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**HEALTH, WELLBEING AND LOCAL GOVERNMENT COMMITTEE –
THURSDAY 8 JULY 2010**

During my attendance at Committee on 8 July, I agreed to provide further information on a number of issues. This information is set out below:-

Three Critical Care Units and Future Needs for Intensive Care Units

My strategy for improving adult critical care services is through the progressive implementation of our formal Quality Requirements, published in 2006. As part of their efforts to implement these, the 3 regional Critical Care Networks carried out reviews of capacity. Last year I asked the All Wales Critical Care Advisory Group to consider the outcome of the Network reviews and to prepare an all Wales report for me to consider.

This Report recognised that much has been achieved by the Networks to improve the efficiency of existing critical care services across Wales in implementing the Welsh Assembly Government Quality Requirements. The Report, however, confirmed that there were further efficiencies to be made to make optimal use of existing capacity. It highlighted the significant waste of these high cost resources due to delayed transfers of care out of critical care units.

In the light of the Report, I asked Paul Williams to write to Local Health Board Chief Executives requiring them to address these inefficiencies as a matter of urgency. This process is underway. Paul Williams has also asked Margaret Foster, Cwm Taf

LHB Chief Executive and Chair of the new National Programme for Acute Care, to include the issue of delayed transfer of care from critical care units in her programme of work.

I recognise, however, that after addressing delayed transfers of care, this needs to be followed swiftly by action, both locally and regionally, to review the planning and organisation of services. I also accept that overall capacity is likely to need to be increased.

There are now new arrangements for the regional Critical Care networks being put in place. The 2 South East Wales and South West Wales Networks will merge to form one for the whole of South Wales and the one in North Wales will become part of Betsi Cadwaladr University LHB. These new arrangements for the Critical Care Networks will put LHBs in a strengthened position to work collaboratively to consider and address these issues.

The Welsh Green Paper on the future funding of social care services included a proposal to create a national system for determining funding and eligibility for social care services. If such a system was developed what opportunities might there be for improving workforce planning in social care?

On the 1 July, the Deputy Minister for Social Services announced her intention to produce a White paper on the future of Social Services early in 2011. By bringing together all current policy and grant programme reviews into one White Paper, the Assembly Government will plan how to deliver a sustainable social service over the next decade.

The Deputy Minister has established a specific Task Group, chaired by the Director of Social Services, to look at the future needs of the Social Care Workforce which will report at the end of 2010.

When is it intended to introduce the National Minimum Dataset to collect workforce information for the social care sector in Wales?

We believe that there is a need for a single comprehensive data collection system which includes information for workforce planning purposes. Officials are currently looking at the requirement for data relating to a number of functions in order to develop a comprehensive national dataset. The timescale for this is dependent on establishing costs and the sector's priority for dedication of available resources.

The Chronic Conditions Management and the Primary Care Community Strategy Assurance Board is leading overarching work on Information Requirements.

We must first determine the total needs for data collection before agreeing a single model.

The Social Work and Social Care Workforce Task Group is taking forward the development work on this issue and will report to the Deputy Minister.

What work is underway to ensure that the needs of migrant workers and their employers in the social care sector are being met?

The Care Council for Wales has an Induction Framework which is designed to ensure that a set of minimum outcomes for all workers is in place . A review of the framework last year showed that it is well known and well used across all settings in the social care sector. The review showed that there was a need for specific induction advice for early years settings in Wales linked to the Framework.

The Care Council, in its role as Sector Skills Council for Social Care and Early years and Child Care in Wales, has researched the size and needs of the migrant workforce for the current Sector Skills Assessment, and a specific work stream defining the workforce development needs of the migrant workforce for social care in Wales is now in place.

What more can you tell us about the work to strengthen cross sector planning in the health and social care sectors and about progress in this area?

How is the NHS restructuring impacting on cross sector workforce planning in health and social care?

The update provided to the Committee in February 2010 indicated that a Health and Social Care Interface work stream, which was established as part of the implementation of the integrated workforce planning process in health, had made a number of recommendations to strengthen cross sector planning.

As a result of the re-structuring of the NHS, the development of the 5- year Service, Workforce and Financial Strategic Framework, and the establishment of the national programmes, all of these recommendations are now be actioned. For example, strategic level recommendations promoted integrated approaches within health and closer working with social services to develop a vision for future models of care. Mechanisms are now in place within LHBs, supported by 11 National programmes, one of which is a Workforce Modernisation enabling programme. The specific workforce development needs of the interface workforce have been considered by both the Workforce Modernisation Programme Board and the Social Care Workforce task group.

A number of specific recommendations are now complete such as joint collection of workforce planning requirements for Occupational Therapists across health and social care and the sharing of workforce information between the independent sector and NLIAH.

Ongoing changes in the NHS and in the development of social care are therefore strengthening the opportunities for closer working together in relation to service, workforce and financial planning.

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