

Agenda – Public Accounts Committee

Meeting Venue:

Committee Room 1 – Senedd

Meeting date: 29 April 2019

Meeting time: 13.15

For further information contact:

Fay Bowen

Committee Clerk

0300 200 6565

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(Private pre-meeting)

(13.15 – 13.30)

1 Introductions, apologies, substitutions and declarations of interest

(13.30)

2 Paper(s) to note

(13.30)

2.1 Primary care out-of-hours service: Additional information from Cardiff & Vale University Health Board (March 2019)

(Page 1)

2.2 Natural Resources Wales: Update from Welsh Government on implementation of Report Recommendations (April 2019)

(Pages 2 – 3)

2.3 Medicines Management: Letter from Welsh Government (April 2019)

(Pages 4 – 5)

3 The Welsh Government's relationship with Pinewood: Consideration of Welsh Government's Response

(13.35 – 13.45)

(Pages 6 – 11)

PAC(5)-11-19 Paper 1 – Welsh Government Response

4 Primary care out-of-hours service: Evidence session with the Welsh Government

(13.45 – 15.15)

(Pages 12 – 51)



Research Briefing

PAC(5)-11-19 Paper 2 – Welsh Government

Dr Andrew Goodall – Director General HSS/Chief Executive NHS Wales

Simon Dean – Deputy Chief Executive NHS Wales

Judith Paget – Chief Executive of Aneurin Bevan University Health Board,
Chair of the National Primary Care Board and Strategic Lead for Out of Hours
Services

5 Motion under Standing Order 17.42 to resolve to exclude the public from the meeting for the following business:

(15.15)

Items 6 & 7

6 Primary care out-of-hours service: Consideration of evidence received

(15.15-15.30)

7 Committee working practices and procedures

(15.30-16.00)

(Pages 52 – 59)

PAC(5)-11-19 Paper 3 – Remit paper

Public Accounts Committee

PAC(5)-11-19 PTN1 29 April 2019

Primary Care Out-of-Hours Service.

Additional Information from Cardiff and Vale University Health Board (CVUHB)

In relation to the request for additional information during the Committee meeting on 18 March 2019, C&VUHB have confirmed there were two periods when increased rates for GPs were paid to fill out-of-hours shifts at short notice. These were in April and December 2018.

There have also been two cases in the last year where there were complaints against the out-of-hours service which C&VUHB accepted liability and compensation was agreed.

CVUHB 28.03.19



Llywodraeth Cymru
Welsh Government

Ein cyf/Our ref MA/P/LG/1087/19

Nick Ramsay AM
Chair – Public Accounts Committee
National Assembly for Wales

1st April 2019

Dear Nick,

PUBLIC ACCOUNTS COMMITTEE REPORT
National Assembly for Wales Public Accounts Committee Report on Natural Resources Wales Scrutiny of Annual Report and Accounts 2017-18

Further to my letter of 10 January with a response to the above report, I advised the Welsh Government accepted the third recommendation and I would follow up on this issue to the Committee by the end of March 2019.

I have considered the independent review by Grant Thornton and the evidence supplied by the Interim Chair and Chief Executive to PAC on 11 February 2019. I am confident the independent review of the Governance of Timber has provided a thorough and comprehensive analysis of the issues. I do not, therefore, see a need for a further review, believing NRW should focus on implementing the measures needed to respond to the issues raised.

I have a regular series of meetings with the Chief Executive and Interim Chair of NRW, and my officials have quarterly Sponsorship Committee meetings with the NRW Executive team. Both of these allow for ongoing dialogue and monitoring of progress in addressing performance and issues.

We are both aware the independent review has raised some issues which you have acknowledged will not be resolved overnight. I agree with you we need to give the Chief Executive and Interim Chair the support and space they need to address the issues.

Bae Caerdydd • Cardiff Bay
Caerdydd • Cardiff
CF99 1NA

Canolfan Cyswllt Cyntaf / First Point of Contact Centre:
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Correspondence.Lesley.Griffiths@gov.wales

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

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

During the PAC discussion with NRW, you commented you believe cultural changes are required within NRW. I think we are agreed in our confidence in the Interim Chair and Chief Executive to continue to make great changes to the leadership of the organisation. This, in turn, should positively impact the whole organisation.

I understand the PAC will next take evidence from NRW on 9 December 2019. I thank the Committee for this space to allow NRW to put in place the actions they have identified.

Regards,

A handwritten signature in black ink that reads "Lesley Griffiths". The signature is written in a cursive style with a large, sweeping flourish at the end of the name.

Lesley Griffiths AC/AM

Gweinidog yr Amgylchedd, Ynni a Materion Gwledig
Minister for Environment, Energy and Rural Affairs

Agenda Item 2.3

Cyfarwyddwr Cyffredinol Iechyd a Gwasanaethau Cymdeithasol/
Prif Weithredwr GIG Cymru
Grŵp Iechyd a Gwasanaethau Cymdeithasol

Director General Health and Social Services/
NHS Wales Chief Executive
Health and Social Services Group



Llywodraeth Cymru
Welsh Government

Nick Ramsay AM
Chair
Public Accounts Committee
National Assembly for Wales
Cardiff Bay
Cardiff
CF99 1NA

9 April 2019

Our Ref: AG/LS/SB

Dear Mr Ramsay

Medicines Management

Thank you for your letter of 15 February, following our further update to the Committee on the Welsh Government's response to the Medicines Management report.

You brought to my attention that an annex referred to was not in fact enclosed with our response. I apologise for this administrative oversight and enclose the requested information.

Yours sincerely

Dr Andrew Goodall

cc: Andrew Evans, Chief Pharmaceutical Officer, Welsh Government
CGU Mailbox
Cabinet Mailbox



Medicines Management

Recommendation 3 – Independent Prescribers - Updated position December 2018

Health Board	Number of Non Medical Prescribing pathfinder sites	Total number of Non Medical Prescribing courses commissioned
Aneurin Bevan University	4	10
Abertawe Bro Morgannwg University	3	7
Betsi Cadwaladr	4	10
Cardiff and Vale University	3	7
Cwm Taf University	3	8
Hywel Dda University	2	5
Powys Teaching	1	3
Total	20	50

Agenda Item 3

Yr Arglwydd Elis-Thomas AC/AM

Y Dirprwy Weinidog Diwylliant, Chwaraeon a Thwristiaeth
Deputy Minister for Culture, Sport and Tourism



Llywodraeth Cymru
Welsh Government

Ein cyf/Our ref: MA-P-DET-0730-19

Nick Ramsay, AM
Chair – Public Accounts Committee
National Assembly for Wales
Cardiff Bay
Cardiff
CF99 1NA

17 April 2019

Dear Chair,

PUBLIC ACCOUNTS COMMITTEE REPORT

THE WELSH GOVERNMENT'S RELATIONSHIP WITH PINWOOD

RESPONSE TO THE REPORT

I have pleasure in enclosing a copy of the Welsh Ministers response to the above report which will be laid before the Table Office.

On behalf of the Cabinet, I would like to thank you and the Committee for the careful and considered way in which you undertook the investigation and produced the report.

The relevant Additional Accounting Officer, Andrew Slade, Director General Economy Skills and Natural Resources, will be pleased to provide any further information, explanation or detail if required, following this response.

Yours sincerely,

Yr Arglwydd Elis-Thomas AC/AM

Y Dirprwy Weinidog Diwylliant, Chwaraeon a Thwristiaeth
Deputy Minister for Culture, Sport and Tourism

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

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Response to the Report of the National Assembly for Wales Public Accounts Committee Report on The Welsh Government's relationship with Pinewood

The Welsh Government welcomes the findings of the report and offers the following response to the nine recommendations contained within it.

Recommendation 1

The Committee recommends that Welsh Government shares with the Committee, details of how the various lessons learnt from its experiences with dealing with Pinewood, have been implemented, embedded into decision-making processes and shared widely across Welsh Government.

Response: Accept

This work is underway. There are a number of lessons learnt from our engagement with Pinewood. These include learning from the differences between the operating models needed for film studios in Wales compared to the rest of the UK, how we can effectively build in wider benefits to the local economy as well as a commercial return, and the speed with which we need to respond to commercial deals. These lessons have been shared across the Finance and Governance teams in the Economy, Skills and Natural Resources (ESNR) Group. The lessons learnt report has also been shared with other teams across Welsh Government so the points noted, as far as they have a wider application compared to specific lessons for managing media interventions, can be considered for any new and existing schemes.

Recommendation 2

The Committee recommends that Welsh Government provides the Committee with an update on the Media Investment Fund's performance at the end of the 2019 calendar year.

Response: Accept

An update on the Media Investment Fund's performance will be provided to the Committee in December 2019.

Recommendation 3

It is apparent to the Committee that the conflicts of interest that were intrinsic to the Welsh Government's contractual relationships with Pinewood were given insufficient attention by officials at the outset. It was only later, when

these conflicts between Pinewood's involvement in the Media Investment Budget and their wider involvement in production work in Wales became increasingly obvious, that corrective action was taken. The risk of these conflicts of interest occurring could, and indeed should, have been identified at the outset of the Welsh Government entering into collaboration with Pinewood. We consider the Welsh Government's reliance on the Media Investment Panel alone, to mitigate their risks, to have been insufficient.

Response: As recommendations 3, 4 and 5 all relate to conflicts of interest, one response has been prepared under recommendation 5 below.

Recommendation 4

The Committee welcomes the action subsequently taken by Welsh Government officials to advise the Minister to reconsider the nature of the agreement following concerns about conflict of interest being raised. However, we are concerned that, as reported by the Auditor General, and in evidence provided to the CWLC Committee, that no specific advice was provided to the Minister on the issue of conflicts of interests prior to the Welsh Government entering into its agreement with Pinewood.

Response: As recommendations 3, 4 and 5 all relate to conflicts of interest, one response has been prepared under recommendation 5 below.

Recommendation 5

The Committee recommends that the Welsh Government should thoroughly overhaul its arrangements for identifying and assessing potential conflicts of interests and that these, together with robust mitigation proposals, be made explicitly clear in advice provided to Ministers prior to entering agreements with private sector business.

Response: Accept

With the benefit of experience, we accept that the wider potential for conflicts of interest ought to have been identified earlier and included in the initial advice to Ministers.

However, once these issues were identified by officials, they were dealt with and highlighted to Ministers. For example, as soon as the potential for conflict on Media Investment Budget deals came to light, officials informed Ministers and required that Pinewood disclose details of any wider Pinewood Group involvement in productions, brought forward for funding.

We are also confident that there are mitigating procedures in the approvals process with regard to the Media Investment Budget in particular to manage any perceived or actual conflicts of interest. A robust approvals process was agreed by both parties prior to the launch of the fund. Potential conflicts of interest were at the top of the agenda for every Media Investment Panel meeting and panel members were asked

to leave the room whilst cases were discussed. A further measure was that the Media Investment Panel did not approve applications for funding. The Panel made recommendations to Ministers for funding under the Ministerial Advice process and this process also requires further approvals from expert teams across ESNR Group and, if required, across the Welsh Government. Pinewood themselves were not able to approve any applications for funding. Their role was limited to developing proposals for the Media Investment Panel to consider.

When officials were made aware that there was a concern within the industry that production companies had to use Pinewood's lighting services and post production services as a condition of Media Investment Budget funding, officials moved quickly to address this. Officials set out the actual position clearly to other supply chain companies and producers looking to access the fund as well as raising the concerns with Pinewood directly. It was always the commercial decision of the production company whether they wished to use Pinewood services and not a condition of Media Investment Budget funding.

Recommendation 6

The Committee recommends, in conjunction with recommendation 2, the Welsh Government provide the Committee with updated financial performance and income projections in December 2019

Response: Accept

An update on financial performance and income projections will be provided to the Committee in December 2019.

The Committee may wish to note that Welsh Government has entered into a Stage Agreement with Bad Wolf Studios Wales to rent the entire vacant space at Pinewood Studio Wales for the next twelve months, with the option to enter into a further two year agreement. This project represents a significant opportunity to secure a long term rental agreement for Pinewood, anchoring two significant productions to Wales as well as enhancing the studio asset.

Recommendation 7

The Committee recommends the Welsh Government demonstrate how it has strengthened arrangements for ensuring that VAT implications are fully considered by officials in a timely manner, including the provision of specialist support where needed, and that complete and accurate advice is provided to

Welsh Ministers on the VAT implications of all proposals submitted for their approval.

Response: Accept

The consideration of VAT implications is now embedded within the process for putting advice to Ministers. There is a specialist VAT team in the Welsh Government and it is the responsibility of the drafting official to contact the finance team in their Group or this specialist team should they have any concerns over the VAT treatment of the proposal being put to the Minister for consideration. There is a mandatory requirement for a VAT statement in all advice provided to the Minister for Economy and Transport where there are financial implications which indicate whether VAT is applicable and whether the VAT is recoverable under rules for Government.

Recommendation 8

The Committee recommends the Welsh Government obtain surveys, not just valuations, on all property acquisitions above £1million.

Response: Reject

Whilst we accept the general principle of the recommendation, there will be instances where a survey would not be relevant, for example, where the intended purpose of acquisition is to demolish the building being acquired. There may also be instances where such surveys are appropriate for acquisitions of lower value.

Work has already begun to develop a best practice guide to acquisitions undertaken in the name of Welsh Ministers. This guide will supplement existing departmental guidelines already in place, but again ensure that we adopt a consistent good practice approach to acquisitions with appropriate transparency and due diligence across government. The recommendation will be considered as part of this work and the criteria for surveys being carried out will be included in these considerations.

Recommendation 9

The Committee recommends that all future negotiations between the Welsh Government and private sector business include a rigorous assessment of each party's responsibilities and these are set out explicitly in all contracts.

Response: Accept

We are confident our agreements with third parties appropriately reflect the responsibilities of each party. For example, our grant funding arrangements, which cover the vast majority of our funding relationships with third parties, are covered by standard grant terms and conditions which clearly set out the responsibilities of both parties. The Pinewood example found by the Committee is unusual given the bespoke nature of what it was designed to deliver. However, we will ensure that in the future should bespoke agreements be needed to define the relationship between parties then additional professional advice will be sought to ensure the rigorous assessment recommended by the Committee is applied.

Further to this, the Economic Contract which underpins our relationship with those who engage with us to deliver the Economic Action Plan clearly sets out the responsibilities of both parties as we move to a collaborative approach with business to deliver public investment with a social purpose.

Agenda Item 4

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

Document is Restricted

Public Accounts Committee – Primary Care Out of Hours Services

Evidence Paper

Primary Care Out of Hours Services

Introduction

This section of the evidence paper reports on the progress in implementing the recommendations made in the Wales Audit Office (WAO) report on Primary Care Out of Hours (OoHs) Services, published in July 2018. Responsibility for delivering the report recommendations is shared between the Health Boards (HBs) and Welsh Government (WG).

The resilience of, and access to, in hours services has a key bearing on Out of Hours (OoHs) services. Therefore, Out of Hours services in Wales are now being planned in the strategic context of the Primary Care Model for Wales. The Model, which supports the vision set out in *A Healthier Wales*, is about preventing urgent health needs through well planned anticipatory care, including supported self care. It is predicated on collaboration at a very local level through the primary care clusters to plan care and support to meet population need. Cluster led planning and delivery is about seamless and effective care from a multi professional team on a 24/7 basis, with priority for the sickest people.

A key component of the Model is the 111 service which manages people with urgent needs in the out of hours period. Good communication systems means professional teams have access to up-to-date clinical records, which is essential so people receive appropriate care, especially those with complex conditions and/or at the end of life.

The 111 programme roll out, to be completed by 2021/22, will initially support primary care out of hours and provides a significant opportunity by simplifying access to services for the public, providing greater national alignment for the call handling and clinical triage. The 111 service is supported by a national virtual directory of services and will improve access by signposting people to local services and sources of help at any time of the day, using a free to call number and other multimedia / digital opportunities. There will be greater regional and national working to meet the demand for advice and treatment at peak times and to safely reduce the workforce at quiet times.

The 111 service is currently in operation in Swansea Bay (including Bridgend), Hywel Dda and Powys health boards. Plans are in place to roll the service out in Aneurin Bevan and Cwm Taf Morgannwg health boards in 2019/20. The project will then instigate a 'firebreak' in autumn 2019/20 to introduce a new national 111 IT platform to support the service. Following the implementation of the IT system, roll out of the 111 service will be extended to Betsi Cadwaladr and Cardiff & Vale health boards. Contacts with patients will be increasing based around multi disciplinary team working, these will be less reliant on GPs but place greater emphasis on their clinical leadership role.

In this context, our approach is embedded in a 24/7 service. We know services delivered during the in hours period can impact on demand for services out of hours. Some GP practices across Wales are facing challenges in terms of achieving sustainability and accessibility. We are working in close collaboration with health boards and GP practices to address the challenges of GP recruitment and introduce access to a wider range of health professionals and signpost people to other local services such as community pharmacies.

In terms of attracting more GPs and other health professionals to Wales, our national and international campaign “This is Wales: Train, Work, Live” was launched in October 2016 to market Wales and NHS Wales as an excellent place for doctors, including GPs. The campaign has resulted in a significant increase in the fill rate for GP training. Following all rounds of recruitment this year, 98% of GP training places have been filled - 134 from the 136 places available. It is positive that more doctors are choosing Wales to train as a GP. As noted, our strategy is for expansion of multi-disciplinary teams in primary care, including out of hours, led by GPs, by investing in a range of healthcare professionals, such as advanced practitioners, clinical pharmacists, mental health clinicians and physiotherapists.

We are also reforming the national contract for in hours primary care services to improve the way they are planned and delivered leading to more sustainable and accessible services. For General medical Services, the priorities of this reform are;

- Improved appropriate access to GP and other primary care services;
- Building on multi-agency cluster led planning and delivery;
- Improve the sustainability of practices: address premises and last person standing issues;
- Professional Indemnity for GPs and wider practice and cluster teams;
- Effective, consistent, delivery of Wales-wide Enhanced Services, with specific changes to selected enhanced services;
- Demonstrating and developing quality improvement methodology in General Practice;
- Recruiting, retaining and diversifying the workforce; and
- Appropriate access to data to provide for an improved evidence base

The Report

The WAO report recognises that out of hours services are well regarded by the public. However, their recommendations call for greater involvement and leadership from both the Welsh Government and the NHS. A significant amount of work has been undertaken in the last two years which due to the timing of the report and field work was not fully recognised in the final report. It should be noted that Health Boards are responsible for the delivery of primary care services in the out of hours period.

Key actions and activity undertaken in response to each recommendation are recorded in this paper. For ease of reference, the WAO recommendations are in

bold and paragraphs referenced to the recommendation they apply to as appropriate.

Recommendation 1

In parallel with the national roll out of the 111 telephone service, the Welsh Government should lead work to standardise the way that NHS websites, GP phone lines and other NHS information sources refer and signpost to out of hours. This work should also aim to provide a clear, nationally-agreed definition of the scope of out of hours services and the circumstances in which the public should access them.

The following standard out of hours messaging was agreed and issued to GP practices in August 2018, this has also been reinforced in the national in hours access standards:-

- *Thank you for calling the xxx. The surgery is now closed. If you have a life threatening emergency please hang up and dial 999.*
- *If you require urgent medical attention call the Out of Hours service on xxxxx or 111 (as appropriate).*
- *For health advice and information please call NHS Direct on 0845 4647.*

The standard messaging* was also provided to the practices in Welsh. The British Medical Association (Cymru) supported this approach and they disseminated to the Local Medical Committee's (LMCs). We are currently unaware of the number of practice who have adopted this message but will be commissioning the NHS Wales Delivery Unit to undertake an audit in due course.

****Note: As 111 is rolled out across Wales, we will have a simplified message that replaces the above.***

Regarding the standardisation of NHS websites, a Content Management System Replacement Project has been established. This project seeks to replace the NHS Wales content management system and is agreeing standards around the look, feel, content and navigation across the NHS Wales websites. The Project Board is being chaired by Prof. Hamish Laing with communications, technical and clinical representation. A website User Experience Design Consultancy company, Box UK has undertaken work with a broad range of stakeholders to develop robust, user driven designs. This is now being used to inform the development of the new sites and will inform the development of the Welsh Online Platform.

The Primary Care Model for Wales is about seamless services across the 24/7 period, where there is less of a distinction between in hours and out of hours, this will be based around a detailed understanding of the patterns of demand and a greater

focus on making access to the right services easier for the public. The 111 service will be an important component in this.

Recommendation 2

The Welsh Government is carrying out work to update the national standards for out of hours, to make sure the standards fit with the new ways of working between 111 and out of hours. The Welsh Government should introduce an annual report to describe the health boards' progress in implementing the new national standards.

A new set of Standards and Activity Measures for 111 and OoH in Wales have been developed through close collaboration between Out of Hours clinicians, service managers and the Welsh Government. These were shared widely with the NHS before being issued in March 2019. The standards have been divided into three parts:

- Part A are delivery standards and activity indicators (AIs) which are required to be reported monthly at either a national or local level.
- Parts B and C are quality and development indicators which require WAST and Health Boards to collect and report the information either monthly, quarterly, six monthly or annually.

The new set of revised standards have been issued and will be monitored from 1 April 2019.

Welsh Government required Health Boards to produce an Annual Report capturing performance against the Standards for the first time for 2017/18. The annual report template has been updated and developed and will be provided to WAST and Health Boards in April 2019, ready for reporting in July 2019 on 2018 -19 activity against the current standards.

The Standards will be reviewed regularly to enable changes to be made that supports clinical and service changes in the way in which 111 / OoH services are developed and delivered. These Standards will be formally reviewed once full roll out of the 111 service has been achieved, circa 2021.

Recommendation 3

To make out of hours services more attractive places to work, the Welsh Government should work with the health boards to carry out a national project to engage with out of hours staff, to identify and address the factors that are causing poor morale and deterring staff from working in these services.

Health boards, Health Education Improvement Wales (HEIW) and Welsh Government under the strategic leadership of Judith Paget (see Recommendation 7

for more detail), are undertaking a number of initiatives to address this recommendation. Some examples can be found below:-

Peer Review

The Peer Review process, the first round of which concluded in December 2018, focused on engaging with a range of health board staff, crucially the clinicians, in identifying good practice, current issues and sustainable solutions which deliver a quality improvement and transformational process for the Out of Hours urgent primary care services within each health board. The Review, based on the Welsh Peer Review process, was clinically led, evidence based, and outcome focussed. In this context it was not been designed to be about performance.

Dr CDV Jones provided independent Chairmanship of the visiting panel to each health board. The output from each review was a summary letter which is to used as the basis of a locally developed and owned action plan. Each health board Executive Board is asked to endorse this work and support to achieve improvements in the Out of Hours service.

The relevant outcomes of the peer review were:

- Engagement with staff at all levels;
- The provision of constructive peer comment and support (including critical comments where appropriate);
- A heightened profile for Out of Hours within the Health Boards;
- Recognition of good practice and the identification what can be scaled up at a regional or national level – a national report has been drafted and will be shared with stakeholders (see below);
- A clarity of direction / focus on sustainable solutions;
- Assistance in the development of a new outcome focussed, sustainable model for Wales within which workforce planning will be a critical component; and
- Peer reviewers learnt a lot from those they reviewed and the process.

The 'core' panel members met on 17 December to develop an all-Wales 'lessons learnt' paper, while messages will be fed back in an all Wales event that will be organised later this year. This paper has been shared with Chief Executives and the Directors of Primary Care and Mental Health in advance of this event.

There are plans to peer review the WAST 111 function and to conduct a follow up peer review 'lite' process with LHBs in 2019/20 in part linked to winter planning and preparedness.

Online Resource – work being undertaken by Health Education Improvement Wales (HEIW)

HEIW are developing an online resource, aimed at a range of clinicians and other staff who are interested in working in OoHs. This will provide visual information and access to generic / national information on working in OoH, as well as local and health board specific out of hours information. The intention is that by providing this information in a common, consistent and professional format this will encourage interest in working in this area. This will also provide access to eLearning, and other tools and resources, as well as steering delivery of local face to face taster sessions.

The content will cover:

- What's in it for me?
- Generic information about out of hours services;
- Linked to local out of hours teams – video messages, who's who and where?
- What do I get by working in the service;
- How do I access a taster session; and
- Staff and patient stories.

This will be accompanied by a digital based social media campaign to raise awareness of working in out of hours services to widen the pool of potential workforce.

Welsh Government commissioned HEIW to deliver this and expect HEIW to be able to review and evaluate the impact of the initiative and to provide progress updates to both Judith Paget's Urgent Primary Care OOHs group and the Unscheduled Care Delivery Group.

Training and Development Support

HEIW are working with the OoHs community in a number of areas including: identification and delivery of training modules, the development of new job roles and associated job descriptions, the organisation of a national Out of Hours conference scheduled to take place in June, and the provision of training to support better more appropriate processes around the verification of death.

Recommendation 4

The Welsh Government should work with the health boards, ambulance service and the 111 Programme to develop a national workforce plan for out of hours services. This should build on the engagement work in Recommendation 3. The plan should set out the mix of skills and competencies that multi-disciplinary out of hours services need in future and the national level actions required to deliver that mix of skills.

The context for this recommendation has changed, with the greater integration of primary care services being sought through the Primary Care Model for Wales, it would therefore be counter productive and not the best use of sometimes scarce resources to develop a work force plan solely for out of hours.

As previously noted in this paper, the delivery model for Out of Hours services has already changed and developed significantly over the last 2 years away from a GP delivered service to a GP led service. Crucial to this has been detailed and complex demand and capacity work. This recognises that responding to changes in the pattern of demand is key to the delivery of a safe and sustainable service for patients and staff. Significant work has been undertaken over the last 2 years to improve the quality of the data to support this work. While experts in demand and capacity modelling have been working to develop demand and capacity models that 'work' across Wales. This is complex work and there is still some work to do to inform: what the most appropriate delivery model in terms of skill mix is in each health board? and, how/when this skill mix should be deployed across the out of hours period?

The peer review and 111 have also been important influences in moving towards a MDT approach. This winter, health boards put in place a number of initiatives to improve overall capacity including advanced paramedics, mental health support, health care support workers, additional triage capacity, increased remote working capabilities and urgent dental health capacity. The peer review reinforced the need for a multi disciplinary approach in a very practical way, while there are significant strategic opportunities to use 111 across a 24/7 period, including: being the number for all helplines, linking in with 999 clinical desk, and potentially support to in hours. In needs to work in the context of other pieces of work in Primary and USC to make the best use of professionals

As noted previously the out of hours workforce cannot be looked at in isolation from the general workforce, in particular those who work in the unscheduled care area. One of the delivery milestones for the Primary Care Model for Wales is for a cluster level workforce development plan informed by an analysis of population need, demand and workforce numbers and skills. This workforce development plan in turn will underpin a cluster level IMTP required by September 2019. The workforce and OD work stream of the Strategic Programme for Primary Care is taking forward action needed to support this local action at cluster level. This workstream will take

into account the methodology and workforce requirements arising from similar work undertaken by the OoHs community.

Recommendation 5

The Welsh Government should work with health boards to introduce a regular national assessment of quality in out of hours services, to consider clinical audit, learning from incidents and patient experience. The assessment should also lead to a set of national and local improvement actions for the NHS in Wales.

OoH Forum – Quality and Safety Group

The Out of Hours Forum is a national meeting that consists of key stakeholders across the out of hours service in Wales, and includes Clinical Directors, senior clinical leaders, operational managers, the 111 National Project Team and Welsh Government.

An Out of Hours Forum Quality and Safety Group has been established and is chaired by an Assistant Medical Director. The Q&S Group focusses on the quality indicators, clinical audit and serious incidents with a view to sharing learning and lessons and supporting clinical decision making. A draft Terms of Reference for the group can be found at **Appendix 1**.

111 / OoH Standards

The new standards for 111 and out of hours include the following quality improvement standards:

- 100% reporting of 'serious incidents' to Welsh Government in agreed timescale via DATIX
- Clinical audit undertaken to review any 'adverse incidents' reported through governance process (DATIX)
- Quality Improvement Methodology is used continually to develop local services and share good practice.

Peer Review

As described above, a peer review process has been undertaken across all health boards in Wales. The Review tested processes in health boards relating to clinical governance and assurance processes relating to quality and safety and made recommendations to health boards as appropriate. The output from each review is a summary report which is used as the basis of a locally developed and owned action plan that the health board Executive Board is asked to endorse and support to achieve improvements in the out of hours service.

Recommendation 6

The Welsh Government should work with health boards, ambulance service and relevant all Wales groups to test and spread innovative practice in the provision of out of hours face to face appointments and home visits. This work should result in a clear model of face to face services for the NHS to implement locally or regionally.

As previously noted in the Recommendation 3, the peer review process identified much good practice within health boards and the process supported the sharing of this both during and after the review, both for those being reviewed and the reviewers. While a national summary report will contain evidence of good practice that can be shared across the OoHs community. The Review aimed at facilitating the sharing of this good practice to provide greater consistency of approach across Wales. Each health board is responsible for developing a locally owned action plan which will capture best practice and these, together with a national event planned for early summer 2019 that will share key national learning points.

The implementation and roll out of the 111 service in Wales is providing an opportunity for health boards to review and plan their clinical triage, triage and wider community support model and how this can be delivered consistently.

Health boards will remain responsible for the face to face and home visiting service and this will be timely with the local adoption and roll out of the Primary Care Model for Wales which is about seamless multi professional care across the 24/7 period.

The GP OoHs Forum (see also Recommendations 5 and 7) which meets approximately every 6 weeks has been very active in this area, providing the opportunity for clinical leads and managers to discuss and share learning and best practice.

Recommendation 7

Welsh Government should review the national leadership arrangements for out of hours services. The review should consider whether there is a need for more specific leadership of out of hours at a national level. The review should also consider the role of the All Wales Out of Hours Forum and whether its work is sufficiently joined up with that of the other national NHS groups.

National Strategic Leadership

See also recommendation 3, Judith Paget, Chief Executive, Aneurin Bevan UHB, lead chief executive for primary care and chair of the National Primary Care Board, was appointed strategic lead of Out of Hours services (12 July 2018) by Andrew Goodall, NHS Chief Executive and Director General, Welsh Government. An Urgent Primary Care OOHs group was established on a task and finish basis to look at what

strategic actions / support is needed to improve out of hours services in Wales. The Group is overseeing a number of pieces of work such as:

- Peer Review;
- A Workforce and Educational Working Group;
- Developing a 'better offer' to Out of Hours staff and reducing the feeling of isolation;
- Understanding demand and capacity as part of meaningful workforce planning;
- Multi disciplinary working;
- Death verification processes;
- Preparation for future 111 roll outs.

GP Out of Hours Forum

The background to this Forum is provided in Recommendation 5. To enable alignment, members of the Forum also hold seats on other key strategic groups such as the National Unscheduled Care Programme Board, 111 Implementation Board and Directors of Primary Care meeting and national Primary Care Board and the 24/7 model work stream of the Strategic Programme for Primary Care.

While the forum didn't have a formal role in the governance structure surrounding Out of Hours, seeing benefits from a more 'flexible' arrangement. This has now changed. Terms of Reference for the Forum and the Quality & Safety Forum have been revised and they are now formally constituted and report directly to the 111 Programme Board. Outcomes from the 111 Programme Board and work around Out of Hours are also regularly reported to the National Primary Care Board.

Recommendation 8

Welsh Government and the 111 Programme should clarify the timescales for finalising and assessing the business case for the integrated computer system to replace existing systems in 111 and out of hours services, to ensure decisions on affordability are taken as soon as possible.

The purpose of the 111 Wales Procurement Programme is to procure an integrated information solution to support the new 111 service, replacing the existing NHS Direct Wales CAS and the multiple GP Out of Hours Adastra systems across each of the health boards.

The replacement system will provide a fully managed service, hosted in an NHS Wales Datacentre with the following features:

- A single integrated solution covering call handling, triage and clinical assessment;
- Links to 999 and Emergency Department systems;

- Ability to integrate with the NHS Wales IT infrastructure, as well as providing records to the relevant repositories;
- Provide multi-channel access for citizens wishing to access the service;
- Be available in both desktop and mobile settings; and
- Have a fully integrated, evidence based, decision support system, available to both clinical and non-clinical call handlers.

The procurement of a new system is a key enabler for ensuring the long term success of the 111 programme and will support NHS Wales in making changes to the wider urgent care and unscheduled care system.

The key high level milestones for the procurement process are as follows:-

Activity	Start Date	End Date
<i>Full procurement document pack finalised and approved</i>	<i>January 2018</i>	
Invitation to Participate in Dialogue (ITPD)	February 2018	May 2018
Receive Final ITPD & Evaluate	June 2018	August 2018
<i>Supplier Shortlist (x3) Finalised & Approved</i>	<i>August 2018</i>	
Competitive Dialogue	September 2018	January 2019
Invitation to Submit Final Tenders (ISFT) (includes final submission by x2 suppliers, final evaluation process, final recommendation of solution supplier and endorsement of same by Board)	February 2019	April 2019
Stakeholder engagement (national peer groups, NHS organisations, etc)	February - April 2019	
Full Business Case Production and Endorsement (includes drafting, engagement & sign-off across NHS Wales LHBs & Trusts). Engagement with Boards/stakeholders will take place during this period to align with receipt of ISFT. Ongoing engagement with WG throughout to support FBC production and ensure that they are engaged with process.	January 2019 – May 2019	
<i>Full Business Case Submission and Approval</i> (includes submission to and scrutiny by WG, consideration by IIB and final approval)	<i>May 2019 – August 2019</i>	
<i>Contract Award</i>	<i>August 2019</i>	
System Development (Assumed 7 months) Likely to be amended/refined during Competitive Dialogue stage.	September 2019 – April 2020	

Testing/Training (includes 1 month overlap). Likely to be amended/refined during Competitive Dialogue stage.	April 2020 – September 2020
<i>Go Live Phase 1</i>	<i>October 2020</i>
<u>Decommission existing IT infrastructure from live sites</u> <u>(3 month lag following go live)</u>	<u>January 2021</u>

Committee	All Wales 111/OOH Quality and Safety Forum
Purpose	<p>The purpose of the All Wales 111/OOH Quality and Safety Forum is to provide Welsh Ambulance NHS Trust (WAST) and Local Health Boards (LHBs) with:</p> <ul style="list-style-type: none"> • Evidence and timely advice relating to the provision of Urgent Out of Hospital Health Care • Assurance in relation to arrangements for safeguarding and improving the quality and safety of patient centred health care by 111 Wales, provided by WAST and associated Out of Hours (Urgent Primary Care) services provided by LHBs. • Provide specific assurance in relation to the Clinical Support Hub and its cross organisational roles and responsibilities. • Implementation and ongoing improvements for 111 • To receive guidance from the Urgent Primary Care Out of Hours task and finish Forum. <p>In accordance with its stated objectives and the requirements and standards determined for NHS Wales.</p>
Membership	<p>Chair:</p> <ul style="list-style-type: none"> • Clinical Director of an LHB OOHs service <p>Vice Chair:</p> <ul style="list-style-type: none"> • Clinical Director of a LHB OOHs service <p>WAST / LHB OOH Representatives – from each organisation</p> <ul style="list-style-type: none"> • Senior clinician • Operational Manager <p>Optional Leads</p> <ul style="list-style-type: none"> • Pharmacy • Workforce Development • IT & Comms • Nursing <p>111 Wales Project Team</p> <ul style="list-style-type: none"> • Director or 111 Project Lead • Senior Clinician (Incident Coordinator) <p>A representative from:</p> <ul style="list-style-type: none"> • AMD • Welsh Government – Primary or Community Care • Public Health Wales • HEIW • Human Resources

	<ul style="list-style-type: none"> • The Postgraduate Education Deanery • RGCP <p>By Invitation</p> <p>The Forum may extend invitations to attend as required to representatives within Wales NHS including but not limited to:</p> <ul style="list-style-type: none"> • Emergency Medicine • Mental Health • Paediatrics • Dentistry • Microbiology • Optometry • Professions Allied to Medicine • Representatives from key professional bodies • Palliative Care professionals <p>In attendance</p> <p>Executive Directors / or deputies holding portfolios containing aspects of quality, safety, complaints or service improvement can attend from time to time, or as requested by the Forum’s Chair</p> <p>Secretary: Secretarial Support will be provided through the 111 Wales Project Team</p> <p>Costs for member’s time to attend shall be borne by their representative organisation.</p>
<p>Duties:</p>	<p>The Forum will in respect of its provision of advice to WAST and the LHBs: (<i>Italics = Specific advice to WAST CSPT sign off processes when time permits</i>).</p> <p>Quality:</p> <ul style="list-style-type: none"> • <i>The Forum can specifically review and advise on the Decision Support Software for call handlers and clinicians provided as a solution within the 111/OOH IT solution.</i> • <i>The Forum can approve and endorse local (and in time national or all Wales) modifications on decision support software considering NHS Wales policy – e.g. pandemic or other localised public health outbreaks or incidents.</i> • The Forum will make national recommendations on antimicrobial use in the urgent primary care setting, taking in account of LHB Policies and guidance. This in turn will assist in the standardisation of antimicrobial availability across Welsh OOH services.

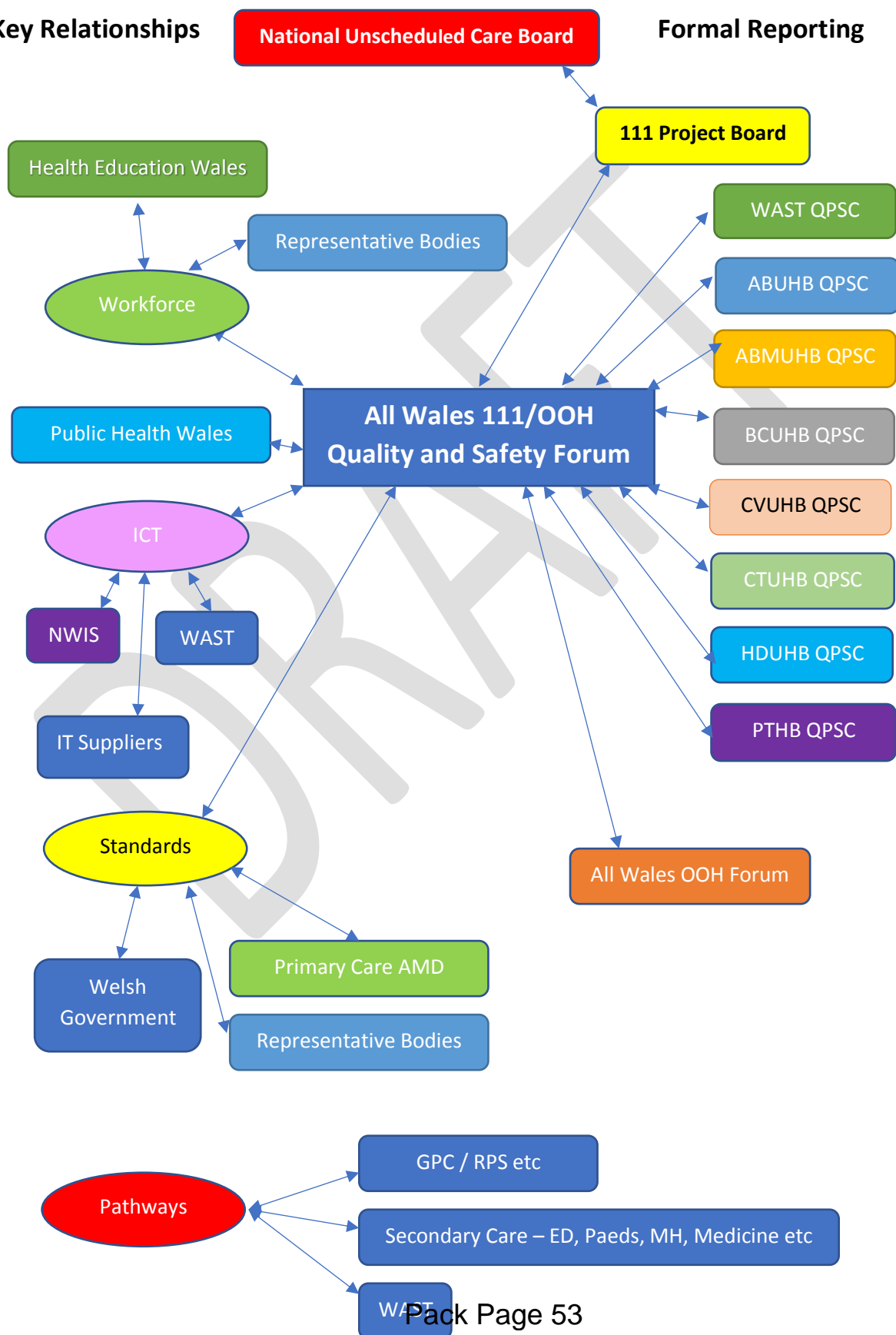
	<p>Safety</p> <ul style="list-style-type: none"> • Lessons are learned and shared across 111 and Out of Hours service from patient safety incidents, complaints and claims. • Significant national risks are actively identified, shared and robustly managed across 111 Wales and Out of Hours services • Noting the outcomes from the above, the forum (with the endorsement of LHB and WAST Medical Directors) should consider the implications for NHS Wales following the publication of any review/investigation reports arising from external regulators. • To ensure robust clinical audit is taking place in organisations and relevant training is in place. <p>Workforce</p> <ul style="list-style-type: none"> • Highlights national issues or concerns regarding the workforce regarding selection, training, support, responsiveness and health and well-being. <p>Quality, Safety and Performance Management</p> <ul style="list-style-type: none"> • Advise on the initial development of NHS Wales strategies for the development of a high quality and safe services, or pathways for patient seeking advice relating to new or urgent health needs whilst in the community. • Consider the implications for quality and safety relating to corporate strategies across NHS Wales in relation to meeting the needs of patients presenting with new or urgent health problems within the community • Consider the quality and safety implications for NHS Wales resulting from reports on service performance against Healthcare Standards for Wales with respect to 111 Wales and LHB Out of Hours Urgent Primary Care Services. • The Forum will advise Welsh Government, WAST and LHBs on the adoption of a set of key indicators of the quality of care, against which NHS Wales performance will be regularly assessed and reported on through Annual Reports. • The Forum will endorse an annual report summarising national performance and local variance against the key indicators.
<p>Access</p>	<ul style="list-style-type: none"> • The Forum will have oversight on performance and access indicators for 111 (and by agreement with LHBs) on OOH standards and can provide peer support on wider service delivery and transformation. • The Forum can also offer wider input on the delivery of regional solutions to OOHs and 111 working to facilitate

	improved patient safety and quality of care.
Meetings	At least 8 members of the Forum should be quorate with at least one of the members being the Chair or Vice Chair
Frequency:	Meetings shall be held no less than quarterly but usually alternate months or otherwise as agreed appropriate by the Chair of the Forum.
Reporting	The minutes and associated recommendations will be reported to the Quality and Safety Committees of WAST and LHBs, with copies being shared with Welsh Government and All Wales Out of Hours Forum.
Feeder Forums	The Forum may, subject to approval by the 111 National Board establish specific task and finish Forums to carry out aspects of their work as and when required.
Applicability of Standing Orders	It is not envisaged that the work of this Forum will directly impact on individual organisation's Standing Orders however if there is any potential conflict then this will be reviewed by the Board Secretaries and /or Medical Directors in the first instance.
Review	The terms of reference and operating arrangements shall be reviewed annually by the Forum, the 111 National Programme and shared with appropriate organisations across NHS Wales

Key Relationships

National Unscheduled Care Board

Formal Reporting



Agenda Item 7

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

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