
Velindre NHS Trust Annual Report from Healthcare Inspectorate Wales 2014-15

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Purpose

Healthcare Inspectorate Wales (HIW) is the lead independent inspectorate for healthcare in Wales. Its purpose is to provide independent and objective assurance on the quality, safety and effectiveness of healthcare services making recommendations to healthcare organisations to promote improvements.

This annual report has been produced by HIW as a summary of the activity that HIW carried out between 1 April 2014 and 31 March 2015 in Velindre NHS Trust.

The outcomes we seek to influence as a result of our activity within this and other health boards/trusts are that:

- Citizen experience of healthcare is improved
- Citizens are able to access clear and timely information on the quality, safety and effectiveness of healthcare services in Wales
- Citizens are confident that inspection and regulation of the healthcare sector in Wales is sufficient, proportionate, professional, co-ordinated, and adds value.

Overview

HIW has not conducted any visits to Velindre NHS Trust during 2014-15, following an inspection of the [Active Support Unit](#) at Velindre Cancer Centre on 6 February 2014.

Key Themes and Noteworthy Practice

HIW did not carry out any inspections at Velindre NHS Trust during 2014-15.

Governance and Accountability

Velindre NHS Trust's vision is that they will be recognised locally, nationally and internationally as a renowned organisation of excellence for patient and donor care, education and research.

The self assessment conducted and submitted to HIW by Velindre NHS Trust for 2013-14 indicated the following:

Under the *Setting the Direction* theme, the organisation believed that they had demonstrated level 5 maturity – can demonstrate sustained good practice and innovation that is shared throughout the organisation/business which others can learn from. A number of improvement actions were highlighted including exploring benchmarking opportunities and maximising sharing and innovative practice across the organisation with external partners and other organisations/bodies.

Under the *Enabling Delivery* theme, the organisation believed that they had demonstrated level 4 maturity – the trust has well developed plans and processes and can demonstrate sustainable improvement throughout the organisation / business. A number of improvement actions were highlighted including continuing to work towards improving the environment and estate within physical and financial constraints and developing workforce plans and introduction of Electronic Staff Record.

Under the *Delivering Results, Achieving Excellence* theme, the organisation believed that they had demonstrated level 4 maturity – the trust has well developed plans and processes and can demonstrate sustainable improvement throughout the organisation / business. A number of improvement actions were identified including mapping the learning process within the Trust (success to be monitored through monitoring concerns performance and audit compliance) and addressing information sharing between operational performance management and information to the Board (success to be monitored through Board and Committee self assessment).

In addition, conclusions from the Wales Audit Office (WAO) Annual Audit Report 2014 indicated that sound financial management enabled the trust to achieve financial balance at the end of 2013-14, but some specific financial challenges within the Velindre Cancer Centre still need to be considered. This ties in with the self-assessment where Velindre also identified their continued financial stability along with the need to improve the environment and estate within physical and financial constraints. WAO also identified that whilst governance arrangements are effective and there is an agreed Integrated Medium-Term Plan, there are opportunities to improve the detail and co-ordination of the information provided to committees to support enhanced scrutiny, challenge and oversight. This links with the self-assessment where Velindre referred to governing well through the development of a three year plan, while identifying the need to strengthen information sharing between operational performance management and information to the Board.

Engagement

During 2014-15, HIW's Chief Executive, Kate Chamberlain, along with the Relationship Manager, Sarah Jones met with Velindre NHS Trust's Acting Chief Executive, Steve Ham and Chair, Professor Rosemary Kennedy on 18 December 2014.

HIW would like to thank staff at Velindre NHS Trust for their support and engagement during 2014-15, while HIW were exploring the feasibility of moving the hosting arrangements for the Local Supervising Authority for Midwives (LSA) from HIW to Velindre NHS Trust.

Special Reviews and Investigations

Peer review of cancer and palliative care services in Wales is a quality assurance programme that assesses the quality of the service being delivered by multi-disciplinary teams, health boards and palliative care services in Wales. Assessments are set against a framework of specific healthcare standards and national guidelines.

They combine self assessment with independent expert review to not only ensure structures and processes are in place to deliver high quality care, but that clinical teams are working effectively together and that there is a service improvement ethos based on treatment outcomes and patient experience.

The peer review programme is a collaboration between HIW, the South Wales Cancer Network (SWCN), the North Wales Cancer Network (NWCN) and the Palliative Care Implementation Board (PCIB). HIW supports the peer review process by:

- Helping to plan and organise each review
- Formally writing to Health Boards when each review commences
- Making arrangements for Health Boards to submit their self assessment documentation electronically
- Observing the peer review process to ensure that it is fair and impartial and that the outcome of the review is communicated openly and transparently

HIW hosts the reports to support the open and transparent reporting of conclusions and a public version of reports and action plans are published on our website.

During 2014-15, there was a regional head and neck cancer services peer review for Velindre carried out on 25 September 2014 at the Royal Gwent hospital, Newport. The results were not published when this annual report was produced.

Follow Up and Immediate Assurance

Following the publication of the [Trusted to Care](#) report, the Minister for Health and Social Services ordered a series of unannounced 'spot check' visits to hospitals in Wales, during June and July 2014, managed by the Welsh Government (WG). Velindre Cancer Care Centre was the pilot for the 'spot check' visits.

Although HIW did not carry out any inspections at Velindre NHS Trust during 2014-15, we did work closely with the Welsh Government 'spot check' visit team around some follow-up actions from our inspection of Velindre in February 2014.

WG identified an issue that HIW had also found on one of the wards, around medicines found to be stored in a treatment room that was not locked and the fridge storing medication was also not locked. By working together, this was followed up with Velindre NHS Trust and the issue was resolved.

Inspections Activity

Inspection Type	Location	Date
Peer review visits	Velindre Cancer Care – Head & Neck Cancer Services (Royal Gwent Hospital)	25/09/14

Date produced: July 2015