

Answers to the Written Assembly Questions for answer on 4 August 2010

[R] signifies that the Member has declared an interest.

[W] signifies that the question was tabled in Welsh.

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To ask the Minister for Environment, Sustainability and Housing

Mick Bates (Montgomeryshire): What criteria are used to determine whether to develop an area as a Strategic Regeneration Area. (WAQ56304) ***Transferred for answer by the Deputy Minister for Housing and Regeneration***

Answer issued on 06 August 2010

The Deputy Minister for Housing and Regeneration (Jocelyn Davies) In the ‘One Wales’ Agreement the Assembly Government makes commitments to:

- “establish integrated and cross-cutting initiatives aimed at economic development and regeneration, particularly in areas of high deprivation - the existing models of the Heads of the Valleys Programme and Môn a Menai will be exemplars”
- “adopt an all-Wales approach to economic development, guaranteeing investment in all regions of Wales, and working within the framework of the Wales Spatial Plan”.

Our budget is not open ended, and so we need to concentrate our investment so that we can make the most difference with the resources we have. Within this government’s term, we have decided to concentrate on seven Regeneration Areas. While there are clear boundaries to these areas, we are also willing to be flexible and consider projects located outside the boundaries where there is clear evidence that potential beneficiaries live within them.

Of course, these areas will change over time. Other communities will need support and we will need to redirect resources. It’s important that the process for deciding where we invest our resources is open and transparent. This is I am committed to setting out clear criteria for government to use to identify future Regeneration Areas. This is to ensure we are directing our resources to enable communities with the greatest need to prosper, to encourage strong local economies across Wales and to take advantage of opportunities so we make the most impact. We are currently working with our partners to agree the criteria, building on lessons learned from existing Regeneration Areas to inform future investment. It is hoped to publish these before the end of this year.

To ask the Minister for Health and Social Services

Andrew RT Davies (South Wales Central): Will the Minister list the dates when she met with the Food Standards Agency to discuss the implementation of the recommendations of the Pennington enquiry since January 2009. (WAQ56305) ***Transferred for answer by the Deputy Minister for Social Services***

Answer issued on 06 August 2010

The Deputy Minister for Social Services (Gwenda Thomas): I have ministerial portfolio responsibility for the Food Standards Agency (FSA) and met representatives of the FSA on 18 March 2009, 28 April 2009, 8 September 2009, 24 September 2009, 14 December 2009, and 14 June 2010. Discussions at these meetings included the implementation of Professor Pennington’s recommendations. The First Minister also met the FSA on 15 July 2010. Arrangements are in hand for me to meet the FSA again in September when I will seek an update on the implementation of the Pennington recommendations.

Nick Bourne (Mid and West Wales): What consideration has the Minister given to asking the Faith Communities in Wales to create a charitable trust to fund hospital chaplaincy and, if she has not, will she consider doing so. (WAQ56306)

Answer issued on 06 August 2010

NHS organisations in Wales are responsible for the planning and delivering of these services locally, in line with the standards I have now issued, and I am of the view that funding these services through the NHS is the best way of ensuring equality in their provision.

I would, of course, expect the NHS to identify the funding spent on these services and use it innovatively, working with partner organisations in developing them.

Helen Mary Jones (Llanelli): What progress has been made on implementing the Council of the European Union's Recommendation on an action in the field of rare diseases in Wales; and looking ahead, what action is the Minister taking to implement the Recommendation including the adoption of a plan or strategy for rare diseases. (WAQ56307)

Answer issued on 06 August 2010

Currently my officials are in contact with counterparts from the three other Departments of Health in the United Kingdom and also with Rare Disease UK, the leading third sector organisation in this field. The likely outcome will be a common linked approach across the United Kingdom which reflects the advice in the recommendation and draws on further work in progress at European level, while addressing the local issues in each of the four countries.

Chris Franks (South Wales Central): What discussions has the minister had regarding the abolition of the Health Promotion Agency. (WAQ56309)

Answer issued on 06 August 2010

I am aware of the Department of Health's review of Arm's Length Bodies including the proposal to transfer the Health Protection Agency into a new Public Health Service for England. My officials are in discussion with the Department of Health.

Veronica German (South Wales East): Will the Minister provide an update on steps taken on the One Wales commitment to 'pilot investment in new multi-purpose well-being centres'. (WAQ56310)

Veronica German (South Wales East): Will the Minister outline what actions have been taken on the One Wales commitment to 'ensure improved access to services including well-being centres and pharmacy based NHS drop-in centres'. (WAQ56311)

Answer issued on 06 August 2010

I have put in place a wide range of programmes to improve access to healthcare services across Wales. Pilot walk-in centres in Cardiff and Merthyr are being planned. Land for the Merthyr Health Park has been purchased and a planning application has been approved. I have recently approved the Outline Business Case and this approval includes authorisation to proceed with an extensive package of enabling works on the site. I also expect the Full Business Case to be presented by the LHB in December 2010 and for the main construction work to commence early in 2011. The scheme aims to be operational in January 2013. Enabling works on the Cardiff site have been completed. I expect completed plans for the early phases, including GMS and Integrated Sexual Health services by the end of 2010. Further plans for out-patient services are expected by August 2011. The first of these schemes is planned to be operational by December 2011.

Access to pharmacy services depends on two factors: the services being available and the pharmacies' locations. In 2008 I established a Task and Finish Group to review the provision of pharmacy services in

Wales. It has developed key recommendations to improve service availability and has now become an Implementation Group. A review will begin shortly to investigate and suggest changes with regard to the issues of geographical access.

Veronica German (South Wales East): Will the Minister outline what actions the Welsh Assembly Government has taken to 'increase the number of nurses qualified to prescribe medicines independently' as stated in the One Wales agreement. (WAQ56312)

Answer issued on 06 August 2010

In order to support the commitment made in One Wales, WAG has ensured that secondary legislation has been put in place to permit supplementary and independent non-medical prescribing and provided funding for a variety of training courses.

WAG's position is that when determining which professionals should be trained for this role, the decision must be based on service need and bring about demonstrable improvements to service delivery to patients.

In addition to the numbers of supplementary prescribers trained since 2003 and the fully independent prescribers trained since 2007/8, a further 148 practitioners commenced training in Sept/Oct 2009, with conversion courses being offered this year to those supplementary prescribers wishing to expand their roles.

In total over 500 places have been funded by WAG but it is not possible to state the exact numbers of prescribers as many will have been funded by organisations themselves and free movement across the Borders with England and Wales has blurred the picture.

Veronica German (South Wales East): Will the Minister outline which of those recommendations set out in the document titled 'Unscheduled care: developing a whole systems approach' by the Wales Audit Office, have been accepted. (WAQ56313)

Answer issued on 06 August 2010

I can confirm that all recommendations were accepted.

Kirsty Williams (Brecon and Radnorshire): Will the Minister detail (a) the amount of operations on the Aorta carried out in Wales in the last eight years, (b) the mortality rate of these operations and (c) the amount of Welsh patients who were successful in receiving funding for operations on the Aorta in Centres of Excellence in England during the last eight years. (WAQ56314)

Answer issued on 06 August 2010

(a) Information on operative procedures and hospital admissions by primary diagnosis are available at: <http://www.infoandstats.wales.nhs.uk/page.cfm?pid=41010&orgid=869>
Operative procedures on the Aorta are included in the Main Operations Summary table in the line labelled LB Aorta (L16-L28). Welsh residents with a primary diagnosis of I71 Aortic Aneurysm and dissection treated in NHS hospitals are included in the Principal Diagnosis (3 character detail) table.

(b) Operation mortality rates have not been calculated, but information on heart surgery survival across the UK, including aortic valve replacement operations, is available at <http://heartsurgery.cqc.org.uk/index.aspx>

(c) This information is not held centrally.

Kirsty Williams (Brecon and Radnorshire): Over the past eight years how many Welsh cardio-vascular patients were referred to Primary Care Trusts for funding to receive treatment in Centres of Excellence in England. (WAQ56315)

Answer issued on 06 August 2010

This information is not held centrally.

Kirsty Williams (Brecon and Radnorshire): Will the Minister detail the amount of Welsh patients who, over the past eight years, have (a) suffered an Aortic or Thoracic Aneurism and (b) received treatment in the UK, giving the mortality rate. (WAQ56316)

Answer issued on 06 August 2010

(a) Information on operative procedures and hospital admissions by primary diagnosis are available at: <http://www.infoandstats.wales.nhs.uk/page.cfm?pid=41010&orgid=869>

Operative procedures on the Aorta are included in the Main Operations Summary table in the line labelled LB Aorta (L16-L28). Welsh residents with a primary diagnosis of I71 Aortic Aneurysm and dissection treated in NHS hospitals are included in the Principal Diagnosis (3 character detail) table.

(b) Operation mortality rates have not been calculated, but information on heart surgery survival across the UK, including aortic valve replacement operations, is available at <http://heartsurgery.cqc.org.uk/index.aspx>

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To ask the Minister for Heritage

Eleanor Burnham (North Wales): Will the Minister confirm that it is his intention to establish a new "Festivals Fund" to provide alternative forms of financial assistance for events in Wales, including the Llangollen International Music Eisteddfod. (WAQ56308)

Answer issued on 19 August 2010

Funding for the arts in Wales is provided by the Arts Council of Wales, acting at arms-length from government; I do not intervene in those decisions. ACW, having conducted its funding review, intends to support eligible festivals from Lottery funding from the next financial year. Festivals will remain an area of ACW priority.

To ask the Minister for Rural Affairs

Lorraine Barrett (Cardiff South and Penarth): Will the Minister welcome the drop in Bovine TB in cattle for the first quarter of 2010, as indicated in the recent figures from DEFRA, and can she confirm whether this is due to the measures brought in to control cattle movement. (WAQ56301)

Answer issued on 24 August 2010

Any reduction in the number of cattle slaughtered because of bovine TB is of course welcome. It is however too early to say whether the stricter cattle controls, increased testing and our zero tolerance approach to not complying with regulations are making a difference yet.

Statistics need to be treated with caution, and while we monitor statistics monthly, figures need to be analysed over time to observe a trend. In 2006, the number of infected cattle dropped slightly but by 2008, the cases of bovine TB in cattle had increased by over 100%. In the first quarter of 2009 the number of cattle slaughtered because of bovine TB was 3705, while the numbers for 2008 and 2010 are similar, being 2418 and 2255 respectively (these figures are presented in WAQ56303).

As well as looking at general trends over time, underlying trends need to be analysed as well. For example, while the number of cattle slaughtered between 2008 and 2009 did fall, the number of bovine TB herd breakdowns hardly changed, falling by just 1.5%, from 1193 to 1175.

My officials are working to improve the value of our statistics. An important component of the TB Eradication Programme is improving the statistics we have available so that we can target the disease more accurately.

Lorraine Barrett (Cardiff South and Penarth): Will the Minister make a statement on figures from DEFRA for the first quarter of 2010 showing a 64 per cent drop of cattle slaughtered in Wales because of Bovine TB to 2,255, including a 49 drop in Dyfed. (WAQ56302)

Answer issued on 19 August 2010

In the first quarters of 2009 and 2010 the number of cattle slaughtered in Wales because of bovine TB was 3705 and 2255 respectively (these figures are presented in WAQ56303). This therefore represents a reduction of 39% (which differs from the figure of 64% that you have quoted).

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Lorraine Barrett (Cardiff South and Penarth): Will the Minister give figures for the number of cattle slaughtered in Wales because of Bovine TB for each quarter of 2008, 2009 and 2010. (WAQ56303)

Answer issued on 19 August 2010

The table below shows the published totals, by quarter, for the number of cattle slaughtered because of bovine TB in Wales for 2008, 2009 and 2010 (first quarter only). Figures for the second quarter of 2010 are not yet available.

Year	Quarter	Reactors*	Direct Contacts	TOTAL
2008	Jan-Mar	2,239	177	2,416

	Apr-Jun	2,847	341	3,188
	Jul-Sep	2,348	197	2,545
	Oct-Dec	3,338	556	3,894
2009	Jan-Mar	3,588	117	3,705
	Apr-Jun	2,484	84	2,568
	Jul-Sep	2,107	46	2,153
	Oct-Dec	1,938	69	2,007
2010	Jan-Mar	2,218	37	2,255

*A reactor is an animal that has failed a) the comparative intradermal tuberculin skin test (including those slaughtered as inconclusive reactors) or b) any other relevant test, including the gamma-interferon blood test.

Please note: The above information is extracted from the Animal Health database. All data is provisional and incomplete, subject to change as more data becomes available. When making year on year comparisons of bovine TB incidence, it is important that these are not made in isolation but in the context of the wider disease picture over a longer timeframe.