

Memorandum of Understanding (MoU) between Healthcare Inspectorate Wales (HIW) and the Royal College of Anaesthetists (RCOA)

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Revision history and approval

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Formally agreed by	HIW: Kate Chamberlain RCoA: Sharon Drake
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Introduction

1. The purpose of this Memorandum of Understanding (MoU) is to set out a framework to support the working relationship and exchanging of information between Healthcare Inspectorate Wales (HIW) and the Royal College of Anaesthetists (RCoA).
2. This working relationship is part of the maintenance of an effective regulatory system for health and adult social care in England and Wales, which promotes patient safety and high quality care.
3. This MoU relates only to the regulation of healthcare in Wales. It does not override the statutory responsibilities and functions of HIW and RCoA and does not create legally binding rights or obligations; its purpose is to define the joint agreement between the two organisations and to indicate a common line of action.
4. As part of the activities undertaken as part of this MoU, other agreements (for example, information sharing agreements, or joint working protocols) may be established. Such agreements will exist separately to this MoU.

Roles and responsibilities

Healthcare Inspectorate Wales

5. HIW is the independent inspectorate and regulator of healthcare in Wales. HIW carries out its functions on behalf of Welsh Ministers and, although part of the Welsh Government, protocols have been established to safeguard its operational autonomy. HIW's main functions and responsibilities are drawn from the following legislation:
 - Health and Social Care (Community Health and Standards) Act 2003;
 - Care Standards Act 2000 (and associated regulations);
 - Mental Health Act 1983 and 2007, Mental Health (Wales) Measure 2010;
 - Independent Health Care (Wales) Regulations 2011;
 - Controlled Drugs (Supervision of Management and Use) (Wales) Regulations 2008; and
 - Ionising Radiation (Medical Exposure) Regulations 2017 and Amendment Regulations 2018.
6. HIW's priorities are to:
 - provide assurance: provide an independent view on the quality of care;

- promote improvement: encourage improvement through reporting and sharing of good practice; and
 - influence policy and standards: use what we find to influence policy, standards and practice.
7. HIW's core role is to review and inspect NHS and independent healthcare organisations in Wales to provide independent assurance for patients, the public, and others that services are safe and of good quality. Health services are reviewed against a range of published standards, policies, guidance and regulations. As part of this work, HIW will seek to identify and support improvements in services and the actions required to achieve this. If necessary, HIW will undertake special reviews and investigations where there appears to be systematic failures in delivering healthcare services to ensure that rapid improvement and learning takes place.
8. HIW is also responsible for the registration and regulation of independent healthcare providers under the Care Standards Act 2000. The regulation of such establishments is governed by the Independent Health Care (Wales) Regulations 2011.

Royal College of Anaesthetists

9. The RCoA is the professional body responsible for the specialty throughout the UK, and it ensures the quality of patient care through the maintenance of standards in anaesthesia, critical care and pain medicine.
10. The RCoA runs the Anaesthesia Clinical Services Accreditation (ACSA), which is a voluntary scheme for NHS and independent sector organisations that offers quality improvement through peer review.
11. The Invited Review programme is an advisory service offered to NHS and independent sector organisations within the UK who feel they would benefit from expert and independent advice to support locally implemented solutions to improve the anaesthetic services they offer.

Principles of co-operation

12. HIW and RCoA acknowledge their respective statutory and non-statutory responsibilities and functions, and will take account of these when working together.
13. In implementing this agreement, HIW and RCoA intend that their working relationship will be characterised by the following principles:
- the need to make decisions that promote high quality healthcare and which protect and promote patient health, safety and welfare;
 - full openness and transparency between the two organisations as to when cooperation is, and is not, considered necessary or appropriate;

- respect of each other's independent status;
 - the need to use resources and intelligence effectively and efficiently through appropriate coordination and information sharing;
 - the need to maintain public confidence in the two organisations; and
 - a commitment to address any identified overlaps or gaps in the regulatory framework and responsibilities.
14. HIW and RCoA are also committed to transparent, accountable, proportionate, consistent, and targeted regulation (the principles of better regulation).
15. The RCoA and HIW have agreed to exchange relevant information in order to support the provision of high quality anaesthetic services for the benefit of patients.

Joint Priorities and Areas of Work

Exchange of Information

16. Co-operation between HIW and RCoA will often require the exchange of information. Exchange of information will be expected, but not limited, to cases where:
- either HIW or RCoA identifies concerns about the health and wellbeing of the public, particularly in relation to any inspection or review work that involves theatre settings or other settings where anaesthesia is administered, such as obstetrics, emergency, MRI and ECT
 - a resolution to a concern would benefit from a coordinated multi-agency response.
17. In such cases, all exchanges of information will be lawful and proportionate and shared in confidence with the named contact in the other organisation at the earliest possible opportunity. The contact details in Annex B will be used for the raising and sharing of concerns.
18. HIW will provide a list of surgical settings in Wales. The RCoA will provide information on the stage the anaesthetic department is at for implementing the ACSA standards of care, in line with the agreed wording in the HIW Surgical Inspection Framework, Pre-Inspection Self-Assessment:
- ACSA accreditation achieved and continued engagement within the scheme.
 - ACSA visit undertaken – ACSA accreditation not achieved yet.
 - Formal ACSA implementation commenced (and contact with RCoA made).
No ACSA visit yet.
 - No formal ACSA improvement plan implemented.
19. For ACSA and the Invited Reviews, the RCoA cannot provide copies of the reports as they remain the property of the health board.

20. RCoA and HIW will continue to ensure that the inspection domains of the HIW Surgical Inspection map to the ACSA standards.
21. All arrangements for co-operation and exchange of information set out in this MoU and any joint working protocol that may be developed will take account of and comply with the General Data Protection Regulation (GDPR), Data Protection Act 2018, Freedom of Information Act 2000, Health and Social Care (Community Health and Standards) Act 2003, section 76 of the Health and Social Care Act 2008, Care Standards Act 2000 and all relevant HIW and RCoA legislation relating to these matters, and respective Codes of Practice, frameworks or other policies relating to confidential personal information and information issues.
22. Both HIW and RCoA are subject to the Freedom of Information Act 2000. If one organisation receives a request for information that originated from the other the receiving organisation will discuss the request with the other before responding.

Media and Publications

23. HIW and RCoA will seek to give each other adequate warning of, and sufficient information about, any planned announcements to the public on issues relevant to both organisations, including the sharing of draft proposals and publications.
24. HIW and RCoA commit to work together, where appropriate, to produce joint statements or communications highlighting collaboration or activities relevant to both organisations.
25. HIW and RCoA respect confidentiality of any documents shared in advance of publication and will not act in any way that would cause the content of those documents to be made public ahead of the planned publication date.

Governance

26. The effectiveness of the working relationship between HIW and RCoA will be supported by regular contact, either formally or informally. This contact and any partnership working is described in Annex A.
27. At a minimum, there will be an annual meeting between Chief Executives to discuss strategic concerns relevant to both organisations. Meetings to discuss intelligence, policy and operational issues of interest to both organisations should take place between relevant colleagues at both organisations when appropriate; at least twice a year. Contact details of relevant operational level contacts in each organisation are shown at Annex B.
28. Any disagreement between HIW and RCoA will normally be resolved at working level. If this is not possible, it must be brought to the attention of the MoU managers identified at Annex B, who may then escalate it as appropriate within the two organisations to reach a mutually satisfactory resolution. Both organisations should aim to resolve disagreements in a reasonable time.

Duration and review of this MoU

29. Both organisations have identified a person responsible for the management of this MoU in Annex B. They will liaise as required to ensure this MoU is kept up to date, identify any emerging issues and resolve any questions that arise in the working relationship between the two organisations.
30. This MoU is not time-limited and will continue to have effect unless the principles described need to be altered or cease to be relevant. This MoU will be reviewed annually by the MoU managers identified at Annex B, but may also be reviewed more urgently at any time at the request of either organisation.

Signed



Dr Kate Chamberlain

Chief Executive
Healthcare Inspectorate Wales

Date: 17/12/2019



Sharon Drake

Deputy CEO, Director of Clinical Quality &
Research
Royal College of Anaesthetists

Date: 26/11/2019

Annex A – Partnership Working

While this MoU sets out the guiding principle of information and incident sharing, there are also some specific activities that will facilitate the partnership between HIW and RCoA:

Regular engagement

The RCoA and HIW will meet on a quarterly basis for the purposes of:

- informing HIW of any invited review that has taken place or is due to take place within the hospitals
- updating RCoA on any inspection or review findings which relate to surgical services and the provision of anaesthetics

Annex B – Contact Details

Healthcare Inspectorate Wales	Royal College of Anaesthetists
Welsh Government Rhydycar Business Park Merthyr Tydfil CF48 1UZ Tel: 0300 062 8163	Churchill House 35 Red Lion Square London WC1R 4SG Tel: 020 7092 1500

There will be named contacts between HIW and RCoA as follows:

Chief Executives	
Dr Kate Chamberlain <i>Chief Executive</i> kate.chamberlain@gov.wales	Sharon Drake <i>Deputy CEO, Director of Clinical Quality & Research</i> sdrake@rcoa.ac.uk
MoU managers	
Joseph Wilton <i>Head of Partnerships, Intelligence and Methodology</i> joseph.wilton@gov.wales Tel: 0300 025 2663	Carly Melbourne <i>Head of Clinical Quality</i> CMelbourne@rcoa.ac.uk Tel: 020 7092 1699

Concerns

concerns.hiw@gov.wales

Tel: 0300 062 8163

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