

Cafodd yr ymateb hwn ei gyflwyno i'r ymgynghoriad ar y cyd a gynhelir gan [y Pwyllgor Iechyd a Gofal Cymdeithasol](#) a'r [Pwyllgor Cyfrifon Cyhoeddus a Gweinyddiaeth Gyhoeddus](#) fel sail i'w [gwaith craffu ar Iechyd a Gofal Digidol Cymru](#)

This response was submitted to the joint consultation held by the [Health and Social Care Committee](#) and the [Public Accounts and Public Administration Committees](#) to inform their [scrutiny of Digital Health and Care Wales](#)

SDHCW 18

Ymateb gan: | Response from: Comisiynydd y Gymraeg | Welsh Language Commissioner

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23 September 2022

Dear Colleague

### Scrutiny of Digital Health and Care Wales

Thank you for the opportunity to contribute to this consultation. The Welsh Language Commissioner was established by the Welsh Language (Wales) Measure 2011 with the aim of promoting and facilitating the use of the Welsh language. The Commissioner also oversees and regulates the compliance of 124 bodies in Wales with Welsh language standards. My comments therefore focus specifically on the Welsh language in relation to Digital Health and Care Wales.

The Commissioner is responsible for regulating the compliance of bodies in the health and care field with Welsh language standards. Since 2016 these bodies include all local authorities, and since 2019 all health boards and community health councils in Wales as well as Public Health Wales, Felindre University NHS Trust and Welsh Ambulance Service NHS Trust. As a result of the Health and Social Care (Quality and Engagement) (Wales) Act 2021 the Citizen Voice Body will also operate in accordance with Welsh language standards. Digital Health and Care Wales is not subject to Welsh language standards; when it was established, an opportunity was missed to bring it under the standards regime. Setting standards on the body from the outset would have meant that it had specific language duties which would mean that there is consistency in the services and provision that the public expects to receive from it in line with the other health bodies mentioned previously.

It is positive that Digital Health and Care Wales has chosen to develop a [language scheme](#) under the Welsh Language Act 1993. Consultation on the draft scheme will close on 30 September 2022. As a result of the Welsh Language (Wales) Measure 2011 the Commissioner can investigate non-compliance with the Welsh language standards language and impose enforcement measures if it finds that there is a lack of compliance. However, the Commissioner does not have such powers in relation to language schemes

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and therefore, if Digital Health and Care Wales does not comply with its proposed language plan the Commissioner can only offer recommendations to remedy failures to comply with language duties under the scheme.

As a result of the co-operation agreement between the Welsh Government and Plaid Cymru the Welsh Government's [Programme for Government](#) sets out the intention of 'implement[ing] Welsh Language standards on ..... newly established public bodies' which will include Digital Health and Care Wales. It is a matter of concern that there is no timetable for this to happen. Certainty is needed with regards to the timetable and the exact organisations that will be within the scope of this commitment to be able to plan and ensure that rights become active at the first opportunity. I therefore ask the Committee to take every possible opportunity to encourage the Welsh Government to publish a timetable for bringing Digital Health and Care Wales under the standards regime.

Regardless of the missed opportunity to ensure that the organisation complies with standards, as a national body Digital Health and Care Wales has an important role in facilitating the implementation of Welsh language standards by other NHS bodies. There is a commitment in the draft Welsh language scheme that Digital Health and Care Wales will 'ensure that our systems and services are designed and built/procured to support organisations who use our systems to meet their Standards under the Welsh Language Measure'. Despite the commitment in the scheme that is subject to consultation, I am already aware of examples of resources provided by Digital Health and Care Wales that do not enable health boards to fully comply with the expected standards meaning that, as Commissioner, we have to investigate these cases. These include:

- delays with replacing and updating key clinical systems (e.g. CANISC and RADIS) meaning that health boards are not able to produce appointment letters in Welsh;
- templates which have the English first rather than the Welsh language;
- problems with the accessibility of plug-ins that have been developed to enable health boards to show which primary care providers provide their services in Welsh;
- problems with the content management system MURA that mean that health boards have to ask Digital Health and Care Wales to change static content on their websites so that they can comply with standards.

My officers have informed Health and Digital Care Wales of these examples. I am keen that you scrutinize how Digital Health and Care Wales operates in order to enable other health and care bodies to comply with Welsh language standards.

During August 2022 the Welsh Government published its plan for the Welsh language in health and social care 2022-27 known as [More than words](#). The plan includes actions and it identifies which bodies have lead accountability for implementing those actions. I am glad that there is recognition in the plan that it is necessary for the Welsh language to be part of digital developments and data collection. However, it is a concern that the expectations placed on Digital Health and Care Wales in a strategic document by the Welsh Government may not mean that it will support the bodies referred to above to fully



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comply with Welsh language standards, even though they have had to implement the standards for more than three years. For example, in *More than just words* Digital Health and Care Wales will have lead accountability for 'us[ing] our Bilingual Technology Toolkit to ensure that when we procure and/or develop new digital services, they will include a bilingual user interface wherever possible.' 'Wherever possible' is not adequate in terms of the compliance of these organisations with the Welsh language standards. In the medium to long term it is stated that Digital Health and Care Wales will have lead accountability for 'continu[ing] to improve Welsh language capabilities of national health and social care digital systems and ensure apps being developed such as the NHS Wales App support the vision and actions in this plan.' Again, it is not enough that *More than just words* states that these systems will be available in Welsh in the middle to long term when health and social care organisations have already been expected to comply with standards for at least three years.

I trust that these comments will help the Committee as it considers the relationship between Health and Digital Care Wales and other health bodies in terms of the impact of its activities on them and their ability to comply with Welsh language. It is key that the body's activities do not undermine the objectives of the Welsh Language Measure and the expectations placed on health and care bodies in accordance with the Measure.

Yours sincerely

**Gwenith Price**

Deputy Welsh Language Commissioner

cc. Helen Thomas, Chief Executive, Health and Digital Care Wales