

**Date:** 4 July 2001  
**Venue:** Committee Room 3, National Assembly for Wales  
**Title:** 2002-2003 Budget - Issues Paper

## **1. Purpose**

1.1 The Finance Minister's letter commissioning the year 2002-2003 planning and budget round invited Assembly Secretaries to submit an issues paper to subject committees. This paper details the main issues relating to the programme areas within the remit of my portfolio and therefore the remit of this Committee. The paper, and the views of the Committee, will be used to inform my discussions with the Finance Minister on the actual budget for 2002-2003 and indicative plans for 2003-04 and 2004-05.

## **2. Summary**

2.1 The paper offers an assessment of :

- the effectiveness of the Assembly in meeting the targets in *betterwales.com* and *Putting Patients First* for 2000-01 and progress towards meeting the longer term targets for 2003;
- the priorities and pressures for 2003;

## **3. Timing**

3.1 To meet the requirements of the Finance Minister, I need to receive a note from the Committee setting out its views on the issues raised, including the relative priority to be attached to the specific issues raised by 20 July.

## **4. Background**

4.1 The Finance Minister has indicated that she does not expect to receive any large bids for new spending this year. The absence of a Spending Review this year means that, apart from the new money made available to the Assembly following the Chancellor's Budget in March (£99.8 million), there is no change to the quantum of the Assembly's DEL provision which was allocated as in the indicative budget for 2002-03, and which was adopted by the Assembly on 29 March 2001.

4.2 Corporately, across the Assembly we therefore need to remain within the constraints of that budget while ensuring that we are properly resourced to fulfil the programmes and meet the targets we have in place to address our priorities.

## 5. Review of 2000-01

5.1 A detailed breakdown of the targets published in *betterwales.com* and *Putting Patients First* and the progress made towards meeting the targets for 2000-01 and 2003 during the past year is attached at Annex A.

5.2 We have delivered a number of unique Welsh initiatives, such as the Eye Care Initiative, the freezing of prescription charges and prescription exemption for younger people; and the extension of the availability of free dental checks. We are taking action to reduce waiting times and, to ensure further improvements, we have established the Innovations in Care Programme to assist the NHS in bringing forward innovative solutions and identifying and adopting best practice across Wales. The recommendations of the Emergency Pressures Working Group also allowed us to assist the NHS in dealing with the annual winter period of increased emergency admissions better than ever before through planning of additional resources.

5.3 We have made progress in developing strategies for mental health care and an implementation plan for the National Service Framework to reduce mortality from coronary heart disease. We also issued revised minimum standards of care for cancer services during the year.

5.4 Our commitment to tackle health inequalities has been reflected in the work of the Resource Allocation Review team and the establishment of the Health Inequalities Fund. We also introduced salaried GPs to combat shortages in rural and other areas.

5.5 Earlier this year also saw the publication of our ten-year plan for the overhaul and rebuilding of the NHS in Wales. *"Improving Health in Wales"* contained some of the most radical proposals for the future of the NHS anywhere in the UK. Widely welcomed throughout Wales, our plans to remove Health Authorities and introduce more locally accountable planning and commissioning of services will place Wales at the forefront of the delivery of health services in the UK. The Plan will encourage stronger links between the NHS and all its partners to deliver a total service, embracing primary, community and secondary care, social services provision and the voluntary sector.

5.6 We have made significant progress in taking forward social care policies, initiatives and programmes. In relation to improving the well being, protection, and enhancing the life chances of children we have, for instance, established the Children's Commissioner, created 10,000 childcare places under the Early Years Development and Child Care Partnerships, and established many partnerships delivering a diversity of projects under the Sure Start initiative.

5.7 We have launched a Carers' Strategy Implementation Plan and further developed it. We have instituted the Carers' Special Grant and implemented most of the provisions of the Carers' and Disabled Children Act 2000. We have regulated to permit pooled budgets and the delegation of functions

between NHS bodies and local government, instituted a special grant and in other ways promoted joint working on the delayed transfer of care. We have started work on an older persons strategy, adjusted the means test, introduced a disregard period and in other ways sought to reduce the pressure on individuals to sell their own homes to pay for care. We are working to extend free nursing care to those who fund their own care in nursing homes. We have provided funding to complete the resettlement of people with learning disabilities from Hensol Hospital and to develop and implement a comprehensive programme at Bryn y Neuadd. Action to improve care standards included preparatory work to set up the Care Standards Inspectorate for Wales and the Care Council in Wales to improve performance in social services was taken forward with progress on the development of a Performance Management Strategy.

5.8 The Assembly also published a Voluntary Sector Scheme which paves the way for the Assembly's working relationship with the voluntary sector in Wales. Under the Scheme the Assembly has established a Voluntary Sector Partnership Council and also provides for twice yearly meetings between Assembly Ministers and representatives of the relevant voluntary sector networks. The Assembly has also made a modest start in addressing capacity difficulties faced by the sector.

5.9 We have made good progress but there is still a lot of work to be done. We must take forward the proposals in the NHS Plan for both health and social services and at the same time address our public health requirements to ensure that future generations benefit from better health, and better services when they need them.

## **6. Priorities for 2002–03**

6.1 The BPR process will include an assessment of inescapable spending and pressures within health and social services baselines. It will also examine the scope for flexibility within baseline budgets. Within available resources, it will be essential to prioritise funding requirements.

6.2 A top priority for health and social services will be to maintain existing baseline provision. This would sustain the encouraging progress made towards Partnership Agreement commitments and *Improving Health in Wales*. Maintaining the baseline would also deliver published planning assumptions to the NHS. These include year on year increases of 7 per cent on the health authority discretionary allocation; 9.1 per cent year-on-year on GP prescribed drugs prescribing and 5.7 per cent for family health services. This is the financial planning framework within which the NHS is operating.

6.3 In addition to maintaining baselines, a current top priority for health will be seeking to maintain and build on the £20 million new investment package I announced in March. The package covers spending on most of the Partnership commitments in some key areas this year. New investment has covered:

- primary care- to deliver on GP recruitment and retention and improve GP and dentists' premises;
- NHS capacity- to deliver on waiting list hotspots, cardiac and cancer services and to develop services to NSF standards;
- Nurses - to increase recruitment and retention packages;
- *Improving Health In Wales* - to deliver increased nurse training, clinical networks and orthopaedic services.
- *Health Inequalities* - to tackle health inequalities in our poorest communities in Wales.

This funding needs to be sustained and increased to achieve progress every year.

6.4 Alongside considering any new unfunded pressures which may emerge from the assessment of baselines, we shall be reviewing the scope for increasing investment towards some significant Partnership commitments which will require further investment if we are to see full progress. Additional funding has been invested in:

- NHS Human Resources Strategy;
- Waiting Times Strategy;
- Innovative solutions to delayed discharge;
- Winter Pressures;
- Information Management and Technology; and
- Improvements to facilities and equipment.

Further progress in these areas requires additional funding. Additional funding will be required also to progress:

- Clinical education expansion in North and South Wales; and
- The Finance Minister's statement on 28 June highlighted progress on funding of the Partnership Agreement. The only outstanding commitment is school breakfasts/fruit tuck shops - *a commitment from the Education and Lifelong Learning chapter of the Partnership Agreement.*

6.5 Capital is essential if we are to modernise the practice environment for health professionals - equipment and information systems as well as buildings. This is becoming a significant issue in recruiting and retaining clinical staff in a number of medical specialities, as well as wishing to provide the people of Wales with the benefits of safe and effective treatment.

6.6 Increasing the Health Inequalities Fund is also a priority area for further investment to ensure that health makes an appropriate contribution to the

*betterwales.com* priority of tackling social disadvantage, and to play its part in implementing the recommendations of the Townsend resource allocation review.

6.7 For social services all children's budgets are on a rising baseline, with the exception of that for the Children's Commissioner. Adjustment of that budget will depend on proposals to be received from the Commissioner in July, but the sums involved are unlikely to be significant.

6.8 The Committee may wish to consider whether the planned expenditure on the Childcare Strategy should be further enhanced to reflect recommendations that may emerge from the report of the Childcare Strategy Task Force in the Autumn.

6.9 We will need to review the budget baseline provision for Elderly and Long Term Care when better data become available, including the need to ensure that there is adequate funding for free nursing care and the continuation of the 6 weeks Free Home Care Scheme.

6.10 The present baseline for the Care Standard Inspectorate Wales was based on a best estimate made whilst the Care Standards Bill was still going through Parliament. Detailed costings are now being prepared. It is likely that additional sums will be required in order to ensure that the staff transferring into Assembly, as well as the newly recruited inspectors, are enabled to train for the new nationally recognised inspection accreditation; and to undertake the additional work in the early years on re-registering all the settings currently registered with local and health authorities.

6.11 In respect of the Care Council for Wales, a recommendation of payment of members will increase our requirement. In addition it has been necessary to undertake work on the recruitment and retention of the social care workforce which has led to a need to implement a long term strategy which will tackle the difficulties identified.

6.12 The planned level of support for the voluntary sector needs to be re-examined if we are to fulfil commitments given to help the sector create the capacity necessary for it to deliver on our objectives and expectations. Budgets are fully committed for next year, as a result of the move to three-year funding streams, and decisions will need to be taken about whether some highly desirable measures to assist the voluntary sector can be allowed to proceed.

## **7. Conclusion**

7.1 Our remit includes a wide range of subject areas, all requiring funding from a finite budget. I will be discussing with the Finance Minister how far we can meet the commitments within the resources we have and what scope there may be to reprioritise expenditure. To inform those discussions, I would welcome the Committee's views on what should be considered as our priority areas for investment over the coming year.

**Jane Hutt**  
**Minister for Health & Social Services**

<b>Better Wales Targets 2003</b>	<b>Action Taken 2000-01</b>	<b>Estimated Completion Date</b>
To achieve an equitable distribution of health resources in line with the best evidence on needs and to ensure that all health authorities have Health Improvement Plans in place which allocate resources in line with health service needs.	Resource Allocation Review National Steering Group and Project Review Group established-May 2000 Emerging Findings Report produced January 2001 The need to link resources and health improvement programmes emphasised in the NHS Plan for Wales	Report produced July 2001 for consultation with a view to revising the resource allocation formula from 2002-03  Guidance to reflect the need for Health Improvement Plans to link with resources will be linked to the technical document due by September 2001.
To have implemented new Welsh strategies on the mental health of children, adolescents and adults.	Drafts produced by 2 Advisory Groups sent out for 3 month consultation. Responses have been incorporated into new drafts and have been discussed at HSSC.	Final CAMHS strategy sent to Jane Hutt in May 01 and re submitted to 21 June. Adult Strategy to be submitted to Minister imminently publication of both planned in late summer.
To have developed a clearer sense of purpose and direction for the NHS in Wales, based on strategic health improvement programmes, in partnership with all key stakeholders and users through the publication of a Corporate Strategy, by 2001.	The NHS Plan for Wales – “ Improving Health in Wales – A Plan for the NHS with its Partners” launched February 2001. A framework for implementing the Plan was established by the end of the financial year.	The horizon of the Plan is over 10 years, with a combination of short, medium and long term undertakings. A document is being compiled over the summer following the reports of the Task and Finish Groups to capture the whole programme of activities required to implement the Plan. The document will be launched in the Autumn of 2001
To achieve a primary care focus in the planning and delivery of healthcare with primary care pilots being worked up in 2000-01.	26 expressions of interest received, 1 pilot approved, negotiations continuing on others.	Further approval by October 2001 depending on negotiations
To deliver joined up and more efficient services for users and carers by making full use of the flexibilities available under the Health Act 1999 to improve joint working between health and social services, including the use of pooled		

Better Wales Targets 2003	Action Taken 2000-01	Estimated Completion Date
budgets, integrated provision and lead commissioning of services.		
To improve the effectiveness of cancer treatment by continuing with the existing all Wales programme of action, a particular effort being made to reduce the mortality rate for breast cancer in women aged 50 to 74 to no more than 59 per 100,000 women by the end of 2002 and the rate at which invasive cervical cancer occurs to no more than 11 per 100,000 women, by the same date.	Revised minimum standards of cancer care have been issued.  A rolling programme of audit against the 3 main cancer sites has begun.	
To begin to reduce the mortality from coronary heart disease by implementing a National Service Framework and models of delivery for the prevention and treatment of disease, beginning Spring 2000.	Draft Implementation plan for Wales put out to consultation	Final plan to be published July 2001. Progressive implementation will be well underway by end 2003
To have developed over the next 12 months a programme for improving hospital waiting times, based on a clearer understanding of demand and a sound, widely owned, framework for deciding priorities.	On the back of substantial extra funding, targets were agreed with the NHS for 2000/01 reflecting improvements in waiting times, improvements were made in the year.	On-going action, 2001/02 including new targets aiming at better planning in HAs and Trusts and speciality reviews.
To reduce the in-year net operating deficit of NHS Wales bodies to zero by implementing a financial recovery programme, consistent with the new Health Improvement Programmes.	Good progress was made towards the development and implementation of recovery programmes which will eliminate the in year net operating deficit of NHS Wales and restore underlying financial balance by April 2003 – Swansea NHS Trust reported surplus and achieved underlying financial balance in 2000-01. Dyfed Powys Trusts and Cardiff & the Vale NHS Trusts recovery plans approved by the Assembly and are	On target for 2003

Better Wales Targets 2003	Action Taken 2000-01	Estimated Completion Date
	<p>expected to achieve underlying financial balance in 2002-03.</p> <p>Ambulance Trust Recovery plan was approved by the Assembly and it is expected to achieve underlying financial balance in 2001-02.</p> <p>NE Wales Trust recovery plan is expected to be ready for Assembly endorsement shortly. It will achieve underlying in-year financial balance by 2002-04.</p> <p>Meanwhile the draft NHS Wales accounts for 2000-01 indicate an accounting surplus of 24 million but a similar sized deficit is expected in 2001 - 02</p>	
<p>Through better prescribing practice, deliver by 2002 at least 50% of the potential savings in prescription costs identified by the Audit Commission.</p>	<p>Ongoing work by Health Authority and LHG Prescribing Advisors</p>	<p>Data on savings should be available in early 2003</p>
<p>For the efficiency of NHS and social services to match UK averages at least, with new performance frameworks and key indicators having been published for these services: for the NHS by April 2000 and for social services by December 2000.</p>	<p>A new Performance Management Framework and set of National Performance Indicators(NPIs) for the NHS in Wales were published in March 2000. Baseline figures for the 41 indicators were published in July 2000</p>	
<p>A human resources strategy for the NHS to be developed to support continuous service improvement through better recruitment, management and employment practices and effective training and development.</p>	<p>Strategy launched in June 2000 Objectives set for 2000-01 have been reviewed; revised objectives for the 2001-02 were set and issued to the service.</p>	<p>This is a rolling annual programme of HR development projected to continue for 10 years</p>

Better Wales Targets 2003	Action Taken 2000-01	Estimated Completion Date
<p>To re-establish a capital programme for the NHS, including maximisation of capital receipts and better management of the estate.</p>	<p>Capital programme reinsated for priority health and safety/essential equipment replacement</p> <p>Estates Policy Issued 2000</p> <p>Action Plan for better Estates Management agreed</p> <p>All Trusts preparing Estates Strategies</p> <p>Disposals report has been finalised and will be presented to Ministers in June 2001-06-13</p> <p>Estates Performance Management report to be presented to ministers in July 2001</p>	<p>Dec. 2001</p> <p>For implementation in April 2002</p> <p>For implementation in April 2002</p>
<p>A better targeted and more community-based health strategy to be developed by early 2000 with a greater emphasis on tackling the determinants of ill-health and the promotion of personal responsibility for health</p>	<ul style="list-style-type: none"> <li>• Consultation on national health promotion strategy completed</li> <li>• National action programme to implement the strategy published following approval in Plenary debate on health promotion</li> </ul>	<ul style="list-style-type: none"> <li>• Completed</li> <li>• 3 year rolling programme from launch in January 2001</li> </ul>
<p>A measurable improvement in health in key areas, by the continued implementation of the <i>Better Health, Better</i></p>	<ul style="list-style-type: none"> <li>• <i>Smokebugs</i> clubs launched</li> </ul>	<ul style="list-style-type: none"> <li>• Ongoing with targets</li> </ul>

Better Wales Targets 2003	Action Taken 2000-01	Estimated Completion Date
<p>Wales Programme and related Action Plan.</p>	<ul style="list-style-type: none"> <li>• <i>Quit &amp; Win Challenge</i> launched</li> <li>• UK Occupational Health strategy launched with Health &amp; Safety Executive</li> <li>• Updated Corporate Standard for Workplace health launched</li> <li>• Develop National Assembly policy on the Fluoridation of water supplies. York Report published on 6 October 00. Paper to note submitted for Health and Social Services Committee meeting on 25 October 2000.</li> <li>• Establish Rapid Inquiry/Data Mapping facility pilot project. Formal contract agreed with SAHSU. Pilot Project operating from 1 January 2001 to 31 December 2001. 10 Projects to be completed by 31 December 2001.</li> <li>• Communicable disease strategy document launched July 2001 retitled: <i>A Framework for the control of communicable disease in Wales</i></li> <li>• Main issues of concern progressed: <ul style="list-style-type: none"> <li>- HIV/AIDS</li> <li>- Hepatitis C</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Finished May 2001</li> <li>• Implementation ongoing</li> <li>• Implementation ongoing with targets</li> <li>• Ongoing. Further paper under preparation on what a fluoridation scheme might look like in Wales to be completed by October 2001.</li> <li>• Evaluation to be completed by end of February 2002. Bid submitted in 2001 Budget Round to continue project.</li> </ul>

Better Wales Targets 2003	Action Taken 2000-01	Estimated Completion Date
Launch Sustainable Health Actions Research Programmes	<ul style="list-style-type: none"> <li>• Seven projects funded and implemented.</li> </ul>	<ul style="list-style-type: none"> <li>• Funding will continue in 2001-2002.</li> </ul>
For health impact assessments to ensure that all Assembly decisions take account of the implications for health	<ul style="list-style-type: none"> <li>• Series of roll-out events to engage social partners – local government, NHS, voluntary sector.</li> <li>• 4 pilot projects completed</li> <li>• Further guidance published</li> </ul>	<ul style="list-style-type: none"> <li>• Health impact assessment integrated within Assembly policy development and appraisal processes by March 2003.</li> </ul>
The Food Standards Agency to have been set up by April 2000 to ensure that the food we consume is safe	<ul style="list-style-type: none"> <li>• Food Standards Agency established April 2000, with strong arrangements for Wales. Advisory Committee for Wales appointed June 2000.</li> </ul>	

Better Wales Targets 2003	Action Taken 2000-01	Estimated Completion Date
<p>Target resources and health promotion on the most disadvantaged communities to help reduce health inequalities and assist individuals who are currently excluded to participate more full in society.</p>	<ul style="list-style-type: none"> <li>• Inequalities in Health Fund launched</li> <li>• Local Health Alliances established in all 22 local authority areas.</li> <li>• National Accreditation Scheme for Health School Schemes introduced</li> <li>• Health Schools Schemes established in 11 areas</li> <li>• Partnership Council report on health and well being completed</li> </ul>	<ul style="list-style-type: none"> <li>• First tranche of projects will end in autumn 2004</li> <li>• Alliances contribute to 3 year health promotion action programme</li> <li>• Accreditation ongoing as part of 3 year health promotion action programme</li> <li>• Implementation as part of 3 year health promotion action programme</li> <li>• Completed</li> </ul>

Better Wales Targets 2003	Action Taken 2000-01	Estimated Completion Date
<p>Substance misuse to be tackled by implementing the Welsh Substance Misuse Strategy: we will publish the strategy in 2000 and develop a range of supporting targets</p>	<p>Welsh Substance misuse Strategy published in May 2000. Initial Implementation phase underway. Advice commissioned from consultants on supporting targets.</p>	<p>This is an 8-year strategy to coincide with the timeframe of the UK Anti-Drugs strategy. Targets to be announced in Summer 2001.</p>
<p>Local Action plans under the Sure Start programme, which supports parents and pre-school children in disadvantaged areas, to be fully implemented by 2000</p>	<p>Local plans agreed with the Assembly were fully implemented by local partnerships within the year.</p>	<p>The local action plans run until March 2002; the Assembly is considering the future of the programme in the context of its consultation "Children and Young People – a Framework for Partnership".</p>
<p>To deliver joined up and more efficient services for users and carers by making full use of the flexibilities available</p>	<p>Regulations came into force on 1 December 2001</p>	<p>NHS and local authorities planning to use the new Flexibilities and the</p>

Better Wales Targets 2003	Action Taken 2000-01	Estimated Completion Date
under the Health Act 1999 to improve joint working between health and social services, including the use of pooled budgets, integrated provision and lead commissioning of services	Framework launched by Minister at promotional conference in November Guidance widely distributed Development of Special Grant scheme for 2001-2 to support joint working under the Flexibilities framework	Joint Working Special Grant will support such initiatives. First examples under the framework are expected in 2001.
For the efficiency of NHS and <b>social services</b> to at least match UK averages, with new performance frameworks and key indicators having been published for these services: for the NHS by April 2000 and for social services by December 2000	A set of core indicators has been developed with local authorities during 2000 and was formally consulted on as part of the Best Value and Policy Agreement processes in 2000/2001. A Performance Management Strategy for Social Services linked to a Performance Management Development Fund has been agreed and is now being implemented over the next three years	The work as outlined in Better Wales is now complete. Development work is now focussed on continual improvement of the framework and performance in Social Services.
To improve social and long term health care by setting up a Care Standards Inspectorate, a new registration system for social and health care services, producing guidance on fair access to care and forging good working relations with the disability rights commission	Fair Access to Care: Expert Reference Group has been established and met twice. Research commissioned. Consultation in the Autumn. Care Standards Inspectorate: Project Management Team appointed, Staff Recruitment Policy agreed, IT Specification agreed, Financial analysis undertaken, and first set of consultation papers on Children's Homes and Care Homes issued.	April 2002
To champion the rights of children by appointing a Children's Commissioner	Children's Commissioner for Wales appointed December 2000 and took up post 1 Mar 2001.	1 March 2001
At least 90% of those assessed as needing community care to receive support to allow them to live at home	Consultation and related research on new statutory guidance which will	April 2002

Better Wales Targets 2003	Action Taken 2000-01	Estimated Completion Date
	produce fairer and more consistent charging for domiciliary care support	
No more than 250 people to be resident in long stay learning disability hospitals	Additional resources made available to complete the Hensol Hospital resettlement programme and prepare and implement a comprehensive resettlement plan for Bryn y Neuadd Hospital	Hensol Hospital resettlement programme should be completed in 2004. A draft comprehensive resettlement plan for Bryn y Neuadd Hospital should be submitted to the Assembly for agreement in the summer 2001.
To improve the health and well being of Wales' 350,000 carers, by implementing the Carers' Strategy	<p>Publication of Carers Strategy Implementation Plan.</p> <p>Introduction of Carers Special Grant (£3 million)</p> <p>Commissioned 3 Research projects – carers and young carers</p> <p>Establishment of Carers Strategy Review Panel</p> <p>Consultation of Carers and Disabled Children Act 2001</p> <p>Support funding to voluntary organisation for Carers Strategy</p> <p>Consultation on special grant 2001/2002</p>	The target is an on-going one with considerable progress made in 2000-01 to take forward the Strategy.
Social disadvantage: Give Children from disadvantaged backgrounds a better start to life through the £25 million Sure Start programme.	Local plans agreed with the Assembly were fully implemented by local partnerships within the year.	The local action plans run until March 2002; the Assembly is considering the future of the programme in the context of its consultation "Children and Young People – a Framework for

Better Wales Targets 2003	Action Taken 2000-01	Estimated Completion Date
<p>Make the particular needs of black and ethnic minority groups and disabled people a priority for the NHS and <b>social services</b>.</p>	<p>The Children First guidance for 2001-02 has been revised to give increased priority to services for disabled children &amp; their families.</p> <p>Work started on improved guidance in respect of child protection issues to take account of the needs of black and ethnic children</p> <p>Section 64 Grant to Age Concern Cymru includes objective to – take forward a programme of development work on ethnicity and ageing over the next 3 years in collaboration with ethnic minority organisations in Wales</p>	<p>Partnership”.</p> <p>Children First programme extends to the end of 2003-04. The Framework for Assessment of Children in Need published in June 2001 is supported by practice guidance, which deals in detail with the needs of black and ethnic minority groups and disabled people. The Framework is expected to be Implemented by end March 2002.</p> <p>December 2001</p> <p>April 2002</p>
<p>Raise standards of social care and appoint a Children’s Commissioner, to help protect the most vulnerable in our society</p>	<p>Children’s Commissioner for Wales appointed December 00 and took up post 1 Mar 01.</p>	<p>1 March 2001</p>
<p>Help the elderly and those with disabilities to live independently and support their carers.</p>	<p>Commenced development of a Strategy for Older People in Wales. Steering Group established, review of research completed and consultation programme commenced.</p>	<p>April 2002</p>
	<p>Children First Team has developed close</p>	<p>Consultation is ongoing and will</p>

<b>Better Wales Targets 2003</b>	<b>Action Taken 2000-01</b>	<b>Estimated Completion Date</b>
<p>Ensure that the needs of disadvantaged groups are better met by involving patients, users, carers and voluntary organisations in the planning and review of health and social services programme.</p>	<p>links with Children In Wales, National Foster Care Association, Voices From Care &amp; other relevant voluntary organisations in developing the Children First programme. Through the NFCA, officials consulted directly with foster carers &amp; young people in foster care about the Children First programme. With Voices From Care, a programme of work has been planned for 2001-02 to consult &amp; involve looked after children in the ongoing development of Children First. Officials are working with the Children In Wales Forum for Disabled Children to examine ways in which disabled young people can be involved in Children First.</p>	<p>extend at least to the end of the Children First programme in 2003-04.</p>

<b>Partnership Agreement Commitments</b>	<b>Action Taken 2000-01</b>	<b>Estimated Completion Date</b>
<p>We will implement the NHS Human Resources Strategy so as to recruit and train more doctors and nurses. This will contribute to improved hospital bed availability, and so reduce waiting times for consultation and treatment. We will develop and implement the Assembly's waiting times strategy. We will consider setting maximum waiting times</p>	<p>Strategy launched in June 2000. A recruitment and retention team has been established. Return to practice courses for Nursing staff have been established and funded. NHS Wales careers information publications have been</p>	<p>Targets for improving staff retention rates and reducing staff shortages will be set for March 2002. The 5% year on year increases in training places for non medical health care staff will start in 2001 and be fully</p>

Partnership Agreement Commitments	Action Taken 2000-01	Estimated Completion Date
<p>for both inpatients and outpatients cutting waiting times. Budget decisions agreed by the Partnership Government will produce substantial spending in health over the next three years. Our budgets will provide an extra £150 million in 2001/02; £400 million in 2002/03 and £665 million in 2003/04 in order to make immediate progress in improving the NHS and cutting waiting times.</p>	<p>developed. Bids for child care initiatives have been invited from Trusts. Data collection systems are now in place to identify long term vacancies. A 15% increase in pre-registration training places for non medical healthcare professionals was implemented in 2000. Thirty five new medical undergraduate places implemented in 2000. Thirty Five additional medical undergraduate places were implemented in 1999 and maintained in 2000.</p> <p>On the back of substantial extra funding, targets agreed with the NHS for 2000/01 reflecting improvements in waiting times, improvements were made in the year in the number of patients waiting over 12 months and the number of patients waiting for cataract surgery.</p>	<p>implemented by 2003; a further 65 medical undergraduate places are planned during 2001. A further 65 medical training places are planned for 2001(subject to agreement on the Swansea Clinical Medical School).</p> <p>On-going the emphasis continues to move to improving waiting times in priority areas.</p>
<p>In order urgently to tackle the problem of the NHS staff retention and to reduce the burden on the acute service, we will introduce services staffed by professionals wishing to work in school-term time only to provide planned treatment for those with chronic disease. These services could also take on much of the prospective screening and surveillance work currently done by over stretched acute service professionals.</p>	<p>Term time working is in place in some Trusts. A directory of Flexible working is under development with the NHS Equality Unit.</p>	<p>This is ongoing work in developing innovative working practice and employment arrangements</p>
<p>As part of our drive to introduce greater flexibility into working practices, and again through working with the service, we would introduce a flexible retirement plan for senior health care professionals to allow greater freedom for training and supervision without being subject to acute</p>	<p>Discussions have been opened with the Chief Executive of the NHS Pensions Agency, who is also considering similar proposals from England</p>	<p>This is not a devolved issue. The outcome of this initiative is dependent on the NHS Pensions Agency</p>

Partnership Agreement Commitments	Action Taken 2000-01	Estimated Completion Date
pressures of out of hours work. This would also facilitate the movement of highly skilled professionals into areas of acute health need.		
We recognise the urgent need to increase the capacity of the NHS in Wales in order to provide consistent, efficient, high quality care into the 21 <sup>st</sup> century. We will therefore restore the capital programme for the NHS in Wales by investing £200m over the next three years to enable Health Authorities and Trusts to meet their growing health and safety obligations and to begin the process of improving long-term clinical capacity.	<p>Total capital programme of approximately £100million in 2001/02.</p> <p>Commitment in Improving Health in Wales to maintain and increase this level of funding in future years.</p> <p>Health and Safety will be a key criteria in allocating funds.</p>	2003-4
Pilot schemes to pioneer solutions to delayed discharge. We will initiate pilot projects to pioneer innovative solutions to the problem of delayed discharge.	A number of projects have been set up around Wales with the £40m extra funding.	On- going this will be supported by the Innovations in care team
LHGs empowered to purchase primary care and mandated to improve co-ordination between health and social services. Local Health Groups will be empowered and funded to purchase primary care and mandated to improve co-ordination between health and social services, to ensure best value in the NHS.	<p>The minister has agreed to the drafting and issue of an instrument in writing ( a direction) to enable health authorities to formally delegate executive functions to Local Health Groups. The details of the direction are being agreed with OCG.</p> <p>The NHS Plan for Wales signalled the development of a strengthened LHG function in the wake of the abolition of Health Authorities in Wales. By the end of the financial year, a framework for implementing the Plan was in place, within which a Structures Task and Finish Group has been tasked with making recommendations about the future structure for LHGs by June 2001</p>	<p>June/July 01</p> <p>Health Authorities will be abolished by 2003. A strengthened LHG function will therefore be in place by 2003/04.</p>

Partnership Agreement Commitments	Action Taken 2000-01	Estimated Completion Date
<p>We will set about the rapid implementation of the report of the Winter Pressures Group; funding <u>25 ITU and HDU</u> beds and 400 general medical beds to be commissioned and staffed throughout Wales.</p>	<p>As a consequence of the extra £40m allocated the NHS put in an extra 100 acute beds and 20 critical care beds. While more beds were funded staffing difficulties prevented the opening of some of these.</p>	<p>An extra £3m has been allocated in 2001/02 to increase capacity. In addition the NHS has been asked to review available capacity in the light of the whole system approach and schemes that seek to increase effective capacity.</p>
<p>Extension of availability of free NHS prescriptions and freezing prescription charges. We will immediately freeze the cost of all prescription charges in Wales, with a view to extending exemptions for those who remain most in need, and those who currently have most difficulty paying; starting with particular consideration to 16-25 year olds.</p>	<p>Cost of prescription charges frozen at £6.00.</p> <p>Introduction of free prescriptions for people aged between 16 and 25 years.</p>	<p>Completed</p> <p>Completed April 2001</p>
<p>Continuation of work of HSS Committee in relation to eye tests. We will continue the work of the Health and Social Services Committee in relation to eye tests, considering access to free tests on an evidence-based foundation.</p>	<p>Announcement of Eye Care Initiative to HSSC on 6 June ( Extension of free eye test policy replaced by a programme of eye examinations for vulnerable people in Wales). Currently in process of developing procedures. Could be hampered by serious staff shortages.</p>	
<p>Extension of availability of free dental checks. In relation to dentistry, we will extend the availability of an annual free dental check to individuals aged under 25 and those over 60 and over.</p>	<p>Legislation in place</p>	
<p>We will develop and implement a tele-medicine strategy for Wales. We will invest in increasing the use of information technology throughout the NHS to release staff from the</p>	<p>-All Wales Telemedicine Strategy Development Manager appointed.-March 2001</p>	<p>-1<sup>st</sup> draft scheduled November 2001- -Final draft due for submission to HSSc for discussion – January 2002</p>

Partnership Agreement Commitments	Action Taken 2000-01	Estimated Completion Date
<p>burdens of unnecessary bureaucracy, working towards the early introduction of a computerised booking service for the NHS.</p>	<p>-Initial review of strategic issues for inclusion in strategy considered and agreed at HSSC in March 2001 at first "virtual" meeting            -Drafting of document commenced            Document to include Strategic vision and context for 5 year period</p> <p>Reviewed booking systems across the UK. Made recommendations for implementation of new system in Wales. Made funding available to Trusts. Piloting systems to inform future strategy</p>	<p>-Strategy implementation to commence April 2002</p> <p>All Trusts in Wales to have booking systems in place by 2002. ( Not all fully computerised)</p>

Partnership Agreement Commitments	Action Taken 2000-01	Estimated Completion Date
We will seek a period of organisational stability within the health services in Wales to allow staff to prioritise the delivery of better health care	Improving Health in Wales seeks to abolish Health Authorities but this will not happen until 2003. The current remit and structure of NHS trusts and other NHS organisations in Wales will remain the same until this time, allowing staff to consolidate the changes of the past two years.	
We will ensure that investment in the Ambulance Trust is properly funded. We will halt the recent trend of cuts and are investing £5m as part of our commitment to enable it to meet its performance targets, and to satisfactorily complete recent structural and organisational changes. This investment will enable us to improve response times, working conditions for crews.	<p>HAs agreed recurrent increases in full year funding totalling about £1.9m; NAW provided £3m in funding for strategic assistance and loans for restructuring and £500,000 capital for rapid response vehicles, uniforms etc.</p> <p>Ambulance trust successfully completed restructuring.</p> <p>NAW commissioned specialist consultants to review efficient use of resources and improving response times</p>	<p>Main actions completed.</p> <p>Funding the ambulance service is being considered by the Resource Allocation Review.</p>
Appointment of salaried GPs. We will tackle inequalities in health provision by appointing salaried GPs in areas where recruitment is difficult.	Mechanism in place via Primary Care Pilots for Health Authorities to use as necessary- 5 salaried GPs in place	Ongoing
<p>We will therefore implement a comprehensive strategy to extend the provision of breakfasts in schools and the existing fruit tuck shop scheme to schools in Wales.</p> <p><b>This is a commitment from the Education and Life long learning chapter</b></p>	1. The Assembly has started a grant scheme to enable local health and education partnerships to develop Healthy School Schemes in each local authority area. This includes the performance criterion of increasing the number of fruit tuck shops, setting them up on a cost recovery basis. All LEAs participating from April 2001	The funding scheme ends in 2003-2004

Partnership Agreement Commitments	Action Taken 2000-01	Estimated Completion Date
	<p>2. All Welsh primary schools have been sent a copy of 'Fruit tuck shops in primary schools: A practical guide to planning and running a school fruit tuck shop'.</p> <p>3. A small number of breakfast clubs are supported by grants to community food initiatives. Research has been commissioned into the provision and barriers to provision of breakfasts by LEA catering services.</p>	<p>Completed</p> <p>Three initiatives will be supported during 2001-02.</p> <p>The research is due to be completed during 2001-02.</p>
<p>Over the lifetime of the Partnership Government, we will ensure that suitable accommodation in the community is made available for people with learning difficulties currently living in long-stay hospitals</p>	<p>Additional resources made available to complete the Hensol Hospital resettlement programme and prepare and implement a comprehensive resettlement plan for Bryn y Neuadd Hospital.</p>	<p>Hensol Hospital resettlement programme should be completed in 2004. A draft comprehensive resettlement plan for Bryn y Neuadd Hospital should be submitted to the Assembly for agreement in the summer 2001.</p>
<p>We will appoint a Children's Commissioner to protect, inform and advocate on behalf of young people throughout Wales. We will increase the Commissioner's existing draft budget from £100,000 to £700,000 to ensure that her or his offices can adequately fulfil that mandate. We will continue to press Westminster for the Commissioner to have a more comprehensive range of statutory powers</p>	<p>Children's Commissioner for Wales appointed December 00 and took up post 1 Mar 01.</p> <p>Primary legislation to broaden his functions commenced and children's commissioner for Wales Bill before Parliament aiming for Royal Assent prior to General Election.</p> <p>Proposals for Assembly legislation, anticipating enactment of Bill, issued 9 March 01.</p>	<p>Completed</p> <p>Before 2001 General Election</p> <p>Estimated commencement date end of July 2001.</p>

