

QE 03

Ymchwiliad i Fil Iechyd a Gofal Cymdeithasol (Ansawdd ac Ymgysylltu) (Cymru)

Inquiry into the Health and Social Care (Quality and Engagement) (Wales) Bill

Ymateb gan unigolyn

Response from an individual

I have a number of concerns that the current draft of the Health and Social Care (Quality and Engagement) (Wales) Bill is not strong enough to give the proposed Citizen's Voice body the power to carry out its stated duties of representing the public in an effective manner ie the "teeth" referred to in section 104 d of the Explanatory Memorandum.

My concerns, based on my own experience of working with a Community Health Council fall into three clear but interconnected categories –

- Right of entry
- Unannounced visits
- Right to a response

1. Right of Entry

In order to gather information from people who are receiving either health or social care services it is, in my opinion, vital to speak to them as that service is actually being provided – eg in the hospital ward; in the social care environment.

Speaking to users 'face to face' in a confidential manner, is vital to get a true and honest picture of the public's opinion of the services they are actually getting **at the time they are actually receiving it.**

A strength of the current Community Health Council setup is that they have that right of entry to speak to the service users.

Without this fundamental power, the Citizen's Voice body would immediately be handicapped and unable to obtain the basic information they are seeking.

The information collected at such a visit could, if deemed necessary, be fed back to the service provider immediately if it has highlighted a significant issue.

This right will enable the new Citizen's Voice body to build up its value and reputation with the public.

Although the Bill does state that it "*... must seek the views of the public in whatever way it considers appropriate..*" (Section 13 (2)) there is nothing specific regarding right of entry. This will be a significant weakness in the draft and a watering down of the powers and abilities for the new body.

How can the new body hope to represent the public in an open and worthwhile manner, if they are not able to speak to them at the "coal face"?

2. Unannounced visits

The new Body should have the right to make an unannounced visit. If the service provider has to be notified that are to be visited, then it is reasonable to assume that any existing service issues could be 'patched up' for the purpose of the visit.

Visit Reports can only report on what is observed at the time of the visit. It could (and should) report on what may have happened in the past (ie the user's experience), but such information cannot be evidenced, so weakens the value of the report.

The public must feel free to express their views honestly. If they feel there is a problem, they must feel comfortable to tell a third party (ie the new body) without fear of their care being compromised in any way.

In addition to gaining the public's confidence in the new Body, the staff should also feel free to express their views openly. My experience, working with a Community Health Council, has been that this has provided valuable information about the quality of the service being provided, strengthening the finding of the final report.

Unannounced visits are a means of spotting potential issues early and providing feedback to the provider to enable such issues to be addressed quickly.

Unannounced (followup) visits are simple means of checking whether an identified issue has been addressed.

The current draft Bill contains nothing to indicate that the new Body will have the right to make unannounced visits. This is, in my opinion, a very significant weakness.

How can the Citizen's Voice body be expected to gather information on the true nature of the services being provided to the public, if they have to give the service provider notice that they will be visiting?

3. Right to a response

Section 15 of the Bill.

A current strength (the "teeth") of the current system with Community Health Councils is that having identified and reported an issue, the Health Board is required to formally respond, setting out their interpretation and the actions they propose to remedy the reported issue.

The new Bill contains only weak and vague phrases to cover this most important matter.

What is the value of the "representations" made by the new Body?

What does the phrase ".. must have regard to the representations ..." actually mean?

The current draft Bill is totally inadequate. The new Body must have the right to a response to any report presented. Without this right how can the new Body hope to build up the confidence of the public and actually be able to demonstrate that they do have the "teeth" required to influence changes to the services being provided.

Without this fundamental right, the new Body becomes little more than a talking shop with no powers and certainly no teeth.

4. Conclusion

The new Body should be based on the solid foundations built up by the Community Health Councils; build on its strengths; not take backward steps.

The current draft Bill does NOT do this.

Without the fundamental right to access, unannounced visits and to a response, it would never be able to fulfil its basic role of representing the public.

It would never have the strength and power (the teeth) to influence the services being provided in order to provide the services that the public expect and deserve.