

## **Health & Social Services Committee HSS-11-01 (p.1)**

**Date:** 4 July 2001  
**Venue:** Committee Room 3, National Assembly for Wales  
**Title:** Monthly Report of the Minister for Health And Social Services

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## **1. STRATEGY ISSUES:**

### **1.1 "Improving Health in Wales" – Implementation Plan Update**

The Implementation Group will be considering the results of the task and finish groups scoping exercise which will provide the basis of the full programme of future activity to implement the Plan. This will be available as a technical document by September.

The consultation paper on the options for the revised structure of NHS Wales to enable the implementation of the plan – Improving Health in Wales – will be published on 18 July for a period of 3 months consultation.

An open access website for *Improving Health in Wales* was launched in June. Following the initial start up of the site the information will expand as the implementation process moves forward. This will include the provision of a means for professionals and members of the public to request information or provide feedback. The website currently provides information on:

- the remit, membership and notes of meetings of all Task and Finish Groups;
- progress reports providing headlines of current work; and
- a monthly website News Bulletin.

The first edition of a bi-monthly newsletter "*Health Plan Newsletter – Improving Health in Wales*" has been published to coincide with the website. Some 100,000 copies were printed and distributed to all NHS Staff and other key organisations. Copies are available in the Assembly's Libraries.

## **1.2 Launch of Coronary Heart Disease National Service Framework Implementation Plan**

I will announce the launch of the Coronary Heart Disease National Service Framework on 3 July. Coronary Heart Disease is a leading cause of death in Wales and tackling the disease and reducing the mortality rate remains one of the Assembly's top priorities for the NHS in Wales.

## **2. NHS PERFORMANCE:**

### **2.1 Waiting Times**

It is my intention to announce a new Waiting Times strategy for Wales at the Innovations in Care conference on 12 July. My officials are currently discussing waiting times and other NHS targets with NHS colleagues and I hope to be able to confirm the nature of these targets during my strategy announcements.

As I have previously stated, the new targets will focus on clinical need and the length of time patients have to wait, rather than simply concentrating on reducing numbers on the list irrespective of clinical priority.

Other targets might include introductory booking systems for some specialities, improving care pathway, and increasing day case surgery.

### **2.2 Additional Funding for Orthopaedic Services in Wales**

On 26 June I announced £12 million to address the severe problems associated with orthopaedic services in Wales. This money will benefit patients throughout the whole of Wales.

Health authorities and trusts share my concern about the unacceptable waiting times for surgery. Together, we are allocating additional money to reducing the current long waiting times for orthopaedic surgery and further monies to improve the services to patients. I am determined that by the end of July 2002, no one should have to wait over 18 months for orthopaedic treatment in Wales.

### **2.3 Emergency Pressures**

Daily reporting continued until 29 June and will restart at the beginning of September. Weekly reporting will continue throughout the year. The Winter Report has been completed and is due to be distributed shortly. Updated Emergency Pressure Planning Guidance will be available from the end of August and will be distributed widely to the NHS, Local Government and Partners.

### **2.4 Keep well this Winter Campaign**

The first Keep Well This Winter campaign arose from a recommendation from the Emergency Pressures Task Force that it was important to promote the health and well being of older people during the winter. It was decided to stage a campaign to provide information and support to people over 65 to enable them to keep well during the winter. The objectives of the campaign were:

- to raise awareness among the target group of the issues that will enable them to keep well this winter
- to increase the uptake of the flu vaccine among this target group
- to improve access to help and support for the most vulnerable within the target group
- to achieve a more co-ordinated approach to NAW initiatives for this target group, in order to get the message across more effectively
- to encourage a co-ordinated, multi - agency approach among those delivering the campaign
- to promote good health and well being, thus making a positive contribution to reducing the pressures faced by the NHS in Wales

Adopting a partnership approach, the campaign drew together established initiatives into a concerted programme and focused the expertise and resources of a number of statutory and voluntary organisations, local government and the National Assembly into a co-ordinated campaign. Work focused on four themes - flu vaccination, keeping your homes warm, eating well during the winter months and accident prevention. These were promoted through a series of themed monthly messages in the media, via public information materials and community action.

The campaign started in October with the flu vaccination initiative. Considerable emphasis was placed on raising awareness of the availability of the vaccine to people over 65 via media initiatives and

community action by primary care teams.

Age Concern Cymru played a pivotal role in the campaign. The organisation's networks were used extensively to disseminate information and stage events, and its expertise in providing support and information to the over 65s helped shape campaign activities. They also produced a comprehensive booklet which provided advice on the campaign themes.

Other partners involved in the campaign were:

- the Wales Office of National Energy Action (linking in with Warm Homes Week and the launch of the new Home Energy Efficiency Scheme;
- the Food Standards Agency Wales which produced a useful booklet on nutrition, and staged community events;
- care and Repair Cymru, with support from some Local Authorities, which led the accident prevention element of the campaign;
- the Wales Youth Agency which undertook a pilot campaign to encourage young people to help the elderly in their community, by volunteering to do their shopping;
- the Wales Council for the Blind and the Royal National Institute for the Blind which made campaign materials accessible, via 'talking newspapers' and large print publications, to visually impaired people; and NHS Direct, which provided a national source of information, and the network of 70 Citizens Advice Bureaux which provided access to information locally.

### **3. IMPROVING HEALTH AND TACKLING INEQUALITIES:**

#### **3.1 Foot and Mouth Statement**

As I indicated in last month's report, the Chief Medical Officer (CMO) is setting up a Human Health Monitoring Group to co-ordinate and review monitoring data on human health. The group will be chaired by the CMO herself and will include a wide membership from within and outside the National Assembly. The group will work closely with the Foot and Mouth environmental monitoring group which is co-ordinating and reviewing data from the environmental monitoring programme put in place to assess exposure of the public to potential health risks arising from foot and mouth disease control. The two groups will collaborate closely and information and data will be published regularly.

The environmental monitoring group met on 25 May. Routine monitoring of private water supplies around Eppynt has not shown any contamination from foot and mouth disposal. Analysis of samples of air, soil and herbage is on-going. This includes samples from Anglesey where deformities in chickens have been claimed.

The Food Standards Agency is shortly expecting to receive the results of sampling for dioxins in milk and eggs around pyre sites. Eggs taken from sites in Wales are included in the first batches of samples to be tested. Samples were not taken earlier because it takes time for peak amounts of dioxins to build up on grass, and for the highest levels to get through into milk or eggs. Testing for dioxin levels is also a complex and time-consuming process.

In my last report to the Committee, I explained that a small-scale study had been commissioned to explore in more detail the impact of the foot and mouth situation on people's mental health and well being. This report has now been published and I arranged for all Members of the Committee to receive a copy. I also copied the report to all other Assembly Members, given the interest in the foot and mouth situation outside this Committee. Proposals for a more detailed assessment of the impacts of foot and mouth on people's mental health and well being are being prepared.

### **3.2 Future of Infertility Services in Wales**

Committee Members considered infertility services at our meeting on 22 November 2000 (HSS-20-00) and requested a further report when the Health Authorities had considered the report of their Directors of Public Health

I have agreed to join England in referring the Royal College of Obstetricians and Gynaecologists' guidelines on NHS infertility services to the National Institute for Clinical Excellence (**NICE**). There are three parts to the guidelines, which will be considered consecutively, namely management of infertility in:

- the Primary Care Setting;
- Secondary care setting; and
- "specialised services".

This will ensure that, in future couples get fairer and faster access to clinically cost effective and appropriate infertility services.

NICE work on the guidelines will begin, and form part of their work programme, for 2001-2002. However, it is expected it will take 18 months or more for NICE to produce its findings.

Health Authorities have been conscious of the present inequities in the provision of specialised infertility services throughout Wales and have set up a special group, headed by the five Directors of Public Health, to review these services across Wales. Their report has now been reviewed by the health authority Chief Executives. As a consequence, whilst they await the publication of the NICE guidance on the specialised infertility services, each health authority will now be developing work to bring their existing policies into line.

## **4. QUALITY REGULATION AND INSPECTION:**

### **4.1 Modernising Audiology Services**

In February I announced that £1.5 million was to be made available in order to modernise audiology services across Wales.

A project board has now been established to oversee the allocation of these funds in the most appropriate and effective manner. I attended the first meeting of the board in June. The project management role will be undertaken by a team of audiologists on part time secondment from their Trusts. A Trust Chief Executive chairs the board and members include Assembly officials and the Director of the Royal National Institute for the Deaf, as a representative of the voluntary services

Funding of £1.7 million and £1.8 million has been earmarked for subsequent years, subject to Budget Planning Round decisions. It is anticipated this money will be spent on providing new technology hearing aids, extra staffing in Audiology departments and training.

### **4.2 A Rural Health Research Initiative**

To facilitate the development of evidence-based policy and programmes tackling rural health issues in Wales, there is a need to complement existing information with robust and up to date intelligence and research. In light of this, I have approved the commissioning of an 18 month research programme examining health and well-being issues in rural areas.

The main objectives of the proposed research programme are as follows: to provide a rural perspective on health issues for the National Assembly for Wales; to provide intelligence on UK and wider European developments on rural health issues and their implications for Wales; and to further develop research capacity in Wales on rural health issues. This research programme will complement the currently planned health impact assessment of the mental health impact of the Foot and Mouth Disease outbreak in Wales.

It is anticipated that the research will commence in September 2001, following discussions between officials and the appointed contractor.

## **5. CHILDREN'S SERVICES:**

### **5.1 Children First Action Plans 2001-2002**

Local authorities submitted their Children First Action Plans for 2001-02 at the end of April. Scrutiny of the Plans suggests that Children First is beginning to lead to improved services and outcomes for looked after children, though considerable improvement is still required. The availability of baseline performance data has improved. Overall investment in children's services will increase by around

£15.5million this year, including the Children First Development Fund (£11.7million) made available by the Assembly. The Assembly responded to local authorities' Plans in June and officials will hold mid-year review meetings with each authority to monitor progress. Full progress reports are required at 31 March 2002.

## **5.2 Children First Conference for Looked After Young People**

On the 30 May, in Cardiff I attended a conference for looked after young people, organised by The Children First Team. Around 50 young people took part. The workshops focused on the main objectives of the Children First programme and young people were invited to give their views on the appropriateness of those objectives and the future development of the programme. A second conference will be held in the Autumn (around October) in North Wales.

Initial feedback suggests that the first conference was very well received by the young people who took part. We understand that the Children's Commissioner for Wales intends to approach the same group of young people to act as a reference group for his work with looked after children.

## **5.3 Childcare Task Force Meeting**

I attended the second meeting of the Childcare Strategy Task Force on 13 June. On the last occasion we asked the key players in childcare in Wales to provide reports on specific areas that the final report of the Task Force should address. These were:

- Childcare in disadvantaged areas
- Support, Infrastructure & Information
- Recruitment & Training
- Maximising existing resources

I am pleased to say that we received some very encouraging responses. We will have developed an integrated document including a draft Action Plan by the next meeting on September 7. The document will then be brought to the relevant subject committees for discussion.

## **5.4 Participation of Children and Young People in Decision-Making**

I am issuing a consultation paper containing proposals for ensuring that the voices of children and young people are heard in Wales and taken into account in policy development in the National Assembly.

It proposes establishing a structure to ensure representation at an all-Wales level that can link to local children and young people's forums. This would involve setting up a new self-governing organisation, called Llais Ifanc/Young Voice, that would be run by, and answerable to, children and young people and supported by representatives of key organisations.

The proposal has been written by a group of young people supported by Save the Children, Children in Wales, the Wales Youth Agency and Assembly officials. Consultations will take place until the end of September with a wide range of children and young people's organisations, local youth forums, local authorities, the education sector, health agencies and the youth service.

## **5.5 Health of School age children**

At our 6 June Committee meeting, members asked for draft terms of reference for the review of the Health of School Age Children to be drawn up in time for consideration at our 18 July meeting. A consultation exercise is scheduled for the end of June/beginning of July to inform the terms of reference.

## **6. SOCIAL CARE:**

### **6.1 Carers**

In 'National Carers Week' on 12 June I presented a Plenary Statement on a package of Carers issues. Key to that was the publication of my First Report of the Strategy for Carers in Wales. The report sets out achievement to date that will have a positive impact on carers' lives and includes a forward look programme.

At the plenary, the Assembly approved the Commencement Order for most of the provisions of the Carers and Disabled Children Act 2000, supporting Regulations and the Special Grant Report which will distribute £3.7m to local authorities for services to carers in the current financial year. Money for carers' assessments (£1.1m) has been provided for separately in the local government revenue settlement.

### **6.2 Health Act 1999 "Flexibilities"**

The Joint Working Special Grant was approved by the Assembly in Plenary on 12<sup>th</sup> June £1.9m will be distributed to local authorities in 2001-2 to establish partnerships under the Flexibilities framework.

Assembly officials are compiling a database of existing joint working relationships between local partners. This will help to spread good practice. We will also establish a working group to explore how best to promote joint working and tackle some of the practical obstacles to partnership working. This will lead to the production of a detailed practitioners guide to using the Health Act Flexibilities.

The emphasis on joint working is strongly embedded in the NHS Plan. I set up a Task and Finish Group to advise on the implementation of the various commitments in Chapter 4 of the Plan. The Task Group has wide representation drawn from the NHS, local government, and the voluntary and independent sectors. The Group has developed a model for local 'Health and Well-Being Strategic Partnerships' which will be the strategic driving force for joint working between the NHS and local government.

### **6.3 Establishment of the Care Standards Inspectorate – June Update**

*Accommodation & IT:* floor plans and layouts are being agreed with the transferring staff. A timetable for phasing the moves into the new offices is in preparation. Discussions are ongoing with potential suppliers for an all-Wales registration and inspection database.

*Staffing:* the Care Standards Inspectorate Wales senior management team has been identified and announced. Work has commenced on the matching of around 200 eligible transferees to posts in the new structure. Planning of the autumn recruitment programme to fill any gaps, and to cover the additional workload arising from the inspection and registration of new settings, is underway.

*Regulation & Standards:* the third commencement order under the Care Standards Act 2000 was passed in plenary on 12 June, giving the Assembly the powers to make regulations and national minimum standards. As noted in the previous monthly report, there has been some delay in the production of draft documents for consultation. However, the first consultation pack, dealing with draft regulations and standards for Children's Homes, will issue in week commencing 18<sup>th</sup> June, to be followed with a similar exercise on care homes in July. These are likely to issue in advance of the corresponding Department of Health consultation exercises in England and we hope to be in a position to present the final regulations and standards for these particular settings for consideration by Plenary in November.

The children's homes and care homes consultation exercises will be followed by a number of others over the course of the summer. These will include private and voluntary healthcare settings, boarding schools, domiciliary care agencies, foster care agencies, applications for registration and fees. We would expect to be in a position to present the final regulations and standards for these settings for the Assembly's consideration in January/February 2002.

It is possible that regulations and standards for some other settings won't be made until after April 2002. These include regulations and standards for adoption agencies. These particular regulations and standards were to be developed in the light of the proposed Adoption bill, which recently fell.

Rob Pickford has been appointed to head up the Care Standards Inspectorate for Wales. This is a senior civil service appointment, which has been made following external competition. Mr Pickford is currently Assistant Director (Adult Services) of Strategic and Operational Management at Bridgend County Borough Council, Social Services Department.

## **6.4 Voluntary Sector / Volunteering**

The Voluntary Sector Partnership Council met on 22 June in Kidwelly. The meeting was attended by the Minister for Finance, Local Government and Communities to discuss issues raised by the voluntary sector relating to Local Government Modernisation, Communities First and Assembly Budgets. We also agreed the final draft of the first Annual Report on the Voluntary Sector Scheme. This will be the subject of debate in Plenary on 17 July.

## **6.5 Task and Finish Group for Workforce Issues**

The Chief Inspector of Social Services in Wales established a specialist Task and Finish Group to look at workforce issues within the social care sector in Wales, in January 2001. The group represents the range of interests within the sector including the Association of Directors of Social Services (ADSS), the private and voluntary sector, CCETSW/TOPPS and education interests. The Task Group has reported to the Minister and made a presentation to the Health and Social Services Committee on 20<sup>th</sup> June 2001.

## **6.6 Care Council for Wales**

The Care Council for Wales is to be set up in October 2001 as an Assembly Sponsored Public Body, and has been based on the 6<sup>th</sup> floor of Southgate House. The appointment of the Chair of the Council has been made, Mutale Nyoni was introduced to the committee in June. Members are currently being sought. The Care Council for Wales (Appointment, Council for Wales Membership and Procedure) Regulations were approved at Plenary in June and will come into force on 1<sup>st</sup> July 2001.

## **6.7 Developing Performance Management in Social Services**

The new Performance Indicator set for 2001/2 has been agreed and authorities are now working on data against the new definitions. An initial trial data return will be carried out at the end of September 2001 to test the data return and the data model.

Social Services Inspectorate Wales has consulted on a Performance Management Strategy and Development Fund. The Assembly agreed the Special Grant Report for the Development Fund at Plenary on 12<sup>th</sup> June 2001.

A training and development programme for Senior Managers in Social Services on improving the management of performance is being developed to support this work, following discussions with Directors of Social Services.

## **6.8 Transfers of Resources affecting the Health and Social Services Main Expenditure Group**

In accordance with Standing Orders 19.5, 19.6 and 19.7, I wish to inform the Committee of the transfers of resources (Annex 1) during the current financial year which I have been agreed with the Minister for Finance, Local Government and Communities.

## **7. FINANCIAL POSITION:**

### **7.1 Overall Position**

It is too early in the year to form a clear assessment of the overall forecast cash out turn for 2001-2002.

Where early indications of underspend have been identified these have been redirected to address orthopaedic waiting list pressures. Any further underspends identified will be addressed during the current Budget Planning Round.

## 7.2 Primary Care Allocations

At the last meeting I promised to provide details the £3.1m allocated to Primary Care in April:

£1m - GP Recruitment and retention

£1m - Development of out of hours medical services

£0.4m - Central funding for two integrated primary care teams in a deprived area

£0.7m - Welfare rights advice in primary care settings.

£3.1m - Total

## ANNEX 1

<b>Amount of Transfer from Transfer</b>	<b>Transfer from</b>	<b>Transfer to</b>	<b>Reason for transfer</b>
£30,000	Health & Social Services MEG	Health & Social Services MEG	To fund the production of a newsletter which is an important part of the communication process on the implementation of the Care Standards Inspectorate for Wales. The aim this year will be to produce 6-8 newsletters in the run up to the launch of the Inspectorate on 1 <sup>st</sup> April 2002.
	Other Health & Social Services SEG	Other Health & Social Services SEG	
	Care Standards Regulation BEL	Research/Publicity/Misc Payments BEL	
	Before Transfer:		
	£2,801,000	Before Transfer:	
	After Transfer:	£1,305,000	
	£2,771,000	After Transfer:	

£80,000	Health & Social Services MEG	£1,335,000 Health & Social Services MEG	To provide Carers National Association and Crossroads with "capacity building" funds to support them in their work in developing and implementing the Carers Strategy in Wales.
	Other Health & Social Services SEG	Support for the Voluntary Sector SEG	
	National Strategy for Carers BEL	Support for the Voluntary Sector/ Volunteering BEL	
	Before Transfer:	Before Transfer:	
	£4,040,000	£5,572,000	
	After Transfer:	After Transfer:	
	£3,960,000	£5,652,000	
£30,000	Health & Social Services MEG	Health & Social Services MEG	To fund the production of a number of publications disseminating information about the National Strategy for Carers Policy
	Other Health & Social Services SEG	Other Health & Social Services SEG	
	National Strategy for Carers BEL	Research/Publicity/ Miscellaneous Payments BEL	
	Before Transfer:	Before Transfer:	
	£3,960,000	£1,335,000	
	After Transfer:	After Transfer:	
	£3,930,000	£1,365,000	

£60,000	Health & Social Services MEG	Economic Development MEG	Community Enterprise Wales (CEW) is an umbrella organisation that aims to promote community regeneration through community enterprise. The transfer is being made as Economic Development Division are now responsible for CEW. This transfer will be the subject of a motion in plenary at the appropriate time.
	Support for the Voluntary Sector SEG	Pathway to prosperity SEG	
	Support for the Voluntary Sector/Volunteering BEL	Pathway to Prosperity Fund BEL	

Before Transfer:

£5,652,000

After Transfer:

£5,592,000

Before Transfer:

£29,143,000

After Transfer:

£29,203,000