

# **The Chief Executive and Director General of Health and Community Services response to Comptroller and Auditor General's Report on Health and Social Care**

**November 2021**

## **Glossary of Terms**

HCS – Health and Community Services

IGA – Integrated Governance Accountabilities

IGF – Integrated Governance Framework

JNAAS - Jersey Nursing Assessment and Accreditation System

PALS - Patient Advice and Liaison Service

TOR – Terms of Reference

Further Action and Clarification required by PAC on Executive Response to C&AG's Report on Health and Social Care

<b>C&amp;AG Recommendation (in part)</b>	<b>Executive Response (in part)</b>	<b>Further Action Required:</b>	<b>Revised Response</b>	<b>Target date/Responsible Officer</b>
<p><b>1:</b> Document a comprehensive and publicly available Health and Social Care Integrated Governance Accountabilities (IGA) Framework. This structural document should include:</p> <ul style="list-style-type: none"> <li>• arrangements both within HCS, within Government and within the whole Island health and social care system;</li> </ul>	<p>Many of the principal strands of HCS governance have already been established (including TOR). Key actions:</p> <ul style="list-style-type: none"> <li>• Develop an Accountability Framework which specifies how the performance management systems are structured and tracked, to ensure delivery of the corporate objectives at every level of the organisation.</li> <li>• Develop the Integrated Governance Framework document for HCS</li> <li>• Further develop the framework to include the Whole Island system / JCM / our Hospital</li> </ul>	<p>The PAC considers that the response is not clear as to whether the governance frameworks that are being developed will be publicly available (as recommended) and seeks assurance that they will be. It also considers that the published frameworks should not focus on Health and Community Services alone. It requests the Chief Executive Officer to take steps to ensure that the frameworks encompass the Island's entire health and social care system.</p>	<p>The Integrated Governance Framework will be made publicly available. This HCS Board website could be expanded or a new Corporate Governance site for HCS launched.</p> <p>The focus must be on HCS initially. Once satisfied that the HCS IGF is effective, it can then be expanded to include other areas of GOJ &amp; the whole Island health &amp; social care system.</p>	<p>Director General HCS &amp; Board Secretary</p> <p>HCS IGF June 2022</p> <p>Dec 2022 to include other GOJ departments &amp; the wider health care system.</p>
<p><b>2:</b> Review the terms of reference for and the membership of the HCS Board.</p>	<p>A review of the Terms of Reference will consider all these points &amp; this process will start at the meeting 8 November 2021.</p>	<p>The PAC considers that the response to the recommendation is appropriate, however it requests to view the draft</p>	<p>The process has started in the meeting 8<sup>th</sup> Nov 2021. The draft TORs will be made available as soon as ready.</p>	<p>Director General HCS &amp; Board Secretary</p> <p>Draft Dec 2021.</p>

		terms of reference as soon as they are available.		
<p><b>4:</b> Prioritise the finalisation of the Board Assurance Framework to support the work of the HCS Board. This document should be publicly available and be updated and publicised on at least a six monthly basis.</p>	<p>The development of a Board Assurance Framework has been discussed in detail with the GOJ Risk &amp; Audit Team. The development of a BAF will be considered in conjunction with the GOJ Risk management Strategy, however, this is a long-term project. Once a detailed timeframe and work programme for the development of the Framework is in place, this will be shared with the C&amp;AG.</p>	<p>The Committee expects the development of a Board Assurance Framework to be prioritised, in keeping with the wording of the C&amp;AG's recommendation, rather than 'considered' as phrased in the Executive Response. Furthermore, it is concerned that Q4 (October-December) 2025 is too long a timescale for what is an important document setting out how the HCS Board obtains assurance over the key risks faced by the health and social care system on the Island. The PAC notes that a Risk Manager has been appointed and will be commencing mid-November 2021. This role will ensure the development and embedding of risk management processes within HCS and the maintenance of a risk</p>	<p>Accepted as recommended by PAC</p>	<p>HCS Board Secretary/Director General/ Risk Manager</p>

		<p>register which fully reflects risk exposure. It therefore urges the Director General to produce the Assurance Framework by Q2 (April-June) 2023, to align with the work of this key appointment and provide reassurance that the HCS Board has a clear picture as to how it obtains assurance over key risks.</p>		
<p><b>5:</b> Publish an Annual Quality Account for all health and social care services provided by Government. The Annual Quality Account should include, as a minimum, information on: • identification of and progress made in identified areas of improvement</p>	<p>The introduction of an organisation wide Quality Account enabling staff to reflect on their hard work and celebrate their achievements and successes has been identified as a key deliverable within the Q4 2023 Scrutiny Office   States Greffe   Morier House   St Helier   Jersey   JE1 1DD Tel: 01534 441080   Fax: 01534 441077   email: scrutiny@gov.je ratified Quality and Safety Strategy 2021-2023. Work on this will commence early 2022 with the aim of being able</p>	<p>The PAC considers that although it is encouraging that an Annual Quality Account is planned for 2022, there should also be one prepared for 2021. Further, the response does not specifically commit to the account including 'identification of and progress made in identified areas of improvement' nor to the Annual Quality Accounts' publication and the PAC seeks assurance that it will. The Committee requests that if a 2021 report is not prepared, the</p>	<p>A new Director of Quality and Safety is being recruited to take this important work forward. The recommendation will be a priority of the new director. Interviews are being held in November 21.</p>	<p><b>Quality &amp; Safety Team / Director Quality &amp; Safety Q4 2023</b></p>

	to provide an annual quality account for 2022	areas of improvement identified for 2022 to be reported in the 2022 quality account should be published in early 2022.		
<b>6:</b> Consider appointment of independent members to the assurance committees to ensure that there is appropriate independent challenge of, and assurance over, performance.	Review the constitution & remuneration of other GOJ Boards (for example Law Officers Department) to explore how this could be developed within HCS.	The PAC considers that the response only commits to looking at other Government of Jersey Boards to explore how the appointment of independent members could develop within HCS. The PAC urges HCS to review more widely and it seeks more detailed information on how this recommendation will be implemented in practice.	Wider best practice and experiences on independent assurance committees will be considered as part of the review. However, to consider the appointment of independent members to the assurance committees, the review will need to take into account that HCS is a government department and part of the wider GoJ governance and accountability framework .  Therefore, a first step is to explore other GOJ Boards, to understand their arrangements on responsibility, accountability, and remuneration. This information will support the wider review and ensure	Head of Financial Governance  HCS Board Secretary  End Q2 2022

			any proposals can practically be embedded.	
<p><b>8:</b> Document a long-term strategy for health and wellbeing to be delivered across Government, health and social care services and key partners. Progress against the long-term strategy should be reported publicly.</p>	<p>People &amp; Corporate Services are developing a GOJ Wellbeing Strategy. As part of this work there will be a wholesale review of the existing Occupational Health provision and in particular to establish a) which potential partner organisations on the island could provide specialist and or niche services to augment the existing offering; and b) establish which SME businesses on the island would be interested in accessing such an offer to better support the Wellbeing of their own respective workforce Health will present their strategy to complement this.</p>	<p>The Committee is concerned that the response does not address the recommendation, in particular that it only addresses States employees rather than including and informing the wider public. The C&amp;AG was clearly recommending that a longterm Strategy for Health and Wellbeing be delivered across Government, Health and Social Care services and key partners, and that progress against the Strategy should be reported publicly. The PAC supports the rationale for a clear and public strategy that links the longterm performance outcome measures of the Jersey Performance Framework to the annual operational plan of the department and to the plans of other providers in</p>	<p>The provision of occupational health and supporting health and wellbeing across GOJ staff is changing. Before COVID the results of the 'be heard survey' showed that wellbeing was a key theme and priority for attention across GoJ departments. In addition, sickness data showed a shift to increasing numbers of sick days due to anxiety, stress and depression alongside increasing access to AXA counselling services.</p> <p>This information has partly informed an increasing focus by departments on plans to support staff's health and wellbeing as part of our 'People and Culture' programme. Further, that the shifting needs have helped inform a review of the current</p>	<p><b>Head of Organisation Development (COO)/Associated Chief for Allied Health Professionals and Wellbeing</b></p>

		<p>the health and social care system. It urges the Chief Executive to commit to producing a public Strategy without delay.</p>	<p>occupational health contract. A tender process over COVID saw a low interest from service providers and AXA was eventually awarded the contract again. A growing understanding of the shifting workforce health and wellbeing need and collaboration across departments has informed a review and shift in the contracted services from AXA to improve and match services to demand.</p> <p>Further, work has begun to review and develop opportunities for developing and building on alternative, innovative inhouse and local provision building the capability and capacity for on-island provision. Approaches under development would build on successful models such as the multi-disciplinary approaches in</p>	
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			HCS such as the pain clinic and CLS back-to-work initiatives.	
<p><b>9:</b> Complete the review of a PALS (Patient Advice and Liaison Service) and prioritise the establishment of a PALS or equivalent service.</p>	<p>A review of the PALS service has been completed. A Task &amp; finish group is being set up to review and establish the PALS function going forward. Pilot of PALS desk in Gwyneth Huelin from October – December 2021. This will provide users of our service any guidance, support, advice or information should they have concerns, Scrutiny Office   States Greffe   Morier House   St Helier   Jersey   JE1 1DD Tel: 01534 441080   Fax: 01534 441077   email: scrutiny@gov.je suggestions or queries about their care at point of contact. Service users will be signposted to local services, support groups and complaints process, if necessary.</p>	<p>From the response given, the Committee is unclear about plans for the Patient Advice and Liaison Service beyond the pilot scheme. It seeks a clear commitment to a rollout of the service.</p>	<p>The PALS function going forward will be a permanent desk at the Gwyneth Huelin site. The reason it is temporary currently is due to the space the desk is currently situated. The plan is to have the desk relocated within the Gwyneth Huelin site to a more accessible area which can also have a private space for distressed/upset patients/relatives/visitors. Work is ongoing on staffing the desk Monday to Friday 9am until 5pm</p>	<p><b>Chief Nurse</b></p>



<p><b>12:</b> Document and implement a formal action plan to rollout JNAAS (Jersey Nursing Assessment and Accreditation System) to all community providers.</p>	<p>JNAAS was temporarily suspended during the Covid Pandemic. At that time, JNAAS had been implemented across all inpatient HCS areas and Jersey Hospice Care. JNAAS has now recommenced, and all HCS inpatient areas will have been assessed by December 2021. At the initial discussions with some community providers, there were no immediate plans to introduce a community JNAAS frameworks, due to competing priorities. However, this will be further reviewed in line with the commissioning processes (Q4 2022 /Associate Chief Nurse) We are already creating frameworks for our own HCS Mental Healthcare Teams and have templates that can be modified for other community teams/providers. The templates can be individualised to</p>	<p>The Committee is concerned that the response does not address the C&amp;AG's clear recommendation to document a formal action plan to rollout JNAAS to all community providers and goes on to indicate there is no immediate plan to do so 'due to competing priorities'. The PAC considers this to be unacceptable, especially given that the recommendation is, prima facie, accepted. The PAC urges the Chief Executive and/or the Director General HCS to clarify the position.</p>	<p>The inclusion of JNAAS will be included in all new or renegotiated contracts with community providers. Under current contracts provision for JNAAS is not currently explicitly described, so subject to the providers priorities.</p>	<p><b>Associate chief Nurse (Professional Practice)</b></p>
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	commissioned organisations, without losing the standardised evidence-based benchmarks we use.			
<b>15:</b> Implement a more comprehensive quality and safety programme across all health and social care services.	The Quality and Safety Strategy 2021- 2023 has been approved within HCS and will be rolled out in Q1 2022. The Strategy describes: • how we organise ourselves • how we will embed an open learning culture cross-cutting throughout all our structures • how we will implement constant improvement; and • how we will measure and share this success in delivering a new Jersey Standard for Quality and Safety within health and social care for all Islanders	The PAC commends the HCS approval of the Quality and Safety Strategy 2021- 2023, however it seeks clarity and further evidence on how a more Scrutiny Office   States Greffe   Morier House   St Helier   Jersey   JE1 1DD Tel: 01534 441080   Fax: 01534 441077   email: scrutiny@gov.je comprehensive quality and safety programme across all health and social care services will be delivered, including those services not provided within HCS.	This will be a priority of the new director. Interviews are being held this week for suitable candidates.	<b>Quality &amp; Safety team / Director Quality &amp; Safety</b>
<b>16:</b> Extend further the scope and nature of routine public reporting of the performance of all elements of health and social care, including through the Government of Jersey	Reporting is currently restricted due to technical limitations and staffing capacity. The new EPR (electronic patient record) system (implementation by end of 2022) will enable	The PAC request to see a clearer 'roadmap' documented of what information is planned to be made public, by when and how this compares to other jurisdictions.	HCS Quality & Performance Report is now published on www.gov.je on a quarterly basis, timetabled to align with the publication of the GOJ Performance Framework.	<b>Head of Informatics / Director of Improvement &amp; Innovation</b>

<p>website, taking into account performance reporting in other jurisdictions.</p>	<p>better and easier reporting. In the meantime, we will review options for public reporting including taking into account performance reporting in other jurisdictions</p>		<p>The indicators in the QPR are reviewed on an annual cycle and it is ensured that Care Groups have the indicators they need to inform and run their business in their local scorecards and dashboards. The format is based on standard reporting that can be seen in many NHS Organisations. The indicators are chosen to be reliable and robust – as set out in the report. Standards have been set based on benchmarks. This is set out for each indicator in the appendix to the report. The roadmap is no longer required – this is now a business as usual task for the Informatics team and the report is public. Report and indicator development as part of the annual review process is standard practice in other organisations.</p>	
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<p><b>17:</b> Improve the arrangements for the management of risks by: • documenting the risk appetite for the key risks identified on the risk register • ensuring that risk mitigation actions are aimed at managing risks within the identified risk appetite • clarifying the interaction between the HCS approach to risk and the Government ERM approach • improving the audit trail through the assurance committees and the HCS Board as to how risks have been managed on and off the risk register; and • ensuring the HCS Board reviews the top health and social care system risks on a systematic basis at least twice a year.</p>	<p>A Risk Manager has been appointed &amp; will start mid-November to further develop &amp; embed risk management process within HCS. This will incorporate actions to meet the recommendation in full. A Risk Management Committee has been established (terms or reference attached to original response but not reproduced here). The risk appetite document is being developed for presentation at the Risk Management Committee. Following agreement here, this document will need to be presented to the Senior Leadership for approval &amp; the Quality &amp; Risk Assurance Committee for assurance. The inclusion of the Risk Register at the HCS Board will feature on the annual work plan for 2022.</p>	<p>The Committee commends the detailed response to this recommendation; however it seeks clarity on specifically how the HCS arrangements for risk management and governance of risk relate to Government-wide arrangements, including the role of the Government Risk and Audit Committee.</p>	<p>HCS will align its risk management processes with the GOJ wide strategy &amp; process for managing risks (ERM site). The development of the GOJ ERM site did not consider the requirements of HCS before its implementation &amp; consequently, HCS are unable to report into this. However, exploring alternative ways to report until a solution is found.</p>	<p><b>Board Secretary HCS</b></p> <p>Q2 2022</p>
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