Our Health, Our Health Service Green Paper: Summary Document

This Green Paper covers a number of topical issues which relate to the quality of health services and the governance and functions of the NHS in Wales. Broadly, this is what we mean when we use the terms of quality, governance and functions:

Quality – providing the right care, in the right place, at the right time and in the right way.

Governance – the management, monitoring, decision making process and accountability of organisations.

Functions – the activities and services of organisations.

The Green Paper sets out the current position, the challenges we face and asks what else we might do to improve. Due to the breadth of these issues, it is a large document. Whilst we encourage everyone to read the whole of the Green Paper and to comment as widely as possible, we recognise different issues will interest different people.

This document summarises the issues contained in the Green Paper so that you can easily identify and access the parts which interest you.

The section below sets out the key aspects of each chapter. This should help you easily navigate your way through the Green Paper; finding those issues you really want to read about and the discussions you most want to be involved in.

Part 1: Quality First and Foremost

<u>Chapter 1: The Changing Shape of Health Services</u> looks at the changing pattern of health services in Wales and how we are moving towards a system of preventative healthcare, where promoting healthy choices and preventing ill heath becomes the focus, rather than simply treating illness. It questions how legislation could be further used to ensure services work together to meet the local population's needs. It also looks at how the public can become involved more effectively in planning NHS services and how changes in services should be taken forward.

<u>Chapter 2: Enabling Quality</u> focusses on how legislation could be used to ensure quality is the first priority for everyone working in the NHS, and how quality should be reflected in the way services are planned as well as delivered.

<u>Chapter 3: Quality in Practice</u> considers the use of common standards, across all healthcare service providers, including NHS, independent and voluntary sectors, to ensure they deliver high quality services to provide us with the care and patient experience we expect. This chapter also looks at how clinical peer supervision can support health professionals to learn, discuss, and share models of best practice.

<u>Chapter 4: Openness and honesty in all that we do</u> emphasises the importance of being open and honest when things go wrong. While this issue is already progressing in the right direction, the paper questions how legislation can be used to

improve transparency and honesty about performance in the Welsh NHS. This chapter also looks at how concerns, in an increasingly integrated system, should be handled and whether there could be improvements in the joint investigation of complaints across health and social care.

<u>Chapter 5: Better Information, Safely Shared</u> looks at how the NHS can share patient information more effectively, to provide joined-up services and the best quality of care for individuals. This chapter also asks for views on the use of patient information for other purposes such as research.

<u>Chapter 6: Checks and balances</u> considers the arrangements in place for external assurance of health services. It identifies the need to reconsider the arrangements for regulation and inspection in healthcare settings, in light of recommendations made by the Marks review of Healthcare Inspectorate Wales, and the changes proposed by the Regulation and Inspection of Social Care (Wales) Bill. The chapter specifically raises questions about whether we should consider merging Healthcare Inspectorate Wales and Care and Social Services Inspectorate Wales. It also considers whether Community Health Councils need to change to more effectively represent patients and the public.

Part 2 – Strong Organisations, Strong Governance

Chapter 7: NHS Finance, Functions and Planning describes how the NHS reform in 2009 introduced a new organisational, governance and accountability structure, which may now need some legislative change to reflect the current needs of NHS organisations. It focusses on financial matters, including whether Health Boards need borrowing powers to access different sources of finance and if the requirement for Welsh Government to prepare statutory summarised accounts for Health Boards and NHS Trusts still adds value. This chapter also takes into account the various planning duties of NHS organisations and questions the need to better align planning duties to avoid duplication.

Chapter 8: Leadership, Governance and Partnerships looks at how the existing NHS governance framework might be improved. It examines the size and configuration of the board membership for Health Boards and NHS Trusts, as well as the role of the board secretary as advisor to the board. This chapter also explores partnership working, both for securing and sharing professional clinical advice and the wider partnership working arrangements at a UK level. It also considers the accountability and governance arrangements of hosted and joint services and whether, and how, the role of NHS Wales Shared Services Partnerships could become public sectorwide.

Responding to the Consultation

As the outcome of this consultation has potential to inform legislation in the future, we want to collect as many views and responses as possible.

The response form contains all of the Green Paper questions with space to fill in your views. We recognise not everyone will have a view on every issue contained in the Green Paper, but we don't want this to put you off from responding. We

encourage you to provide us with your opinion on those issues which matter to you, even if it is only one of the chapters above.

You can respond by sending any of your responses to:

HQDMailbox@wales.gsi.gov.uk

Or by post to:

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