



**PWYLLGOR ADNODDAU CYNALIADWY
SUSTAINABLE RESOURCES COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	25 June 2024
TEITL YR ADRODDIAD: TITLE OF REPORT:	Monitoring of Ministerial Directions
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Huw Thomas, Director of Finance Jill Paterson, Director of Primary Care, Community and Long Term Care Andrew Carruthers, Director of Operations
SWYDDOG ADRODD: REPORTING OFFICER:	Rachel Williams, Head of Assurance and Risk

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

The purpose of this report is to provide the Sustainable Resources Committee (SRC) with a status update and assurance that all NHS Non-Statutory Instruments, otherwise known as Ministerial Directions (MD), received from Welsh Government (WG) have been implemented/adopted by Hywel Dda University Health Board (HDdUHB).

Cefndir / Background

Acts of Parliament, Acts of Senedd Cymru, Assembly Measures and Assembly Acts enable Welsh Ministers to develop more detailed legislation, known as secondary or subordinate legislation, usually by means of Statutory Instruments (SI).

Non-Statutory Instruments (NSI) are legislative in character; they alter legal rights and duties, however they are not SIs. NSIs, which are issued by Welsh Ministers, include codes of practice and guidance.

In complying with the requirements of various governance codes and the Annual Governance Statement requirements, HDdUHB has a duty to provide assurance of compliance with the NSIs.

During the review of the Annual Governance Statement, the Audit and Risk Assurance Committee (ARAC) requested that the internal assurance process regarding the adoption of and actions in response to, these requirements be strengthened. As MDs potentially form part of the process of approving expenditure of public money, the Sustainable Resources Committee will receive regular assurance reports on compliance.

Asesiad / Assessment

The table attached at Appendix 1 details the MDs relating to the National Health Service issued between 1 February 2024 and 31 May 2024, as well as MDs issued previously which are still in the process of being implemented. Appendix 1 provides details that all MDs have either been implemented/adopted by HDdUHB in this timeframe or are in the process of being implemented.

The following BRAG status is now applied to MDs:

- **Green** = completed
- **Amber** = a plan is in place and on schedule to be completed by the timescale provided by the Lead Officer
- **Red** = behind schedule to the timescale provided by the Lead officer, or a plan (with date for implementation) is not yet in place
- **Blue** = External i.e., the means to achieve compliance is currently outside the gift of the Health Board

Since the previous report to SRC, the following WHCs have been confirmed as implemented:

Direction Number	Name of Direction	Lead Director	Update
2023. No 47	The National Health Service (Wales Eye Care Services) (Wales) Directions 2023	Director of Primary Care, Community and Long Term Care	Confirmation received from the Director of Primary Care, Community and Long Term Care that the legal direction supports the Optometric Contract in Wales, and is complied with.
2024. No 02	The National Health Service (Wales Eye Care Services) (Wales) Directions 2024	Director of Primary Care, Community and Long Term Care	Confirmation received from the Director of Primary Care, Community and Long Term Care that the legal direction supports the Optometric Contract in Wales, and is complied with.
2024. No 17	The Managed Introduction of New Medicines Into The NHS in Wales Directions 2009 (Amendment)(Wales) Directions 2024	Director of Primary Care, Community and Long Term Care	The Ministerial Direction allows flexibility around the 60 day implementation target for the New Treatment Fund (NTF) when dates set either by NICE or Welsh Governments (WG). The report was received at the Medicines Management Operational Group (MMOG) on 21 May 2024, who endorsed the Ministerial Direction, and the Managed Entry of New Drugs (MEND) process has been updated accordingly. As such, the Ministerial Direction is noted to be complied with, and fully implemented.

An update from each Supporting Officer, in respect of the open MDs that fall under the remit of SRC, is attached at Appendix 1.

Argymhelliad / Recommendation

The Sustainable Resources Committee is requested to **RECEIVE ASSURANCE** that HDdUHB is compliant with the NSIs (MDs) issued by WG between 1 February 2024 and 31 May 2024.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.12 Seek assurances on the requirements arising from the Health Board's regulators, Welsh Government and professional bodies.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Contained within Appendix 1 if applicable
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	6. All Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	All Planning Objectives Apply
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	10. Not Applicable

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Ministerial Directions
Rhestr Termiau: Glossary of Terms:	Incorporated within the main body of the report

Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Adnoddau Cynaliadwy: Parties / Committees consulted prior to Sustainable Resources Committee:	Relevant Lead Executives/Lead Directors or Supporting Officers.
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Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Non-statutory Instruments are legal tools which often have a financial impact on the organisation.
Ansawdd / Gofal Claf: Quality / Patient Care:	Non-statutory Instruments are legal tools which can impact patient care
Gweithlu: Workforce:	Not applicable
Risg: Risk:	Non-Statutory Instruments are legislative in character, they alter legal rights and duties and must be implemented by the Health Board.
Cyfreithiol: Legal:	Non implementation of Non-Statutory Instruments may result in the Health Board being less likely to defend itself in a legal challenge which could lead to fines/ penalties and damage to reputation.
Enw Da: Reputational:	Non implementation of Non-Statutory Instruments may result in the Health Board being less likely to defend itself in a legal challenge which could lead to fines/ penalties and damage to reputation.
Gyfrinachedd: Privacy:	Not applicable
Cydraddoldeb: Equality:	Not applicable

Appendix 1

Direction Number	Name of Direction	Date Issued	Lead Director	Description	Progress on Implementation	RAG Status	HDdUHB implementation date
2021. No 59	The Directions to Local Health Boards and NHS Trusts in Wales on the Delivery of Autism Services 2021	26/07/21	Director of Operations	Directions to Local Health Boards and NHS Trusts on autism services for 2021. Each Local Health Board and each NHS Trust must exercise its functions in accordance with the relevant provisions of the Code of Practice on the Delivery of Autism Services, which was issued by the Welsh Ministers on 16 July 2021, and which came into force on 1 September 2021.	<p>The Health Board continues to work with the Regional Partnership Board (RPB) in the development and delivery of the Code of Practice Implementation Plan which requires a multi-agency response to address the recommendations outlined in the Code.</p> <p>The Health Board continues to work in collaboration with partner agencies in the delivery of the 3 year Improvement Plan with a focus on achieving the 3 priority areas of:</p> <ul style="list-style-type: none"> - Improving urgent need and family support - Building sustainable services - Cross cutting themes to focus on workforce, digital, data and monitoring <p>WG commissioned an independent evaluation of the Code of Practice for 2023 to identify the current position of all services in respect of the code, identify what data is collated, and to identify barriers and enablers to implementation, and identify recommendations for improvements in meeting the duties of the Code. Following this there is now a regional action plan in place which is monitored via the RPB and includes Local Authorities (LA) as well as the Health Board.</p>	Amber	Oct-25

				<p>WG has made £12million available as part of a 3 year Improvement Plan.</p> <p>There are now the NHS Executive Recommendations for Children and Young People (CYP) in respect of Neurodevelopmental (ND) services (Autism Spectrum Disorder (ASD) / Attention Deficit Hyperactivity Disorder (ADHD)), which the service have developed an integrated Plan for, and will be working to implement jointly across ND services and Child Health. Focus is on strengthening joint working and pathways. A series of task and finish groups have been established to strengthen links and increase alignment with Children and Adolescent Mental Health Service (CAMHS) and Children's ASD services, and to strengthen transition arrangements from children's to adult neuro-developmental services. This is in addition to the existing task and finish group to develop a 3 county, multiagency approach to offering early help and support.</p> <p>In relation to timely assessment of autism, referral rates remain exponentially high. However, dedicated premises have now been identified for children and adult ASD Services, with some clinical space which will help to increase capacity. The procurement exercise to outsource a number of diagnostic assessments to external providers is progressing well. In</p>	
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					<p>addition to the 728 assessments for CYP and adults outsourced between 2022-2025, an additional 86 assessments (66 children and 20 adults) assessments were procured during Q4 of 2023/24 using Regional Integration Fund (RIF) and Neurodivergent Improvement Programme (NDIP) slippage monies.</p> <p>It is noted that the Directorate has a corporate risk relating to the timely diagnosis and treatment of Mental Health and Learning Disability (MHL) clients due to demand and capacity, with specific actions relating to ADHD and ASD, which has a current risk score of 20 at May 2024 (risk reference 1032).</p> <p>There is also a directorate level risk (1287 - Risk of clients not being provided with timely interventions due to waiting lists for assessment & diagnosis of ASD, current risk score 20) on the MHL risk register in relation to this MD.</p>		
2023. No 08	Local health boards and NHS Trusts reporting on the introduction of new medicines into the National Health Service in Wales Directions 2023	24/03/23	Director of Primary Care, Community and Long Term Care	Directions regarding the Implementation of the high-cost drugs reporting system.	Implementation of this MD is aligned to the Welsh Health Circular 032-22 (Further extending the use of Blueteq in secondary care). The national roll out of Blueteq will be managed by the All-Wales Blueteq Steering Group, with management support from All Wales Therapeutics & Toxicology Centre on behalf of WG.	External	Apr-24 N/K

					<p>The Welsh Health Specialised Services Committee (WHSSC) Data Protection Impact Assessment (DPIA) and Cyber Security Impact Assessments have been approved at National level, and have been sent to the Health Board Information Governance team for local approval.</p> <p>The Health Board has representation on the Blueteq Steering Group, with National drug approval templates being developed on a Once for Wales approach. Implementation of Blueteq is heavily dependent on the development of these templates for each speciality, so implementation dates are not currently known.</p>		
2023. No 14	Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 2) Directions 2023	30/08/23	Director of Finance	Directions relating to the payments to be made by Local Health Boards to a GMS contractor under a GMS contract	The Health Board will compile a report regarding General Medical Services (GMS) practices compliance with standards for Practice Access, which will inform the payment required to be made to GMS contractors, scheduled for June 2024.	Amber	Jun-24
2023. No 27	The Primary Care (E-Prescribing Pilot Scheme) Directions 2023	01/06/23	Director of Primary Care, Community and Long Term Care	Directions to local health boards as to the Primary Care EPS (E-Prescribing Pilot Scheme) Directions 2023.	This Ministerial Direction came into force on 1 June 2023. Digital Health Care Wales (DHCW), who has overall responsibility for implementation, is leading the programme. DHCW has set up an advisory group that is attended by Hywel Dda representatives. Due to these factors, it was agreed by Medicines	External	Oct-23 N/K

					<p>Management Operational Group (MMOG) to amend the status of this MD to “External”. To date, EPS has gone live in the first GP practice and community pharmacy in Rhyl in November 2023, with the second site due to go live in March 2024 within Betsi Cadwaladr University Health Board.</p> <p>GP practices within Hywel Dda are not yet compliant with the new EPS system, therefore rollout is unlikely to commence prior to quarter 3 of financial year 2024/25.</p> <p>In addition, following a mini-procurement exercise, some GP practices within the HDdUHB area have opted to switch from their existing systems to the Egton Medical Information Systems (EMIS). It is currently not known if these changes will impact on the EPS implementation timescale for Hywel Dda.</p> <p>The existing system supplier have also announced that they are pulling out of Wales and therefore these GP practice will be required to find new system suppliers.</p> <p>The service has a directorate level risk on their risk register of avoidable medication related patient harm due to no e-prescribing and electronic medication administration system, which as of May 2024 has a current risk score of 16.</p>		
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