

Health and Social Services Committee

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Meeting date: Thursday 26 October 2006

Venue: Committee Room 3, Senedd, National Assembly for Wales

Title: Ministerial Report

Agenda

1. Grant scheme to develop breastfeeding peer support groups and other supportive mechanisms
2. CHKS top 40 hospitals award
3. Further advice to the NHS and Local Authorities on Continuing NHS Health Care
4. Social Services Strategy Paper Fulfilled Lives, Supportive Communities: Main Milestones
5. The delay in issuing the National Health Service (Pharmaceutical Services) Regulations
6. Book Prescription Wales
7. GM contamination of American long grain rice
8. Funding for the next phase of the Children's Hospital
9. Car parking charges at NHS Trust hospital sites
10. Update on the progress of the Hospital at Night Project
11. Update on the waiting list/times for bone marrow transplants
12. Update on continuity of funding for the Welsh Neuromuscular Network

1. Grant Scheme to Develop Breastfeeding Peer Support Groups and Other Supportive Mechanisms

1.1 The recently launched Food and Fitness – Promoting Healthy Eating and Physical Activity for Children and Young People in Wales five-year Implementation Plan highlights the importance of a balanced diet, including the benefits of breastfeeding. One of its seven major actions is to develop and deliver training linked to the plan.

1.2 A small grant scheme has been established for voluntary groups and health professionals working to promote breastfeeding. Directed by the Welsh Assembly Breastfeeding Co-ordinator, grants will provide funding for the development and training of peer support groups across Wales, particularly in areas of deprivation.

1.3 NICE Effective Action Briefing on the initiation and duration of breastfeeding recommends peer support as part of a package of systems to support mothers antenatally and postnatally, with particular benefits shown for women on low incomes.

1.4 The grants may also be used to develop or purchase other supportive mechanisms such as antenatal training packs, locally adapted peer support materials, or education packs for use in schools by health professionals or voluntary bodies.

2. CHKS Benchmarking – Top 40 Hospitals Award

2.1 On Thursday 4 May, CHKS made its annual ‘top 40 hospitals award’. Six NHS Trusts from Wales secured their places on the list:

Bro Morgannwg NHS Trust;

Ceredigion & Mid Wales NHS Trust.

Conwy & Denbighshire NHS Trust.

North West Wales NHS Trust

Pontypridd and Rhondda NHS Trust

Pembrokeshire and Derwen NHS Trust

2.2 This was the first time that Pontypridd and Rhonda NHS Trust and Pembrokeshire and Derwen NHS Trust have achieved the top 40 hospitals status.

2.3 The remaining four Welsh hospitals had been on the award list for some years, as follows:

- Bro Morgannwg - 3 years
- Ceredigion & Mid Wales - 5 years
- Conwy & Denbighshire NHS Trust - 6 years
- North West Wales NHS Trust - 6 years.

3. Further Advice to the NHS and Local Authorities on Continuing Care

3.1 Continuing NHS health care is care fully funded by the NHS, in hospital, care home or at home. It is provided for those whose primary need is for health care. Where the primary need is for personal care and accommodation, residents in care homes are required to contribute financially, supported by local authority funding where necessary. This has been the legislative position since 1948. In 2004, the Welsh Assembly Government produced new guidance to provide greater clarity as to who was entitled to continuing NHS health care funding.

3.2 In January 2006, the judgement *Maureen Grogan v. Bexley NHS Care Trust* raised a number of issues in relation to the assessment procedures and criteria applied on decisions on eligibility for continuing NHS health care. In particular, it focused on the limits of the responsibilities of local authorities in the provision of care. As a consequence, a new circular is being issued as an interim measure to Local Health Boards, NHS Trusts and Local Authorities regarding the interpretation and application of the existing guidance, to ensure that it is consistent with the current legal position. Revised guidance will be prepared subsequently to take into account both the implications of the Grogan judgement, and the implementation in 2007 of the Mental Capacity Act.

3.3 Nursing assessments often contribute significantly to the decisions on eligibility for continuing NHS health care, as well as being the basis for decisions on NHS Funded Nursing Care. The Nurses Workbook which was originally produced in 2001 to support the introduction of that policy, is being re-issued after being updated to take into account the current legal position, with a supporting training package.

4. Social Services Strategy Paper Fulfilled Lives, Supportive Communities: Main Milestones

4.1 The Social Services Strategy Paper *Fulfilled Lives, Supportive Communities* was issued for consultation in August and has been provided to all Assembly Members. The Paper has recently proceeded through three regional consultation events involving a wide range of stakeholders. My officials held a briefing session for DHSS and SJ&R Committee Members on Tuesday.

4.2 *Fulfilled Lives, Supportive Communities* will be a ten-year strategy for social services in Wales. The draft Strategy emphasises that Social services should remain a unified and integral part of Local Government and that it should continue to modernise in order to provide high quality, accessible and personalised care. The Strategy says that Social services need to rebalance so that they support people earlier in order to help people retain their independence and support families so that they can care for their children whilst managing any risks.

4.3 The key remaining milestones for the development of the strategy are:

- Formal Consultation ends 15 November 2006
- Launch of final document Week commencing 26 February 2007 (to be confirmed)

4.4 I propose that the implementation of the final Strategy should comprise a series of three year rolling action plans aligned to the same three year periods as Designed for Life and with the three year local government revenue settlements. The implementation would be managed through five interdependent work streams:

- Strong leadership and accountability
- Efficient commissioning
- Rigorous performance management
- Effective partnerships that delivers for people
- A skilled workforce that can deliver a people centre service

5. Delay in Issuing The NHS (Pharmaceutical Services) Regulations

5.1 The issues surrounding rurality and control of entry are complex. A detailed consultation was carried out last year. The results of this have been assimilated and proposals are being drawn up for my consideration. We have looked closely at England's example and it may be that some changes will mirror theirs; but it may also be more appropriate to vary the changes according to Wales's needs. Pertinent to this is a review currently underway into the changes implemented by the Department of Health, the results of which could further inform our proposals. I am determined to get the best possible way forward for Wales.

5.2 Original pack dispensing was the subject of consultation in Wales earlier this year, the results of which are currently being examined. We need to work in tandem with DH on a unified approach because of our joint Drug Tariff. They are currently engaged in negotiations with the Pharmaceutical Services Negotiating Committee (PSNC) on this issue.

5.3 The legislation concerning oxygen is needed to remove the option for prescription forms to be used to prescribe oxygen. This is now done by means of a Home Oxygen Order Form and, when this legislation is in place, this will be the only means of doing so.

6. Book Prescription Wales

6.1 Book Prescription Wales (BPW) is a national scheme set up by the Assembly which has now been up and running for one year. The scheme enables patients to be referred to what health professionals believe are the best healthcare books out of the many thousands on the market, and access those books free of charge utilising the library service. Thirty-three different titles are available in the 312 libraries and four prisons across Wales.

6.2 BPW currently targets those experiencing mild to moderate mental health problems, delivering an alternative treatment option known as bibliotherapy. Bibliotherapy is recommended by NICE as part of a staged treatment programme for, in particular anxiety and eating disorders, although the scheme

covers eighteen conditions in all. BPW is a means by which health professionals can opt into a system, already set up on an equitable and cost saving basis, and recommend with confidence, professionally selected self-help books. Use of the books may avoid the need to prescribe drugs.

6.3 BPW has recently been independently evaluated, evidencing the very positive reception to the scheme, the potential to expand it to many other health areas and the need for more publicity.

7. GM Contamination of American Long Grain Rice

7.1 The Food Standards Agency advises that, in accordance with an EC Decision, all imports of long grain rice from the United States of America to any EC country should arrive with certification confirming the consignment is free of specific unauthorised GM rice LL601. Any consignments that arrive without certification are being held at points of entry, including those in Wales, until they can be certified to be free of the GM rice.

7.2 The European Commission is leading discussions with the US authorities to ensure that no further products containing unauthorised GM material are exported to Europe.

7.3 In addition, the Food Standards Agency has commissioned a survey of American long grain rice in UK rice mills, to ensure that any further batches of affected rice are not entering the food supply chain. Samples have been collected and the Agency is waiting for the results of analytical tests conducted. The laboratories carrying out the testing will inform the Agency immediately of any positive results so that the mills concerned can be informed and take the appropriate action. There are no rice mills in Wales.

7.4 The FSA and the European Food Safety Authority (EFSA) have each undertaken a risk analysis. The Agency, having issued earlier interim advice, agrees with EFSA's opinion that, despite insufficient data on which to complete a full risk assessment (as would be carried out for the authorisation of new GM foods) then, on the basis of current evidence, rice containing these trace levels of unauthorised GM material is not likely to pose an imminent safety concern. Advice to consumers remains the same: if consumers have US long grain rice at home, they can continue to eat it.

7.5 FSA has continued to notify interested parties of developments in relation to this incident and has provided updates on its website.

8. Funding for the Next Phase of The Children's Hospital

8.1 A total of £11.35m was spent on the first phase of the development of the Children's Hospital for Wales, of which the Welsh Assembly Government contributed £4.9m.

8.2 The next phase of the proposed Children's Hospital is being taken forward by Cardiff and Vale NHS Trust, in discussions with its commissioners. These discussions are focussing upon the range of services the facility will offer, particularly the more complex services like paediatric A & E and paediatric theatre provision.

8.3 An indicative capital sum of £38.5m was identified within Designed for Life for phases 2a and 2b of the proposed hospital development. However, until the Strategic Outline Case (the first stage of the three stage business case process) for this phase is developed and submitted, a clearer funding requirement, for both capital and revenue, will not be available. It will be for commissioners, Local Health Boards and Health Commission Wales, to agree to fund the revenue consequences of the development whilst the Welsh Assembly Government will fund the capital. Officials expect the Strategic Outline Case to be available towards the end of this calendar year.

9 Car Parking Charges at NHS Trust Hospital Sites

9.1 The Welsh Assembly Government does not direct or guide NHS Trusts on the issue of parking charges at hospital sites. This and other operational matters remain the responsibility of each NHS Trust to determine on a local basis.

9.2 NHS Trusts follow the guidance contained within the Department of Health publication NHS Income Generation - Best Practice (February 2006). This refers to HM Treasury Guidance and makes it clear that income generation schemes must be priced fairly and must at least recover full costs, including overheads, depreciation of assets and an appropriate return on the capital employed. Trusts may then utilise any surplus income as they wish.

10. Update on the Progress of the Hospital at Night Project

10.1 Currently seven of the 13 NHS Trusts in Wales have developed and implemented a Hospital at Night (H@N) model. These are:

- Bro Morgannwg NHS Trust
- Cardiff and Vale NHS Trust
- Conwy & Denbighshire NHS Trust
- Gwent Healthcare NHS Trust (including Caerphilly & District and Miners Hospital)
- North West Wales NHS Trust
- Powys LHB
- Swansea NHS Trust.

10.2 The remaining trusts have planned launches for early in 2007. The Assembly's

Junior Doctor Co-ordinator and EWTD/New Deal Project manager plan to continue to actively monitor the progress of H@N implementation in Wales and will offer support to trusts as necessary.

10.3 Pembrokeshire & Derwen and North East Wales both have full time dedicated

H@N project leads in place, with both posts currently being funded by the Welsh Assembly Government.

11. Update on the Waiting Times for Bone Marrow Transplants

11.1 HCW has been working with Cardiff & Vale NHS Trust to address capacity problems in the Bone Marrow Transplant services. The number of bone marrow transplants funded by HCW has increased significantly over the past few years.

11.2 Since April, Cardiff and Vale Trust has taken a number of initiatives in order to increase capacity for bone marrow transplantation. The Trust has opened two additional beds, and appointed two specialist nurses to help with the management of patients. The Trust is also piloting the use of hotel facilities in the care pathway for bone marrow transplantation, and has strengthened procedures for assessing referrals into the bone marrow transplant service. Together these actions have improved access to Bone Marrow Transplants.

11.3 Additionally the Welsh Blood Service runs the Welsh Bone Marrow Donor Registry (WBMDR) which covers mid and South Wales. The WBBMDR was established during 1988 as a collaborative enterprise between the Regional Tissue Typing Laboratory of the Welsh Blood Service and the British Bone Marrow Donor Appeal. It recruits all of its panel donors from Welsh Blood Services volunteer blood donors. The WBMDR is one of the most successful in the world for matching potential bone marrow donors and recipients. The testing of donors in Wales is of such a high standard that they now form part of a donor network to fight blood diseases worldwide.

12. Update on Continuity of Funding for The Wales Neuromuscular Network

12.1 The Wales Neuromuscular Network has been funded by the Muscular Dystrophy Campaign to date. Cardiff and Vale NHS Trust did not identify this service as a priority in the 2006-07 Service Level Agreement discussions with Health Commission Wales. Health Commission Wales continue to work closely with Cardiff and Vale NHS Trust. If the Network is identified as a priority by the Trust for funding in 2007-08, it will be considered along with all other priorities in the Health Commission Wales commissioning plan for 2007-08.