

Health and Social Services Committee

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Venue: Committee Rooms 3&4, National Assembly for Wales

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Moving More Often Grants

There is substantial evidence that physical activity can play an important part in improving functional capacity, increasing mobility, and assisting in the maintenance of independent living for frail older

people. It allows them to maintain dignity and autonomy, stay in touch with their friends, family and neighbours, maintain their social network and sustain the activities of daily living.

'Moving More Often' is a British Heart Foundation (BHF) training programme which is aimed at promoting physical activity among frail older people. The programme, which is still in the process of final development, provides training for care workers and volunteers to enable them to develop appropriate physical activity opportunities for older people in a range of settings such as day centres, sheltered and other supported living accommodation, and residential and nursing settings. Current elements of the scheme are *Walk with Me*, *Out and About*, *On my Own*, and *Games People Play*. These are being tested out in the development phase of the programme and may be further refined.

The BHF began piloting the programme in England and Wales in 2003. In Wales all local authorities were invited to apply to participate in the pilot scheme in 2004-05 and six were successful. These were:

- The Vale of Glamorgan
- Rhondda Cynon Taf
- Torfaen
- Swansea
- Wrexham
- Conwy

The Welsh Assembly Government funded the initial 'cascade' training and also supported each area with a grant of £1500 for local dissemination of training and provision of equipment.

It is planned to roll out the scheme to another 6 local authority areas in 2005-06. The remaining 16 areas were invited to initial Information Days which were held in North and South West Wales on 16th and 20th June respectively. To date expressions of interest in joining the scheme have been received from Cardiff, Gwynedd, Bridgend, Newport, Neath Port Talbot and Merthyr. Applications will be considered by officials from the Health Promotion Division in collaboration with the British Heart Foundation, and will be assessed on their ability to deliver, determined by level of partnership arrangements; qualifications of key training staff; project co-ordination; and breadth of objectives.

The BHF has completed an evaluation of the initial pilot schemes and a report is due shortly. Initial findings indicate that the programme is generally well received by older people who have found it both enjoyable and beneficial. Overall, staff delivering the scheme in local settings are supportive. However, the degree of enthusiasm and commitment depends largely on local circumstances and management support, and these are being looked into further in the second phase of the pilot.

Consultation Exercises

"Listening and Learning": A Consultation on Complaints and Representations Procedures in Local Authority Social Services

The Welsh Assembly Government launched a consultation on 16 May about a new framework for complaints and representations procedures in local authority social services. The overall aim of the new framework is to promote a culture where local authorities in Wales listen when people complain about social services – and learn from these concerns to improve services for everyone who uses them.

Views have been invited on four documents:

- a draft of "Listening and Learning - A Guide to Handling Complaints and Representations in Local Authority Social Services in Wales",
- a draft of The Representations Procedure (Children) (Wales) Regulations 2005,
- a draft of The Social Services Complaints Procedure (Wales) Regulations 2005, and
- a draft of a Regulatory Appraisal.

Over 400 copies of the consultation documents have been issued.

The draft regulations and guidance were developed through the work of a Complaints and Representations Advisory and Implementation Group (CRAIG). This brought together a range of key interests to consider the main policy options, the drafting instructions for the regulations and the draft guidance.

In summary, the key changes proposed are as follows:

- Overall, the separate children's and community care procedures have been brought more closely together into a common framework. There are – for legal reasons – two sets of regulations, but there is now a single body of guidance.
- Both sets of regulations set out the same three-stage procedure – this has been achieved by introducing into the children's procedure a clear, time limited first stage giving a chance for local resolution.
- The new regulations extend the duties on local authorities to safeguard and promote the welfare of the service user in handling complaints – and to ascertain and take into account the user's wishes and feelings.
- The regulations put the time-scales for handling complaints on a statutory footing and require authorities to keep complainants informed about progress.
- The scope of the Children Act 1989 procedure has been extended to services under Parts IV (care and supervision) and V (protection of children) of the Act.
- The right to a Panel hearing will be safeguarded and, in perhaps the biggest single change, wherever the council's handling of the complaint has failed to resolve the matter, the complainant will have a right to request a panel where both the panel membership and the administrative arrangements will be wholly independent of the authority.
- The guidance outlines the new arrangements for links between the social services and NHS procedures – arrangements which the Assembly Government proposes to give the force of

regulation when the new NHS regulations are made.

- Through the guidance, the same principles have been extended to cover links with other complaints procedures in local government and in the Care Standards Inspectorate for Wales. Together, these changes will be a major step towards a seamless complaints service for users of public services in Wales.

The consultation will last for twelve weeks. Comments on the draft guidance, regulations and regulatory appraisal have been invited by Friday, 5 August 2005. The formal consultation is being supplemented by a range of initiatives designed to secure views from key groups of service users, such as older people and adults with learning difficulties. As part of wider developments on advocacy and complaints, the Assembly has already undertaken extensive consultations involving around 600 children and young people.

The final versions of the regulations are scheduled for scrutiny by the Health and Social Services Committee for Wednesday 5 October. Members will be given an opportunity to see the regulations alongside the draft guidance. The regulations are time-tabled to be made in Plenary on 6 December 2005, with a coming into force date of 1 April 2006 to allow local authorities adequate time for preparation.

Adoption and Children Act: The Local Authority (Non-agency Adoptions)(Wales) Regulations 2005

This consultation covered an eight-week period from 18 April 2005 to 13 June 2005.

Adoptions are usually arranged via adoption agencies (local authorities or voluntary adoption agencies) with agencies placing a child for adoption with approved adopters. Some adoptions are however arranged without an adoption agency. Such cases may involve step-parent adoptions, or adoptions with a foreign element. It is important in these non-agency cases that the standards applied are, as far as possible, consistent with those adoptions arranged via an agency, including the need for police checks and reports for court.

The Local Authority (Non-agency Adoptions) (Wales) Regulations will introduce the requirement that all proposed adopters and members of their household aged 18 or over, are subject to criminal record checks. The local authority for the purpose of the investigation will have to take steps to obtain enhanced criminal record certificates for each person within the meaning of section 115 of the Police Act 1997(1).

The regulations prescribes the appropriate local authority when proposed adopters are living abroad and wish to apply for an adoption order. This will cover circumstances when the proposed adopters are members of the armed forces or diplomatic service.

Consultation responses are now being analysed and the draft regulations are scheduled for consideration

in Plenary in October. The regulations come into force on 30 December 2005.

The National Service Framework for Children, Young People and Maternity Services

The National Service Framework (NSF) for Children, Young People and Maternity Services in Wales consultation document was launched last year and sets out the quality of services that all children, young people and their families have a right to receive. It aims to improve quality and reduce variations in service delivery through the setting of national standards for health, social care, education, housing and transport. Responses to the consultation are currently being considered and the final standards are due to issue this summer with the final document being launched in September.

The Children and Young People's Specialised Services Project

The Children and Young People's Specialised Services Project remit is to develop high quality, equitable and sustainable specialised children's health services across Wales. The project aims to address the specific needs of children and young people who need access to specialised healthcare, by producing standards based on the best available evidence. Children and their carers are at the centre of all planning and provision. The consultation process commenced in March 2005 with the launch of the following first group of standard documents:

- All Wales Universal Standards for Children and Young People's Specialised Healthcare Services;
- All Wales Standards for Neonatal Services;
- All Wales Standards for Paediatric Gastroenterology, Hepatology and Nutrition Services.

A further seven services are near completion for consultation in the coming months, and further documents will be ready for consultation throughout the remainder of the project which is due to end in March 2006.

Children Act 2004: Proposed Child Protection Arrangements from April 2006 and Local Safeguarding Children Boards

On 10 June, draft guidance and regulations were published for consultation on proposed child protection arrangements. The consultation period will run until 31 August 2005. Two consultation events are being held in June.

Section 28 of the Children Act 2004 places a duty on key persons and bodies in Wales to make arrangements to ensure that in discharging their functions they have regard to the need to safeguard and promote the welfare of children. Draft guidance issued jointly by the Secretary of State and myself details how devolved and appropriate non-devolved services should fulfil their duties under this legislation. Such organisations have a duty under s.28 to take the guidance into account.

Under Section 31 of the Children Act 2004 Area Child Protection Committees will be replaced by Local Safeguarding Children Boards thereby placing them on a statutory footing for the first time. The Act empowers the Assembly to make regulations stipulating the membership of the Boards. The draft Local Safeguarding Children Boards (Wales) Regulations and the associated guidance entitled 'Safeguarding Children Together' were also published for consultation on 10 June. The guidance set out how all agencies and professionals should work together to safeguard and promote children's welfare and protect them from abuse and neglect.

The consultation documents can be found at:

<http://www.wales.gov.uk/subchildren/content/section-28-children-act-2004-e.pdf>

<http://www.wales.gov.uk/subchildren/content/safeguarding-children-e.pdf>

The Draft Abolition Order for Health Professions Wales

On 30 November 2004, the First Minister announced that the agenda had moved on since Health Professions Wales (HPW) was conceived as an executive ASPB. He stated that HPW would be wound up by April 2006.

The Draft Abolition Order for HPW is currently being drawn up, and will be published for consultation in July or August 2005. The Health and Social Service Committee will scrutinise the legislation in November 2005. The Consultation of the policy changes will be published week commencing 4 July for a twelve-week period.

Link Age in Wales

A new initiative, Link-Age in Wales has been developed by Department of Work and Pensions in close collaboration with the Assembly Government. This initiative will develop in partnership with Local Government, an integrated network of services for older people. It will re-structure provision of advice on welfare services, focusing more holistically on the needs of older people. The range of proposals included better information, working with the voluntary sector, joint teams with DWP and local authorities and single local contact telephone numbers.

One of the key aims of the Strategy for Older People in Wales is to develop and promote policies and programmes to tackle poverty and social exclusion amongst older people. Link-Age in Wales supports that aim and builds upon the approach taken by DWP in England for Link-Age. The development of Link-Age in Wales has been placed firmly in to the context of the Strategy for Older People in Wales and will be taken forward building on that wider agenda already well underway and using the related local structures that have already been established with Assembly Government funding. Link-Age in Wales has also taken full account of the objectives of the UK Government Strategy on Ageing

'Opportunity Age. A consultation document, drafted with a Working Group of all partners (including older People) , has recently been issued for wide ranging consultation until 30 September 2005. A launch of Link-Age in Wales is expected in the Autumn with implementation by June 2006.

National Service Framework for Older People in Wales

A vision for achieving consistently high quality and sustainable services for older people across Wales was set out by Deputy Minister with responsibility for Older People, John Griffiths on Wednesday 6 July.

The Welsh Assembly Government's National Service Framework (NSF) for Older People sets out what older people can expect from health and social care services by setting national standards for Wales to drive up quality and reduce variations in service delivery.

John Griffiths is encouraging anyone with an interest to take part in the 14-week consultation, which closes on Friday, 14 October.

Speaking at the National Partnership Forum for Older People in Carmarthen, Mr Griffiths said: "The standards are cross cutting and apply to both health and social care services across Wales. The standards will ensure older people are placed at the heart of all service planning, with services delivered to meet their needs. That should be the aspiration of all organisations. Too often in the past older people have had to fit in with the services that were available rather than the services being tailored to the needs of older people. These standards will reverse this trend across Wales.

"The key actions of the NSF have been written to be specific, measurable and with the organisations responsible for delivery clearly identified. This very direct and measurable approach is designed to achieve maximum impact on the health and well being of older people.

"At the heart of the NSF are older people. That is why they have been, and will be consulted at every step of the process. I want to thank everyone who has been involved so far for their hard work and commitment in delivering and shaping this document. Specific arrangements have been made with the help of Age Alliance Wales to ensure that older people are encouraged and enabled to take part in the consultation process.

"There is already a lot of good practice across Wales in helping to improve the lives of older people and this NSF provides an opportunity to build on that innovation to drive up standards in all services affecting older people."

Strategy for Older People in Wales - Annual Report 2004-05

The Second Annual Report provides a summary of progress made by the Assembly Government, Local Government and the Voluntary Sector respectively in the 2004-5 financial year on the implementation of

the Strategy for Older People. It demonstrates that across the various sectors and in respect of older people, the Strategy has gained "ownership" - and is not seen as purely an Assembly Government Strategy. 2004/05 was a year of solid achievement and consolidation for the Strategy. As a result, there is now a firm basis from which the Strategy can be confidently driven forward. Now that the main structures and foundations for the Strategy have been put in place, further consolidation is essential to strengthen their effective use. During this next phase of Strategy implementation, there will be an evaluation to spread the good practice that has developed, and adjust direction where the outcomes from evaluation suggest that is necessary. Overall the implementation of the Strategy is now well underway and promises much for the future. The Report is being distributed widely during July.

Flu Immunisation

Key results:

- Average up-take rate for the over 65s was 62% in 2004-05 (unchanged from 2003-04)
- Only GP practices in Monmouthshire LHB area reached the Assembly's target of 70%. Improvements were however observed in Ceredigion (64.5% from 51.9%), Torfaen (61.5% from 53.2%) and Wrexham (69.2% from 64.5%) LHB areas.
- Wales had the lowest uptake rate compared to the other UK countries (Scotland 82%, England 74% and NI 73%).
- The reason for this is unclear, although the other countries appeared to be more proactive at promoting the vaccination (for example Wales was the only country that did not run TV adverts).

Actions being taken include:

- Wales is reviewing the advertising literature that is sent out annually together with the distribution lists (with the view to promoting the flu vaccination with more voluntary organisations).
- NPHS are conducting an audit of GP surgeries to ascertain the numbers and methods used to contact eligible patients.
- More timely promotional material direct to GP surgeries
- Better guidance for GPs.

Welsh Cancer Intelligence and Surveillance Unit

Publication of Report on Cancer Incidence, Mortality and Survival in Wales

The Welsh Cancer Intelligence and Surveillance Unit (WCISU) have recently published a report on cancer incidence, mortality & survival in Wales. The report was published via the Internet on Wednesday 15 June 2005. It is a detailed triennial report bringing together information on cancer incidence, mortality and survival in Wales, and covers the ten year period 1993-2002. The report includes chapters for 20 major cancer sites and a summary for all malignancies excluding non melanoma

skin cancer. Trends over the last decade are shown, as well as comparisons between the 22 Local Health Board areas of Wales. Survival rates are also presented by deprivation quintile. A copy of the report is available on WCISU's website [www.wcisu.wales.nhs.uk].

Key results:

- There were approximately 15,000 cancers registered each year between 1993-2002 for Wales (excluding non melanoma skin cancer). There were roughly the same number of cases in males and females but the case mix was different.
- There was a 1 in 3 (33%) chance of a male being diagnosed with cancer before age 75, and a 2 in 7 (28%) chance for females.
- The most common cancers were breast, prostate, lung, and colorectal, together accounting for around half of all cancers. Prostate cancer has replaced lung cancer as the most common male cancer (incidence increased substantially over the period. The report attributes this to increasing prostate specific antigen (PSA) testing and an ageing population), and breast cancer was the most common female cancer.
- The overall number of cancer cases increased over the decade 1993-2002, but the age-standardised rate remained relatively unchanged. Over the same period, there was a slight reduction in deaths from cancer (there was an average of around 8,400 deaths each year over the period).
- There was some evidence of an improvement in cancer survival between the two periods shown in the report (those diagnosed during 1990-1994, and those during 1995-1999), when the five-year relative survival rate increased from 40.9% to 45.5%. Survival rates for different cancer sites varied greatly, some having a poor prognosis while others were better.
- Relative survival rates showed a pattern of lower survival rates in the most deprived quintile compared with the most affluent quintile.
- There was some variation in incidence by Local Health Board (LHB) area, although the pattern was not particularly clear, and varied by cancer site. Parts of both north and south Wales had some of the higher overall rates. There was also variation in survival rates by LHB, with some of the lower rates in parts of the south Wales valleys. However, LHB figures are based on relatively small numbers of cases (95% confidence intervals are included to illustrate this) and should be treated with caution.

WCISU has also recently published a brief update of cancer incidence in 2003 - the update shows provisional figures for Wales as a whole, and is available on the Unit's website. It should be noted, however, that cancer registration is a dynamic process and figures are updated on an ongoing basis, so these figures are likely to change.

Designed for Life

Designed for Life was launched on 19 May, and represents the start of the next phase in improving health and social care in Wales, with the aim of creating healthcare services for the 21st century. It

provides a clear 10-year ambition - to cut to the minimum avoidable death, pain, delay, helplessness and waste in Wales.

The strategy focuses on the transformation of services by

- addressing health and wellbeing, not illness
- getting supply and demand into balance
- creating sustainable services Wales can be proud of.

The aim will be to work with the public and professionals to design a system that uses resources effectively to:

- deal with needs as early and effectively as possible
- offer services when and where they are needed, minimising the need to travel
- ensure services are safe, effective, timely, efficient and patient-focused
- provide services carefully matched to people's specific needs, making the best use of the latest technology
- co-ordinate all the different levels and streams of care within a single well-run network.

This will be achieved through a sequence of 3-year strategic frameworks. The first– *Redesigning Care 2005-08* - will set tough targets to:

- strengthen prevention - especially to reduce smoking and help smokers to quit, to improve workplace health in the NHS, to strengthen health promotion in schools
- improve access - including action year-on-year to reduce waits for treatment so that by December 2009 we will achieve a wait of no more than 26 weeks from referral by a GP or dentist to treatment (including diagnostic and therapy requirements).
- make demonstrable improvements in frontline services - especially those relating to cancer, coronary heart disease, chronic disease and long-term illness and mental ill health, and services for children and young people and for older people

We will work with the NHS and its partners to deliver these improvements through a tough but fair process of performance management. In the first year there will be a strong focus on ensuring that the processes and systems to support and sustain continuous service improvement over the longer term are put in place.

Change of this scale will require both strategic management, and real community-wide commitment, relying on good partnerships, especially across the NHS, public health, local government and voluntary organisations.

The Assembly will be working with partners over the coming year to develop a comprehensive social services and social care framework which will parallel *Designed for Life*.

The second strategic framework *Higher Standards 2008-2011* will focus on

- achieving more clinically focused targets
- tackling wellbeing and health inequalities
- workforce development

The third framework *Ensuring Full Engagement 2011-2014* will take the strategy to the next stage, with the clear aim that Wales will have services *designed* for a healthier, longer living population, who are treated quickly and effectively, in services we will be proud of.

Prescription Cost Analysis (PCA) Data

The statistics cover all prescriptions dispensed by community pharmacists (including supermarket pharmacies), appliance contractors and dispensing doctors in Wales including items personally administered. The vast majority are written by General Medical Practitioners in Wales; however prescriptions written by nurses, dentists and hospital doctors are also included provided they were dispensed in the community. Also included are prescriptions written in England, Scotland, Northern Ireland and the Isle of Man but dispensed in Wales. The analyses do not include prescriptions written in Wales but dispensed outside Wales.

Key Facts

In Wales in 2004:

- The number of prescription items dispensed in the community increased from 51.0 million in 2003 to 54.0 million (up by 6 per cent).
- The net ingredient cost of all prescriptions dispensed in the community increased by 7 per cent over 2003, to £577 million. In real terms this increase was 5 per cent.
- The average net ingredient cost per item was £10.69, an 11p increase from the 2003 figure.
- Drugs for the treatment of the cardiovascular system make up the largest group in terms of volume and cost.

Cabinet Statement - Telemedicine

At the recent meeting of the British-Irish Council, hosted by the Isle of Man in May the main agenda item was a discussion of a Working Group report on Telemedicine. All delegations recognised the importance of harnessing ICT to the provision of Health and Social Care. Wales has a particularly good story to tell in this area, and our officials were closely involved in the preparation of the report. It is all too easy to regard the technological developments as an end in itself, whereas Brian Gibbons was at pains to relate the developments to improving the quality of the patient experience; for us (as for Scotland), one of the enormous advantages of telemedicine is for people in more remote or rural

communities to gain access to specialist services without having to travel to specialist centres. This citizen-focussed approach to the provision of Health and Social Care very much accords with the spirit of the Making the Connections programme. The Council endorsed the paper on Telemedicine, and asked for further work to be taken forward.

Food Standards Agency Wales: Next Phase of the Food Hygiene Campaign

The Food Standards Agency is about to launch the next phase of its national Food Hygiene Campaign. The Food Hygiene Campaign is one aspect of the Agency's strategy to reduce foodborne disease in the UK, and has been developed to raise awareness of foodborne disease and ways of preventing it. This phase of the Campaign is aimed particularly at the 16-25 year age group and focuses on cross-contamination. The advertisement will be launched on Monday 11 July 2005, and will be screened across the UK for three weeks at selected viewing times after 9 p.m., when this sector is most likely to be viewing. Agency research has shown that this group is most ignorant of cross-contamination issues in the home but has also been most responsive to previous advertising. The advertisement will be supported by a Food Standards Agency advice leaflet and associated website activity.

The Campaign is also timed to coincide with the seasonal period when the number of laboratory-reported cases of *Campylobacter*-related foodborne illness is highest. *Campylobacter* causes the largest number of cases of foodborne disease in the UK, and preventing cross-contamination is a key measure in the control of *Campylobacter* infection.

The advertising will be delivered in England, Scotland and Wales. In Wales, the advertisement will be shown with Welsh subtitles or a Welsh-speaking voice-over.

Wales Neurological Alliance

The Minister for Health and Social Services met with members of the Wales Neurological Alliance on 24 May 2005 to discuss the strategic review of neuroscience services in Wales. At the meeting it was explained that a number of key objectives of the review had been achieved and that reports were being compiled. Health Commission Wales also confirmed that preparatory work was being undertaken for the forthcoming option appraisals in the Summer 2005.

Option appraisal workshops to discuss the key implications of the review of neurosciences in Wales will commence on 20th July and the final neurosciences review board will take place at the end of October '05. The report will be discussed at the National Commissioning Advisory Board in the first week of December and will then go out for informal consultation.

Healthcare Inspectorate Wales Report of Ceredigion and Mid Wales NHS Trust

Introduction

This report was published on 7 July and was the first inspection undertaken by Healthcare Inspectorate Wales (HIW).

HIW was established as an independent unit within the Assembly on 1 April 2004. Its core responsibilities are to undertake reviews and investigations into the commissioning and provision of NHS funded care by or for Welsh NHS organisations in order to provide independent assurance about and support continuous improvement in, the quality and safety of Welsh NHS funded care.

The inspection reviewed and assessed the six key areas of clinical governance:

- The patients' experience
- Patient and public involvement
- Use of information
- Processes for quality improvement
- Staff focus, and
- Leadership, strategy and planning

The inspection started on 1 November 2004. Key stakeholders, including patients, the voluntary sector, community health councils and other health and social care organisations were invited to share their views. In addition, the inspection team used documentary evidence and staff interviews to build up a picture of the Trust.

Findings

The inspection concluded that the Trust has made significant progress in improving clinical governance arrangements over the past few years. However, it also highlights a number of areas where further improvements can be made.

The report commends the Trust for its involvement of patients, carers and the public in service developments and notes the introduction of several positive initiatives in this area. These include the introduction of patient leaflets, the development of the Trust's website to allow feedback and comments from the public, and a user focus group in the Outpatients Department in Bronglais District General Hospital.

The inspection also identified that local people and patients value the hard work of staff working across the Trust - within community services, community hospitals and Bronglais Hospital.

In terms of further improvements, the report's recommendations include the need to improve security arrangements at Bronglais Hospital A&E Department, the greater use of management information about the outcomes and quality of services to inform future planning, and further strengthening of the

implementation of the Trust's public and patient involvement programme.

Pembrokeshire and Derwen NHS Trust, which manages the mental health services provided at the Bronglais Hospital site, will be working with the Trust to improve the arrangements for the care of people with mental health problems who are admitted to the Hospital.

Next Steps

The Trust is now in the process of producing an action plan in response to the report's recommendations. The implementation of these will then be monitored as part of the performance management framework for NHS Wales.

2005 National Cancer Standards

The 2005 National Cancer Standards were published on 16 June and Networks are now undertaking assessments of current services against the Standards and will produce action plans to bring about the re-organisation of services in order to meet the Standards. *Designed for Life* requires the standards to be met in full by March 2009.

Personal Dental Services

Following the Minister's announcement of the rollout of Personal Dental Service pilot schemes in Wales, the PDS scheme is expected to go live on 5 July. The practice in question is Ceredigion. Five further applications are being considered by officials, and officials understand from Local Health Boards that some 70 expressions of interest have been received so far.

Myocardial Infarction National Audit Project

The Fourth Public Report from the Myocardial Infarction National Audit Project (MINAP) on the treatment of heart attack patients was published on 15 June. It presents data from all hospitals in England and Wales that admit patients with suspected heart attacks, from April 2004 to March 2005 (2004-5) in comparison with data from the previous year (2003-4).

The Report concentrates on the time taken to administer thrombolytic treatment to suitable patients and the use of drugs to reduce the risk of another heart attack. It shows continuing improvement in the care of heart attack patients with marked improvements being seen in Wales. 'Call to needle' time is no exception with an increase in the number of patients receiving thrombolysis within 60 minutes of placing the call for professional help. This year, we are placing great emphasis on improving 'call to needle' times with a SaFF target which expects that 60% of 'call to needle' times to be within 60 minutes, to be achieved by 31 March 2006. In addition the number of hospitals in Wales providing thrombolytic treatment within 30 minutes of the patient's arrival at hospital has increased since the last

report in June 2004. The Welsh Ambulance Service can now give thrombolytic treatment to patients before they reach hospital and the number of patients receiving that treatment has significantly increased in England and Wales on last years figures. The report also shows an increase in the prescription of secondary prevention medication on discharge from hospital for drugs such as aspirin, beta-blockers and statins.

Inspection of Adult Services in Bridgend County Borough Council

Bridgend County Borough Council has a strong commitment to providing effective services for adults and services are mainly good, according to a review undertaken by the Social Services Inspectorate for Wales. Inspectors found that most people had been helped by the services with some innovative development through joint projects with the health service. The prospects for sustaining services were, however, uncertain. The authority should ensure that facilities are equally available throughout the borough and develop a prioritised commissioning strategy for all adult services. The Council needs to increase its focus on social services.

Bridgend County Borough Council has agreed a plan to carry out the priority actions listed in the review report and has already undertaken a number of measures to create improvements.

Bridgend provides good services for most adults. It must make sure there are timely and consistent services for all who need them.

Chief Social Services Inspector, Graham Williams, has stated that the Council is already acting on the recommendations in this report. This will be followed up through annual performance evaluation and other monitoring.

Wales Centre for Health Remit Letter 2005-06

Update on the Establishment of the Wales Centre for Health as an Assembly Sponsored Public Body on 1 April 2005

The Wales Centre for Health (WCfH) was established as an Assembly Sponsored Public Body (ASPB) on 1 April 2005 under the Chairmanship of Professor Mansel Aylward CB. It has three statutory functions as set out in the Health (Wales) Act 2003:

- to develop and maintain arrangements for making information about matters related to the protection and improvement of health in Wales available to the public in Wales;
- undertake and commission research into such matters;
- contribute to the provision and development of training in such matters.

The Board of the WCfH comprises seven members and met for the first time on 13 April. The first meeting of its Audit Committee took place on 4 July.

I recently issued the first Remit Letter to the WCfH. In response to this Remit Letter the WCfH will need to submit its combined Operational and Corporate Plan for 2005-2006 to the sponsor division by the end of July, and present its Operational Plan to the Committee in the next session.

In line with the First Minister's announcement on ASPBs on 30 November 2004, there will be a consultation in early 2006 on conferring the functions of nine statutory health professional committees on the WCfH.