Pwyllgor lechyd, Gofal Cymdeithasol a Chwaraeon Health, Social Care and Sport Committee HSCS(5)-04-20 Papur 3 / Paper 3 Aled Roberts Comisiynydd y Gymraeg Welsh Language Commissioner

05/08



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Annwyl Gadeirydd

Health and Social Care (Quality and Engagement) (Wales) Bill

My officers have had the opportunity to consider the amendments proposed to the above Bill and I would like to make the following comments for the Committee's consideration when considering the proposed amendments. Firstly I will refer to the new Citizen Voice Body before discussing other amendments proposed in relation to Section 2 and Section 4.

1. Adding the Citizen Voice body to Schedule 6 of the Welsh Language Standards (No.7) Regulations 2018 (amendment 66).

In accordance with my letter of 4 December 2019 I would urge you to consider supporting this amendment. I highlighted in my letter that the best way to ensure that the new Citizen Voice body will be required to comply with Welsh language standards as soon as possible would be to amend Schedule 6 of the Welsh Language Standards (No.7) Regulations 2018 as proposed in this amendment. In my opinion this is essential in order to facilitate the smooth transition of these duties from the community health councils to the new organisation. It would also enable me to work with the Citizen Voice Body straight after it is set up. My officials have already worked over a number of years with officers of the existing community health councils to impose these standards in accordance with the Welsh Language (Wales) Measure 2011. In my view a delay in bringing the Citizen's Voice Body under the standards could mean that this investment of money and staff time could be wasted; acting in accordance with this amendment could indeed save money and costs. Furthermore, it is also true to say that the proposed governance

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structures detailed in Schedule 1 of the Bill would enable more operating standards to be imposed on the new body than on the existing community health councils.

Section 2

2. Duty to secure quality - amendments 23, 29, 35 and 41

These amendments propose that the phrase 'the availability and accessibility of health services through the medium of Welsh' be added to the interpretation of what is meant by the quality of health services and that this applies to Welsh Ministers, Local Health Boards, NHS trusts and Special Health Authorities. In my response to your consultation on the Bill in July 2019 I asked the Committee to ensure that the failure to provide health services in Welsh is fully recognized as a matter of lack of quality of health services and that this is reflected in this Bill and related provisions. Most of the above bodies are required to comply with language duties arising from Welsh language standards and it is important that there is no duplication of effort in this field. This amendment however recognizes that providing a service in Welsh is a matter of quality. I would therefore urge you to support these amendments.

3. Guidance issued by Welsh Ministers in relation to the duties placed in sections 12A, 20A and 24A on Local Health Boards, NHS trusts and Special Health Authorities – amendments 4, 5, 6; 67 and 71

If guidance is issued by Welsh Ministers in relation to the quality duty they should include full consideration of the importance of providing services in Welsh as a matter of the quality of health services. I would urge Committee members to emphasize this need when considering these amendments whether amendments 23, 29, 35 and 41 are accepted or not.

Section 2 amendments in relation to staffing

4. Appropriate numbers (amendments 19, 25, 31 and 37)

These amendments deal with the appropriate number of staff that Welsh Ministers, Local Health Boards, Special Health Authorities and NHS Trusts should have to provide a particular type of health service given particular issues including the nature of the service, local context etc. I would urge you to consider including here the needs of Welsh speakers in the area in question as a matter to be considered when considering the appropriate numbers of staff. With this in mind, adding a clause such as the one in italics below to these improvements would suitable in this regard:

"appropriate numbers" means the appropriate number of staff for the provision of a particular kind of health service, having regard to—

- (a) the nature of the particular kind of health service,
- (b) the local context in which it is being provided,
- (c) the number of individuals being provided it,
- (d) the needs of individuals being provided it, and



- (e) appropriate clinical advice.'.
- (f) the needs of Welsh speakers where the health service is provided.

5. Staffing duty (amendments 24, 30, 36 a 42)

These amendments place a duty on the Welsh Ministers, Local Health Boards, Special Health Authorities and NHS Trusts to ensure that at all times suitably qualified and competent individuals, from such a range of professional disciplines as necessary, are working in appropriate numbers to ensure the health, well-being and safety of individuals receiving healthcare, to provide safe and high-quality services and to ensure the well-being of employees. Again at this point I believe that there is a need to ensure that there are sufficient numbers of Welsh speaking staff to provide services in Welsh. I would therefore propose that a clause such as the one in italics below is added to these amendments:

"staffing duty" means the duty of the to ensure that at all times suitably qualified and competent individuals, from such a range of professional disciplines as necessary, are working in appropriate numbers for—

- (a) the health, wellbeing and safety of individuals to whom health services are provided,
- (b) the provision of safe and high-quality health services,
- (c) the provision of health services through the medium of Welsh

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6. Duty of quality: ensuring appropriate number of registered healthcare staff (amendment 68) and duty of quality: real-time staffing assessment (amendment 69)

These amendments relate to ensuring that there are sufficient numbers of registered healthcare staff to ensure quality care. They are to some extent dependent on passing amendments 24, 30, 36, 42. Whether or not these amendments are accepted we ask you consider that the Bill should provide assurance that sufficient staff with Welsh language skills are trained in healthcare professions in Wales, and that information on the language skills of staff and within health services is taken into account in implementing the duties resulting from 25AA (1) and 25AB (1) as a result of the amendments.

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7. In the context of the improvements referred to in 4-6 above an amendment regarding a duty to ensure that a sufficient number of healthcare staff are able to provide services in Welsh in order to provide quality care would be a very positive step forward.

Section 4

7. Amendment 2

This amendment refers to guidance that Welsh Ministers must issue to bodies that the Citizen Voice Body can make representations it considers relevant to the provision of a health service or the provision of Social Services. These bodies are local authorities and NHS bodies. I would like to emphasise that these guidelines should consider the need to provide health and social services in Welsh.

I hope that these comments will be helpful as you consider the amendments to the Bill.

Yours sincerely

Aled Roberts

Welsh Language Commissioner