



Digital Health and Care Wales

Quality Report July - September 2023 (Q2)

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SUMMARY

Digital Health and Care Wales (DHCW) is committed to the aims of the Health and Social Care (Quality and Engagement) (Wales) Act 2020 and the Duty of Quality.

The Act helps to support Welsh Government's 'A Healthier Wales: Long term plan for health and social care'.

The aims of the Duty of Quality are:

- To improve the quality of health services
- To improve outcomes for the people of Wales

The Duty of Quality is split into domains:

- Safe
- Timely
- Effective
- Efficient
- Equitable
- Person-centred



The Duty of Quality has also been split into enablers:

- Leadership
- Workforce
- Culture
- Information
- Learning, improvement and research
- Whole systems approach

This report provides information on how DHCW has:

- Followed the Duty of Quality when making decisions
- Made changes based on what we have learnt
- Made quality improvements
- Improved outcomes

The information in the report is separated under the Duty of Quality Domains to evidence how DHCW has met that domain. The report may not contain information under all the domains.

The report is based on information between July – September 2023 (Quarter 2).



HEALTH AND CARE QUALITY STANDARDS



INTRODUCTION

DHCW has been preparing for the implementation of the Duty of Quality since the Welsh Government statutory guidance was published.

Engagement has been ongoing with presentations to staff at Staff Away Days, Senior Leadership Team meetings, to individual teams and to Board members. DHCW has attended the all Wales Duty of Quality Implementation Group, has an ongoing agenda item in the Quality and Regulatory Group and has provided regular updates to Welsh Government on its' progress.

In line with Mission 5 'Be the trusted strategic partner and a high quality, inclusive and ambitious organisation of the Integrated Medium-Term Plan 2023-26, a focus for DHCW is to 'further embed a culture of quality and continuous quality improvement to demonstrate compliance with the Duty of Quality requirements'.



SAFE

A system that is reliable and safe, avoids preventable harm, learning when things go wrong, identifies and monitors risks and where possible they are reduced or prevented.

QUALITY MANAGEMENT SYSTEMS (QMS)

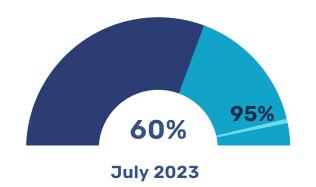
The QMS is a collection of policies, procedures, work instructions and other types of documents which define how DHCW carries out its business, how it governs, creates and delivers products and services.

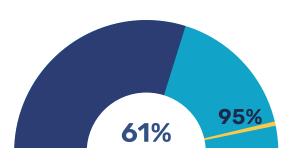
Documents such as procedures and work instructions are stored on SharePoint, also known as an Integrated Management System (IMS) and on iPassport an electronic quality management system. Documents require frequent review to ensure that they remain current, and this is monitored monthly. DHCW has set a target of 95% of documents on the IMS to be within date.

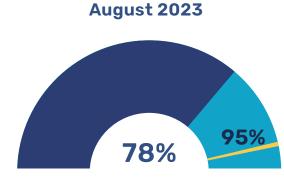
DHCW has several ways of monitoring, managing, and reporting on this. The data is monitored by the quality team who inform document authors of review dates, there are assurance groups which discuss the data and if there are concerns about out-of-date documents, this can be escalated to the directors.

The information below does not include policy data.

IMS Document Status







September 2023

DHCW has not met its' 95% target of IMS documents in date between July to September 2023.

However there has been a significant improvement in September. There was a focus on IMS documents in August and September with escalations to heads of departments and directors which led to the 17% improvement between August and September.





Improvements in this quarter	The introduction of Quality Business Partners who attend each directorate's senior leadership team meetings and can share this information directly and provide support.
	The status is reported monthly to the Management Board through an Integrated Organisational Performance Report (IOPR) which details the improvement plan. This has included focusing on a specific directorate and providing them with support to update documents or to identify documents which may no longer be required.
Future improvements	The drafting of a document management strategy which will provide DHCW with clearer guidance on the management of documents.

NON-CONFORMANCES AND OPPORTUNITIES FOR IMPROVEMENT (OFI)

Internal and external audit actions are stored in the Quality Improvement Action List (QIAL) which is available for all staff to view.

Staff are allocated as action owners and must ensure that the action coming from a nonconformance or an OFI is completed within the agreed timeframe. This data is monitored and reported on monthly via the IOPR and the Quality Report.

OIAL Status



DHCW has not met its' 98% target of all non-conformances and opportunities for improvement being closed within the agreed timeframe. The quality team supported DHCW to update and if relevant to close QIALs during July - September which resulted in a significant decrease in the number of open QIALs. There was a decrease in the percentage September which has been caused by the closure of more than 40 OIALs.





Improvements in this quarter	A fortnightly meeting with QIAL owners to support them in completing their QIALs, a focus in assurance group meetings and escalation to directors at Senior Leadership Team meetings.
Future improvements	There is a planned transfer from the QIAL to an electronic Quality Management System, iPassport, which will send automated notification emails to action owners reminding them to update and close their actions. This process helps to manage the causes of non-conformances and OFIs as well as encouraging continuous improvement.

EFFECTIVE

Decision-making reflects best practice to ensure that optimal services and outcomes are delivered. Transformative, evidence-based services are provided to health boards which cover the whole of life pathway.



To ensure that DHCW is taking the Duty of Quality domains and enablers into consideration, the Impact Assessment section of all reports that are sent to DHCW Committees or Board have been updated to include the Duty of Quality. Report authors must confirm that they have taken the Duty of Quality into consideration and identify which of the quality enablers or domains applies.

Duty of Quality	Choose an
Enabler	item
Domain of Quality	Choose an item
If more than one enabler/domain applies, please list below:	

Future reports will illustrate which enablers or domains have been identified in Board and Committee reports.



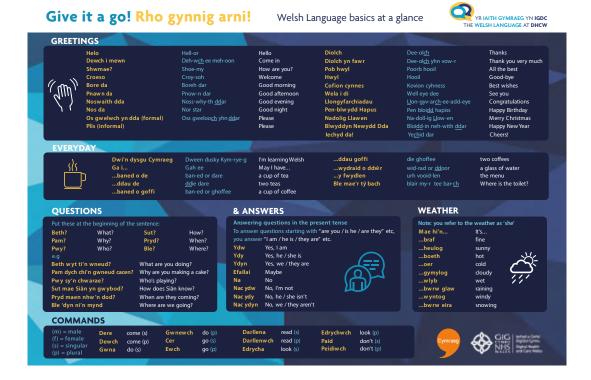
EQUITABLE

Supporting everyone to achieve a better health outcome which does not vary in quality by location, organisation or personal characteristics (such as age, gender, sexual orientation, race, language preference, disability, religion or beliefs, socioeconomic status, political affiliation).



WELSH LANGUAGE

- DHCW have two Board Champions for Welsh Language who actively promote and champion this area of work.
- DHCW has a Welsh Language Group with representatives from across the organisation who work collaboratively to share information, develop and enhance the Welsh Language culture within DHCW.
- DHCW hold a number of engagement and wellbeing activities including the NHS Wales Eisteddfod, Learner of the Year and 'Diwrnod Shwmae' activities. In addition, a number of internal communications (TenTalks) and two thirds of DHCW Public SHA Board meetings are delivered through the medium of Welsh.
- DHCW actively encourage all staff, regardless of level, to use their Welsh Language skills. All staff have access to a range of free training courses, for all levels of Welsh and also confidence building courses that are delivered either online, classroom based or residential.
- DHCW has bi-lingual branding, so each language is treated equitably.
- DHCW have also developed the NHS App which has bi-lingual functionality for patients and the public.



Rhowch gynnig arni!



Give Welsh a go!





Domains	A domain is a particular area or things we want to have good quality health care.
Enablers	An enabler is needed to achieve the quality domain.