to the next twelve months which will bring further challenges as we develop new and innovative approaches to inspection using the Healthcare Standards for Wales as the baseline of our assessment. We will also join with other inspectorates, audit bodies and regulators to ensure that we work together in the most efficient and effective way.

Peter Higson
Our Powers

The Health and Social Care (Community Health and Standards) Act (the Act) received Royal Assent on November 20th 2003. This provided the National Assembly for Wales with the powers to inspect and undertake investigations into the provision of NHS funded care either by or for Welsh NHS organisations. The Assembly established Healthcare Inspectorate Wales (HIW) on 1 April 2004, with the purpose of promoting continuous improvement in the quality and safety of patient care within NHS Wales.

The Assembly’s powers of inspection and investigation under the Act are delegated to HIW. In addition, delegated powers under the Act provide HIW with rights of access to NHS bodies, rights to require documents and information, and the access to interview both staff and patients of Welsh NHS organisations.

The Assembly has a duty to collaborate with the Healthcare Commission in England over cross border services and issues, and with regard to any all England/Wales reviews.

The Act requires HIW to publish an annual report detailing the findings from its inspection and investigation activities.
Our Role and Independence

HIW’s purpose is to promote continuous improvement in the quality and safety of patient care within NHS Wales. In taking this forward, we undertake inspections of and investigations into the provisions of healthcare commissioned and provided by Welsh NHS bodies. The HIW inspection framework includes:

- Inspecting NHS bodies and service providers against national standards, agreements and clinical governance guidance;
- Assessing the management arrangements in place to deliver clinical and NHS services;
- Assessing the quality of NHS services across agencies/sectors.

As part of the above framework we will take into consideration and form a view on the availability of healthcare services, the quality and effectiveness of the service and the economy and effectiveness of its provision.

We inspect NHS bodies and services—these include the 14 NHS trusts, 22 local health boards (LHBs), the Cancer and Coronary Heart Disease Networks, the National Public Health Service (NPHS) and screening services, NHS Direct in Wales and the Welsh Blood Service (in co-operation with the Healthcare Commission as the service for Mid and North Wales is provided from the Northwest of England). In undertaking our inspections and investigations, the Act requires HIW to pay due regard to:

- the availability of, and access to, healthcare;
- the quality and effectiveness of healthcare;
- the management of healthcare and the economy and efficiency of its provision;
- the information provided to the public and patients about healthcare;
- the rights and welfare of children.
Although HIW is a division of the National Assembly of Wales, it enjoys a certain level of independence and organisational safeguards to ensure no undue interference in its business and decision making. HIW’s independence is maintained through:

- HIW’s Chief Executive is accountable to a senior Director outside of the Assembly’s Health & Social Care Department;
- HIW’s Chief Executive has editorial control of reports and the duty to publish these reports - we therefore reach our own conclusions and communicate what we find;
- HIW generates its own work programme;
- HIW has rights of independent access to the Minister for Health & Social Care.

**Our Staff**

A skilled, dedicated and committed workforce is key to the delivery of HIW’s aims and objectives. An intensive recruitment programme got underway at the start of 2004, with the first appointment being that of the Chief Executive in April 2004. This was followed by appointments of the two Directors, the inspection and investigation teams, and the business and finance staff. By the end of 2004-05, 23 of the 27 full-time posts were filled. In addition, as part of the Assembly, HIW utilises and benefits from the Assembly’s central IT, HR and other support functions.

All staff are based in our Caerphilly office, working in the following three Directorates:

- Inspection Directorate;
- Investigation and Development Directorate;
- Business and Finance Directorate.
An organisational chart can be found at Annex 1.

HIW has recruited its full-time staff from various professional backgrounds including nursing, medicine, audit and the civil service to ensure a rich mix of skills and expertise. All staff have personal development plans and are subject to regular performance review. HIW values its staff and the contribution they can make to its progress and development. As such, we have closely involved staff in HIW’s decision-making processes and the setting of our strategic direction.

HIW places great value on the views of the patients and public. In addition, it recognises the need to share expertise and experiences. It is for these reasons that HIW decided to follow a precedent set by the former Commission for Health Improvement (CHI) and include peer and lay inspectors in its review teams. During 2004-05, HIW peer and lay inspectors were drawn from the Healthcare Commission’s panel of former CHI reviewers. In order to ensure an appropriate level of understanding of Welsh NHS structures, policies and priorities, HIW provided tailored training for each review team.
Developing our Approach

Our initial approaches to inspections and investigations were developed in the early part of the year and incorporated the views and feedback gathered from stakeholder workshops held in 2003-04. Attendees at these workshops included NHS staff, voluntary sector organisations, Community Health Councils, and other regulatory and inspection bodies. The inspection methodology adopted was based in particular upon the clinical governance requirements as set out in the Welsh Health Circular (WHC) (2003) 69: *Annual Clinical Governance Reports 1 April 2002 to 31 March 2003, and Future Requirements*, with versions tailored specifically to NHS trusts, local health boards and service networks. The investigation methodology was developed with reference to good practice guidance from the Welsh Assembly Government, the Healthcare Commission and the National Patient Safety Agency.

Delivering a Programme of Routine Inspections

HIW published its Schedule of Inspections for 2004-10 in September 2004. This was based on the rationale of us undertaking at least ten routine inspections a year when fully operational. The aim is to fully inspect each NHS organisation in Wales once every four years. It was intended that this rationale would be reviewed in March 2006 in order to evaluate the lessons learnt after 18 months of operation and also to take into account the development of the Assembly’s Healthcare Standards for Wales.

In line with the 2004-05 published inspection programme inspections of the following organisations were also commenced during the year:
• Ceredigion and Mid Wales NHS Trust
• Torfaen Local Health Board;
• Powys Local Health Board;
• Conwy and Denbighshire NHS Trust’s Mental Health Services;
• Cancer Networks in Wales.

Investigations and Special Reviews

During the year a number of issues were referred to HIW for consideration. However, none of these led to a full investigation as they were deemed, following screening, to have been appropriately dealt with by the relevant organisation.

A review of medium secure adult psychiatric units in Wales was started in December 2004 in response to a request from Ann Lloyd, Director of the Welsh Assembly Government’s Health & Social Care Department. The request for the review followed on from the publication in November 2004 of the independent external review into the homicide committed in March 2003 by Paul Khan, a mental health service user. The review was undertaken jointly with Health Commission Wales to consider the adequacy of discharge planning arrangements for patients with mental health problems from the four mental health medium secure units in Wales, as well as reviewing the quality of services and patient care within these units. The intention was to publish our findings and recommendations in October 2005 to coincide with World Mental Health Day.
Working in Partnership

During 2004-5 considerable effort was given to establishing links with a wide range of partner organisations across Wales representing patients, the public, the NHS, local government, the voluntary sector and other statutory agencies.

Particular focus was given to developing collaborative working arrangements with other regulatory and inspection bodies in Wales and those with an England and Wales remit. In this respect HIW made a significant contribution to the development of the Concordat Between Bodies Inspecting, Regulating, and Auditing Health and Social Care in Wales. This was due to be published in May 2005 and provides a framework to support the improvement of services for patients, service users and their carers, and also to ensure that external audit and inspection is efficient, effective and proportionate.

Strong working links were established with HIW’s equivalent in England, the Healthcare Commission, and a start was made on agreeing a Memorandum of Understanding.

Connections were also made with similar organisations across the remainder of the UK, including Quality Improvement Scotland.

Improving Communication

An extensive communications programme focused on ensuring the role and powers of HIW are widely understood continued with formal presentations, small group meetings, attendances at conferences and the submission of update reports to various healthcare bulletins and newsletters. The key target audiences for these communications included NHS organisations, voluntary sector organisations, other regulatory and inspection bodies operating in Wales, Community Health Councils, professional advisory and regulatory bodies and Departments within the Welsh Assembly Government.
We also started developing our Public and Patient Involvement Strategy and this work will be taken forward over the next twelve months.

HIW launched its website on 1st April 2004. The site provides information on the annual programme and access to reports and press releases as well as including the facility for the public to make comments or ask questions directly. Feedback on the site’s content has been positive. There are plans to strengthen and develop this facility in the coming months and we would welcome your suggestions and comments.

**Defining our Commitment to Equality, the Voluntary Sector and the Welsh Language**

HIW is committed to ensuring that its internal operations are fair and deliver equality of opportunity irrespective of gender, race, ethnicity, nationality, language, ability, age, religion, sexual orientation. In addition HIW has ensured that its inspection methodologies assess the extent to which NHS bodies promote diversity, comply with equality legislation and the expected standards for fair access and treatment of patients.

The Assembly’s Voluntary Sector Scheme sets out how it proposes to promote the interests of relevant voluntary sector organisations. During 2004-05 HIW met with individual voluntary sector organisations to discuss their activities and also to exchange ideas and views on our planned inspections. These meetings are now scheduled to take place on a quarterly basis. Moreover, each voluntary organisation has a “champion” within HIW – becoming the first point of contact for queries, informally updating on progress, and seeking views on current issues where required.
HIW actively encourages and pursues voluntary sector participation and involvement in its inspection process, and has written this into its published inspection methodologies. For instance, at the start of each inspection, HIW writes to community and voluntary organisations, including service client/user groups, for their views. These are then considered along with other inspection evidence and data, and will be used to inform the final report and recommendations. In addition, HIW asks for views on forthcoming inspections both through the media and on its website. Within the inspections themselves, HIW examines the interaction between NHS organisations and the voluntary sector. For example, NHS bodies are asked how they involve the public and service users in service planning.

HIW is developing its policies, procedures and other arrangements to ensure that it complies with the Welsh Assembly Government’s National Action Plan for a Bilingual Wales, *laith Pawb*, and its Welsh Language Scheme.

In 2004-05 considerable progress was made in driving these commitments forward. For example, in terms of the inspection process, HIW ensures that it conducts its inspections bilingually by offering interviews with patients, service users, carers, members of the public, local organisations and NHS staff through the medium of Welsh. All inspection reports are produced bilingually in a single document. As part of each inspection, HIW examines the presence, implementation and impact of a Welsh Language Scheme within the NHS organisation being reviewed. In dealing with the Welsh-speaking public, HIW ensures that all relevant published, printed and electronic material, including press releases and staff recruitment advertising, are made available in Welsh and are distributed together. HIW has a Welsh Language website, which provides links to material in Welsh.
Looking Forward to 2005-06

Thematic Reviews

HIW has a challenging and interesting year ahead. In addition to delivering the published annual programme of routine inspections of healthcare organisations, we aim to also undertake thematic reviews of the Coronary Heart Disease National Service Framework and Child Protection Systems in NHS Organisations in Wales. These reviews will be undertaken in collaboration and consultation with the Wales Audit Office and the Social Services Inspectorate for Wales and will be used to aid the development of approaches to such reviews.

The Healthcare Standards for Wales

The Healthcare Standards for Wales (published in May 2005) will be fundamental to the healthcare quality agenda. They provide a framework ensuring that health services are provided equitably, robustly and ethically, as well as establishing a basis for continuous improvement. In the future, all healthcare organisations will be expected to assure themselves that they are achieving or working towards these standards of care.

We are reviewing our approach to inspection during 2005-06 and developing a framework that will aid in the assessment of healthcare organisations’ compliance with the Healthcare Standards for Wales.
The Wales Concordat

In 2004-05, work was ongoing to develop a Concordat between bodies inspecting, regulating, auditing and advising on health and social care in Wales. The Concordat will build on the collaboration already in place between the various organisations in Wales, and will set out principles, objectives and practices that are designed to support the improvement of services for the public whilst ensuring review processes are efficient and effective.

As with the Healthcare Standards, the Concordat (published in tandem with the Healthcare Standards in May 2005) will inform and influence our current approaches to inspection and investigation.

Appointing Peer and Lay Reviewers

In November 2004, we advertised in healthcare journals and the general press for our own peer and lay inspectors. The response to the adverts was overwhelming, with over 400 applications received. In order to ensure that the recruitment process is as equitable, fair and open as possible, it will be conducted in line with the principles of the Commissioner of Public Appointment’s Code of Practice. The Public Appointments Unit at the National Assembly for Wales will act as our advisors throughout and will provide us with independent assessors as part of our selection panels. Candidates will be asked to attend recruitment assessment centres during 2005-06, with the intention of appointing reviewers in readiness for the 2006-07 round of reviews.

Independent Healthcare

Discussions were on going throughout 2004-05 in relation to HIW taking on more responsibilities commensurate with its role and statutory powers. These included:
The provision of the health expertise into routine inspections of Youth Offending Teams in Wales;
The provision of the health expertise into routine inspections of publicly managed prisons in Wales;
Compliance reviews against the Ionising Radiation (Medical Exposure) Regulations (2001);
The provision of the health expertise into Prison and Probation Ombudsman investigations into deaths in prison;
The regulation and inspection of independent healthcare organisations.

The latter area of work will have by far the biggest impact on HIW in terms of workload and responsibilities. The Assembly was established as the regulator of independent health and social care in Wales in April 2002 and these powers were delegated to Care Standards Inspectorate for Wales (CSIW). There are currently 56 independent healthcare settings in Wales, including private hospitals, dental anaesthesia settings, hospices, and laser treatment centres. Since the inception of CSIW the number of settings being classified as providing independent healthcare in Wales has doubled and this increase in volume and complexity is likely to continue. CSIW currently does not have the range and depth of health professional skills to undertake the inspection of private and voluntary healthcare. Therefore in April 2005 it was formally agreed to transfer the regulatory responsibility for independent healthcare in Wales to HIW. The benefits of this transfer of responsibility to HIW are that it is consistent with HIW’s wider NHS role in monitoring NHS funded care, it enables an overview and consistency of quality and standards of provision across sectors, and there would be in alignment with the role and responsibilities of the Healthcare Commission in England. The transfer is to be completed by 2006-07.