(**p.3**)

Date: 29 June 2000

Venue: Committee Room 2, National Assembly for Wales

Title: Proposals for successor body to Welsh National Board for Nursing, Midwifery and Health Visiting

Purpose

1. The Health and Social Services Committee is requested to approve the proposal for the possible future model for the body that will replace the WNB and to comment on the functions that the successor body may be required carry out.

Summary/Recommendations

- 2. The Welsh Review Group, which was set up to look at the structure and functions of the WNB's successor body, has recommended that a Special Health Authority is the preferred option. It has also recommended a list of functions, costed wherever possible, that the successor body might carry out. The Committee is invited to give its views on these recommendations, in particular whether the preferred model is acceptable and that the functions identified are those which the Committee would want the new body to carry out.
- 3. If agreed, work will commence at official level on the final costings, the financial implications of any additional functions and the drafting of the necessary secondary legislation to affect the change. Updates on progress will be made by the Health and Social Services Secretary in her monthly reports to the Committee.

Timing

4. Although the WNB is not due to be abolished until September 2001, it will be necessary for a shadow body to be up and running as soon as possible. This will help ensure that the current uncertainty

surrounding the future of WNB staff is removed and that the new body has the opportunity to begin preparatory work on any new functions that will be allocated to it.

Background

- 5. The independent review of the Nurses, Midwives and Health Visitors Act, carried out in 1998 on behalf of the four Health Departments, identified a number of weaknesses in the Act and recognised that the current system did not do enough to protect the public.
- 6. Under the existing arrangements, the United Kingdom Central Council is required to set standards for education and practice and the four National Boards, including the Welsh National Board, are required to ensure that the standards for education are implemented in their respective countries. The Government accepted the recommendation that the five statutory bodies would need to be abolished and replaced by a new UK-wide body. The new UK body will have ultimate control of the regulatory process and the setting and monitoring of standards of education for the profession.
- 7. At the time that the proposal was made that the WNB should be abolished, the then Secretary of State for Wales made it clear that it would be difficult to justify the disappearance of a Welsh body and the transfer of functions to a central UK body in the lead up to devolution. Our view was that a decision of this magnitude should be made by the National Assembly. It became clear that the Department of Health would not be moved on their desire to set up a new UK body and we were unable to hold our position when Scottish Office Ministers backed down from their stance that the National Board for Scotland should not be abolished prior to the setting up of a Scottish Parliament.
- 8. We received an undertaking from the Secretary of State for Health and the Deputy Prime Minister that it would be appropriate for the National Assembly to determine the structure and functions of a new Welsh body that would carry out quality assessment activity in Wales on behalf of the new UK body.
- 9. While Wales will be losing an ASPB, every effort has been made to ensure that the WNB's expertise is not lost. In order to do this, the Welsh Review Group was set up which is independently chaired by Professor Adrian Webb, Vice Chancellor of the University of Glamorgan, and having members drawn up from a wide range of bodies with a direct interest in nursing, midwifery and health visiting and the health service in general. Its terms of reference are at **Doc 1** aside and its membership is at **Doc 2**.
- 10. The list of current and possible future functions, with the costings that are currently available to us, are at **Doc 3** and the recommendations of the Group with regard to the possible model for the successor body are at **Doc 4**.

Financial considerations

11. The WNB receives an annual allocation of around £1.06m from the Assembly. This covers the existing functions that the WNB carries out.

12. The new body will be funded from fees raised and from within existing resources. Further work will need to be carried out on costing and prioritising the new functions so that decisions can been taken on which of these could be adopted by the new body within available resources. If in view of further changes in the UK situation it is necessary to add functions to those already identified we will consider bidding for the necessary resources in a future Budget Planning Round. Should such a bid be unsuccessful we would again need to prioritise the functions in order to accommodate them within existing resources. NHS Finance and Financial Planning Divisions have been consulted and are content with the financial aspects.

13. As mentioned in 3. above the Committee will be informed of progress on this.

Contact point

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DOC 1

WELSH REVIEW GROUP

Terms of Reference

To consider and recommend to the National Assembly for Wales and the Welsh National Board, as appropriate, all organisational and procedural changes required to secure continuity of business and an effective handover from the WNB to its successor body. To consider and recommend the structure, role and functions of the new body in Wales including the legal arrangements for its establishment. To oversee their implementation until the new arrangements are operational, identifying resource implications and having regard to opportunities to streamline and develop processes and structures.

Key Tasks

- To project plan and implement the changes arising from the review of the Nurses, Midwives and Health Visitors Act 1997 in relation to Wales.
- To consider and recommend the role of the new body.
- To consider and propose a structure for the new body, including the legal arrangements for its establishment as, for example, an Assembly Supported Public Body or a Special Health Authority.

- To consider the appropriateness of establishing a shadow body as an interim measure.
- To ensure there is effective continuity of business during the transition period and there is a smooth handover to the new body.
- To consider the establishment of a reference group (which may not meet) with whom to consult on proposals.

DOC 2

WELSH REVIEW GROUP

Chairman

Professor Adrian Webb, Vice Chancellor, University of Glamorgan

Members

Mr Martin Turner, Trust Policy Group

Ms Ann Owen, Professional Forum

Ms Liz Hewett, Partnership Forum

Mrs Margaret Andrews, Nurse Education Forum

Mrs Georgina Gordon, Nurse Executive Committee

Ms Dorothy Keddie, North Wales Health Authority

Mrs Lyn Clifton-Davies, Association of Welsh Community Health Councils

Ms Janice Clement, BUPA

Mr Roger Carter, Higher Education Funding Council for Wales

WNB

Mr David Ravey, Chief Executive

Ms Wendy Fawcus, Director - Business Services

Mr Thomas Moore, Director - Quality and Standards

National Assembly for Wales

Mrs Rosemary Kennedy, Chief Nursing Officer

Mrs Hilary Neagle, Human Resources Division

Mr Philip Johnson, Nursing Division

Ms Barbara Bale, Nursing Division

DOC 3

FINANCING THE SUCCESSOR BODY TO THE WNB

Profile of the WNB

The WNB is an Assembly Sponsored Public Body (ASPB) and is part of the regulatory framework for the nursing, midwifery and health visiting professions of the UK, the purpose of which is the **protection of the public.**

The WNB is responsible for ensuring the standards of education set by the United Kingdom Central Council (UKCC) and does so by collaborating with the Council which maintains the Professional Register and sets standards for education and practice. The WNB is responsible for approving and monitoring the pre and post qualifying preparation of nurses, midwives and health visitors in Wales. This education prepares the professions for their roles in health care. The WNB approves a range of education providers from University Schools and Departments of Nursing and Midwifery to Further Education Colleges (approximately 10).

Partnerships

The WNB works closely with the national boards in England, Scotland and Northern Ireland, ensuring that standards for pre and post registration education are maintained in a consistent manner across the UK. In addition, the Board liaises with a range of organisations with interests in quality assurance in nursing, midwifery and health visiting education and various groups on policy development for the

professions in Wales:

- Higher Education Institutions including Nurse Education Forum
- Quality Assurance Agency for Higher Education (QAA)
- Commissioners of education provision (NHS and independent sector employers) including Nurse Executives (Wales)
- National Assembly
- Community Health Councils.
- Wales Council for Voluntary Action

Organisational Structure

The WNB has 22 staff (20.85 whole time equivalents) operating from a headquarters in Cardiff. The WNB's key functions of approval, monitoring and advising are carried out through a team of four Professional Advisers who regularly visit higher education establishments, Health Authorities and NHS Trusts.

There are 10 Board Members - 7 Non-Executive Members appointed by the Assembly, and 3 Executive Members who are salaried senior managers.

Aims

The aim of the current WNB is to ensure that, in a world where patterns of health care are constantly changing, the highest possible standard of professional education of nurses, midwives and health visitors is maintained and enhanced and which:

- meets all the UKCC requirements/standards
- is accessible, effective and appropriate
- opens opportunities for further development
- promotes clinical effectiveness through effective education
- produces professionals able to maintain high standards of professional practice to meet the developing health care needs of the population in Wales

Review of the Nurses, Midwives and Health Visitors Act 1997

The Government issued the independent report it commissioned on the review of the Act, which regulates the education, practice and conduct of nurses, midwives and health visitors throughout the UK, on 9 February 1999. The review identified a number of weaknesses in the current Act. Under the existing arrangements, the United Kingdom Central Council for Nursing, Midwifery and Health Visiting (UKCC) is required to set standards for education and practice. The four National Boards, one of which is the Welsh National Board for Nursing, Midwifery and Health Visiting (WNB), are required to ensure that the standards for education are implemented in their respective countries. The review recognised

that the current system did not do enough to protect the public.

The Government accepted the recommendation that the five statutory bodies would need to be abolished and replaced by a new UK-wide body. The new UK body will have ultimate control of the regulatory process and the setting and monitoring of standards of education for the profession. In addition it was agreed that the National Assembly would determine the structure and functions of a new Welsh body that would carry out quality assessment activity in Wales on behalf of the new UK body.

Implementation of the review

A power has been included in the Health Act 1999 to effect the changes required to primary legislation by Order. The Government has accepted that there should be some limitations on the scope of the power and that it may not be used to abolish a statutory body. As the repeal of an Act requires primary legislation, provision is made in the Health Act to repeal the Nurses, Midwives and Health Visitors Act. While no firm dates are yet available, it has been estimated that the Order will be made in July 2001 with the existing bodies being abolished in September of that year.

The Government has set in place three groups to take the review forward. These are a Legislation Proposals Group (LPG), whose task is to prepare, consult on and finalise legislative proposals to implement the Government's plans. It is supported by a Reference Group which has been given the task of considering and advising on the emerging and final proposals. A Change Management Group (CMG) has been set up to bring the UK changes into being. Its remit is to consider, recommend on and oversee the implementation of all organisational and procedural changes required to secure continuity and an effective hand over from the UKCC and the national boards to their successor body. It is also tasked with identifying the resource implications and have regard to opportunities to streamline processes and structures and contain the costs to registrants.

Assembly officials are represented on the CMG and the LPG and the WNB is represented on the CMG.

A Welsh Review Group (WRG) was appointed by the Assembly to consider the future model for the new Welsh body and the functions that it might perform. It was independently chaired by Professor Adrian Webb, Vice Chancellor of the University of Glamorgan, and in order to achieve as wide a consensus as possible included representatives of the Nurse Education Forum, the Nurse Executive Committee, the Trust Policy Group, the Health Authorities' Chief Executives Group, the Professional Forum and the Partnership Forum.

Financial background

As an ASPB the WNB currently receives its funding from the Assembly. The WNB is allowed to charge fees for entry to its Training Index which is a gateway to the UKCC Register of eligible practitioners. Any change to fee levels has to be approved by the First Secretary and appropriation in aid rules apply: all income is returned to the Assembly with a minimum return specified whether generated in-year or

not.

The WNB's financial allocation for 1999/00 is £999,000 plus £75,000 for teacher training - a total of £1,074,000. The target for WNB income was set at £75,000. Savings in-year, due mainly to vacant Professional Adviser posts and associated non-pay costs have amounted to £83,000. There is also an excess of £15,000 over the target for income receivable. An application has been made to the Assembly to carry forward the £83,000 to offset costs arising from the change process/pump priming.

For 2000/01 there has been an overall reduction in funds allocated. This is not unusual in some respects as the WNB's funding position has been reducing consistently for some time. All inflationary increases in pay and non-pay have for the last six years been funded from within the WNB's reducing allocation by efficiency savings, mainly by reducing the number of staff from 35 to the 22 currently employed.

The reduction in funding from teacher training (66%) in 2000/01 is beyond the scope of the WNB's efficiency savings and the Board is currently in correspondence with the Assembly sponsor Division on this matter.

The cash limit includes an income target of £25,000 which contrasts with the WNB's estimate of £50,000. Both values show a marked drop in comparison with previous years. This has arisen mainly from revisions to the WNB Framework for Continuing Education and in particular a new system of joint awards with the main educational institutions in Wales. One of its attributes is a reduction of fees levied on nurses and midwives.

The funding position for the coming years is important because Assembly officials have acknowledged that WNB funding levels are likely to be the basis for the successor body's financing. The Welsh Review Group has also acknowledged that that the successor body will need to undertake all the WNB's existing activities and provide a range of additional functions.

This document serves three purposes:

- it reviews the existing functions of the WNB and the costs at 1999/00 levels;
- it sets out the functions for the new body; and
- it identifies potential costs of the functions for the new body and considers the funding options.

Costing information

The figures provided on the cost of the current activities are based on the WNB's costing system. The costing system does not distinguish between pre and post registration activities as these have proved difficult for staff to record in analysing their time as visits to educational institutions often cover both roles.

For the purposes of this paper, judgements have been made and applied to the costing figures in order to give estimated costs at this time, including splitting the costs between pre and post registration activity evenly (50/50). The figures provided also contain the cost of administrative support and overheads e.g. the cost of premises; supporting ten Board Members; holding meetings in public; providing a range of focus and working groups which provide information to the professional advisory function across the range of specialities in nurse education and practise in Wales; participation and collaboration on UK and European issues; customer surveys and reviews etc.

Suggestions to cover the potential costs of the new activities to be undertaken by the successor body have also been provided.

A recommendation on the structure of the new body will impact on the future costs and will need to be borne in mind, particularly in relation to the ability for the new body to raise fees and charges for its services. The legal structure of the new body cold also impact on how future services are delivered (existing and new) i.e. whether to employ staff directly to carry out the functions; to contract out for services; or a combination of both (as currently) or if support services can be provided by another body or through a facilities management contract.

TUPE

The legal position of the WNB's staff and the activities that they currently undertake also forms part of the equation when considering the future options for staffing. Assembly officials have advised the WNB that in the event that TUPE does not apply then the spirit of TUPE will be followed. This is the position that has been taken in England where ENB staff are to be offered posts either in the new body or in alternative employment on protected terms and conditions. This has implications on any possible savings from staffing which will be available in the short to medium term.

Continuation of existing activities

Quality Assurance/Regulation - Pre Registration

There is an ongoing requirement to continue the approval of institutions which are providing nursing courses, the approval of the courses of nurse training and the monitoring of education provision for nursing courses in Wales and advising institutions on a range of education issues for pre-registration courses. The UKCC is currently responsible for setting the standard of education. The WNB is currently responsible for the monitoring of the education provision and confirming to the UKCC that their standards are being met in Wales.

The monitoring is undertaken by a team of Professional Advisers working with the educational establishments and using, wherever possible, existing information provided for other purposes (QAA audit for example). The successor body will investigate further how a closer working relationship with

QAA could be established.

The new UK Council is to be responsible for the setting of the standards of education (as currently) and for the monitoring of the standards (currently WNB responsibility). The new Council will have to contract with the successor body in Wales to undertake the approval and monitoring role of educational standards.

There is, therefore, no change in the current quality assurance activity for the WNB's successor body which will need to undertake an approval, monitoring and advisory role.

Cost of current provision of the pre-registration quality assurance service by the WNB is £340,000.

Other options for covering the cost of the provision of the service required by the new UK Council could be:

i. charging the new Council for the quality assurance services provided by the successor body on their behalf. The Council's costs are met by the Registrants paying a fee to retain their registration. This could result in the fees of Registrants being increased. Consideration as to the position taken in other countries would need to be borne in mind.

ii. charging the profession in Wales for the quality assurance services provided by the successor body. As Registrants already pay a fee to the Council, it is unlikely that a further fee would be welcomed for Welsh practitioners.

iii. charging educational providers for the services provided. This would however become a charge against the Education and Purchasing Unit (EPU) and thus public money albeit from a different source.

As the new UK Council will be responsible for the monitoring of educational standards for the first time it is difficult to predict what sort of 'contractual' relationship will be required or the reporting mechanisms that will be necessary. This could result in an increase of work in this area due to a change in the reporting mechanisms. Currently the WNB meets formally with the UKCC once a year to report on educational standards in Wales.

It is not yet clear if the new UK Council will also be responsible for setting standards and monitoring post registration education. If it does then this would have a further impact on costs.

Quality Assurance/Regulation - Post Registration

In addition to the above, the Professional Advisory Team also provides the same service in relation to post registration courses for nurses in Wales through a range of post registration qualifications and the Continuing Education Framework. It forms the basis of the building blocks that lead to Specialist Practitioner qualifications, currently recordable with the UKCC. The new Welsh body should

proactively assess need and develop post registration education and training according to health policy developments in Wales. In addition, post registration developments should support workforce planning initiatives, help to develop nurses for the wider policy agenda and should liaise with the NHS Wales Staff College on non-nursing courses to offer wider development opportunities for the profession.

Study Centres

In addition to the service provided to educational establishments, the WNB also provides an accreditation service for employers in Wales to encourage and maximise learning opportunities and continuing professional development activity.

Supervision of Midwifery Practice

The Supervision of Midwifery Practice covers the advice to Local Supervising Authorities (Health Authorities) on midwifery supervision to ensure that best practice is shared and any difficulties resolved.

Cost of current provision of the post registration quality assurance service by the WNB is £340,000, which includes Study Centre accreditation and Supervision of Midwifery Practice.

Options for covering the provision of these services in the future include:

- i. charging the new Council, if it is responsible for post registration standards and monitoring (see i. previously)
- ii. charging educational providers for the services provided
- iii. charging Study Centres for accreditation
- iv. charging health Authorities for Supervision of Midwifery Practice.

Student Training Index

The successor body will be required to continue to provide a Training Index for all students entering nurse training and undertaking post registration courses. The Training Index is a gateway to the UKCC Register of practitioners.

The WNB currently charges a range of fees to assist in covering the costs of this service and the cost of external examiners who are contracted for externally, and form part of the quality assurance process. The training index fees are met either by educational establishments, via Education and Purchasing Unit (EPU) or individual practitioners, provides statistics for a range of other bodies and informs on workforce planning issues.

An increase in future activity from April 2000 is predicted due to the requirement to introduce approved Return to Practice Programmes and approved Nurse Prescribing courses. It is hoped to contain these additional costs within current expenditure levels.

Cost of current provision of this service by the WNB is £114,000.

The WNB income generated from fees is estimated at £50,000 for 2000/2001, although £90,000 has been achieved in 1999/2000. However under the appropriation in aid rules, any additional income is returned to the Assembly.

Options for covering the total cost of the provision of the service could be:

- i. increasing fees to cover the actual cost of the service provided
- ii. charging the new Council for providing essential information/access to the Register.

Careers Information Service

The Welsh Review Group have confirmed the need to continue to provide a central point of information for accessing careers information on an 'All Wales' basis to the public for entry to nurse training and careers information for members of the professions. This service is able to be provided because of the inflow of information from the Professional Team in their approval and monitoring role for pre and post registration courses. Cost of current provision of this service by the WNB is £76,000.

Options for covering the cost of the provision of the service include:

- i. charging for the information provided (public and members of the profession)
- ii. charging education providers for the service.

Initial and Continuing Education of Teachers

A number of activities make up this provision including:

Promotion of Research skills/evidence led practice

The GNC Trust pump primed the establishment of research training fellows in Wales. The WNB and educational institutions have contributed to the cost of providing research training fellow places, support, education and publication of the research.

Teacher Education Provision

The WNB provides part of the financial support for some of those undertaking teacher preparation courses in partnership with the educational institutions.

Even if the current funding ceased, the successor body would still be required to approve and monitor the institutions providing initial teacher preparation as these courses lead to a recordable qualification with the UKCC. This forms part of the post registration activity.

Continuing Professional Development of Teachers

A range of workshops and conferences are arranged across Wales to discuss best practice, current issues and government initiatives. These events are also open to clinical practitioners and managers and have proved to be an effective tool in encouraging learning experiences and cross boundary working.

The WNB receives £75,000 towards the cost of this provision which is used to provide the above services based on the identification of the 'All Wales' needs of Initial and Continuing Education of Teachers. The WNB currently receives £24,000 from the GNC Trust to part finance the research training fellowships. This funding ended on 31 March 2000.

Cost of the current provision of the services by the WNB is £157,000, which includes the £75,000 above.

- Options for covering the cost of the provision of these services:
- i. educational establishments becoming responsible for the total provision of the research training fellows
- ii. educational establishments becoming responsible for the total provision of the financial support for those undertaking teaching courses
- iii. educational establishments/employers becoming responsible for the total provision of the workshops and conferences
- iv. charging a fee for the workshops and conferences

The £75,000 could be divided between the five main education establishments to assist them with taking on the above. However, the 'All Wales' perspective would be lost that ensures the £75,000 provided is placed where it is most needed as opposed to where it might be available. £75,000 divided up across the five main educational establishments in Wales would net them approximately £15,000 each.

Welsh Language provision

This activity is divided into two areas. The Professional Team encourages the provision of nurse

education through the medium of Welsh via its approval and monitoring role and the provision of WNB information in bilingual formats. The cost of Welsh translation and printing is contracted to external providers. The WNB's successor body, through its Quality Assessment function, would be well placed to set standards and carry out monitoring with a consideration for the cultural and linguistic needs of the people of Wales.

Cost of current provision by the WNB is £40,000. Consideration will need to be given to whether this figure is sufficient to carry out even a minimal role in this area.

There are no alternative options suggested to cover the cost of this provision.

New activities

A range of new activities in addition to the continuation of existing activities for the successor body have also been recommended by the Welsh Review Group. The experience of the WNB in building and delivering services within a flexible framework is a solid basis upon which the new activities can be based. These are split into three types: those functions that would be complementary to the WNB's current activities; services for other health professions that are similar to those currently provided by the WNB for nurses, midwives and health visitors; and significant new work.

1. Complementary to current activities

Accrediting Clinical Learning Environments

With the WNB's experience in reviewing and accrediting student placements and study centres, this service could be extended to cover other clinical environments. This would be service driven and options to cover the additional costs that would arise from this new activity would include charging employers for the services provided. This is not unfamiliar territory: achieving Investors in People carries with it a cost that is charged for and paid by the body wishing to achieve, and have formally recognised, their standard of achievement.

Collaborative working with the Royal Colleges would be required in order to maximise the benefits. Working alongside the Commission for Health Improvement would also be recommended. This would follow a similar pattern to the working practices currently in operation with the approval and monitoring role of educational establishments in Wales and collaborating with other bodies such as the QAA.

Advice on work based learning/assessment of competence

This would involve providing training needs analysis and recommending solutions. Again it is anticipated that this would be service driven and, therefore, the costs of providing the service covered by the employer.

Assist clinical governance agenda to reduce poor performance

This would focus on quality and improvement and looking at learning needs and learning environments. It would be a similar process to that outlined above. This may be service driven or alternatively could be Assembly led with pump priming at the outset. Alternative funding mechanism should be explored including access to National Training Organisation funding.

Accredit individual practitioners

There is the possibility that the new regulatory body may propose different levels of practice. This activity may therefore be undertaken on behalf of the UK Regulator. Alternatively, there may be a requirement from employers to independently appraise individual practitioners as to their level of practice.

As an example, an independent organisation - the successor body - could confirm whether individuals meet the criteria for nurse consultants by developing a range of assessment criteria.

Options for cost coverage include:

- i. charging the new Council
- ii. charging employers
- iii. charging the individual practitioner (current proposal for higher level of practice by the UKCC)

Careers guidance for nurses, midwives and health visitors

With the range of specialities and providers available in nursing, practitioners are often unaware of the options and training opportunities that are available. Advice needs to be tailored to individual requirements and those of the service in Wales in order to maximise the health sector workforce.

The current careers information service could be extended to provide a range of material to satisfy the careers guidance need. In addition, identification of individuals across Wales who are knowledgeable and willing to undertake a career guidance role is possible. The WNB already has a network with the various careers guidance services in Wales that could be further extended to assist in contributing towards this new service.

This external assistance could be paid for on a fee basis, similar to the external examiners arrangement currently operated by the WNB. Costs for this are difficult to estimate at this time. Options to cover the cost include charging the individual practitioner or some method of pump priming from the health service.

2. Similar type services for other health professions

Careers information service

The existing career information service for the public interested in entering nurse training could be extended to cover other health professions where this service is not currently available but there is an identified need.

The establishment of a central point of contact for information on health career opportunities is of benefit to the health service in Wales, and simplifies access by the public. Economies of scale are achieved by building on an existing service and extending it to cover other areas. Costs of the service are difficult to identify until more detailed information is available on how far the service is to be extended.

Options to cover the cost include:

- i. charging for the information provided
- ii. charging educational establishments/employers for the service

3. Significant new work

Assist with the Regulation of Support Workers

The WNB's experience with regulating the professional education for nurses, midwives and health visitors leaves them well placed to undertake this work. The future position is not yet clear on a register for social care support workers and a register for health support workers and whether the registers are to be 'positive' - all support workers to be registered against which employers can check, or 'negative' - identifying individuals that are not to be employed. The intention will probably be that the two registers will need to be able to communicate with each other.

The cost of providing this service - subject to establishing what the service will actually entail - will be an additional cost. As a comparator the current UKCC Register lists all practitioners eligible to practice (a positive register) and costs the practitioner £12.00 per year. However, it must be noted that economies of scale apply as the register covers all nurses, midwives and health visitors in the UK.

Although these costs may be applied as a basis for costing purposes, similar costs may **not** apply to the registers for health and social care support workers, as they may not operate on a UK basis, will contain a much smaller number of individuals, or if a negative register, will be smaller again.

Options to cover the cost of the service include:

- i. charging support workers a fee
- ii. charging employers for the service

Support Worker Education

The approval, monitoring and advisory role that the WNB currently provides can be extended to provide a similar service for support worker education, therefore maximising on economies of scale.

It is anticipated that the content would be simpler and cover a lesser number than that provided for the 30,000 nurses, midwives and health visitors in Wales. The range of specialities would also be considerably less than currently exists within nursing.

The cost of providing this new service would be an additional cost, however options to cover the cost could including:

- i. charging employers/educational providers for the service
- ii. charging individual support workers a fee.

Support role of the 'Academy'

Until the role of the 'Academy' has been clearly defined it is difficult to extrapolate at this time. The WNB is experienced at networking across Wales in the health and education field and bringing together a range of individuals and bodies to discuss and agree on a variety of health related issues. This could be extended as part of the support role to the 'Academy'.

Summary of costs of existing activities

	£000s
Pre registration activity	340
Post registration activity	340
Student Training Index	114
Careers Information Service	76
Initial and Continuing Education of Teachers	157
Welsh Language Provision	40

DOC 4

POSSIBLE FUTURE MODEL FOR THE SUCCESSOR BODY TO THE WELSH NATIONAL BOARD FOR NURSING, MIDWIFERY AND HEALTH VISITING

In determining the possible options for the new structure of the WNB's successor body, the WRG made five suggestions. These are a Next Steps Agency, the transfer of staff and functions to the Assembly, a Special Health Authority, an Assembly Sponsored Public Body and a free standing entity.

The advantages and disadvantages of each of the options are as follows:

i. Next Steps Agency

Next Steps is concerned with improving the management of the executive functions of Government. The concept was born when the Government of the day recognised that a great deal of the work of the Civil Service fell into a category where there was no need for Ministers to have hands-on and day-to-day responsibility.

Generally speaking an Agency must already be a part of the Civil Service. While there are no known examples of an NDPB/ASPB converting to Agency status it is understood that a small number of non-Civil Service bodies have in fact become agencies. As with the option identified at ii. below the successor body would as an Agency be operationally autonomous but would be using powers conferred on the Assembly and be directly accountable to it. The advantages might include short lines of communication and ready access to central support services such as legal, financial, IT and personnel which might in turn reduce overheads and create some staff savings. A disadvantage might be that an Agency would be less independent than a statutory body.

While this option would require no legislative action if the main bulk of the existing and proposed new work were to be transferred, there would need to be some provision made for the proposed fee-raising powers that the successor body would require and possibly some secondary legislation related to the abolition of the WNB and the transfer of staff.

In view of the nature work the successor body would need to carry out, it is felt that there is still a need to retain an 'arm's length' relationship between that body and the Assembly. For this reason a Next Steps Agency is not considered a desirable option.

ii. Transfer to the National Assembly

As with the Agency option, the transfer of functions to the Assembly would mean shorter lines of communication and ready access to support services which would save on running costs. A direct link to policy development would be evident. One disadvantage is that it would not be independent of the executive - an advantage that the WNB's ASPB status currently confers. A second might be that some of the proposed new tasks that the successor body might carry out, such as the provision of a careers service, would be inappropriate to the work of the Assembly. Powers to raise fees might also be an issue if this option were chosen.

When the WNB and other national boards were set up under the Nurses, Midwives and Health Visitors Act 1979 it was considered right and proper that the work was of the nature of that carried out one step removed from Government. This view is supported by Scotland. However in England some of the work currently carried out by the English National Board is to be transferred into the Department of Health. Quality assurance functions will not and will move instead to a new body.

As the successor body's primary functions would concern self-regulation, it is felt that the profession and the public must be assured that regulation is not being carried out by a Government body. It is therefore our view that the work should remain at arm's length from the Assembly. Scottish Executive officials have arrived at a similar view in their deliberations about the model for the National Board for Scotland's successor body. But while we consider that the reservations about having the work at anything other than arm's length are as valid now as they were when the WNB and other national boards were given their current status, it is also considered that the Assembly should review the successor body's status in due course, taking into account developments in the rest of the UK.

This option would require no legislative action but as with the Agency option, secondary legislation might be needed if provision is to be made for the successor to have fee raising powers and in relation to the transfer of staff.

iii. Special Health Authority

The powers by which the Assembly may establish a Special Health Authority are set out in the National Health Service Act 1977. Under section 11 of the Act, the Assembly may set up a special body to perform on its behalf, or on behalf of a Health Authority, functions as directed by the Assembly.

A Special Health Authority - or at least a Special Health Board in their parlance - is Scotland's preferred option for the body that will replace the National Board for Scotland. Their rationale is that if the new body were to be 'part of the NHS' then it could open the way for better working with the Trusts. In addition, there is a Scottish Council for Postgraduate Medical and Dental Education which promotes education for junior doctors and which is already a Special Health Board. Scotland envisage a close working relationship between it and the new nursing body and feel that a similar status for both would be advantageous.

All Special Health Authorities in Wales have been abolished following the enactment of the Government of Wales Act 1998. The Assembly might consider, in view of this precedent, that the successor body should not become one. But as the 1977 National Health Service Act allows the Assembly the opportunity to set up such a body to perform functions it directs, we consider that the option is certainly not a closed one. Indeed it has the attraction of being less bureaucratic than the ASPB model, would be at arms length from the Assembly, would still have a statutory authority for its main focus of protecting the public and, being part of the NHS, would enable better interfaces with the service. Scotland is currently backing this option for much the same reasons. A Special Health Authority could co-locate with an existing Health Authority or Trust which might bring with it some savings on overhead costs.

It is understood that the creation of a Special Health Authority in Wales would necessitate only secondary legislation by Order but clarification is needed in relation to whether sufficient powers exist under which the successor body might assume its functions. The Assembly is empowered to take this forward without recourse to Parliament.

iv. Assembly Sponsored Public Body

The WNB is already such a body. If its successor body were to become one, the Assembly should among other things be satisfied that: the function of the proposed body is best carried out in the public rather than the private or voluntary sector; the function could not be performed by an existing body, by the Assembly (or an Agency) or by local authorities; the scale and duration of the task justifies an ASPB; and that an ASPB is the most effective way of carrying out the function.

There should be a clear statement of the proposed body's functions, aims and objectives and a broad idea of how it will be constituted and funded, what its relationship with the Assembly will be, and what the arrangements are for planning, objective-setting, monitoring and review, audit and accounting. It should also be established whether the new body is to have an executive or an advisory role. This will determine how the body is set up (an executive body will normally require legislation but many advisory bodies do not), how it is staffed, and what the arrangements are for accountability. An ASPB would need specific statutory provision.

In making its decision on the ASPB option, the Assembly has to be aware that the new body's work can quite clearly be carried out by a body other than an ASPB; that the creation of a new ASPB - albeit one that replaces another - will not reduce the number of ASPBs in Wales; and that the WNB itself believes that it has had to expend considerable effort, given the time and resources available to it, in having to meet the requirements of its Management Statement and Financial Memorandum. We are of the view that the successor body's work <u>can</u> be carried out by a body other than an ASPB. Furthermore, the ASPB option is considered to be overly bureaucratic in the case of the WNB and the same argument must be applied to the successor body which will be of similar size. It is not recommended that this option be pursued.

The legislation required to set up such a body would be primary, unless it were created by Order under section 60 of the Health Act 1999, and would need to be considered by Parliament.

v. Free-standing body

Consideration was given to a free-standing company limited by guarantee. This option might have some attractions in that it would be at arm's length from Government. But countering that is the argument that such a body might be too distant from and unaccountable to the Assembly given that public protection will remain the most important function for the WNB's successor. For this reason we do not recommend that this option be pursued further.

Recommendation

None of the five main options would prevent the WNB's successor from carrying out the work currently carried out by the WNB or **any** of the possible new activities once it has been agreed that there is a legal basis for them. Nor would it appear that on a budget of a little over £1m there would be significantly greater savings in the choice of one option above the other particularly if the new body has the ability to raise fees. The choice basically comes down to such considerations as administrative and legal convenience, the ability to raise fees and the relationship between the new body and the Assembly.

The choice of a Special Health Authority, while creating another public body, albeit one that replaces an ASPB, would give us the arm's length status we believe the work requires, would be sufficiently independent and throw off some of the constraints that the ASPB status places on the WNB, would require only secondary legislation, would be part of the greater health service, would be able to raise fees as a statutory body and would not be compromised in its overarching responsibility to protect the public.

Proposals for successor body to Welsh National Board for Nursing, Midwifery and Health Visiting

Executive Summary

- The review of the Nurses, Midwives and Health Visitors Act 1997 recommended that significant changes were needed to the way in which professional self-regulation is governed.
- It identified weaknesses in the powers to protect the public from unsafe practice following some high profile cases which attracted much press and public interest.
- It recommended a new structure to deal with the weaknesses based on a new central UK-wide body.

- The existing central body and the four national boards, including the WNB, should be abolished.
- The Government agreed that a new central body will commission education quality assurance work from a Welsh body set up for this purpose.
- The structure and other functions of the new Welsh body would be determined by the Assembly.
- In order to bring the changes into effect in Wales, the Assembly set up a Welsh Review Group made up of the professions, Trust and Health Authority representatives, nurse educationalists, the Partnership Forum, the private health sector, the WNB and Assembly officials. Its independent chair is Professor Adrian Webb, Vice Chancellor of the University of Glamorgan.
- The Group recommended that the successor body for the WNB should be a Special Health Authority.
- It also recommended that the WNB should have some functions over and above its current responsibilities for quality assurance, careers information and teacher training.
- These might include careers information for other professions and assistance with the regulation of health support workers. There could be others depending on evolving developments elsewhere in the UK.
- We shall be seeking independent legal advice on whether the route by which the new body can be set up as a SHA is viable.