y Meddygon (Cymru)

Ymchwiliad i Fil lechyd a Gofal Cymdeithasol (Ansawdd ac Ymgysylltu) (Cymru) Inquiry into the Health and Social Care (Quality and Engagement) (Wales) Bill

Ymateb gan Goleg Brenhinol v Meddygon Cymru Response from Royal College of Physicians Wales

Royal College of Physicians Cymru Wales

Baltic House Mount Stuart Square Cardiff CF10 5FH

Health, Social Care and Sport Committee

National Assembly for Wales Pierhead Street Cardiff CF99 1NA SeneddHealth@Assembly.Wales

2 August 2019

Dear colleague,

Health and Social Care (Quality and Engagement) (Wales) Bill

Thank you for the opportunity to respond to your inquiry into the general principles of the Health and Social Care (Quality and Engagement) (Wales) Bill. The Royal College of Physicians (RCP) has worked with consultant physicians, trainee, specialty doctors and members of our patient carer network in Wales to produce this response.

Name of organisation: Royal College of Physicians (RCP) Cymru Wales Lead contact: head of policy and campaigns for Wales

The RCP is happy to support the general principles of the Health and Social Care (Quality and Engagement) (Wales) Bill. We welcome a focus on continuous system-wide quality improvement through establishing a duty on the Welsh government and NHS Wales to improve quality and report annually on their progress. The Welsh government should be clear about what it means by 'quality', how it defines the concept and how it measures quality outcomes, especially in the context of an integrated health and care service. The clinical voice must be central to this debate, and health and social care professionals must be empowered to lead change and raise standards with the full support of their employers. The Welsh government should consider how it will effectively hold health boards and NHS bodies to account in the event that they do not comply with the duties of candour and quality which are proposed in this Bill.

We also welcome the development of a system-wide approach to working with patients and their families when things go wrong, including a prescribed process for adverse outcomes. It is very important that this approach is developed through genuine engagement with patients, stakeholders and clinicians at an early stage in the process, and not presented as a done deal down the line.

We support the focus on enabling joined-up and integrated health and social care in Wales through a new Citizen Voice Body; this new body should receive the education, training and investment it needs to ensure it effectively delivers advice and support to patients, their friends and family, and the general public about

the care they receive. The final legislation should ensure that this new patient body has the strengthened powers it needs to hold health and social services bodies to account and enforce any recommendations it makes. It should be fully independent of both the NHS and the Welsh government, with the resources and support it needs to be rigorous in its scrutiny of the NHS and local authorities in Wales. There should be a clear mechanism for the referral of NHS and local government service change decisions directly to Welsh government in the event of significant patient and public concern about a proposed change. Healthcare Inspectorate Wales (HIW) should be required to work closely with the new Citizen Voice Body to ensure that the patient perspective is clearly reflected in its inspections and wider work.

We support the creation of a duty of candour on NHS organisations, and the decision to appoint a Vice Chair on NHS Trust boards to improve governance and decision-making. Doctors already have a duty to raise concerns, as set out in the General Medical Council (GMC) document, <u>Good Medical Practice</u>. The introduction of a statutory duty of candour for health and care providers would be an additional important step towards ensuring an open, honest and transparent culture in the Welsh NHS. The RCP supports the appointment of independent Freedom to Speak up Guardians in each employing health and social care organisation with a National Guardian answering to an independent organisation such as HIW. All staff must be clear about where they can go to raise serious concerns without fear of reprisal.

The Welsh government should consider how they will define an organisational duty of candour and ensure that all patients and staff are empowered to raise complaints and escalate concerns. Again, it is vital that the Welsh government consider how they will hold health and social care organisations to account in the event that the duty of candour is not met, given the lack of specified sanctions in the current draft Bill.

About the RCP

Our 36,000 members worldwide (including 1,300 in Wales) work in hospitals and the community across 30 different clinical specialties, diagnosing and treating millions of patients with a huge range of medical conditions, including stroke, care of older people, cardiology and respiratory disease. We campaign for improvements to healthcare, medical education and public health. We work directly with health boards, NHS Wales trusts and HEIW; we carry out regular local conversation hospital visits to meet patients and front-line staff; and we collaborate with other organisations to raise awareness of public health challenges.

Please do not hesitate to contact my colleague Lowri Jackson, RCP head of policy and campaigns for Wales by emailing Lowri.Jackson@rcplondon.ac.uk if you have any questions or would like more information about any of our work.

With best wishes,

Dr Gareth Llewelyn

Ja leweyn,

RCP vice president for Wales