



Llywodraeth Cynulliad Cymru
Welsh Assembly Government

Healthcare Standards for Wales

**Making the Connections
Designed for Life**

May 2005



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WALES
GIG
CYMRU



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Foreword by the Assembly Minister for Health and Social Services



Between November 2004 and February 2005, the Welsh Assembly Government consulted on the Advisory Board for Healthcare Standards in Wales' proposals for a common framework of healthcare standards to support the NHS and partner organisations in providing effective, timely and quality services across all healthcare settings. Your responses have helped the Advisory Board and the Assembly refine the proposals and I now have great pleasure in commending 'Healthcare Standards for Wales' to you.

First and foremost this work is about improving the patient experience and placing patients at the centre of the way in which services are planned and delivered. The fundamental cornerstone of this document is therefore, the further development of safe, high quality care for all patients in Wales. Along with the development of National Service Frameworks and National Institute for Clinical Excellence (NICE) guidance, this is part of our sustained drive to remove inequalities in health across the breadth of Wales.

Standards are fundamental to the quality agenda. They promote a framework for care based on shared values that can be adopted universally, ensuring that quality services are provided equitably, robustly, and ethically across the full range of services provided by or for the NHS in Wales, no matter what the setting. They also establish a basis for continuous improvement and will help simplify the current complicated array of standards and guidance on healthcare organisations over time. In due course, the Welsh Assembly Government intends to publish integrated standards for health and social care.

All healthcare organisations will be expected to assure themselves and the communities they serve that they are achieving or working towards these standards of care. Healthcare Inspectorate Wales will carry out external, independent assessments of organisations to ensure compliance with, or progress towards meeting the Standards. The next stage in the process will be the

development of the criteria against which the standards contained in 'Healthcare Standards for Wales' will be assessed. To achieve this, we will again be calling on the expertise of the Advisory Board and there will be a further consultation on their proposals later in the year.

A handwritten signature in black ink, appearing to read 'Brian Gibbons'.

BRIAN GIBBONS AM

Healthcare Standards for Wales

Introduction

1. The public consultation 'A Statement of Healthcare Standards – Standards for NHS Care and Treatment in Wales' set out our proposals aimed at cutting bureaucracy and simplifying the current complicated set of healthcare standards so that they can be easily applied and understood. A summary of the main points made in response to the consultation will be available on the Welsh Assembly Government's website – www.wales.gov.uk

2. All responses to the consultation, including the feedback received at the two workshops hosted by the Welsh Assembly Government in January 2005 have helped refine the production of 'Healthcare Standards for Wales'. Overall, respondents welcomed the initiative and the comments received have led to a number of important improvements to the original proposals published in the consultation document. Most of the debate focussed on the 6 central questions posed in the consultation document and how the standards would fit with existing quality, safety and performance improvement frameworks. Consequently we have:

- set the Standards in context by demonstrating how they fit with other Assembly priorities and strategies such as '*Making the Connections: Delivering Better Services for Wales*' and the '*10-year Strategy for Health and Social Care: Designed for Life*';
- retained the original four domains proposed: *patient experience; clinical outcomes; healthcare governance and public health*, but the standards have been re-organised within them so that they directly map across to existing clinical governance guidance;
- shown the links between the Standards and the Performance Improvement Framework and organisations' balanced scorecards and how they will be used as the basis for self assessment and external assessment by Healthcare Inspectorate Wales (HIW);
- adopted the terminology being used in England: *standards; quality requirements; criteria; targets and benchmarks*. Their definitions are incorporated within the glossary to this document; and
- concluded that there was a need for each individual standard to have both a 'core' and 'developmental' element – the 'core' part to be the

basic standard of care to be achieved immediately and the 'developmental' part to be achieved over a longer time period and to a higher level. Precisely how the line will be drawn between the 'core' and 'developmental' elements of each standard will be considered as part of the development of assessment criteria work and will be the subject of a further consultation exercise.

3. The final Healthcare Standards in this document have been recommended by the Advisory Board for Healthcare Standards in Wales and accepted by the Assembly Minister for Health and Social Services, Dr Brian Gibbons AM. The standards will come into effect from 1 June 2005 and will set out the level of quality all healthcare organisations will be expected to meet or be moving towards in Wales. This will enable us to progress to the next stage of this work and define the criteria for assessing compliance with, or progress towards, meeting these standards. It is planned that formal assessment against the standards will begin in April 2006.

4. It is recognised that there is a need for greater alignment between the Healthcare Standards published in this document and the national minimum standards for independent and voluntary sector healthcare providers as well as the standards in operation across the social care sector. In practice, the Welsh Assembly Government has already taken many of these standards into account but accepts that a considerable amount of work remains to be done to bring about a truly seamless and integrated approach to a standards-based system of care across all sectors. Work has already begun on aligning the standards and will continue throughout the development of the assessment criteria. It is hoped that a common framework of standards for all sectors will be in place in around 2 years time.

The Importance of Standards to the Quality Agenda in Wales

5. The Healthcare Standards set out in this document have been developed with the following objectives in mind:

- to promote care based on shared values that can be adopted universally, ensuring that quality services are patient and user centred and provided equitably, robustly and ethically across the full breadth of services we provide, no matter what the setting;
- to establish a basis for continuous improvement to help ensure that additional resources made available deliver the improved levels of patient care the people of Wales have a right reasonably to expect;

- to provide a framework both for self-assessment by all healthcare organisations and for external review and investigation by Healthcare Inspectorate Wales;
- to help clarify the current complicated array of standards and guidance on the NHS, independent and voluntary sectors, with a view to, over time, simplifying and rationalising expectations on the service; and
- to enhance the reputation of the NHS in Wales as a model employer, commissioner and provider of services which delivers the benefits of improved services equitably to all members of society.

6. The healthcare standards will also provide a solid base on which healthcare organisations can build and achieve the new and more challenging expectations for patient care set out in the Welsh Assembly Government's 10-year strategy, *'Designed for Life'*, which is being published in parallel with *'Healthcare Standards for Wales'*.

7. It is recognised that there are two overlapping bodies of practice and skills described as 'evidence-based practice' and 'values-based practice'. Each is not new, but has developed rapidly as ways of delivering effective clinical governance. The intention of the standards in this document is to promote integrated application of both these approaches to commissioning and delivering healthcare.

National Service Frameworks and NICE Guidance

8. As emphasised throughout the consultation period National Service Frameworks (NSFs) and National Institute for Clinical Excellence (NICE) guidance will remain a key component in the Welsh Assembly Government drive to raise the quality and safety of patient care. They play a vital role in supporting local improvements in service quality and healthcare organisations will be increasingly assessed on their ability to deliver high quality standards across a range of areas, including NSFs and NICE guidance.

9. It is likely that NSFs, national standards such as those for cancer and NICE guidance will be assessed in the main as part of the 'developmental' elements of the Healthcare Standards. Healthcare organisations and practices will need to be able to demonstrate that they are making progress against the quality requirements described. Healthcare Inspectorate Wales, Care Standards Inspectorate for Wales and Social Services Inspectorate for Wales will undertake thematic reviews of progress, jointly where appropriate.

Standards for All

10. First and foremost the Healthcare Standards are designed to deliver the improved levels of care and treatment the people of Wales have a right reasonably to expect.

11. These standards need to be taken into account by those providing healthcare, no matter what the setting, those managing health services, those commissioning healthcare and, most importantly, for the general public to be aware of the standards of healthcare they can expect to receive.

12. The standards will also be used by Healthcare Inspectorate Wales who have responsibility for assessing the quality, safety and effectiveness of health and health care provided in Wales. It is not expected that all healthcare organisations will be fully compliant with all the Healthcare Standards immediately. On this basis each organisation should, following self-assessment, describe clearly how and by when it will be compliant. This should be part of its annual operational planning process and performance agreement with the Health and Social Care Department.

13. Throughout these standards 'healthcare organisations' are defined as: Welsh NHS bodies, independent contractors and other organisations and individuals, including the independent and voluntary sectors, which provide or commission healthcare for individual patients, service users and the public.

14. The statements that describe each of the domains are derived from core values and should underpin both the commissioning and delivery of healthcare services delivered for the population of Wales. Each Standard within a domain then describes the values that it represents to make them clear, deliverable and their achievement measurable.

The Standards

First Domain: The Patient Experience

Standards to support the provision of healthcare in partnership with patients, service users, their carers and relatives and the public will be based on plans and decisions that respect diverse needs and preferences. Services will be user friendly and patient centred. Healthcare will be provided in environments that promote patient and staff wellbeing and respect for individual patients' needs and preferences in that they will be designed for the effective and safe delivery of treatment and care and are well maintained and cleaned to optimise health outcomes for patients.

Standard 1

The views of patients, service users, their carers and relatives and the public are sought and taken into account in the design, planning, delivery, review and improvement of health care services and their integration with social care services.

Standard 2

The planning and delivery of healthcare:

- a) reflects the experiences, views and preferences of patients and service users;
- b) reflects the health needs of the population served;
- c) is based on nationally agreed evidence and best practice; and
- d) ensures equity of access to services.

Standard 3

Patients with emergency health needs access appropriate care promptly and within national time-scales set annually by the Welsh Assembly Government.

Standard 4

Healthcare premises are well-designed and appropriate in order to:

- a) promote patient and staff well-being;
- b) respect different patients' needs, privacy and confidentiality;

- c) have regard for the safety of patients, users and staff; and
- d) provide a safe and secure environment which protects patients, staff, visitors and their property, and the physical assets of the organisation.

Standard 5

Healthcare services are provided in environments, which

- a) are well maintained and kept at acceptable national levels of cleanliness;
- b) minimise the risk of healthcare associated infections to patients, staff and visitors, achieving year on year reductions in incidence; and
- c) emphasise high standards of hygiene and reflect best practice initiatives.

Standard 6

Healthcare organisations, in recognising different language, communication, physical and cultural needs:

- a) make information available and accessible to patients, service users, their carers and relatives and the public on their services;
- b) provide patients and service users with timely information on their condition; the care and treatment they will receive as well as after-care and support arrangements; and
- c) provide patients and service users with opportunities to discuss and agree options relating to their care.

Standard 7

Patients and service users, including those with long-term conditions, are encouraged to contribute to their care plan and are provided with opportunities and resources to develop competence in self-care.

Standard 8

Healthcare organisations ensure that:

- a) staff treat patients, service users, their relatives and carers with dignity and respect;
- b) staff themselves are treated with dignity and respect for their differences;
- c) informed consent is obtained appropriately for all contacts with patients and service users and for the use of confidential patient information; and
- d) patient information is treated confidentially, except where authorised by legislation to the contrary.

Standard 9

Where food is provided there are systems in place to ensure that:

- a) patients and service users are provided with a choice of food which is prepared safely and provides a balanced diet; and
- b) patients and service users' individual nutritional, personal, cultural and clinical dietary requirements are met, including any necessary help with feeding and having access to food 24 hours a day.

Standard 10

Healthcare organisations ensure that people accessing healthcare are not unfairly discriminated against on the grounds of age, gender, disability, ethnicity, race, religion, or sexual orientation.

Second Domain: Clinical Outcomes

Healthcare decisions and services will be based on what appropriately assessed research evidence has shown will provide an effective outcome for patients and service users taking account of their individual needs and preferences. Patients and service users will receive services as promptly as possible, and will not experience unreasonable delay at any stage of service delivery or of their care pathway.

Standard 11

Healthcare organisations ensure that:

- a) clinical care and treatments are delivered by healthcare professionals who make clinical decisions based on evidence based practice;
- b) clinical care and treatments are carried out under appropriate clinical supervision and leadership;
- c) clinicians continuously update skills and techniques relevant to their clinical work including peer reviews; and
- d) clinicians participate in regular audit and review of clinical services.

Standard 12

Healthcare organisations ensure that patients and service users are provided with effective treatment and care that:

- a) conforms to the National Institute for Clinical Excellence (NICE) technology appraisals and interventional procedures, and the recommendations of the All Wales Medicines Strategy Group (AWMSG);

- b) is based on nationally agreed best practice and guidelines, as defined in National Service Frameworks, NICE clinical guidelines, national plans and agreed national guidance on service delivery;
- c) takes account of patients' physical, social, cultural and psychological needs and preferences; and
- d) is integrated to provide a seamless service across all organisations that need to be involved, including social care organisations.

Standard 13

Healthcare organisations, which either lead or participate in research, have systems in place to ensure that the principles and requirements of the research governance framework are consistently applied.

Third Domain: Healthcare Governance

Providers and commissioners of healthcare will have in place systems that support both managerial and clinical leadership and accountability centred around patient and service user needs and preferences. Working practices will be in place to enable probity, quality assurance, quality improvement and patient safety to be the central components of all routines, processes and activities.

Standard 14

Healthcare organisations continuously and systematically review and improve all aspects of their activities that directly affect the safety and health of patients, service users, staff and the public. They will not only comply with legislation, but apply best practice in assessing and managing risk.

Standard 15

Healthcare organisations, recognising different language and communication needs, ensure that patients, service users, relatives and carers:

- a) can provide feedback on their experiences and the quality of services;
- b) have their complaints looked at promptly and thoroughly in accordance with complaints procedures;
- c) are given information about complaints advocacy support provided by Community Health Councils in Wales; and
- d) receive assurance that organisations act on any concerns and make appropriate changes to ensure improvements in service delivery.

Standard 16

Healthcare organisations have systems in place:

- a) to identify and learn from all patient safety incidents and other reportable incidents;
- b) to report incidents to the National Patient Safety Agency's (NPSA) National Reporting and Learning System and other bodies in line with existing guidance;
- c) to demonstrate improvements in practice based on shared local and national experience and information derived from the analysis of incidents; and
- d) to ensure that patient safety notices, alerts and other communications concerning safety are acted upon within required time-scales.

Standard 17

Healthcare organisations comply with national child protection and vulnerable adult guidance within their own activities and in their dealings with other organisations.

Standard 18

Healthcare organisations have planned and prepared, and where required practised, an organised response to incidents and emergency situations, which could affect the provision of normal services.

Standard 19

Healthcare organisations ensure that:

- a) all risks associated with the acquisition and use of medical devices are minimised;
- b) all reusable medical devices are properly decontaminated prior to use and that the risks associated with decontamination facilities and processes are well managed;
- c) quality, safety and security issues of medicines are managed; and
- d) the prevention, segregation, handling, transport and disposal of waste are managed so as to minimise the risks to the health and safety of staff, patients, the public and the safety of the environment.

Standard 20

Healthcare organisations work to enhance patient care and to continuously improve staff satisfaction by providing best practice in human resources management.

Standard 21

Healthcare organisations:

- a) undertake all necessary employment checks and ensure that all employed or contracted professionally qualified staff are registered with the relevant bodies;
- b) require that all employed professionals abide by their published codes of professional practice and conduct; and
- c) address where appropriate under-representation of minority groups.

Standard 22

Healthcare organisations ensure that staff:

- a) are appropriately recruited, trained and qualified for the work they undertake;
- b) participate in induction and mandatory training programmes; and
- c) participate in continuing professional and occupational development.

Standard 23

Healthcare organisations ensure that staff are supported by:

- a) processes which permit them to raise, in confidence and without prejudicing their position, concerns over any aspect of service delivery, treatment or management; and
- b) organisational and personal development programmes which recognise the contribution and value of staff.

Standard 24

Healthcare organisations work together with social care and other partners to meet the health needs of their population by:

- a) having an appropriately constituted workforce with appropriate skill mix across the community; and
- b) ensuring the continuous improvement of services through better ways of working.

Standard 25

Healthcare organisations use effective information systems and integrated information technology to support and enhance patient care, and in commissioning and planning services.

Standard 26

Healthcare organisations have effective records management processes in place to ensure that:

- a) from the moment a record is created until its ultimate disposal, the organisation maintains information so that it serves the purpose it was collected for and disposes of the information appropriately when no longer required; and
- b) patient confidentiality is maintained.

Standard 27

Governance arrangements representing best practice are in place which:

- a) apply the principles of sound clinical and corporate governance;
- b) ensure sound financial management and accountability in the use of resources;
- c) actively support all employees to promote openness, honesty, probity, accountability, and the economic, efficient and effective use of resources;
- d) include systematic risk assessment and risk management; and
- e) are integrated across all health communities and clinical networks.

Standard 28

Healthcare organisations:

- a) ensure that the principles of clinical governance underpin the work of every team and every clinical service;
- b) have a cycle of continuous quality improvement, including clinical audit; and
- c) ensure effective clinical and managerial leadership and accountability.

Fourth Domain: Public Health

Healthcare organisations will collaborate with relevant organisations and local communities to ensure the design and delivery of programmes and services to promote, protect and improve health, and which will tackle health inequalities and help people to live healthy and independent lives.

Standard 29

Healthcare organisations promote, protect and demonstrably improve the health of the community served and reduce health inequalities by:

- a) collaborating and working in partnership with local authorities and other agencies in the development, implementation and evaluation of health, social care and well being strategies; and
- b) ensuring that needs assessment and sound public health advice informs their policies and practices.

Standard 30

Healthcare organisations:

- a) have systematic and managed disease prevention and health promotion programmes, which include staff, which meet the requirements of the National Service Frameworks, national plans and health promotion and prevention priorities; and
- b) take fully into account current and emerging policies and knowledge on public health issues in the development of their public health programmes, health promotion and prevention services, and the commissioning and provision of services.

Standard 31

Healthcare organisations:

- a) have plans in place to mobilise resources to protect the public in the event of significant infectious disease outbreaks and other health emergencies;
- b) identify and act upon significant public health problems and health inequality issues, with Local Health Boards taking the leading role;
- c) implement effective programmes to improve health and reduce health inequalities; and protect their populations from identified current and new hazards to health; and
- d) encourage and support individuals to recognise their own responsibilities in maintaining their health and well being.

Standard 32

Healthcare organisations achieve the Corporate Health Standard, the national quality mark for workplace health, moving to a higher level on reassessment.

Aligning the Standards with the five themes of Clinical Governance

Each of the standards within the domains have been organised so that they can be directly mapped across to existing clinical governance guidance as illustrated in the table below:

Standard Number	Domain	Clinical Governance Theme
1-10	Patient experience	Patient experience
11-13	Clinical outcomes	Processes for quality improvement
14-19	Healthcare governance	
20-24		Staff focus
25-26		Use of information
27-28		Leadership, strategy and planning
29-32	Public health	

NEXT STEPS

Assessing Healthcare Standards: developing the method of assessment

15. These Healthcare Standards are broad and overarching; they now need to be translated into a format that makes them measurable and against which healthcare organisations can be assessed.

16. The first step will be to develop a set of criteria for their assessment. These criteria must be able to discriminate between compliance and non-compliance in a transparent and graduated manner and should draw, wherever possible, from existing evidence and information sources.

17. It is also important to map the relationship between the overarching Healthcare Standards and other policies, guidance and service standards; for example, National Service Frameworks and Welsh Risk Management Standards. When healthcare organisations are working with partners, particularly in social care, the standards must be considered alongside other standards and performance frameworks with a view always to achieving the best service for patients and service users. The Welsh Assembly Government will work with other relevant bodies towards more integrated standards and performance frameworks for healthcare organisations and partner services.

18. This mapping process will both describe the overall relationships between the various levels of standards, policies and guidance and also make them easier for the public and the NHS to understand. This will be a significant step in drawing together the various requirements made on the NHS, which in turn should also contribute to their rationalisation thus reducing the burden on the NHS generally.

Assessing Healthcare Standards: who will assess what

Healthcare Organisations

19. Each healthcare organisation will be responsible for assessing itself against the Healthcare Standards on an annual basis and then making public the outcome of this assessment. It is proposed that each organisation include the Standards in its organisational 'scorecard'. The balanced scorecard has been introduced as the means of performance managing NHS bodies in Wales and the inclusion of the

Healthcare Standards in each organisation's scorecard will ensure that they become mainstreamed into their day to day operations. The standards will also form a key part of the rolling clinical governance development plans ensuring that action is being taken to continuously improve achievement against the standards.

Welsh Assembly Government's Health and Social Care Department

20. As it is being proposed that the Healthcare Standards should become part of NHS bodies' own scorecard and clinical governance development plans, then their performance against the Standards will also be assessed as part of the routine accountability and performance management arrangements between them and the Health and Social Care Department.

Advisory Board for Healthcare Standards in Wales

21. The Advisory Board for Healthcare Standards in Wales is made up of people drawn from a very wide range of organisations involved in the delivery of healthcare in Wales. Its first important task was to recommend to the Assembly Minister for Health and Social Services a common framework of standards that would be easy for everybody to understand.

22. The Advisory Board will have a continuing role in the management of the standards framework, ensuring that the standards remain consistent with best clinical practice and continue to be relevant in response to local needs and priorities. It will also help formulate and consider the consultation response to the work to be undertaken to develop detailed assessment criteria against the Healthcare Standards.

23. The Board will also have an important role to play in developing effective methods of communicating this work to the public, patients and relevant stakeholders. Additionally, it will act as a 'Gatekeeper' for new standards, advising the Minister on the appropriateness and relative priority of implementing authoritative evidence based guidance and standards in Wales.

Healthcare Inspectorate Wales

24. Healthcare Inspectorate Wales (HIW) will use the Healthcare Standards and accompanying criteria as the basis of carrying out external, independent assessments of healthcare organisations' compliance with the Standards.

25. HIW will develop its assessment methodologies in this respect and will aim from 2006-07 to be assessing organisations on an annual basis. It is also intended to streamline this process by integrating these assessments with those of other inspectorates and regulators. These developments will form part of the implementation of a Welsh Concordat between Inspectorates, Auditors and Regulators aimed at reducing the overall burden on organisations while maintaining the degree of assurance about the NHS that the National Assembly and the public will expect as described below.

26. HIW will make public the outcomes of its assessments and will require organisations to develop action plans where there is evidence of non-compliance with the Standards. These action plans will then be integrated into the annual planning processes described above and form part of the overall performance management arrangements. HIW will also independently monitor organisations' progress against their action plans using the available performance management information.

27. Part of the next stage of developing the Healthcare Standards will be to consult on the assessment criteria and the most effective way of reporting compliance with them in the context of both providing assurance to the public and the National Assembly and supporting the overall improvement in the performance of NHS Wales.

Concordat between Bodies Inspecting Regulating and Auditing Health and Social Care in Wales

28. A Concordat, between bodies inspecting, regulating, and auditing health and social care in Wales, has been developed. The Welsh Assembly Government welcomes this: it supports our commitment to improving the way public services are delivered. 'Making the Connections: Delivering Better Services for Wales' sets out objectives to co-ordinate effort across the public sector to identify and target areas for improvement, and to reduce administrative burdens to concentrate efforts on improving front line services through:

- strengthening the focus on service user, citizen and community interests in the planning, delivery and reporting of regulation and inspection work;
- enhancing the role of regulation and inspection in stimulating performance improvement and promoting the spread of good practice;
- improving the effectiveness of the contribution that regulation and inspection evidence and professional expertise makes to policy development; and

-
- promoting greater collaboration between the regulation and inspection bodies on planning their reviews, collecting data and sharing knowledge and expertise, which will improve their effectiveness while reducing the burdens on inspected bodies.

Glossary

Access

The extent to which people are able to receive the information, services or the care they need.

Benchmarks

Benchmarks are used as comparators to compare performance between similar organisations or systems.

Clinical audit

A quality improvement process that seeks to improve patient care and outcomes through systematic review of care against explicit criteria and the implementation of change. Aspects of the structure, processes, and outcomes of care are selected and systematically evaluated against specific criteria. Where indicated, changes are implemented at an individual, team, or service level and further monitoring is used to confirm improvement in health care delivery.

Clinical governance

A system through which NHS organisations are accountable for continuously improving the quality of their services and safeguarding high standards of care, by creating an environment in which clinical excellence will flourish.

Clinical network

Connections across disciplines which provide integrated care across institutional and professional boundaries, raising clinical quality and improving the patient experience.

Clinician

Professionally qualified staff providing clinical care to patients.

Concordat

A voluntary agreement between autonomous bodies inspecting, regulating and auditing health and social care in Wales.

Criteria

Criteria are ways of demonstrating compliance with, and performance relevant to, a standard. They establish specific, objective expectations, drawing on such evidence and indicators as the Welsh Assembly Government will publish and Healthcare Inspectorate Wales will use to conduct its inspections and investigations.

Healthcare

Services provided for, or in connection with, the prevention, diagnosis or treatment of illness, and the promotion and protection of public health.

Healthcare associated infections

All infections acquired as a direct or indirect result of health care.

Healthcare Commission

Established in April 2004 as the independent body encompassing the work of the Commission for Health Improvement (CHI). It will inspect health care provision in accordance with national standards and other service priorities in England and will report directly to Parliament on the state of health care in England and Wales.

Health inequalities

Differences in people's health between geographical areas and between different groups of people.

Healthcare organisation

Welsh NHS bodies, independent contractors and other organisations and individuals, including the independent and voluntary sectors, which provide or commission health care for individual patients, service users and the public.

Healthcare professional

A person who is a member of a profession regulated by a body mentioned in section 25(3) of the National Health Service Reform and Health Care Professions Act 2002.

Health promotion

Includes the provision and information on healthier lifestyles and how to make the best use of health services, with the intention of enabling people to make rational health choices and of ensuring awareness of the factors determining the health of the community.

Governance

A mechanism to provide accountability for the way an organisation manages itself.

Medical devices

All products, except medicines, used in health care for diagnosis, prevention, monitoring or treatment. The range of products is very wide. It includes contact lenses and condoms; heart valves and hospital beds; resuscitators and radiotherapy machines; surgical instruments and syringes; wheelchairs and walking frames.

NPSA

The role of the National Patient Safety Agency is to make the NHS a safer place for patients.

National Service Frameworks (NSFs)

- set national standards and identify key interventions for a defined service or care group;
- put in place strategies to support implementation; and
- establish ways to ensure progress within an agreed timescale.

NICE

The role of The National Institute for Clinical Excellence is to provide patients, health professionals and the public with authoritative, robust and reliable

guidance on current “best practice”. The guidance covers both individual health technologies (including medicines, medical devices, diagnostic techniques, and procedures) and the clinical management of specific conditions.

NICE guidance

Guidance covering three areas of health:

- clinical guidelines cover the appropriate treatment and care of patients with specific diseases and conditions within the NHS in England and Wales;
- technology appraisals cover the use of new and existing medicines and treatments within the NHS in England and Wales; and
- interventional procedures cover the safety and efficacy of interventional procedures used for diagnostic treatment.

Patient

Those in receipt of health care provided by or for a Welsh NHS body.

Primary Care

First-contact health services directly accessible to the public.

Public Health

Public health is concerned with improving the health of the population, rather than treating the diseases of individual patients. Public health functions include:

- health surveillance, monitoring and analysis;
- investigation of disease outbreaks, epidemics and risk to health;
- establishing, designing and managing health promotion and disease prevention programmes;
- enabling and empowering communities to promote health and reduce inequalities;
- creating and sustaining cross-Government and inter-sectoral partnerships to improve health and reduce inequalities;
- ensuring compliance with regulations and laws to protect and promote health;

- developing and maintaining a well educated and trained, multi-disciplinary public health workforce;
- ensuring the effective performance of NHS services to meet goals in improving health, preventing disease and reducing inequalities;
- research, development, evaluation and innovation; and
- quality assuring the public health function.

Quality assurance

A systematic process of verifying that a product or service being developed is meeting specific requirements.

Quality requirements

Quality requirements will be established through the National Service Frameworks. They describe the care which clinicians and others will use to guide their practice.

Research governance frameworks

Defines the broad principles of good research governance and is key to ensuring that health and social care research is conducted to high scientific and ethical standards and applies to all research undertaken within the remit of the Assembly Minister for Health and Social Services.

Risk management

Covers all the processes involved in identifying, assessing and judging risks, assigning ownership, taking actions to mitigate or anticipate them, and monitoring and reviewing progress.

Service user

An individual who uses a health care service, including those who are not in need of treatment, such as blood donors, carers or those using screening services.

Standards

Standards are a means of describing the level of quality that health care organisations are expected to meet or to aspire to. The performance of organisations can be assessed against this level of quality.

Systematic risk assessment

A systematic approach to the identification and assessment of risks using explicit risk management techniques.

Targets

Targets refer to a defined level of performance that is being aimed for, often with a numerical and time dimension. The purpose of a target is to incentivise improvement in the specific area covered by the target over a particular timeframe.

Welsh NHS body

NHS Trusts and Local Health Boards in Wales.

Welsh Risk Management Standards

A set of standards designed to ensure that all organisations have systems and processes in place to actively identify and manage risks across the full range of services and functions that they undertake.