



DIGITAL HEALTH AND CARE WALES

ANNUAL QUALITY REPORT

The purpose of the Annual Quality Report is to demonstrate how Digital Health and Care Wales (DHCW) has complied with the Duty of Quality with the aim to improve the quality of health services for the population of Wales

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STRATEGIC OBJECTIVE

All Objectives apply

WELL-BEING OF FUTURE GENERATIONS ACT

A healthier Wales

If more than one standard applies, please list below:

DHCW QUALITY STANDARDS

ISO 9001

If more than one standard applies, please list below:

DUTY OF QUALITY ENABLER

Whole Systems Approach

DOMAIN OF QUALITY

Safe

If more than one enabler / domain applies, please list below:
All domains and enablers apply

EQUALITY IMPACT ASSESSMENT STATEMENT

Date of submission: N/A

Choose an item.

Outcome:

Statement:

APPROVAL / SCRUTINY ROUTE:

Person/Committee/Group who have received or considered this paper

COMMITTEE OR GROUP	DATE	OUTCOME
Paul Evans, Head of Quality Assurance and Regulatory Compliance	20/05/2024	Reviewed
Claire Osmundsen-Little, Executive Director Finance and Business Assurance	07/06/2024	Reviewed
Quality and Regulatory Group	03/06/2024	Reviewed
Incident Review and Learning Group	03/06/2024	Reviewed
Management Board	13/06/2024	Reviewed
Audit and Assurance Committee	09/07/2024	Approved
SHA Board	25/07/2024	Approved

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS / IMPACT	Yes, please see detail below
	Compliance to the Duty of Quality is a legislative requirement
LEGAL IMPLICATIONS / IMPACT	Yes, please see detail below
	It is a legislative requirement to comply with the Health and Care (Quality and Engagement) (Wales) Act 2020
FINANCIAL IMPLICATIONS / IMPACT	No, there are no specific financial implication related to the activity outlined in this report
WORKFORCE IMPLICATIONS / IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
SOCIO ECONOMIC IMPLICATIONS / IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report
RESEARCH AND INNOVATION IMPLICATIONS / IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

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1 DOCUMENT HISTORY

1.1 REVISION HISTORY

DATE	VERSION	AUTHOR	REVISION SUMMARY
07/06/24	1	Laura Beddoe (DHCW - QA and Regulatory Compliance)	Version one for approval

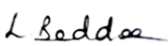
1.2 REVIEWERS

This document requires the following reviews:

DATE	VERSION	NAME	POSITION
20/05/2024	0.1	Paul Evans	Head of Quality Assurance and Regulatory Compliance
03/06/2024	0.1	Claire Osmundsen-Little	Executive Director of Finance and Business Assurance
03/06/2024	0.1	Quality and Regulatory Group	
03/06/2024	0.1	Incident Review and Learning Group	

1.3 AUTHORISATION

Signing of this document indicates acceptance of its contents:

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SIGNATURE:	 07/06/2024

APPROVER'S NAME:	Claire Osmundsen-Little (DHCW - Finance and Business Assurance)
ROLE:	Executive Director Finance and Business Assurance
SIGNATURE:	

1.4 DOCUMENT LOCATION

TYPE	LOCATION
Report	Integrated Management System - IMS

2 FOREWARD

Welcome to the report

Foreword by Simon Jones (Board Chair) and Helen Thomas (Chief Executive Officer)

Digital Health and Care Wales (DHCW) plays a unique role, providing the national digital and data systems underpinning health and care services in Wales. As the expert national body and part of the NHS Wales family we are committed to fulfilling this role, delivering some of the biggest healthcare digital and data projects in the UK.

In the rapidly evolving digital landscape of healthcare, we at DHCW continue to develop the digital services that we offer. We are constantly seeking ways to learn, innovate and improve while continuing the delivery of our core services.

These are challenging times for NHS Wales – both for patients and staff – but there are many opportunities for digital and data to help with these challenges. As NHS organisations deliver more care using digital and data services, it is vital that DHCW prioritises quality as a crucial element and ensures that it is at the heart of everything we do.

This is why we are pleased to present our Annual Quality Report, which summarises the actions and achievements from April 2023 – March 2024, and demonstrates how we at DHCW are achieving Mission 5 of our [Integrated Medium Term Plan \(IMTP\)](#) ‘to be the trusted strategic partner and a high quality, inclusive and ambitious organisation’.

Centralising quality in our strategies, behaviours, systems and services means that we can reliably and sustainably improve the quality of health services for clinical staff and patients across Wales, making digital a force for good in health and care.

This report delves into the achievements and challenges we have faced over the past 12 months and highlights our future objectives and areas for improvement.

Some of the key achievements, among many others, include:

- the proactive communication and engagement around Duty of Quality
- the delivery of the Duty of Quality implementation and project plan and Welsh Government roadmap
- the active promotion of the Welsh language in this area of work.

Looking ahead, we will continue our focus on placing quality at the centre of our strategic plans and embedding the Duty of Quality requirements across the organisation.

Our Annual Quality Report and Always On reports will record our progress against our aims and ambitions.

We hope you find this year’s report informative and engaging.

3 PURPOSE

The purpose of the Annual Quality Report is to demonstrate how Digital Health and Care Wales (DHCW) has complied with the Duty of Quality with the aim to improve the quality of health services for the population of Wales. The Duty of Quality came into effect in April 2023 as part of the Health and Social Care (Quality and Engagement) (Wales) Act 2020. DHCW must consider the Health and Care Quality Standards when making strategic decisions to ensure improved outcomes which supports the Well-being of Future Generations (Wales) Act 2015 and A Healthier Wales.

The report also demonstrates how DHCW is achieving Mission 5 of the Integrated Medium-Term Plan (IMTP) “to be the trusted strategic partner and a high quality, inclusive and ambitious organisation”.

The Duty of Quality requires DHCW to:

- Apply quality concepts across all functions
- Make quality-driven decisions
- Involve people in decisions that affect them
- Use value-based healthcare principles which encourages focusing on the patient.

The Duty of Quality aims are to improve the quality of health services and the health outcomes of the population of Wales. Quality is defined as working to ‘continuously, reliably and sustainably meet the needs of the population we serve’.

The report is a summary of what has happened between April 2023 – March 2024, what went well, what did not work well, what DHCW has learned and plans for improvements in the next year. The report describes progress and challenges that DHCW has faced in complying with the Duty of Quality and an assessment of the extent of any improvement in outcomes achieved.

4 SCOPE

This report applies to all DHCW staff.

5 STEPS TAKEN TO COMPLY WITH THE DUTY OF QUALITY

5.1 COMPLETION OF THE WELSH GOVERNMENT ROADMAP FOR DUTY OF QUALITY READINESS

DHCW submitted a monthly report to the Welsh Government Duties of Quality and Candour Implementation Board. in which it provided monthly updates on how it would meet the Act requirements under the following implementation themes: leadership and culture, decision-making, governance and accountability structures, reporting and information (data to knowledge), commissioning, hosting, quality standards, quality management system – general, communication and engagement and, training and education. In addition to the monthly updates DHCW undertook the following additional activities:

October 2022	Welsh Government provided a development session to the Board which was then followed by a presentation by the DHCW Head of Quality Assurance and Regulatory Compliance.
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January 2023	Claire Osmundsen-Little, Deputy CEO and Executive Director of Finance and Business Assurance was named Executive Lead for the Duty of Quality. A project plan was implemented to provide progress updates to Management Board and the Corporate Governance Manager reviewed Board template documents to include Duty of Quality statements.
March 2023	Welsh Government introductory video was shared with DHCW staff and a session was included in staff conference. Training was also shared with Executive staff and Independent Members of the Board. The mechanisms for sharing the Always On Reports were agreed.
July 2023	Board papers and the Board Assurance Framework were updated to include the Health and Care Quality Standards. Quality Business Partners (QBP) were introduced, with each directorate within DHCW having a nominated QBP whose initial role was to embed the Duty of Quality, to provide support in identifying if they were complying with the Health and Care Quality Standards and to understand their business processes.
August 2023	NHS Executive shared a draft Quality Impact Assessment (QIA) with the Duty of Quality Reference Group to trial and provide feedback. DHCW trialled the tool with one team and reviewed it with members of various directorates, Corporate Governance, Finance and Business Assurance and Strategy, before providing feedback.
November 2023	First Always On Report was approved by Management Board. QBP reporting captures each directorate's quality management system position, specifically any documents or non-conformances that out of date for review and how these will be managed.
December 2023	Duty of Quality workshop was trialled with the finance team. The aim is to tailor the Duty of Quality to individual directorates, to understand what quality means to them and their processes, to identify areas of good practice or areas of concern and to explore what information can be shared in the Always On Reports.
January 2024	Quality team held a Duty of Quality presentation known as a TenTalk in DHCW which all staff were invited to attend. The purpose of the TenTalk was to share updates about the Duty of Quality with a wide audience, the talk included a recap of the Duty of Quality legislative requirements, a reminder of the Always On reports external location, the workshops, and an e-learning programme which the NHS Executive had produced.
February 2024	Quality and Regulatory Annual Plan 2024-25 was approved with the objective for all directorates senior leadership teams (SLTs) to have completed a Duty of Quality workshop by the end of September 2024.
March 2024	Duty of Quality e-learning programme was completed by 100% of the quality team and a request was to be made to the Executive team to mandate it for all DHCW staff. The Head of Quality Assurance and Regulatory Compliance attended the Board Development session and provided Board members with a reminder of the Duty of Quality legislative requirements, DHCWs current position and, Board responsibilities.

5.2 DUTY OF QUALITY REFERENCE GROUP

Members of the Quality team have regularly attended the Duty of Quality Reference Group facilitated by NHS Executive to share insights into how the Duty of Quality will be complied with

in DHCW, have shared learning and challenges, and worked as a group to develop new tools such as the Quality Impact Assessment (QIA).

Welsh Government Statutory Guidance provides examples of evidence which NHS bodies can use to assess their organisation against the Duty of Quality. Several of the examples are based on clinical data such as Patient Reported Outcome Measures, Patient Reported Experience Measures, mortality data and, patient stories. These examples are mainly out of scope for DHCW as it is a Special Health Authority which does not treat or diagnose patients directly. The only exception is patient stories which may be captured when using DHCW products or services but are limited compared to health boards.

NHS Executive facilitated a meeting with other members of the Duty of Quality Reference Group which have similar challenges to identify how to interpret the legislative requirements.

6 KEY STRATEGIC DECISIONS TAKEN BY DHCW AND HOW THE DUTY OF QUALITY HAS INFORMED DECISIONS

A strategic decision is a decision that has a significant or long-term impact on the delivery of DHCW's strategic objectives, mission, or vision. It may involve a change in direction, policy, service, or resource allocation. It may also involve a response to an external driver, such as legislation, national policy, professional guidance, or cost savings.

Some examples of strategic decisions are:

- Developing or implementing a new digital service or system
- Changing or redesigning an existing digital service or system
- Withdrawing or decommissioning a digital service or system
- Entering into a new partnership or collaboration with another organisation
- Adopting or adapting a national or international standard or framework
- Allocating or reallocating resources or funding to a project or programme

6.1 QUALITY IMPACT ASSESSMENT

A Quality Impact Assessment (QIA) is a tool for considering and capturing the impact of proposals / decisions on the Quality of our healthcare system, to inform strategic decision-making.

A DHCW specific QIA has been in development and is aligned with the national tool provided by the NHS Executive. As a non-patient facing organisation, DHCW is tailoring the QIA to align with its' own processes and practices. A draft version was trialled by the finance department with valuable feedback received. Development continues in April-June 2024 (quarter 1) with the aim to receive approval and to roll out in July-September (quarter 2).

6.2 INCLUSION OF THE HEALTH AND CARE QUALITY STANDARDS

Board and Committee papers were updated in July 2023 to include the Health and Care Quality Standards. Four Board meetings have been held since this update, in September, November, January and March.

Eighteen papers were submitted for Board approval during this period, of which ten completed the Duty of Quality Health and Care Quality Standards section. One paper was submitted on an old format template, six were marked not applicable and one was blank. Papers submitted for the March Board showed improvement with 63% being completed correctly.

To continue improving the submissions to the Board, the Quality team will work with the Corporate Governance team to understand why authors have failed to complete the Health and Care Quality Standards section correctly, and to provide training and support where required. This will be monitored through the Always On reports and any concerns escalated to the Quality and Regulatory Group (QRG).

Twenty-two policies were approved during 2023-24. Two of these policies were approved using the updated policy template which included Health and Care Quality Standards. One was completed correctly with the domain and enabler selected, the second was blank. The quality team and corporate governance will work together in 2024-25 to improve completion rates.

6.3 STRATEGIES PUBLISHED IN 2023-24

The [Information Governance Strategy 2023-26](#) explains the strategic approach the Information Governance (IG) team will take when utilising its' resources and prioritising activities. One of its' strategic aims is 'to embed the domains and enablers of the Duty of Quality within DHCW's Information Governance function'.

The [Information and Analytics Strategy 2023-2026](#) vision is 'to drive 'value from data' through the provision of a national information and analytics service for health and care in Wales, that facilitates service transformation and improves patient outcomes'. One of its' strategic aims is to 'focus on the quality, value and user experience of our services and products'. The strategy aims to do this by following the Centre for Digital Public Services design standards in development of data products and by building feedback and evaluation into products.

The [Primary Care Strategy 2024-2027](#) supports 'population health and care improvement in Primary, Community and Mental Health in Wales through development of expert knowledge, information and resources that enables user centred design, interoperability, robust connectivity and security.' One of the operational principles that support the strategy is 'delivery quality' which commits DHCW to:

- Use every means to shape, manage and deliver projects to the highest recognised standards and to make use of its resources to create and guide a best-in-class approach to product, project, and programme management
- Consistently develop and improve the positive impact of products, projects, and programmes of digitally enabled change through a variety of means
- Addressing shortfalls in the consistency and quality of delivery across the entire portfolio of digital projects

The [Communications Strategy 2023-2026](#) vision is 'to deliver multi-channel, transparent and proactive communications which put people at the heart and support DHCW to be a trusted strategic partner'. One of its' strategic aims is 'to enhance our digital communications – delivering high quality digital communications which reflect our purpose and ambition as a digital organisation'.

Another aim is to 'grow our public communications' so that there is an 'awareness of the role DHCW plays and how our services and products help support the delivery and quality of care received or support the public to stay well'. Also so that 'the public are aware and engage with digital services and products they can use to improve their health and wellbeing'.

The [Clinical Informatics and Business Change Strategy 2023-2026](#) was published whose vision is 'to inspire and empower our partners, to shape and adopt our digital services to enhance patient experience, care and outcomes. Putting people at the heart of digital services.'

Two of the strategy's strategic aims are 'to maximise our support for health and care' and 'to adopt a quality approach with professional standards' and has aligned itself with the Duty of Quality domains and enablers. The Strategic Implementation Plan will be closely monitored to evaluate the effectiveness of the strategy through various methods such as feedback from staff or partners and other stakeholders, via product surveys and impact case studies from accredited professional programmes.

1

Health & Care

Strategic Aim: To maximise our **support for health & care** provision

Health & Care Standards ⁽¹⁾ Domains of Quality	Where do we want to be? Aligned with the Health & Care Standards	How will we do it?
Safe	To be the trusted and safe, health technology solutions provider of choice for our health and social care partners.	Support the implementation of Clinical Risk Management Standards to ensure high quality, high reliability, clinically safe digital products (in-house or off the shelf) are maximising opportunities for the best patient outcomes.
Timely	To be aligned with national clinical priorities in the timing and availability of our new products and services.	Support the DHCW Product Strategy by aligning a clinical lead to each of the DHCW digital clinical products to ensure that clinical network priorities are considered in development roadmaps.
Effective	To provide digital information to healthcare professionals to facilitate clinical decision-making, care, and treatment for optimal outcomes that matter to patients, carers, and their families.	Work with clinical networks and the DHCW Data Standards & Information Services teams to standardise digital processes and data collection, to develop and apply national data standards to clinical software systems developed in house or procured with our support for NHS Wales.
Efficient	To evidence clinical digital products and services are designed to enable a values-based approach that improve outcomes that matter most to people, in a sustainable way that avoids waste.	To develop a best practice framework for Clinical Informatics Professionals to support in the identification of requirements for products and services, ensuring they are an effective element of clinical workflows and patient pathways.
Equitable	Our digital clinical products and services are designed for national use to provide all our health and care partners with equal opportunity to realise the intended benefits from the solutions.	To have a core funded Clinical Informatics and Business Change Team with working partnerships with all organisations across NHS Wales.
Person-Centred	Our digital clinical products are developed to meet the needs of people using them, ensuring that consideration is given to patients' preferences, needs and values .	Our digital clinical products are developed with effective clinical engagement and with the adoption of formal centered user design and user interface standards within our product operating model.

2

Quality

Strategic Aim: To adopt a **quality approach** with professional standards

Duty of Quality Enablers	Where do we want to be? Enacting our Duty of Quality	How will we do it?
Leadership	To have visible and focussed leadership within our Clinical Informatics and Business Change Service offering to our public sector partner organisations	Increase our visibility and role within the DHCW Product Operating Model, to champion the DHCW vision and values across Wales as leaders in the field of digital health and care.
Workforce	To recruit, retain and develop roles to ensure that we have enough, confident people with the right knowledge and skills to deliver quality systems for health and care.	Support the DHCW People and OD Strategy to develop our job families within the Digital, Data and Technology Plus Profession Capability Framework for the organisation (DDaT Plus) aligning professional registration with digital skills. Work with HEIs to deliver digital education externally.
Culture	To live our organisational values in an inclusive workplace where people feel psychologically safe to raise concerns and try new collaborative ideas and approaches.	To clarify our role, responsibilities and deliverables within collaborative digital initiatives and increase our visibility, focus and accountability.
Information	To ensure that clinical information is available and shared appropriately for health and care professionals who need it.	To triangulate information requirements from information standards, information services and clinical requirements to ensure that we can produce intelligent information on outcome measures to improve clinical products and services
Learning, Research & Improvement	To promote continuous learning, quality improvement and innovation within the team and education of health professionals, students and other users through our partnerships.	To support research with our partners, to inform clinical product development and training to reflect clinical workflows, in line with the KLAS Research, digital systems usability survey outcomes.
Whole Systems Approach	To support the new DHCW Portfolio Management Office with a consistent approach with professional standards, clinical leadership, clinical governance, engagement, and learning within projects, programmes and product development.	Create a consistent framework for Clinical Informatics and Business Change best practice and accountability in projects, programmes and products that enhances current assurance processes including the New Service Request process and the Wales Informatics Assurance Group process.



Strategies published prior to 2023-24 also included priorities which align with the Health and Care Quality Standards. The [People and Organisational Development Strategy 2022-2025](#) states that 'the delivery of high-quality digital services depends upon a workforce being engaged, happy and motivated in work, supported and appreciated with a good understanding of how they contribute to the organisation and the wider NHS in Wales'. The strategy notes that DHCW was the first organisation 'to achieve certification against the BS 76000, the British Standard for Valuing People, evidencing DHCW's commitment to people practices are principled, relevant and developmental'.

7 WHAT HAS BEEN ACHIEVED

7.1 PROJECT PLAN AND WELSH GOVERNMENT ROADMAP

The Duty of Quality implementation project plan and the Welsh Government roadmap provided structured mechanisms for DHCW to identify what was required to comply with the new legislation and to monitor its' progress. The project plan progress was monitored through the Integrated Organisational Performance Report (IOPR).

7.2 COMMUNICATION AND ENGAGEMENT

The DHCW Quality team have proactively led on Duty of Quality communication and engagement with the organisation including sessions with the Board, a presentation at the Staff Conference, and for individual teams and DHCW-wide talks.

7.3 DHCW STRATEGIES

DHCW strategy documents have taken the Duty of Quality into consideration, some strategically aligning to the Duty of Quality whilst others refer to quality activities and improvements.

7.4 HEALTH AND CARE QUALITY STANDARDS INCLUSION IN BOARD AND COMMITTEE PAPERS

All Board and Committee papers have the Health and Care Quality Standards included and authors must consider them when drafting papers and identify which of the standards is most relevant, further supporting the embedding of the Duty of Quality.

7.5 QUALITY IMPROVEMENT TOOLKIT

A suite of quality improvement tools is being developed by the Quality team. The first tool created was DMAIC – Define, Measure, Analyse, Improve and Control is used to improve the quality of results that processes produce.

7.6 QUALITY BUSINESS PARTNERS

Quality Business Partners have been introduced to support the communication and engagement work, of the Quality team, to share information about the Duty of Quality to directorates. The Quality Business Partner role has expanded over the past few months to include reporting on quality management systems (QMS) data to improve the document and non-conformance status across DHCW. The Quality Business Partners have shared updates on the document management strategy, which includes the use of iPassport, an electronic quality management system.

The Quality Business Partners are also part of a network of DHCW Business Partners sharing information and good practice. The Business Partners Performance Group comprise of business partners from several areas of the organisation including finance, people and organisational development, planning, communications, and corporate governance and led by organisational performance

7.7 CONTROLLED DOCUMENT MANAGEMENT

The Document Management Plan was approved by Management Board in 2024. The plan outlines how and why controlling specific types of documents is essential. The goal is to improve the QMS compliance rates in DHCW, as reported in the Always On reports.

The project has been split into two phases, Phase one will focus on migrating controlled documents from an Integrated Management System (IMS) SharePoint to iPassport. Phase two will focus on all documents stored outside of the IMS or iPassport and identifying and then migrating them to their correct storage location.

7.8 CONTINUED ACCREDITATION TO ISO/BS QUALITY STANDARDS

DHCW is committed to achieving and maintaining several International Organisation for Standardisation (ISO) British Standard (BS) certificates. In 2023-24, DHCW either achieved or maintained accreditation in the following:

- ISO 9001:2015 - Quality Management Systems
- ISO 20000:2018 - IT Service Management Systems
- ISO 14001:2015 - Environment Management Systems
- ISO 27001:2013 - Information Security Management Systems
- ISO 30415:2021 Human Resource Management – Diversity and Inclusion
- BS 76000:2015 - Valuing People
- BS 10008:2020 - Evidential Weight & Legal Admissible Information Management Systems
- SDI - Service Desk Institute

7.9 ALWAYS ON REPORTS

The statutory guidance provided by Welsh Government allows for ‘an agile and iterative process’ when developing the ‘Always On’ quality reporting as it identified that changing how organisations work takes time. Taking this into consideration, DHCW decided to start small and develop the Always On reports over time.

The Always On report focuses on the Health and Care Quality Standards and how DHCW is complying with them. Any evidence gathered is reported under one of the domains – Safe, Timely, Effective, Efficient, Equitable and Patient-Centred.

In 2023-24, Always On reports were written quarterly.

DHCW produced the first ‘Always On’ report covering quarter 2 titled ‘[Quality Report July – September 2023 \(Q2\)](#)’. The report included information on:

- The QMS specifically the document and non-conformance status, if DHCW had achieved its’ target and what improvements were to be made.
- Inclusion of the Health and Care Quality Standards to Board and Committee papers.

- Welsh language update on how it is championing this area of work, engagement activities, training available to staff and bilingual products available to the population of Wales.

The quarter 3 Always On report was approved and published to the external website titled [Quality Report October – December 2023 \(Q3\)](#) and included information on :

- QMS
- Commissioned Services
- Electronic Prescription Service launched in Rhyl
- Health Minister visit to Neath Port Talbot Hospital to view digital ward concept
- Welsh language

The quarter 4 Always On report is going through the approval process prior to publishing on the external website.

8 ASSESSMENT OF EXTENT OF ANY IMPROVEMENTS

A robust assessment of the extent of improvements at this early stage is challenging as the Duty of Quality was only introduced in April 2023. Throughout 2023-24, DHCW's goal was to communicate and engage with the Board and members of staff to understand the legislative requirements and has established a baseline of DHCW's current position in relation to the Duty of Quality. This will provide a reference point for future assessments of the extent of improvements being able to plot and assess the data over time.

8.1 EMBEDDING THE DUTY OF QUALITY

Embedding the new legislation is an ongoing process of communication and engagement with all DHCW staff through various methods. Throughout 2023-24, the Quality team have held talks, spoke at staff conferences, ran workshops and presented at various groups and committees.

2024-25 will see the roll out of Duty of Quality workshops to all directorates to tailor the legislation to individual teams, mapping out their processes against the Health and Care Quality Standards and identifying information that evidences how well DHCW is, or isn't, achieving the goal of improving the quality of health services.

8.2 BOARD AND COMMITTEE PAPERS

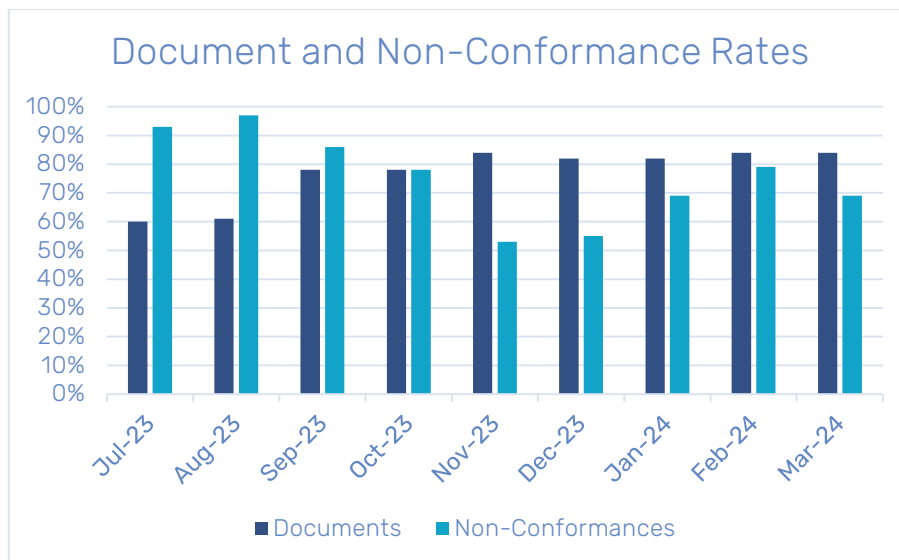
In 2023-24, the Board and Committee papers were updated to include the Health and Care Quality Standards. The compliance with this new requirement was monitored by the Corporate Governance team and the rates of compliance require significant improvement with only 50% completing the new sections.

8.3 ALWAYS ON REPORTS

Two Always On reports have been externally published in [2023-24](#).

8.4 QMS DATA

Prior to the Duty of Quality, there were several key metrics already in place and being reported on such as the QMS data. Improvements are monitored through IMSAG, QRG, IOPR and quarterly reports to the Audit and Assurance Committee. Future Annual Quality Reports will be able to compare the baseline QMS data, consider changes made and communicate its' findings.



Data in the Always On Reports showed an improvement in documents being within review date, however this has remained in the low 80s for several months. Non-conformances dropped to 53% in November 2023, this was discussed at several groups and reported to committees and the closing of non-conformances has improved. Documents and non-conformance compliance rates continues to be reported on and monitored at various groups with a monthly Quality Report identifying areas for concern at an early stage and escalating to directorates through the QBPs.

8.5 WELSH LANGUAGE

Welsh Language statistics from DHCW is routinely reported to Committees and shared in the Always On Reports. There are two Board Champions for Welsh Language who actively promote this area of work, it has a Welsh Language Group which works collaboratively to share information, develop, and enhance the Welsh Language culture in DHCW.

This has helped to support DHCW in achieving 31.3% Welsh Language skill level 1-2 and for 90.6% of staff to have completed the Welsh Language Awareness course.

A Wales of Vibrant Culture and thriving Welsh Language is a principle adopted in the development of DHCW's strategic equality plan and its' commitment to being a bilingual organisation with a focus on Welsh Language training.

Achievements include:

- Adopting the principle established in the Welsh Language Act 1993 that, in the conduct of public business in Wales, the Welsh and English languages should be treated on a basis of equality. DHCW have developed a Welsh Language Scheme and are committed to provide a level of Welsh Language services equivalent to the Welsh Language Standards being adopted by similar public organisations in Wales.
- Continuing to manage our responsibilities for use of the Welsh Language using our Welsh Language Action Plan to monitor progress and improvements.
- Ensuring that Welsh Language requirements are assessed when developing new products.
- Building Welsh culture into our environmental design using opportunities such as Welsh Landscape photograph competitions and Welsh themed naming conventions.

8.6 IMPROVEMENTS IN 2024-25

The Duty of Quality was introduced in 2023-24 with the aim to build, refine and improve how DHCW complies with, and reports on how it has improved the quality of health services. Several areas for improvement have been identified for 2024-25.

Always On Reports

The report focused on the domains, and evidence presented may cover several of the domains however for the report, only one is selected. The reporting template is to be reviewed in 2024-25 to enable it to capture multiple domains and the enablers – Leadership, Workforce, Culture, Information, Learning, Research and Improvement, and Whole Systems Approach. This will give a more holistic view of how DHCW is compliant with the Duty of Quality by demonstrating how evidence provided links to various domains and enablers.

Annual Quality Report

There is limited evidence to support the progress to improve the quality of health services in the 2023-24 as the new legislation was being embedded in DHCW. In the 2024-25 Annual Quality Report, DHCW will report on the extent of any improvements using the Institute for Healthcare Improvement (IHI) [Model for Improvement](#) tool. Using the IHI tool, DHCW will ask three questions:

1. What are we trying to accomplish?
2. How will we know that a change is an improvement?
3. What change can we make that will result in improvement?

Commissioned Services

DHCW has one commissioned service, occupational health. In 2023-24, the Always On reporting was limited to the Quarter 3 report as key performance indicators were under review following a change in processes and system. In 2024-25, data will be provided to evidence how the service has met its' key performance indicators for the year.

9 PROGRESS TO IMPROVE THE QUALITY OF HEALTH SERVICES

The [DHCW Annual Report 2023-24](#) describes the range of organisations we support such as the health boards, trusts, HEIW, Shared Services, GPs, community pharmacies, dentists and prisons. The report also demonstrates the number of digital users, services, documents, results and digital activity across the services DHCW provides.

The report documents the progress DHCW is making on improving the quality of health services it provides to NHS Wales.

Prior to the introduction of the Duty of Quality, DHCW has introduced groups or services whose outcomes would improve the quality of services DHCW provides.

Incident Review and Learning Group (IRLG)

IRLG has been running for four years and its' aim is to embed a culture of learning and improvement, based on lessons learned from major incident reviews. IRLG reports to the [Digital Governance and Safety Committee](#) on Early Warning Notifications and National Reportable Incidents.

Wales Informatics Assurance Group (WIAG)

WIAG's aim is to provide assurance that the delivery of national digital services is safe, effective, and reliable. Twenty assurance leads review new services, existing services that will be re-designed, new releases etc. or that interface with DHCW architecture. Welsh Language is represented at this group to ensure that any service DHCW provides has considered the Welsh Language requirements.

Information Services

DHCW collects data from numerous sources and stores data of more than 50 million outpatient visits and 27 million in-patient episodes of care. DHCW also maintains databases covering secondary care, births, deaths, child health and more. The data supports NHS Wales to run effectively, analysing data to support to quality of health services. [Information Delivery - Digital Health and Care Wales \(nhs.wales\)](#)

10 LOOK FORWARD TO QUALITY PRIORITIES AND AMBITIONS FOR THE FOLLOWING YEAR AND HOW THEY WILL BE MONITORED

To support DHCW's IMTP milestone to 'be the trusted strategic partner and a high quality, inclusive and ambitious organisation' the Quality and Regulatory Annual Plan 2024-25 sets out the quality priorities for DHCW (Appendix A).

Quality priorities listed in the IMTP include:

- Conducting a programme of Duty of Quality workshops across all directorates to map the Health and Care Quality Standards 2023 to the work of each directorate. Directorates are being tasked with mapping their internal processes against the Standards and identifying areas for improvement, successes to celebrate and information to be shared in the Always On Reports.
- Streamlining the WIAG process with the introduction of a Microsoft PowerApp. WIAG assurance will become a two-stage process of presenting a project to WIAG, and then submission and approval of the project via the PowerApp. The PowerApp will make the process more lean and will support attendees to track the progress of their project approvals and minimise the time required to attend WIAG.
- The risk based internal audit programme was shortlisted for a NHS Award 2023 in the category 'Enriching the wellbeing, capability and engagement of the health and care workforce'. Following feedback from the judges, the programme is being reviewed with improvements such as developing training for our qualified internal auditors for each of the standards that DHCW is certified to and mapping audit activity against the requirements of each standard.
- Adopting practices to meet the ISO 13485 Quality Management for Medical Devices. A series of internal audits have been conducted against the standard and non-compliances are being corrected in advance of an external audit. Following the external audit, we intend to seek certification to the standard by the end of quarter 4.
- Readiness for the Medical Device Regulations (MDR) implementation in anticipation of the new UK MDR legislation. Procedures are being developed with the aim for DHCW to be in the position to manage the required regulatory processes for software classed as a class I device through to conformity assessment.

The 2024-25 Annual Quality Report and Always On reports will record progress of these objectives, what has been achieved and what challenges were faced.

11 REFERENCES

INDEX NUMBER	DOCUMENT NAME
	Integrated Medium Term Plan 2023-26
	Information Governance Strategy 2023-26
	Information and Analytics Strategy 2023-26
	Primary Care Strategy 2024-27
	Communications Strategy 2023-26
	Clinical Informatics and Business Change Strategy 2023-26
	People and Organisational Development Strategy 2022-25
	Annual Report 2023-24

12 DEFINITIONS

TERM	DEFINITION
DHCW	Digital Health and Care Wales
QBP	Quality Business Partner
SLT	Senior leadership team
QIA	Quality Impact Assessment
QRG	Quality and Regulatory Group
IOPR	Integrated Organisational Performance Report
IMS	Integrated Management System
QMS	Quality Management System
ISO	International Organisation for Standardisation
BS	British Standard

13 ATTACHMENTS / APPENDIX

13.1 QUALITY AND REGULATORY ANNUAL PLAN 2024-25

OBJECTIVE	KEY ACTIVITIES	DELIVERABLE DATE	MONITORED
Duty of Quality – publication of first Annual Quality Report	Drafting of report to include Always On Reports	Quarter 1	Quality and Regulatory Group to monitor
Duty of Quality workshops	Embed Duty of Quality throughout DHCW Workshops to focus on Health and Care Quality Standards tailoring to each directorate	Quarter 2	Quality and Regulatory Group to monitor scheduled plan of workshops
Preparation for ISO 13485 Medical Devices	Work towards gaining certification for ISO 13485	Quarter 2	Medical Device Assurance Group and Quality and Regulatory Group to monitor progress
Medical Devices readiness	Produce a gap analysis against current UK regulations.	Quarter 2	Weekly progress updates to the Head of Quality Assurance and Regulatory Compliance
Readiness for new UK Medical Device regulations	MHRA consultation and roadmap to be completed with gap analysis findings actioned in workshops	Quarter 4	Medical Device Assurance Group to monitor progress
Quality Assurance Profession Map	Gap analysis of current skill levels in the Quality team against the CQI Quality Profession Map. Design and deliver training and produce a self-assessment tool and evaluate effectiveness.	Quarter 4	Quality and Regulatory Group to monitor progress. Fortnightly Quality objectives meeting led by Head of Quality Assurance and Regulatory Compliance
Streamline Wales Informatics Assurance Group (WIAG) processes with a PowerApp	PowerApp to replace current WIAG process to minimise delays between Assurance Quality Plan and Safety Case and Readiness Report stage for project managers	Quarter 1	Recurring agenda item at WIAG. Updates to Head of Quality Assurance and Digital Governance and Safety Committee
iPassport	Ongoing improvements to iPassport, the electronic quality management system including linking documents to external quality standard clauses, capturing all internal and external audit findings, and exploring additional modules for DHCW use	Quarter 4	Weekly iPassport Implementation Group meeting led by Head of Quality Assurance and Regulatory Compliance.
Validation Agile Strategy	Develop a strategy for an agile approach to 'computerised system validation'.	Quarter 4	Monthly validation team meeting and

OBJECTIVE	KEY ACTIVITIES	DELIVERABLE DATE	MONITORED
			Quality Objectives Review meeting
Programme / Project Quality	Build on work undertaken with LIMS 2.0 to develop a framework for quality within a programme / project	Quarter 4	Quality team meeting review against cross analysis of GAMP5 and monthly Validation team meetings
Validation as a service	Evaluate feasibility of validation as a service to health boards	Quarter 4	Quality team meeting review against cross analysis of GAMP5 and monthly Validation team meetings
Increased visibility of the Quality Assurance and Regulatory Compliance team	Internal communications, TenTalks, quality improvement tools, GEMBA process and using QBPs to integrate quality at a directorate level	Quarter 4	Quality and Regulatory Group to receive updates
Controlled Document Management Strategy	To provide a more robust environment for controlled documents. Project is in two phases, Phase one will focus on migrating controlled documents from an Integrated Management System (IMS) SharePoint to iPassport. Phase two will focus on all documents stored outside of the IMS or iPassport and identifying their correct storage location.	Quarter 4	Quality and Regulatory Group to monitor progress of phase one and two and ongoing compliance with the strategy. Quality Business Partners to update all directorate SLTs on progress.
Improvement of the audit programme	All standard leads to produce specific training programme to train auditors across several standards, minimising the number of audits	Quarter 4	Integrated Management Systems Assurance Group to report to Quality and Regulatory Group
Benchmark against other NHS digital organisations	Identify business processes, performance metrics, quality standards and other relevant certifications and produce recommendations	Quarter 2	Quality Objectives Review meeting