Y Pwyllgor Cyfrifon Cyhoeddus / Public Accounts Committee PAC(4)-16-15 P4

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Mr Darren Millar AM
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Cardiff Bay
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Date: Our ref: Page: 28 May 2015 HVT/2335/caf 1 of 3

Dear Darren

ADVICE ON THE WELSH GOVERNMENT RESPONSE TO THE COMMITTEE'S CONTINUING NHS HEALTHCARE FOLLOW UP REPORT

The Deputy Clerk's letter of 14 May 2015 requested my advice on the Welsh Government's response to the Public Accounts Committee's follow up report on the Implementation of the National Framework for Continuing NHS Healthcare that was published in March 2015.

The Welsh Government has indicated that it accepts all nine recommendations made by the Committee, and has committed to providing the Committee with an update on progress before the summer recess. In the case of Recommendation 2, that update will include the findings from the review of cases with learning disabilities. The Welsh Government has not made clear why the findings from that review, which the Committee understood would be concluded in March 2015, were not able to be shared at this stage.

Overall, I consider that the Welsh Government has responded satisfactorily to most of the recommendations. However, I have highlighted below some areas where the Committee might wish to request further information or clarification as part of the promised update. Perhaps most significantly, it is not clear that the action the Welsh Government outlines in its response fully addresses Recommendation 7.

Recommendation 1: The Committee had confidence in the current arrangements for the audit sample process as these were based around a central team with appropriate seniority and expertise, providing consistency and a degree of independence. In evidence to the Committee, the Deputy Director – Integration Policy and Delivery Division indicated that over time the Welsh Government wanted to move to a peer review process involving health board practitioners rather than a central team. The Welsh Government response to the recommendation confirms that a central team will undertake the annual

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Date: Our ref: Page: 28 May 2015 HVT/2335/caf 2 of 3

audit samples. The Committee may wish to clarify whether there is still an ambition to move away from this arrangement at any point in the foreseeable future.

Recommendation 3: Part of the Committee's recommendation was that the Welsh Government, if necessary, refers claims not processed within the prescribed deadline to the Powys Project. Consistent with its evidence to the Committee, the Welsh Government has confirmed that a batch of claims (referred to as 'Phase 2' claims) is in the process of being transferred to the Powys Project. However, the Welsh Government response does not deal explicitly with any other claims. Should Health Boards not clear other claims within the prescribed timescales it is not clear whether these will also be transferred to the Powys Project. The Committee may wish to confirm that the update promised before the summer recess will include relevant data relating to the processing of retrospective claims, and that the referral of other claims to the Powys Project, over and above the phase 2 claims, will be considered if necessary.

Recommendation 7: The Committee wanted the Welsh Government to publish a general public information leaflet on CHC in addition to the current leaflets that are designed to be accessed once an individual is 'in the system'. The Welsh Government response appears only to commit to distributing more widely what I assume to be one of the existing leaflets. It is difficult to see how the recommendation can be seen as fully accepted unless there is a separate information leaflet as recommended by the Committee or, at the very least, a revised leaflet that is clearly designed to work for both audiences.

In addition, the Welsh Government response does not make clear whether the leaflets will be shared with social care professionals as the Committee recommends.

Recommendation 8: In its response, the Welsh Government confirms that it will provide Health Boards with mandatory guidance on the distribution of information leaflets. The Welsh Government repeats the commitment given in response to Recommendation 7 about distribution to local care homes. However, the response does not make clear whether the mandatory guidance will include a requirement to provide information to people prior to admittance to a care home, as recommended by the Committee. This group of people would include those awaiting a transfer from a hospital ward and those receiving support in their own home but who may be approaching a move to a care home.

The Committee was also concerned about the lack of public information on how the Decision Support Tool is applied to those being assessed for CHC. The Welsh Government response includes a commitment to develop and distribute a poster that signposts people to the website that contains a range of information, including information on the Decision Support Tool.

I hope that this advice is helpful to the Committee in its consideration of the Welsh Government's response.

Yours sincerely

HUW VAUGHAN THOMAS AUDITOR GENERAL FOR WALES