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National Assembly for Wales

Cardiff Bay

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CABINET RESPONSE TO THE AUDIT COMMITTEE REPORT ON CLINICAL NEGLIGENCE

I am writing to you with regard to Russell Keith's letter of 20 November in which he asked for the Auditor General for Wales' advice on the contents of the response by the Assembly Cabinet to the Audit Committee's report on *Clinical Negligence in the NHS in Wales* and on any follow up action which the Committee might take.

In its report the Audit Committee made nine recommendations. The Cabinet has set out the action that is being taken in response to each of these recommendations. One of the main areas of Committee concern was the shortage of good management information to tackle such a serious, and expensive, problem. The Cabinet's response explains that an all-Wales register is being developed, that the minimum level of information to be held on the new all-Wales Losses and Special Payments Register has been agreed, and that the Assembly is working closely with the Department of Health in England on the establishment of a new National Patient Safety Agency. At the core of this new Agency are plans to establish a new national reporting system to record adverse events and near misses in health care to ensure that lessons are learnt – this should also lead to better information about the incidence of "non-clinical" errors which the Committee pointed to as significant contributors to clinical negligence.

In some areas, the Cabinet has been cautious about the action the Assembly might take (examples are recommendation iii: the number of cases examined by the Welsh Risk Pool; recommendation iv: the scope for financial savings from a reduction in non-clinical errors; and recommendation v: incentives for improving trusts' compliance with the Welsh Risk Management Standards). Clinical negligence is a highly complex area and a degree of caution is understandable. The Auditor General for Wales therefore proposes to return to these issues in

a year's time to reassess whether progress on these matters has been satisfactory. He shall report back to the Committee if he thinks it necessary.

In addition, the Committee may like to note that in the Auditor General's proposed forward value for money programme, considered by the Committee at its meeting on 6 November, includes an examination of clinical governance to be carried out in 2003-04. As outlined in Annex A of that document, such an examination would enable the Auditor General to pick up many of the issues raised in his work on clinical negligence.

I do hope that this is helpful.

Yours sincerely

Ann-Marie Harkin

Private Secretary to the Auditor General for Wales