

# Welsh Government Integrated Impact Assessment Summary

**Title of proposal:**

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

**Department:**

*Health & Social Services*

**Cabinet Secretary/Minister responsible:**

*Vaughan Gething, Minister for Health and Social Services*

**Start Date:**

*Introduction into the Assembly – 17<sup>th</sup> June 2019*

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## **What action is the Welsh Government considering and why?**

1. The Bill proposes to introduce changes that will:
  - strengthen the existing duty of quality on NHS bodies and extend this to the Welsh Ministers in relation to their health service functions;
  - establish an organisational duty of candour on providers of NHS services, requiring them to be open and honest when things go wrong;
  - strengthen the voice of citizens, by replacing Community Health Councils with a new all-Wales Citizen Voice Body that will represent the interests of people across health and social care; and
  - enable the appointment of Vice Chairs for NHS Trusts, bringing them into line with health boards.
2. The Bill will also provide the Welsh Ministers with regulation-making powers to set out a procedure to be followed by an NHS body when the duty of candour has been triggered.

## **How have people most likely to be affected by the proposal been involved in developing it?**

3. The Welsh Government's proposals for the Health and Social Care (Quality and Engagement) (Wales) Bill were first consulted on as part of the Green Paper: Our Health, Our Health Service, between July and November 2015. The Green Paper explored whether legislation could help efforts to further improve the health service in Wales. A report summarising the outcome of the consultation was published in February 2016 and can be viewed via this link:  
<https://gov.wales/green-paper-our-health-our-health-service>
4. After reflecting on the responses, the Government identified a number of proposals to be included in the White Paper: Services Fit for the Future, Quality and Governance in Health and Care in Wales, which was published for consultation between 28 June and 29 September 2017. A consultation summary report was published in February 2018 and can be viewed via this link:  
<https://gov.wales/services-fit-future>
5. In addition to the formal consultation process, the Welsh Government presented at a number of stakeholder meetings before and during the consultation period, and held a number of events between 18 and 28 September at various venues across Wales. These events were attended by a number of groups who are traditionally under-represented in consultations including people with learning disabilities and their carers, young people, older people, and BAME participants.
6. Before introducing the current Bill into the National Assembly for Wales, the Welsh Government has engaged with a range of stakeholders to explain the proposals in more detail, to hear the views of those most likely to be impacted by

the changes and to understand the impacts.

## **What are the most significant impacts, positive and negative?**

7. Alongside the costs and benefits presented in the RIA, a number of other potential impacts have been considered and an integrated impact assessment carried out. A summary of the findings of this process is provided below.
8. A Children's Rights Impact Assessment has concluded the Bill will not have a direct role in promoting the rights of a child or young person and is not expected to have any significant negative impacts. The CRIA outlines areas where some consequential positive impacts may be realised, such as those which may result from the Citizen Voice Body providing complaints advice and assistance to those children and young people who do not currently have a statutory right to an advocate under the Social Services and Well-Being (Wales) Act 2014.
9. The potential impact of the Bill on people in protected groups and those living in low income households has been considered through an Equalities Impact Assessment. The proposals are intended to benefit the health and well-being of the population of Wales as a whole; an assessment of the different components of the Bill found a net positive impact for those citizens in vulnerable and protected groups. The EIA also considered possible mitigations for the potential negative impacts identified; such as the risk that individuals receiving support from the CHCs during the transition to the new Citizen Voice Body may receive a poorer quality services.
10. The Rural Proofing Impact Assessment considered the impact of the Bill on rural communities and individuals living within those communities. It found, overall, the proposals will have a minor net positive impact on people who live in rural areas; with the Citizen Voice Body having the potential to strengthen the voice of rural communities in designing the services they receive and the duty of quality ensuring those services are evaluated based on a broadened definition of quality which includes patient experience. The RPIA also highlighted some potential negative impacts around access to services in local areas and recommended some thought would be needed to consider mitigation of these risks when deciding on the model of operation for the new body.
11. A Privacy Impact Assessment has been conducted in relation to the Bill. The duty of quality, duty of candour, and power to appoint Vice Chairs in Trusts will not require any new personal data to be held or processed by the relevant bodies. The creation of the Citizen Voice Body as a body corporate will require it to handle data which was previously held within NHS systems. The PIA has considered the implications of this change and, in mitigation against the possible risks, the proposed implementation team established to introduce the Body will consider what data needs to be transferred to enable the new body to meet its obligations, and what measures will be required to ensure continued compliance with statutory obligations and best practice in relation to data handling.
12. Impact on the Welsh Language has been explored through a Welsh Language Impact Assessment. It is not expected the provisions of the Bill will have any

negative impact on the use of Welsh Language or on Welsh Language communities. Specific proposals, such as the Duty of Quality requiring patient experience be considered during the planning and evaluation of services, and the intention for the Citizen Voice Body to recruit from the local population to support a representative demographic, are likely to support patients receiving care in the language of their choice and within their communities.

13. Consideration of the impact of the Bill on biodiversity, climate change and natural resources concluded that there would be no direct impact on these areas. A Strategic Environmental Assessment and an Impact Assessment on Carbon Budgets were considered not to be required for the Bill.
14. A Health Impact Assessment has evaluated the anticipated impacts of the legislation as drafted and concluded that placing quality at the heart of decision making will result in improved health outcomes for the people of Wales and will make an overall positive contribution to reducing health inequalities in Wales.
15. A justice impact assessment concluded that the proposals in the Bill are likely to have minimal or nil impact on the justice system.

#### **In light of the impacts identified, how will the proposal:**

- **maximise contribution to our well-being objectives and the seven well-being goals; and/or,**
- **avoid, reduce or mitigate any negative impacts?**

16. The Bill will introduce new duties of quality and candour, replace the existing Community Health Councils with a new Citizen Voice Body, and allow Welsh Ministers to appoint vice-chairs to NHS Trusts.
17. In line with the five ways of working identified within the Wellbeing of Future Generations (Wales) Act 2015, the proposals in the Bill will support **collaboration** and **integration** amongst NHS organisations, and between them and other bodies. It will do this by shifting the focus of quality considerations away from a narrow consideration of the quality of individual services towards one that considers the impact of decisions on the overall quality of services.
18. The Bill provisions on duty of candour will help NHS organisations become learning organisations, supporting **long-term** improvements and the **prevention** of variation and repeated mistakes. The new citizen's voice body will support **involvement** of the public in the planning of health and social services.
19. The provisions in the Bill will also contribute to the well-being goals in a range of ways, some examples will include:
20. **A Wales of Cohesive Communities:** the new Citizen Voice body will be required to seek and represent the views of the population of Wales, including the full range of Welsh communities and the varied Welsh demographics. By

recruiting a volunteer base representative of local communities, and by giving those communities a voice in decision making, the new body will support sustainable, viable, safe and well-connected communities;

21. **A Wales of Vibrant Culture & Welsh Language:** The new body will also be required to promote and facilitate the use of Welsh language as part of its service delivery, which will support the sustainability of Welsh speaking communities. Additionally, evidence from Wales and international research in bilingual communities demonstrate language barriers in accessing health and care services can contribute to poor patient experience. The duty of quality expands the definition of quality to include patient experience, and therefore it can be expected future decision making about services will also need to consider how decisions will impact on vulnerable people and their families who need to access services in their first language, for example people suffering from dementia or a stroke as they may lose their second language, or very young children who may only speak Welsh.
22. **A Healthier Wales:** The duty of candour will require NHS providers to follow a procedure to inform service users, or their representative, when something goes wrong with their care and to publicly report annually on the actions taken to learn from any mistakes made. This will allow individuals to be assured, should something go wrong with their NHS care or treatment, they will be dealt with in an open and honest way. The evidence support that increased openness, transparency and candour are associated with the delivery of higher quality health and social care, and that organisations with open and transparent cultures are more likely to spend time learning from incidents, rather than trying to hide or be overly defensive about issues. This open approach supports a society in which people's physical and mental well-being is maximised and in which choices and behaviours that benefit future health are understood.

### **How will the impact of the proposal be monitored and evaluated as it progresses and when it concludes?**

23. The Bill is multi-faceted and will provide a legislative framework to enable action in a number of interlinked areas to drive learning and improvement and prevent healthcare associated harm.
24. The implementation approach outlined in the RIA builds, where possible, on existing planning and reporting processes to deliver an effective framework for demonstrating outcomes and impacts without excessive additional burden. This approach will underpin the monitoring and evaluation associated with the Bill, making use of routinely collected administrative and survey data, complemented with qualitative evidence from key stakeholders and service recipients.
25. A programme of monitoring and evaluation activity will be developed to correspond with key activities and a range of research and evaluation methods will be considered, depending on the nature of the data required. Given the multiple outcomes anticipated as a result of the legislation, it is important to note

that some elements of the approach will have relevance across the different issues being addressed by the Bill.

26. While the specific evaluation methodology cannot be finalised until the detail of the implementation of the different areas of the bill has been agreed, and while routine health data will provide an essential information source, it must be noted that a number of the issues addressed in the Bill are also being addressed by other forms of action.
27. For example, the provisions in the Bill relating to the establishment of the Citizen Voice Body could ultimately improve service user satisfaction and contribute to a more sustainable NHS if feedback from the general public is more routinely informing service improvements. However, given the wider political and financial environment that the NHS currently operates in, it would be unrealistic to assume there would be no other factors influencing public/service user satisfaction during and post implementation. It will therefore be difficult to fully attribute certain population level trends (as may be identified through this type of data) to the effects of the Bill.

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hefyd ar gael yn  
Gymraeg. This  
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available in Welsh.

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