

Agenda – Health and Social Care Committee

Meeting Venue:

Committee Room 3, Senedd

Meeting date: 26 January 2023

Meeting time: 09.30

For further information contact:

Helen Finlayson

Committee Clerk

0300 200 6565

SeneddHealth@senedd.wales

The Committee agreed on 11 January 2023 in accordance with Standing Orders 17.42 (vi) and (ix) to exclude the public for all items with the exception of the evidence session with the Chief Nursing Officer for Wales

Private pre-meeting (09.30–09.45)

1 Introductions, apologies, substitutions and declarations of interest

(09.45)

2 Dentistry: draft report

(09.45–10.30)

(Pages 1 – 67)

Paper 1 – Dentistry – report publication

Paper 2 – Draft report

3 Public Accounts and Public Administration Committee Inquiry into Public Appointments: draft letter

(10.30–10.45)

(Pages 68 – 73)

Paper 3 – Draft letter to the Public Accounts and Public Administration Committee

4 Welsh Government Draft Budget 2023–24: draft report

(10.45–11.30)

(Pages 74 – 111)



Paper 4 – Welsh Government Draft Budget 2023–24: Report publication

Paper 5 – Draft report

Break (11.30–11.45)

5 Scrutiny of the Chief Nursing Officer for Wales

(11.45–13.00)

(Pages 112 – 125)

Sue Tranka, Chief Nursing Officer for Wales

Gill Knight, Nursing Officer Safety, Regulation & Service Development, Welsh Government

Research brief

6 Papers to note

(13.00)

6.1 Letter to Care Inspectorate Wales following the horizon–scanning session on 30 November 2022

(Page 126)

6.2 Letter from Care Inspectorate Wales following the horizon–scanning session on 30 November 2022

(Pages 127 – 136)

6.3 Letter from the Public Accounts and Public Administration Committee regarding its inquiry into public appointments

(Pages 137 – 138)

6.4 Letter from the Royal College of Nursing to the First Minister regarding strike action

(Pages 139 – 140)

6.5 Letter from the Deputy Minister for Mental Health and Wellbeing to Committee Chairs regarding the Food Supplement and Food for Specific Groups (Miscellaneous Amendments) Regulations 2022

(Pages 141 – 142)

6.6 Letter to the Deputy Minister for Mental Health and Wellbeing regarding consideration of a national children's counselling service

(Page 143)

6.7 Letter from the Minister for Health and Social Services regarding the Health Service Procurement Bill

(Pages 144 – 145)

7 Scrutiny of the Chief Nursing Officer: Consideration of evidence

(13.00–13.15)

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By virtue of paragraph(s) vi of Standing Order 17.42

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Agenda Item 3

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Agenda Item 4

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Agenda Item 5

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Agenda Item 6.1

Y Pwyllgor Iechyd a
Social Cymdeithasol

Health and Social Care Committee

Gillian Baranski
Chief Inspector
Care Inspectorate Wales

8 December 2022

Dear Gillian

Many thanks to you and Vicky for attending our meeting on 30 November to discuss issues facing social care and social services. Members found the discussion interesting and informative.

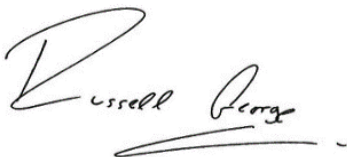
During the meeting, you agreed to provide the following information:

- The process followed by local authorities on receipt of CIW care reports of children's homes, and whether you receive any feedback on actions taken as a result of your reports.
- A link to the data tool used to monitor provision of Welsh-speaking services.
- Details of the work being undertaken to improve leadership and management in the social care sector.

We also noted there had been an increase in adult safeguarding referrals. Could you provide us with more information on the nature of these referrals, and in particular what the specific safeguarding issues are.

We will be considering our forward work programme early in the new year, and it would be helpful therefore to receive your response by 27 January 2023.

Yours sincerely



Russell George MS
Chair, Health and Social Care Committee

Croesewir gohebiaeth yn Gymraeg neu Saesneg. We welcome correspondence in Welsh or English.

cc Jayne Bryant, Chair, Children, Young People and Education Committee

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Russell George MS
Chair, Health and Social Care Committee
SeneddHealth@senedd.wales

Dyddiad / Date: 5 January 2023

Dear Russell George MS

Care Inspectorate Wales evidence session – 30 November 2022

Thank you for inviting Care Inspectorate Wales (CIW) to take part in the Health and Social Care Committee's horizon scanning session to explore key issues affecting social care and social services.

As set out in your letter of 8 December 2022, please find attached further information which I trust will be of assistance to the Committee:

1. The process followed by local authorities on receipt of CIW care reports of children's homes, and whether CIW receive any feedback on actions taken as a result of our reports.

We would expect every local authority children's services to be well sighted on all children looked after, whether they are being cared for locally or out of county. There are statutory duties on social services to do this. In addition, the local authority is a Corporate Parent and as such the Corporate Parenting Board should scrutinise performance of all aspects of children's services.

When we carry out inspection activity of a local authority, whilst we cannot dictate how the local authority disseminates the report, our published code of practice for review of social services states: *"The inspection report will be published to our website within 25 working days of receipt of the local authority's comments. The local authority will be expected to present the report to elected members and subject the report to public scrutiny through a formal and open committee meeting at the earliest opportunity. An invite should also be extended to CIW to attend the meeting"*

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

We will always follow up on the areas for improvement identified in our inspection reports. How we do this will depend on the balance of strengths and areas for improvement as well as the seriousness of issues we identified. If we identify serious or serious and significant issues, we will closely monitor progress and may carry out a follow up inspection. We are currently revising our code of practice and are happy to share it with the committee once this is finalised.

In relation to inspection reports on registered care homes for children, we share these with the local authority where the care home is located and with Children's Commissioning Consortium Cymru (4Cs). CIW's senior manager for the children's services inspection team meets regularly with 4Cs manager and more generally we have regular meetings with local authority commissioners to share intelligence and concerns about regulated services. We are unable to comment on issues taken by individual local authorities as this varies across Wales.

2. CIW data tool

On 1 March 2022, CIW launched an interactive tool providing information on the number and geographical spread of care home services, domiciliary support services and childcare and play services across Wales. It includes a breakdown and mapping of the number of places available, the main operating language and any enforcement activity at a local authority or local health board level. The information is updated monthly. The data tool is available on the CIW website via the following link: [Data Tool | Care Inspectorate Wales](#).

3. Details of the work being undertaken to improve leadership and management in the social care sector

We know it is rare for social care services and local authority social services to fail when there is strong and effective leadership and management. A vital aspect of leadership is establishing a positive culture. Therefore, we have been working with Social Care Wales (SCW) and the Social Care Institute of Excellence (SCIE) to look at the evidence on the core components of positive cultures. Alongside this we are working with SCW to promote the model of Compassionate Leadership which is being adopted by health and care services across Wales.

I have enclosed examples of positive practice shared by our inspectors illustrating how little things can make a big difference to people's lives.

4. Adult safeguarding referrals

Unfortunately, we are unable to provide details of the types and themes of safeguarding referrals being managed by local authorities. CIW is only directly involved in a small number of these, where they relate to safeguarding concerns in a regulated service.

Last year, local authorities were reporting an increase in safeguarding which may have been in part due to the opening up of society as COVID-19 restrictions relaxed. Reports of adults at risk of harm or abuse can come from many sources and may include issues such as unsafe hospital discharge, excessive waits for an ambulance or domestic abuse.

Thank you for giving CIW the opportunity to share this additional information with the Committee. I hope the information is helpful in informing the Committee's work but please do not hesitate to contact us if we can be of further assistance.

Yours sincerely

A handwritten signature in dark ink, appearing to read 'G. Baranski', written in a cursive style.

Gillian Baranski
Chief Inspector
Care Inspectorate Wales

Positive practice examples – it's the little things

The following examples, shared by CIW inspectors, are testament to the daily work of care professionals working in the services we inspect.

1. The domiciliary support service providing care and support for people in supported living, who has a creative approach to engaging people with complex needs in activities by setting up a social enterprise scheme to grow and sell produce whilst learning on a practical level about environmental matters.
2. A care home that, during Covid, converted a vacant bedroom into a model railway for two people who loved that sort of thing – complete with paper-mâché mountains, farms and rivers etc. It was amazing.
3. A manager who took a lady, who was living with advanced dementia, to her granddaughters wedding, in her own time. The staff and the family made sure the lady had something nice to wear and had her hair done. I was told it meant such a lot to the family and made the day special.
4. I was inspecting a supported living service on Monday and they showed me their new E:Care Planning system. A really nice feature is the video recording system, which they use in reviews. The review can take place as normal and everyone can discuss the plans and outcomes and at the end they add a video clip. In this case it was a young person who attends a voluntary job and the video showed him in the workshop doing his thing. What I enjoyed was the interactions he was having with people and the smile on his face. The simple 30 second clip made all the talking points real for him.
5. I saw a man of Chinese origin being cared for in a local home, the staff had worked with the family to create a poster with day-to-day Chinese phrases, such as, “would you like a drink?” that staff were using with him. The family said this had helped him to settle into the home.
6. I saw a lady in a residential home who was Welsh first language, her personal plan was detailed and said she liked to listen to Radio Cymru in the afternoon and appreciated her own space. I saw she had an armchair in a quiet corner and was happily listening to the radio.
7. I saw a person who had not been able to attend their mother’s funeral during the pandemic. The home had purchased a bench in the garden and flower pots in her mother’s memory. The person appreciated this and said it helped them grieve.
8. In one care home people living with dementia help with the gardening, also, there is an old car outside that people can “tinker” with.
9. A person with learning disabilities who uses parts from old wheelchairs to make new and useable ones. These are then transported to Africa. The staff made it

possible for him to travel to where the wheelchairs were sent and was able to see how they were used. It was his first time travelling overseas.

10. Staff being cheerful, and despite having their own problems, leaving these at home in order to make a positive difference to the lives of people they care for in the home. (This was an observation of a person living in a care home).
11. Staff having time to listen and hold a hand.
12. A 'cwtch' or hug, and staff members going around to say 'nos da/ good night' before they go off shift.
13. People with dementia supported to go into the community, with one care home helping people to go to a singing group every week. When this is not possible, impromptu choir practice and singing throughout the home.
14. Helping people stay in touch with families, making sure the home phone is answered and people get to speak to their loved ones when they want.
15. Helping people to maintain independence and not prevent some activities through over risk assessing. For example, one care home has a kettle and hot drink making facilities available in large kitchenette / dining areas where people make themselves or their visitors a drink.
16. Family members able to have a meal with their loved one.
17. People and their life experience valued. For example, one person helped a trainee chef so they could improve the gravy, which in turn pleased everyone in the home.
18. People helped to follow their own interest, with an example of one person supported to purchase art materials so they could continue their passion of watercolour painting. The resulting art was then displayed.
19. Staff doing something 'daft' like wearing a pink sparkly wig, promoting smiles and conversation.
20. "The bag lady", a well-being coordinator visiting every single person in the morning with her special bag of 'goodies', bringing a nice snack or useful gift such as a packet of tissues, but more importantly, five minutes of joy, that everyone talks about and looks forward to.
21. Younger people assisted to access the community and take up challenges such as the Duke of Edinburgh Award.
22. A phone call to someone who is waiting for their care worker to visit them in their own home, to let them know they may be five minutes late.

23. People receiving care in their own homes receive a schedule/ rota, showing who will be supporting them during the coming week.
24. People or their families always being able to contact a manager, we were told by one person about a domiciliary support manager “They’re brilliant, you can pick up the phone and they will always answer.”
25. A person receiving a weekly Welsh language magazine and staff from very different cultural backgrounds giving Welsh a go with the odd word, ‘dim siarad Cymraeg’ went down well.
26. Personalised musical playlists that family/friends have helped put together that support really positive interaction and conversation starters.
27. Lifestyle teams recreated missed experiences -e.g. one lady had never experienced the Ballet - the team recreated the event on the big screen in their cinema room and she received a proper invite and people dressed up to attend.
28. Breakfast club - Chef cooks fresh to order in the community kitchen gives that full greasy spoon café experience.
29. Staff with a talent such as music and singing breaking into song for people in the lounge (operatic) it was very impressive.
30. Staff recognising someone’s loss of a parent and that person being able to plant a rose in the garden and have a memorial bench she can use in her own garden.
31. Care workers having meals with residents - some residents started lunch being assisted to eat however by the end of the meal were managing to do this themselves.
32. Residents being part of the upkeep of the home- folding laundry, washing dishes, dusting and polishing- just as they would if they were home! and outside tending to the garden etc (all risk assessed).
33. Residents sharing their skills with younger staff members – knitting / crochet classes.
34. Social evenings – beer and footie, Christmas wreath making with mulled wine etc, nice to see evening activities arranged and people were dressing up smart to attend.
35. A married couple who moved to the same home eventually - he is devoted to her and he feels integral to her care as she has dementia, and when they are together she eats and drinks better and he has seen a huge improvement in her well-being, they get to spend their day together, and he likes to get up early so he is ready when she has finished her routine with the carers. I met them both

having a cuppa and biscuit in his room while they watched the news, and she couldn't take her eyes off him. True love. He is 96 years young.

36. Using the outdoor space available creatively. One of provider has the 'Budding Minds' initiative where they use the garden to extend children's learning experiences. The home has a good deal of land, and they have polytunnels and fruit trees. The children have in the past made their own jams and preserves, which they have sold at a local farmers' market. Other homes have also used their gardens creatively even though they are much smaller, with one having a sensory garden and some raised beds for veg and fruit. The other home had a hedgehog visitor, and during the last inspection, one of the children was researching what foods a hedgehog could eat.
37. I inspected a children's home, and since my last visit they have acquired two cats. This has been lovely for the children who are clearly very fond of them and the cats are very affectionate (one decided to fall asleep in my bag and the other on the desk I was using). Supporting children to have pets is a really good way to show them they are trusted to care and gives them some choice, control and responsibility. They are really proud to show inspectors their fish/lizards/snakes/hens etc.
38. Since early in my inspecting career (over 30 years), I have encouraged providers of care homes, particularly for older people, to ask during assessment/admission 'What would you like to achieve?'. I think this simple question can help to change a person's and/their relatives' attitudes to more positive ones when someone needs a care home. I think all too often people see entering a care home as just somewhere to go to spend the rest of their days, and not somewhere to start a new, different, life where they could maybe be helped to try new things. In one home (not one of mine and possibly not in Wales) this question led to someone going on a hot air balloon ride. It was also filmed and shared with the other residents as part of an evening's entertainment.
39. There was another home where they were about to ask the family of someone with dementia to move him as he kept going into another resident's room during the night. He never did anything, just stood there. A caring member of staff went the extra mile and by observing him discovered he was going in to look at her clock for the time as he didn't have one. They got him a clock and it didn't happen again.
40. I think the best thing I have seen is the practice of service users being part of recruitment processes and being on interview panels when new staff are recruited.
41. This was a care home for people with learning disabilities and mental health needs. A person using the service told the inspector one of the support workers was taking her to visit their Mum's grave to lay flowers on her Mum's birthday. They would travel a three hour return trip to do this.

42. One person had slept on a sofa in her lounge her whole life, when she moved into the service, she wanted this to continue. We all have individual ideas about our home and home life and basic needs and requirements. It would have been so easy for a service to just expect this lady to 'conform to a standard bedroom and to sleep in a bed'. But they didn't do this and after a risk assessments furniture was obtained by the service to allow her to continue to do this safely. Her bedroom resembled a lounge, with the 'bed' being made up on the sofa each evening by support staff and then packed away daily too. Demonstrates such an understanding of her right to have an adequate standard of living and what this standard meant to her as an individual.
43. Another example, a person with quite a significant cognitive impairment wanted to remain independent and cater for herself in her own space. Staff looked at how this could be facilitated safely and made a small kitchenette with a fridge, toaster, microwave and instant water boiler in the room. The person was able to receive support when needed to help with preparing her own meals. I thought this was an excellent example of both upholding someone's rights but also her independence and skills for everyday living.
44. One resident is a published author/poet. Whilst they are no longer able to write they still recognise their past work and are very proud of what they have achieved. The activities coordinator arranged poetry sessions for people to read the books together with books on display around the home. Staff were also planning a 'book signing' where the person could sign copies and talk about their work. I was really impressed how the staff acknowledge the importance of this person's life work to them, celebrated and respected it.
45. On an inspection, a person living with advanced dementia was experiencing periods of being unsettled. The family had bought an animatronic dog which they had responded positively to, provided companionship and reassurance during periods of anxiety or frustration. Staff ensured that the dog "Rex" was with its owner wherever they were in the home and engaged with the dog as a way of communicating with the person. I spoke to the person on my visit and struggled to engage them in an exchange until I brought Rex into the conversation, asking if he was a good dog and was he happy living at the home, did he have nice food to eat, etc. I observed the person talking to the dog through the day and saw in records that staff used it as a way to de-escalate situations and provide reassurance for the person.
46. Arranging a 'goodbye' party for a younger person at end of life (at their request) where friends and family socially distanced but gathered to play favourite music live in the garden. The person listened from the balcony and was able to enjoy a pint and have a memorable evening.
47. One service linked with the local primary school and created a pen pal scheme so that children wrote to older people who weren't having visitors. At the lifting of restrictions, the children finally met with residents. Increasing use of intergenerational links in lots of services now.

48. Domiciliary care provider who hired an aeroplane hangar to bring together people and their primary carers for a socially distanced tea party, so that the carers didn't feel so isolated during the pandemic.
49. Staff from a care home attending hospital to encourage people to eat – they were reluctant to eat because of fear of 'strangers' or cognitive impairment.
50. Replicating the layout of bedroom furniture of people with visual impairment to mirror that in the homes they lived in prior to going to live in a service.
51. A care plan created by a person who was unable to read. They cut out pictures of foods they were encouraged to eat and food to avoid to help them to lose weight, be healthy and to be able to go swimming. The review of the plan included certificates from a weight watching group they attended.....and a photo of the person, eventually, in their local swimming pool having lost 12 stone and reversed life-threatening health conditions.
52. Encouraging the inclusion of pets – either owned by staff and attending the home with their owner – or owned by the service or enabled to be owned by individuals. There have been at least two care homes where older people have been able to spend time with horses. One service has visiting donkeys and lots of examples of mobile zoos with exotic creatures as well as pet a dog schemes. Also some instances of animal husbandry being used therapeutically – chickens.
53. People being enabled to say goodbye. Sometimes people move to a care home following the death of their spouse or primary carer. Many people are not able to attend a funeral and so being helped to visit a grave or place of significance is a huge comfort.
54. Younger adult and children service providers often try to promote dignity by providing individuals with proper luggage - ditching the black bags and carrier bags for belongings that stigmatise when they have to move elsewhere or are admitted to hospital.
55. Introducing regular phone calls/texts to family members to report happy days and achievements, not just contacting to inform of illness or accidents.
56. Social media to video message or Facebook updates for families to remain in touch with residents
57. Having a room to accommodate visitors overnight when they are spending the last days of life with a loved one.
58. Being able to speak in first language, particularly when going for hospital appointments or in times of distress.

59. Storybook Records – taking down accounts of people’s memories and sharing these as legacy gifts with loved ones when the person passes. Can act as an aid to ‘anchor’ distressed and disorientated people, to provide talking points and comfort but also hugely valuable for families to celebrate the life of someone once they are no longer alive.
60. There are so many examples that happen every day, from staff stopping off on their way to work to get a person a newspaper to sitting with someone who is dying, when their shift has finished, so the person is not alone.

7 December 2022

Dear Chair

Public Accounts and Public Administration Committee Inquiry into Public Appointments


The Public Accounts and Public Administration Committee is undertaking an Inquiry into Public Appointments. Evidence received from the Committee's consultation on the scrutiny of public administration in autumn 2021 recommended that an inquiry be conducted in this area. It was considered to be an issue that had been 'under-examined' since the establishment of the Senedd.

Our agreed Terms of the Reference for the inquiry are detailed in Annex A. However, we are aware that concerns regarding the public appointments process may extend beyond those terms of reference. We therefore welcome the views and experiences of your committees on the matters listed and any other issues that you feel are relevant to our work.

I look forward to hearing from you and kindly ask for responses by Friday 27 January 2023.

Thank You.

Kind Regards,



Mark Isherwood MS
Committee Chair

Croesewir gohebiaeth yn Gymraeg neu Saesneg.
We welcome correspondence in Welsh or English.

Annex A

The Committee is undertaking an inquiry into the Welsh Government's approach to the public appointments process, including where this could be improved to increase the diversity of candidates for public appointments made by Welsh Ministers. Issues to be considered include the following:

- The role of the Public Bodies Unit and the effectiveness of its relationship with Public Bodies' Boards in terms of ensuring good governance and effective public appointment arrangements. This includes any ongoing support for board members.
- The views of those corporate bodies that receive public appointments on the public appointments process;
- The role the Commissioner for Public Appointments.
- What are the main barriers to increasing the diversity of candidates for public appointments in Wales? How do these vary by factors including:
 - Age
 - Sex
 - Ethnicity
 - Disability
- How effective are current approaches being taken by the Welsh Government to encourage and increase the diversity of candidates?
- How can the public appointments process be improved to achieve this?
- How can the Welsh Government create a more transparent and open public appointments process?
- Are there examples of best practice elsewhere in the UK and internationally that Wales should learn from?





18 January 2023

Mark Drakeford, MS
First Minister of Wales
Welsh Government
5th Floor, Tŷ Hywel
Cardiff Bay
CF99 1NA

Dear First Minister

I am writing to you as I have yet to receive a full response to my letter, 19 December 2022.

On 23 December you acknowledged my letter saying that you would respond after the 'short festive break'. We are now well into January, and I have not received a response. I am disappointed that you have not responded, my members feel that your government is not taking seriously the challenges facing the nursing workforce and, by extension, the patients who depend on them.

The Royal College of Nursing (RCN) Wales first notified you of our formal trade dispute with the Welsh Government and NHS Wales Employers in accordance with s.244 Trade Union & Labour Relations (Consolidation) Act 1992 on the 13 October 2021. Over 15 months has passed since the dispute was first raised and the Welsh Government has not taken meaningful action to resolve the dispute. It is for this reason I have announced further strikes days for Wales.

Continued

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Ysgrifennydd Cyffredinol a Phrif Weithredwr/General Secretary & Chief Executive
Pat Cullen
Cyfarwyddwr, RCN Cymru/Director, RCN Wales
Helen Whyley

Mae'r RCN yn cynrychioli nrysys a nyrsio, gan hyrwyddo rhagoriaeth mewn arfer a llunio polisiau iechyd
The RCN represents nurses and nursing, promotes excellence in practice and shapes health policies

INVESTORS IN PEOPLE®
Rydym yn buddsoddi mewn llesiant Arian

Mae'r Coleg Nyrsio Brenhinol yn Goleg Brenhinol a sefydlwyd drwy Siarter Frenhinol ac Undeb Llafur Cofestr Arbennig a sefydlwyd a dan Ddeddf Undebau Llafur (Cydgrynhoi) 1992.

The RCN is a Royal College set up by Royal Charter and a Special Register Trade Union established under the Trade Union and Labour Relations (Consolidation) Act 1992.

In a press conference last week, you said you were unable to offer a higher, consolidated pay award to create “a platform for the future”. Yet low pay continues to drive nursing staff away from NHS Wales. A platform for the future is exactly what is needed.

The offer of a one-off payment demonstrates the Welsh Government’s lack of understanding regarding the nursing crisis we are facing in Wales. Registered nurse vacancies in the NHS are exceeding 3,000 and agency spend has risen once again to £152 million. A one-off payment will go nowhere near what is needed to resolve the nursing staffing crisis and therefore the RCN dispute with your government. A one-off payment offers no certainty for the future of our profession and therefore of patient safety.

The Minister for Finance and Local Government recently confirmed the existence of £215.8 million in unallocated resource funding. Service improvements and pandemic recovery begins with the workforce, without which all services would cease to exist.

I urge you to reconsider your approach and in the spirit of social partnership come back to the table with an improved, substantive, and restorative pay award.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Helen Whyley', written in a cursive style.

**HELEN WHYLEY, RN, MA
DIRECTOR, RCN WALES**

cc: Russell George MS, Chair of the Health and Social Care Committee

Huw Irranca-Davies MS,
Chair, Legislation, Justice and Constitution Committee

Jayne Bryant MS,
Chair, Children, Young People and Education Committee

Russell George MS,
Chair, Health and Social Care Committee

18 January 2023

Dear Huw, Jayne, Russell

I am writing to inform you that my consent has been granted for The Food Supplement and Food for Specific Groups (Miscellaneous Amendments) Regulations 2022 and that this Statutory Instrument has now been laid in the UK Parliament.

The SI has amended the following legislation to effect changes in Scotland, Wales and England.

- The Nutrition (Amendment etc.) (EU Exit) Regulations 2019 (SI 2019/651) as amended,
- Regulation (EU) No 609/2013 of the European Parliament and of the Council of 12 June 2013 on food intended for infants and young children, food for special medical purposes, and total diet replacement for weight control and repealing Council Directive 92/52/EEC, Commission Directives 96/8/EC, 1999/21/EC, 2006/125/EC and 2006/141/EC, Directive 2009/39/EC of the European Parliament and of the Council and Commission Regulations (EC) No 41/2009 and (EC) No 953/2009¹,
- Commission Delegated Regulation (EU) 2016/127 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for infant formula and follow-on formula and as regards requirements on information relating to infant and young child feeding, and

¹ Retained EU regulation as amended by The Nutrition (Amendment etc.) (EU Exit) Regulations 2019 and 2020

- Commission Delegated Regulation (EU) 2016/128 of 25 September 2015 supplementing Regulation (EU) No 609/2013 of the European Parliament and of the Council as regards the specific compositional and information requirements for food for special medical purposes

These amendments have:

- updated the unit of measurement used for copper in food supplements;
- updated the unit of measurement used for zinc in food supplements;
- updated the forms of niacin which are permitted for use in the manufacture of food supplements to include nicotinamide riboside chloride;
- updated the forms of magnesium which are permitted for use in the manufacture of food supplements to include magnesium citrate malate;
- updated the forms of folate that are permitted for use in the manufacture of infant formula and follow-on formula (IFFOF) to include calcium L-methylfolate;
- updated the forms of folate that are permitted for use in the manufacture of processed cereal-based foods and baby foods to include calcium L-methylfolate;
- standardised the definition of pesticide residues used in the regulations on IFFOF; and
- standardised the definition of pesticide residues used in the regulations on food for special medical purposes developed to satisfy the nutritional requirements of infants and young children (iFSMPs).

Yours sincerely,



Lynne Neagle AS/MS

Y Dirprwy Weinidog Iechyd Meddwl a Llesiant
Deputy Minister for Mental Health and Wellbeing

Lynne Neagle MS
Deputy Minister for Mental Health and
Wellbeing

19 January 2023

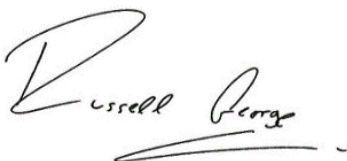
Dear Lynne

Consideration of a national children's counselling service

As you will agree, building positive mental health and wellbeing should begin in early in a child's life, as positive and healthy relationships and connection are vital for their healthy development and their future mental health. For the same reason, where trauma does occur in a child's early years, it is crucial that the right services and mechanisms are in place, and that they work together in a joined up way to support children, young people and their families. This includes school counselling services, whole school and whole families approaches, and CAMHS, as well as the implementation and embedding of the NEST/NYTH framework.

As part of ensuring that the right preventative and intervention services are in place to support children across Wales, we would be grateful if you could indicate whether any consideration has been given to establishing a national children's counselling service to ensure that all children of all ages, including those who are not yet school age, have access to mental health and wellbeing practitioners.

Yours sincerely



Russell George MS
Chair, Health and Social Care Committee

Croesewir gohebiaeth yn Gymraeg neu Saesneg. We welcome correspondence in Welsh or English.



Llywodraeth Cymru
Welsh Government

Russell George MS
Chair, Health and Social Care Committee
Welsh Parliament
Cardiff Bay
Cardiff
CF99 1SN

18 January 2023

Dear Russell,

HEALTH SERVICE PROCUREMENT (WALES) BILL

I'm writing to advise that the Government will introduce a Health Service Procurement (Wales) Bill to enable the introduction of a bespoke procurement regime which will apply to Welsh NHS health services. The short Bill, which runs to five sections, will make provision for:

- A "disapplication power" which will enable the Welsh Ministers to disapply relevant legislation by Senedd Cymru and the UK Parliament which otherwise would apply to the procurement of Welsh NHS health services; and
- A "creation power" to enable Welsh Ministers to introduce, via regulations, a new separate procurement regime for these NHS health services in Wales.

The Bill and potential subordinate legislation will seek to give organisations such as the NHS and local authorities in Wales the ability to implement more flexible procurement practices when sourcing health services in Wales. To enable subordinate legislation to be brought forward as quickly as possible, the Government will propose an expedited timetable for the Bill that will enable it to reach Stage 4 prior to the summer recess. Further detail regarding implementation will be provided in the Government's Business Committee paper.

Milestone	Date
Introduction	Monday 13 February 2023
End of Stage One	Friday 28 April 2023
General Principles Debate	Tuesday 9 May 2023
Stage Two	Wednesday 10 May 2023 – Friday 9 June 2023
Stage Three	Tuesday 4 July 2023
Stage Four	Tuesday 11 July 2023

Bae Caerdydd • Cardiff Bay
Caerdydd • Cardiff
CF99 1SN

Canolfan Cyswllt Cyntaf / First Point of Contact Centre:
0300 0604400

Gohebiaeth.Eluned.Morgan@llyw.cymru
Correspondence.Eluned.Morgan@gov.wales

Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

To facilitate delivery of this Bill, I am happy to work flexibly with the Committee and would like to offer the Committee a technical briefing on the Bill with my officials to aid their understanding of the proposal.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'M. E. Morgan'.

Eluned Morgan AS/MS

Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol
Minister for Health and Social Services