

Written Questions answered between 11 and 18 August 2005

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

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

Contents

[Questions to the Minister for Economic Development and Transport](#)

[Questions to the Finance Minister](#)

[Questions to the Minister for Health and Social Services](#)

Questions to the Minister for Economic Development and Transport

Irene James: What considerations have been given to introducing a staged opening of sections of the Ebbw Valley railway as each section is completed? (WAQ43943)

The Minister for Economic Development and Transport (Andrew Davies): No consideration has been given to a staged opening of the Ebbw Vale railway as it would be impractical to implement such arrangements without frequent timetable variations and causing significant additional costs.

Questions to the Finance Minister

Michael German: When will the research into the current business rates system in Wales be completed? (WAQ43938)

The Finance Minister (Sue Essex): The research into the current rate relief system in Wales is in its final stages.

Questions to the Minister for Health and Social Services

Jonathan Morgan: Would the Minister make a statement as to why patients eligible for beta interferon

and other disease modifying treatments for multiple sclerosis in south-east Wales are being told they cannot receive the treatment due to lack of funding? (WAQ43919)

Jonathan Morgan: Will the Minister confirm that patients fulfilling eligibility criteria for beta interferon and other disease modifying treatments in MS are able to receive the drugs without financial or area of residence restriction? (WAQ43920)

Jonathan Morgan: Would the Minister make a statement on the availability of beta interferon and other disease modifying treatments for patients in south-east Wales with multiple sclerosis? (WAQ43921)

The Minister for Health and Social Services (Brian Gibbons): The Welsh Assembly Government supports the provision of disease modifying therapies for multiple sclerosis under the MS risk sharing scheme. This scheme has been established in England and Wales in response to guidance issued by the National Institute of Clinical Excellence to evaluate the effectiveness of those therapies. The Assembly has put arrangements in place to help ensure that people with MS, who meet the clinical criteria for eligibility for treatment under the scheme, can be provided with disease modifying drugs, including beta interferon. The criterion has been developed by the Association of British Neurologists.

Arrangements have been made with three specialist centres to help support the provision of disease modifying therapies for MS at Cardiff, Swansea, and the Walton Centre for north Wales patients. Over £2.5 million has been invested in these services across Wales for the financial year 2005-06 and caseloads are being managed within allocated resources.

I understand that there is a considerable demand for the disease modifying therapies at all three centres. In terms of the south-east Wales region, I am aware that the Cardiff and Vale NHS Trust has experienced such demand that it has reached maximum capacity. My officials at Health Commission Wales have been in discussion with the trust to help resolve these difficulties. Any further investment in this service has to be considered against the competing needs of a full range of specialist services and difficult choices have to be made.

Rhodri Glyn Thomas: What rules are in place to prevent, or limit, the recruitment of NHS staff by the private sector? (WAQ43922)

Brian Gibbons: There are no rules in place to prevent or limit the recruitment of NHS staff by the private sector. NHS staff are free to apply for any post they wish either within or outside NHS Wales.

The latest Welsh Assembly Government figures show that at 30 September 2004 there were 90,708 staff employed by NHS Wales. This is an increase of 22,085 from 30 September 1997. Vacancies in nearly all staff groups have reduced, and a number of NHS trusts undertake exit interviews to gather information to inform their recruitment and retention practices.

The Welsh Assembly Government has put in place a recruitment and retention strategy for NHS Wales, and NHS trusts and local health boards have developed local initiatives to support this strategy.

Rhodri Glyn Thomas: What intention does the Minister have to review existing regulations and national minimum standards with regard to adult placement schemes in Wales, and will he provide a timetable, and detail any representations received, or discussions held on this matter? (WAQ43923)

Brian Gibbons: I have already announced that such a review will be undertaken during 2006 but the precise timetable has yet to be determined. It would be appropriate for the Care Standards Inspectorate for Wales to have completed the registration of the adult placement schemes and undertaken a first round of inspections before commencing the review. This work should be completed by March 2006.

The National Association of Adult Placement Services Cymru wrote to me in July raising a number of matters about the existing arrangements. Officials will be meeting with NAAPS in early September to discuss these matters, the scope of the review and its timetable.

Rhodri Glyn Thomas: Will the Minister make a statement on the secondment of the chief executive of the Royal Orthopaedic Hospital NHS Trust and her duties and responsibilities? (WAQ43924)

Brian Gibbons: Christine Miles has been seconded from the Royal Orthopaedic Hospital NHS Trust for six months through the National Leadership and Innovations agency in Wales to work with the Welsh Assembly Government Department of Health and Social Care and the NHS in Wales on two pieces of work, namely the implementation of the waiting times strategy and the development of performance management through the creation of a delivery and support unit to provide support for health organisations

Rhodri Glyn Thomas: Will the Minister make a statement on when he became aware of the Audit Commission's report regarding the chief executive of the Royal Orthopaedic Hospital NHS Trust? (WAQ43925)

Rhodri Glyn Thomas: Will the Minister make a statement on whether the Audit Commission's report regarding the chief executive of the Royal Orthopaedic Hospital NHS Trust has any implications for her current duties on behalf of the Welsh Assembly Government? (WAQ43940)

Brian Gibbons: Ms Miles has been seconded to work in Wales for six months on the duties described

under question WAQ43924. She commenced that secondment on 30 March 2005.

My officials were made aware during May 2005 that there was an investigation by the Audit Commission and they have been in communication with the trust. Assurances were received that the matter under investigation would not impact on Ms Miles's work in Wales. The trust board received the report from the Audit Commission on 1 July at which time I was advised formally of the situation. It is now for the trust board to decide how this particular report is managed.

My officials are continuing to monitor the situation and have been reassured subsequently by the chair and the board of the trust that that the outcome of this report and the subsequent action of the board will not impact upon Ms Miles's current work in Wales.

Jenny Randerson: With regard to the new delivery and support unit, will the Minister state: a) the total budget of the unit; b) the breakdown of the budget including staff and running costs; and c) the total number of staff due to be employed at the unit? (WAQ43926)

Brian Gibbons: The delivery and support unit is being established to assist NHS trusts and local health boards in Wales to consistently achieve national priorities and to embed a culture of performance and delivery throughout NHS Wales. Although the framework for the unit has been agreed the number of staff and the budgetary requirements are yet to be finalised.

Jenny Randerson: How much funding is the Minister intending to allocate from his budget for the implementation of the national service framework in children's services to be launched this autumn in: a) the current financial year; b) 2006-07; and c) 2007-08? (WAQ43927)

Brian Gibbons: The national service framework for children, young people and maternity services is a 10-year programme. The need for future funding will be determined through the application of the self assessment audit tool, which has been developed to support the management and monitoring locally of the children's NSF and to evidence deficits in meeting the standards and key actions. Evidence from the use of the tool was not available to support bids in the latest budget planning round and no specific resources have been allocated to the NSF at this stage. However, many of the Assembly's currently funded programmes and policies will contribute to implementing the NSF, for example the Children First programme, the Cymorth programme and health promotion activity and the food and fitness policy.

Laura Anne Jones: Would the Minister provide figures on the number of current vacancies for trained nurses in hospitals in Gwent? (WAQ43928)

Brian Gibbons: The latest available data are at 31 March 2005 and can be found on StatsWales at:

<http://www.statswales.wales.gov.uk/ReportFolders/ReportFolders.aspx>

Lisa Francis: How much money has the Welsh Assembly Government set aside to enhance and develop GP services: a) in Wales; and b) in each of the 22 LHB areas? (WAQ43929)

Brian Gibbons: The Welsh Assembly Government has allocated £24.3 million to local health boards in 2005-06 for the provision of enhanced services under the nGMS contract. The table below shows the allocation of this funding to individual local health boards.

Enhanced Services Allocation 2005-06

Local Health Board	£ million
Caerphilly	1.361
Blaenau Gwent	0.683
Torfaen	0.676
Monmouthshire	0.722
Newport	1.052
Vale of Glamorgan	0.882
Rhondda Cynon Taf	2.024
Merthyr Tydfil	0.539
Cardiff	2.301
South-east Wales Region	10.240
Powys	1.205
Ceredigion	0.851

Pembrokeshire	1.042
Carmarthenshire	1.528
Swansea	1.818
Neath Port Talbot	0.999
Bridgend	1.047
Mid and West Wales Region	8.490
Anglesey	0.598
Gwynedd	1.132
Conwy	0.931
Denbighshire	0.843
Flintshire	1.089
Wrexham	0.977
North Wales Region	5.570
Total	24.300

Lisa Francis: Of the 88 per cent of patients from the southern Meirionnydd area who were discharged from Bronglais General Hospital, how many could not be discharged to Tywyn Memorial Hospital as a result of a lack of beds in Tywyn? (WAQ43930)

Brian Gibbons: The decision to discharge patients to their usual place of residence would have been made on clinical and/or social care grounds. A total of 86.6 per cent of Bronglais hospital patients were successfully transferred to their usual place of residence in Gwynedd.

Patients who could not be transferred to Tywyn Community Hospital due to bed shortages are classified as delayed transfers of care. Of the 7.7 per cent—61 patients—who were transferred to Tywyn Community Hospital during 2004-05, one patient was identified as a health-related delayed transfer of

care.

Lisa Francis: How much money will be allocated specifically to enhance and develop GP services in Tywyn? (WAQ43931)

Brian Gibbons: The Welsh Assembly Government allocated £1.132 million to Gwynedd Local Health Board in 2005-06 for the provision of enhanced services under the nGMS contract. It is for Gwynedd Local Health Board to determine what element of that funding is allocated to enhance and develop GP services in Tywyn.

Lisa Francis: Will any more specialised posts be created in Tywyn Community Hospital as a result of implementing option B (primary care resource centre model—no in-patient beds)? (WAQ43932)

Brian Gibbons: Option B proposes that community-based specialised services be created in Tywyn to avoid unnecessary hospital admission. The new rapid response team would be a specialist team, and would consist of nursing and allied health professionals—physiotherapist, social worker, and so on. Healthcare staff would be responsible for delivering specialist care for chronic disease conditions and also palliative care.

Lisa Francis: In respect of the future of Tywyn Community Hospital, has the Minister made any assessment on what will happen to the number of health professional posts at Tywyn Community Hospital, should Gwynedd Local Health Board decide on option B (primary care resource centre model—no in-patient beds)? (WAQ43933)

Brian Gibbons: It is the policy of North West Wales NHS Trust to provide, as far as is possible, continued employment of existing permanent healthcare professional staff and to do everything possible to avoid having to make such staff compulsorily redundant. The trust is committed to ensuring affected staff will be transferred to alternative posts on existing grades. This is supported by Gwynedd Local Health Board, and full consultation with staff will be maintained by the trust during all stages of this work.

Glyn Davies: What plans are there to introduce home-test kits for bowel cancer for all over 60s as part of a screening programme in Wales? (WAQ43934)

Glyn Davies: What would be the cost of extending the home-test kits for bowel cancer for all over 50s in Wales? (WAQ43935)

Glyn Davies: What would be the cost of extending the home-test kits for bowel cancer for all over 60s as in England? (WAQ43936)

Brian Gibbons: As part of its work programme for 2005-06, the Welsh Assembly Government commissioned the cancer services co-ordinating group to develop a framework for bowel cancer which incorporates not only screening but prevention, symptom awareness, diagnosis, outcomes and treatment.

The cancer services co-ordinating group has recently submitted its draft bowel cancer framework to the Welsh Assembly Government for consideration. All aspects of this framework including the screening element will be subject to a consultation exercise. Until that exercise has been completed no decisions will be made on what format the screening programme will take and ultimately any final decisions to screen nationally for bowel cancer will be taken in the light of recommendations from the national screening committee.

Michael German: When will the review of the Townsend formula be completed and when will the new formula be put into action? (WAQ43937)

Brian Gibbons: Professor Townsend is completing his final progress report on the direct needs model, which is due to be published in the early autumn of 2005. The report will identify areas where further refinement and development of the direct needs model is appropriate, and will recommend a mechanism for taking this forward. It is unlikely that any significant amendments will be made to the existing hospital and community health services model for the 2006-07 local health board allocations, which are planned to be issued in November 2005.

However, work has been undertaken by a task and finish group on the refinement of the prescribing allocation model, and a revised model is currently being consulted on with key NHS and other stakeholders. Subject to the outcome of that consultation, it is proposed to commence implementation of the prescribing model in 2006-07.

Irene James: Will the Minister make a statement about screening for bowel cancer in Wales and any plans to roll out a programme of screening similar to those being implemented in England? (WAQ43942)

Brian Gibbons: As part of the work programme for 2005-06, the Welsh Assembly Government commissioned the cancer services co-ordinating group to develop a framework for bowel cancer which incorporates not only screening but prevention, symptom awareness, diagnosis, outcomes and treatment.

The cancer services co-ordinating group has recently submitted its draft bowel cancer framework to the Welsh Assembly Government for consideration. All aspects of this framework including the screening element will be subject to a consultation exercise. Until that exercise has been completed no decisions will be made on what format the screening programme will take and ultimately any final decisions to screen nationally for bowel cancer will be taken in the light of recommendations from the national screening committee.

Nick Bourne: Will the Minister make a statement on the vitreol retinal service in south Wales and what measures are in place to ensure effective weekend cover for patients in danger of losing their sight? (WAQ43950)

Brian Gibbons: It is for each local health board to commission appropriate services for the areas they cover. That includes emergency services which can sometimes take the patient outside their normal catchment area. Treatment in either Bristol or Moorfields is available for south Wales residents requiring emergency vitreol retinal services at weekends.