Abstract
This paper updates Research Paper 03/094 and provides briefing on the structure of the NHS in Wales following the restructuring in 2003, and further reforms announced by the First Minister in 2004.

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The NHS in Wales: Structures and Services (update)

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The NHS in Wales: Structures and services

Coverage

This paper provides an outline of the main NHS bodies operating in Wales at April 2005.

1 Introduction

The National Health Service in Wales provides a comprehensive healthcare service which, for the most part, is free at the point of use. It is Wales' largest employer, with more than 70,000 staff and in 2005-06 will receive revenue funding of £3.8 billion.1

Health services are usually categorised into primary, secondary, and tertiary care.

♦ Primary care – family doctors (GPs), opticians, dentists, pharmacists, and other healthcare professionals. There are almost 1,900 family doctors in Wales and around 1,000 dentists2. Family doctors are the 'gateway' to the NHS, referring people to hospitals or specialist treatment where necessary. Other health care staff working in the community include health visitors, midwives, community nurses, physiotherapists, occupational and speech therapists, and practice nurses.

♦ Secondary care – hospitals and ambulance services. These are provided by fourteen NHS Trusts in Wales, including one all-Wales Ambulance Service Trust. Between them, the Trusts manage 135 hospitals and some 15,000 beds.

♦ Tertiary care – specialised care provided at some of the larger hospitals or through specialist hospitals treating particular types of illness such as cancer.

In addition, the NHS provides specialist services such as screening services that support medical diagnosis and treatment and disease prevention.

Community care aims to help vulnerable people, such as older or disabled people lead independent lives in the community, and is provided through partnership arrangements by the NHS, local social services and voluntary and private organisations.

2 Statistics Wales website.
2 Recent reforms of the NHS in Wales

2.1 NHS reforms in Wales up to April 2003

On 1 April 2003 the NHS in Wales underwent a major restructuring. A number of new NHS bodies, most importantly Local Health Boards (LHBs), were created and some others were abolished. This section describes the changes that took place and outlines the role of the new bodies. Contact details for the main health bodies in Wales are provided in Annexes A, C & E.

2.2 Main features of the 2003 NHS organisational reforms

Changes that took effect from April 2003:

♦ Creation of 22 Local Health Boards coterminous with local authority boundaries, and abolition of the five former Welsh Health Authorities. This changed the way community and most secondary healthcare services are commissioned, and was intended to bring more joint working with local authorities and other bodies through the preparation of statutory Health, Social Care and Well Being Strategies.

♦ Powys Healthcare Trust merged with Powys Local Health Board.

♦ Health Commission Wales (Specialist Services) was created as an executive agency of the Welsh Assembly Government to commission specialist services on a Wales-wide basis.

♦ The Business Services Centre, managed by Powys Local Health Board, was set up to provide support services to Local Health Boards and other parts of the NHS across Wales.

♦ The Public Health Laboratory Service in Wales was restructured as a new public health body, the National Public Health Service for Wales.

♦ The NHS Wales Department was restructured to include three Regional Offices in North, South East and Mid & West Wales with the aim of strengthening the department’s local presence and facilitate planning and development.

In addition, the Health (Wales) Act 2003 provided the primary legislative framework for the Assembly to take forward further organisational change through secondary legislation. This provided:

♦ New responsibilities for Community Health Councils, including a duty to provide independent complaints advocacy services.

♦ Establishment of Health Professions Wales and the Wales Centre for Health as independent statutory bodies with funding from the Assembly. (Both these organisations were set up in preliminary form in 2002. Most of the functions of Health Professions Wales will be transferred to the Workforce Development Unit of the National Leadership And Innovations Agency for Healthcare - see paragraph 7.6)
below) from April 2006, with supervision of midwives likely to transfer to the Wales Centre for Health.

♦ The Health and Social Care (Community Health and Standards) Act 2003, created two new bodies to undertake healthcare audit and inspection work from 2004 - the Commission for Healthcare Audit and Inspection (CHAI) and a new Healthcare Inspectorate Wales (HIW).

2.3 Background to the 2003 NHS reforms

Following the 1997 general election, the government announced its intention to reform the NHS and dismantle the ‘internal market’ created by the National Health Service and Community Care Act 1990. This led to the establishment in Wales in 1999 of 22 Local Health Groups (LHGs) with boundaries coterminous with local authorities. Local Health Groups were essentially committees of health authorities, influencing their commissioning of secondary health services, although the intention was that they would eventually develop into independent organisations. Some LHGs later took direct commissioning decisions but health authorities retained legal and financial responsibility. Local Health Groups contributed to the health service in three main areas:

♦ Developing Health Improvement Programmes.
♦ Developing clinical governance in primary healthcare.
♦ Informing the commissioning of hospital and community services.

In 1999, responsibility for health policy in Wales was devolved to the National Assembly for Wales under the Government of Wales Act 1998. In February 2001 the Welsh Assembly Government published Improving Health in Wales: A Plan for the NHS with its Partners which outlined proposed health structures for Wales. Improving Health in Wales proposed the abolition of the five existing Welsh Health Authorities and the establishment of 22 Local Health Boards (LHBs) to undertake many of the commissioning and providing functions of the Health Authorities. An NHS Plan Steering Group and a number of Task and Finish Groups were established to ensure that the new arrangements were in place by 1 April 2003.

Local Health Boards are statutory bodies and have taken over many of the roles of the former health authorities and their Local Health Groups. The Welsh Assembly Government has direct responsibility for overseeing the new LHBs and the existing fourteen NHS Trusts, which remain the principal providers of secondary and community health services. The stated aims of the reforms were to provide:

♦ Greater simplicity for patients
♦ Enhanced and strengthened primary care
♦ Closer working between NHS organisations and local government
♦ More accountability
♦ A stronger democratic voice in the provision of health services

These reforms of the NHS in Wales were enacted through two pieces of legislation: The National Health Service Reform and Health Care Professions Act 2002 and the Health
(Wales) Act 2003. The Health and Social Care (Community Health and Standards) Act 2003 included provisions for further reform of healthcare audit and inspection arrangements. Its main provisions related to the establishment of Foundation Hospitals, which do not apply in Wales.

2.4 Reforms announced by the First Minister on 30 November 2004

On 30 November 2004, the First Minister Rt Hon Rhodri Morgan AM announced the following changes to the structure of the NHS in Wales. These reforms are also outlined in greater detail in section 7 below:

♦ The functions of Health Professions Wales are to be transferred to the Workforce Development Unit of the National Leadership And Innovations Agency for Healthcare by April 2006.

♦ The establishment of the Welsh Centre for Health will proceed as planned but there will be consultation with a view to transferring onto it the work of some nine health advisory bodies which are currently classified as ASPBs and which provide professional scientific and medical advice.

♦ Following the successful Pathfinder piloting project at Powys LHB (see paragraph 3.2 below), NHS Trusts and LHBs will be invited to put forward proposals for integration of their services where there is co-terminosity and where clear benefits can be delivered to patients.

♦ Proposals will also be invited from LHBs in partnership with local NHS Trusts for taking responsibility for elements of community health services.
3 The NHS in Wales: Commissioners and providers of healthcare services

3.1 Local Health Boards

At the core of the 2003 reforms was the abolition of the five former Welsh Health Authorities and the creation of 22 LHBs, coterminous with the 22 Welsh unitary local authorities. Local Health Boards are statutory bodies established under the NHS Reform and Healthcare Professionals Act 2002. They decide what services are needed for their local communities and ensure that these are provided. These include family health, community health and hospital services. Services that are too specialised to be dealt with locally continue to be organised on an all-Wales basis (see Health Commission Wales (Specialist Services) paragraph 3.2.3 below). LHBs are expected to work closely with local government and the voluntary sector to improve co-ordination between health and social services.

3.1.1 Structure of LHBs

Each LHB has its own board and management team and receives funding directly from the National Assembly for Wales, to which it is accountable. Membership of Local Health Boards comprises a chairperson, four officers and up to 17 non-officer members including representatives from the main health professions, the local authority, voluntary sector and a lay representative and carer. Four associate members have speaking but not voting rights. Further details of the membership of LHBs can be found in Annex B.

3.1.2 Key roles of LHBs

Commissioning health services

Local Health Boards have a statutory responsibility for funding primary care services, and commissioning community health, mental health, and secondary care services for their local populations. Primary care services differ from those commissioned in that most primary care professionals are self-employed and provide NHS services through a contractual arrangement with their LHB, administered by the Business Services Centre.

Local Health Board commissioning plans are set out in an Annual Service and Commissioning Plan and are expected to be informed by the Health, Social Care and Well Being Strategy formulated by LHBs, local authorities and their partners. In developing and implementing the Annual Service and Commissioning Plan, LHBs are expected to work closely with NHS Trusts, the National Public Health Service for Wales, Health Commission Wales (Specialist Services), local authorities and the voluntary and private sectors.

Primary Care and Community Health services are arranged locally by LHBs but the commissioning of secondary care services is co-ordinated by Secondary Care Commissioning Groups. These comprise LHBs, NHS Trusts, local authorities and possibly representatives from the voluntary and private sectors. There are a number of configurations across Wales, each designed to meet local needs.

Securing primary and community health care services

Primary and Community Healthcare Services include GP services, opticians, dentistry, district nursing, chiropody, health visiting. Local Health Boards are responsible for the
Members’ Research Service: Enquiry
Gwasanaeth Ymchwil yr Aelodau: Ymholiad

development of primary care in line with the Welsh Assembly Government’s Primary Care Strategy.\(^3\)

Securing secondary (i.e. hospital) health care services

Local Health Boards are the principal bodies to which resources for the commissioning of healthcare are delegated and they secure secondary services for their populations through ‘Long Term Agreements’ with NHS Trusts and other providers.

Improving the health of communities

Local Health Boards have a joint responsibility with local authorities and others to improve the health of their local populations and ensure co-ordinated services through their statutory responsibility to develop joint Health, Social Care and Well Being Strategies. This includes:

♦ Assessing local health needs and developing the Health, Social Care and Well Being Strategy based on this assessment.

♦ Planning and delivering community health development with local authorities and other partners.

♦ Taking responsibility for statutory public health functions.

♦ Working closely with Trusts to improve the health of local populations through, for example, health promotion.

Partnerships

LHBs are formally engaged in two distinct forms of local partnership:

♦ Jointly developing a Health, Social Care and Well Being Strategy with local authorities and other parties.

♦ Developing effective commissioning arrangements through working with Trusts, local authorities and, in the case of specialised acute services, with Health Commission Wales (Specialist Services).

Public Engagement

The development of Health, Social Care and Well Being Strategies with local authorities necessitates the engagement of the public and other public and voluntary bodies in planning and monitoring the provision and quality of services. LHBs also have an important role in public consultation on proposed significant service changes in their area.

Corporate and clinical governance

LHBs must meet the standards of regularity and probity, and value for money expected of statutory public bodies and must maintain clinical standards.

\(^3\) WHC(2002) 102 The Future of Primary Care - An Action Plan for Primary Care in Wales.
Statutory Instruments setting out the structure and roles of LHBs were passed by the National Assembly for Wales in January 2003 (References nos: 2003, No. 148 (W.18), 2003, No. 149 (W.19), 2003, No. 150 (W.20) and can be found at: http://www.wales-legislation.hmso.gov.uk/legislation/wales/w-2003.htm.

3.2 Powys Local Health Board

In Powys, the NHS Trust (which ran a number of community hospitals but had no major acute hospital) was dissolved and its services incorporated into the new Powys Local Health Board in April 2003. Powys Local Health Board therefore has responsibility for providing community healthcare services in addition to securing primary care and secondary care services as undertaken by other LHBs. Powys LHB was designated a Pathfinder project to test the effectiveness of this method of providing community healthcare, and as detailed in paragraph 2.4, plans are now being made to use this model of provision in other parts of Wales.

These additional powers were conferred on Powys Local Health Board by Statutory Instrument (no. 815) passed by the National Assembly for Wales in March 2003, which can be viewed at: http://www.wales-legislation.hmso.gov.uk/legislation/wales/wsi2003/20030815e.htm

3.2.1 New General Medical Service (GMS) contract

The new GMS contract is the product of negotiations between the four UK health departments,4 the British Medical Association's General Practitioners Committee (GPC), and the NHS confederation, which is being implemented in Wales from April 2004. The newly negotiated GMS contract aims to facilitate delivery of higher quality primary care services for Wales, and by offering more services in GP surgeries and health centres, to alleviate pressure on hospitals. Outlined below are some of the main changes brought about by the new contract:

♦ **Quality and Outcomes Framework** The Quality and Outcomes Framework is a voluntary system of financial incentives. It rewards contractors for good practice (and its associated workload) through participation in an annual quality improvement cycle.

♦ **Enhanced services** These are essential or additional services delivered to a higher specification, or medical services outside the normal scope of primary medical services, which are designed around the needs of the local population. Enhanced services are commissioned by Local Health Boards and can be contracted from any provider, not just GMS contractors, so long as the provider can meet the service specification and provide value for money. Enhanced services provide LHBs with opportunities to develop more local and integrated services across primary and secondary care. There are three categories of enhanced services:

  - Directed Enhanced Services (DES) – all LHBs must commission or provide these.
  - National Enhanced Services (NES) – all LHBs should commission or provide these but they are not mandatory.
  - Local Enhanced Services (LES) – optional commissioning of services based on local needs.

Enhanced services are funded from the LHB administered budget for the GMS contract. This is a ring-fenced allocation with a spending floor set by the UK

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4 Department of Health, Scottish Executive, Welsh Assembly Government and Northern Ireland Executive.
Technical Steering Committee for the GMS contract. The enhanced services floor is
the minimum amount that must be spent on enhanced services although LHBs are
free to spend more using other funding streams as appropriate.

♦ **Out of Hours services** Under the terms of the new GP contract, all GPs have the
ability to opt out of the provision of Out of Hours services. Where this occurs the
responsibility would pass to the Local Health Board. In Wales, all GPs have
exercised that option.

♦ **Workforce Development** The new GMS contract includes workforce development
policies, including:

- Addressing current shortages of GPs and nurses.
- Reviewing existing recruitment and retention initiatives i.e. Golden Hello,
  Golden Thanks Schemes.
- Reviewing workforce planning systems to ensure workforce capacity is in line
  with service delivery.
- Establishing effective information flows to inform workforce development
  processes.
  *Working Differently*
- Building capacity through the use of skill mix, new ways of working and the
  creation of new roles.
- Supporting/advising practices to make best use of salaried doctors, nurse
  practitioners, healthcare assistants etc.
- Developing a scheme for GPs with special interests.
  *Infrastructure – HR support and guidance on:*
- Flexible family friendly working.
- Childcare provision.
- Occupational Health services.
- Model employment policies and procedures.
- Implications of *Agenda for Change*, an initiative to harmonise conditions of
  service, modernise the pay system, and improve career progression for NHS
  staff.
- Appraisal and personal development planning.

♦ **Premises** New improvement grants are being made available to modernise primary
care premises under the new GMS contract.

A comprehensive range of resources relating to the new GMS contract is available at:

### 3.2.2 Health, Social Care and Well-Being Strategies

Local Health Boards and local authorities have a statutory duty to jointly formulate and
implement a Health, Social Care and Well-Being Strategy for their area. This
arrangement aims to improve the co-ordination of services, particularly health and social
care, and the use of the financial flexibilities in the *Health Act 1999*. The Health, Social
Care and Well-Being Strategy contributes to the health related elements of local
Community Strategies which must be prepared by all local authorities and their partners.
The Health, Social Care and Well-Being Strategy provides the framework for service
delivery and operational plans for local health services. The first strategies were formally
agreed by December 2004 and cover the three years from April 2005. They will be
reviewed annually and subsequent strategies will cover a five-year cycle.
3.2.3 Health Commission Wales (Specialist Services)

Since April 2003, some specialist health services have been commissioned by Health Commission Wales (Specialist Services). The new body is an executive agency of the Welsh Assembly Government and has an advisory board, the National Commissioning Board. Health Commission Wales (Specialist Services) was created from the Specialist Health Commission Wales which was established by the five former Health Authorities and hosted by the former Dyfed Powys Health Authority, and performed a similar function prior to 1 April 2003.

Health Commission Wales, working with Local Health Boards, the National Public Health Service and others, assesses the need for, and funds, specialised services and services for people living in Wales.

There are three main types of specialised health services:

♦ Highly Specialised Services, which are commissioned on an UK basis, in collaboration with the National Specialised Commissioning Advisory Group.

♦ Specialised Services, which require a large catchment population to provide a viable service.

♦ Specialised care and treatment provided by clinical teams whose main work is providing local services in district general hospitals.

3.2.4 Business Services Centre

The Business Services Centre (BSC) which is hosted by Powys Local Health Board was established on 1 April 2003 to provide “shared services” support to the 22 Local Health Boards (LHBs) and other clients in NHS Wales. It provides support in four main areas:

♦ Financial services.

♦ Contractor services.

♦ Human Resources.

♦ Management Information and Computer Technology.

The BSC also manages and administers the following on behalf of the NHS in Wales:

♦ Research Ethics Committee Facilitation.

♦ NHS Equality Unit.

♦ Independent Review Panels.

♦ Community Health Councils.

♦ Welsh Assembly Health Information Monitoring Service / Knowledge Management Support Function.
The BSC’s structure and operations is regularly reviewed.

3.3 **NHS Trusts**

Most of the secondary and community healthcare services commissioned by Local Health Boards are provided by NHS Trusts. Established under the NHS and Community Care Act 1990, NHS Trusts manage hospital and community health services and are self-governing, property owning bodies within the NHS. There are fourteen NHS Trusts in Wales, including the all-Wales Ambulance Services Trust. A list of the NHS Trusts in Wales and a map showing their boundaries can be found in Annexes E & F respectively.

There are five types of hospital in Wales:

- **Major Acute Hospitals** (sometimes known as District General Hospitals) provide a wide range of acute in-patient and out-patient specialist services together with the necessary support systems, allow emergency admissions and usually have an Accident and Emergency department.

- **Acute Hospitals** provide a range of acute in-patient and out-patient specialist services (including some surgical acute specialties) but not the wide range available in major acute hospitals.

- **Community Hospitals** provide local and less extensive medical services such as care of the elderly, day surgery, outpatient clinics, maternity services, occupational therapy etc.

- **Psychiatric Hospitals** provide care for people with mental health problems.

- **Specialist Hospitals** cover specialties such as cancer or dentistry.

There are 24 acute hospitals in Wales, of which 17 are major Acute Hospitals. There are also four specialist Hospitals:

- **The University Dental Hospital**, Cardiff

- **Rookwood Hospital**, Cardiff, specialising in spinal injuries, artificial limbs and clinical support services

- **Velindre Hospital**, Cardiff, specialising in cancer care

- **North Wales Cancer Treatment Centre**, Bodelwyddan, Rhyl.

The 2003 NHS reforms did not affect the number and configuration of NHS Trusts, except in Powys where slightly different arrangements apply (see paragraph 3.2 above). Trusts remain the principal providers of secondary and community health services, and work with LHBs and local authorities in developing Health, Social Care and Well-Being Strategies and commissioning arrangements. They have a role in engaging with patients and carers in decisions around care and in the future provision of services, and continue to have a major role in professional education and research and development.

NHS Trusts are accountable to the Director of NHS Wales through the three Regional Offices, and to LHBs locally for the delivery of services against ‘Long Term Agreements’. Each year the Regional Offices develop performance agreements with Trusts which
reflect their role in the delivery of Service and Financial Frameworks (SaFFs). The SaFFs set out the delivery plans agreed by the NHS to achieve the Welsh Assembly Government’s priorities and requirements alongside local priorities, within the context of the financial resources provided. Further information on SaFFs is available from: http://howis.wales.nhs.uk/sites/page.cfm?orgid=407&pid=9109.
4 The NHS in Wales and the National Assembly for Wales

Under the *Government of Wales Act 1998*, responsibility for the provision of health and social services is devolved to the National Assembly for Wales.

### 4.1 Health and Social Services Committee of the National Assembly for Wales

The Health and Social Services Committee is one of seven subject committees of the National Assembly for Wales. It considers all aspects of health policy and its work reflects the portfolio of the Assembly Minister for Health and Social Services. The work of the Committee during the first Assembly 1999-2003 included advising the Welsh Assembly Government on the range of healthcare policies and strategies, such as the restructuring of the NHS and the development of the Primary Care Strategy, including scrutiny of relevant legislation. The Committee also undertook a number of policy reviews of health and social care issues, including Services for Children with Special Health Needs (2002), the Children’s Commissioner for Wales (2000), NHS sight tests (2000), and the Phillips (BSE) Enquiry (2001). In the second Assembly the Committee has undertaken reviews of the user and carer participation standard of the National Service Framework for Mental Health, and the interface between health and social care.

The Committee is also responsible for scrutinising the work of the Minister for Health and Social Services and Assembly Sponsored Public Bodies with responsibilities in the health field.

Further information on the work of the Health and Social Services Committee, including its reports to the National Assembly for Wales can be found at: [http://www.wales.gov.uk/keypubassemhealsocsvs/index-e.htm](http://www.wales.gov.uk/keypubassemhealsocsvs/index-e.htm).

### 4.2 Health and Social Care Department

Created on 1 March 2003, the Health and Social Care Department is the Welsh Assembly Government department responsible for funding and overseeing the operations of the NHS and Social Services in Wales. NHS Trusts, Local Health Boards and other statutory NHS bodies are accountable to the Minister for Health and Social Services via the Director of NHS Wales. Many of the functions of the former NHS Wales Department are discharged through new regional offices in North Wales, Mid & West Wales and South East Wales (see Annex D for a map of regional office boundaries).

The Department currently comprises the following divisions:

- **Children and Families Directorate** - responsible for development of services for children and women.
- **Community, Primary Care, and Health Service Directorate** - provides a lead on planning for all health services.
- **Health and Social Care Strategy Unit** - includes Business Planning, Research and Development, implementation of the recommendations from the Wanless review, and organisational development and training.
- **Regional Offices** - Act as agents of the Director of NHS Wales on a day to day basis in holding to account the Chief Executives of the eleven statutory NHS bodies and
managing their performance in line with the Framework for Continuous Improvement. The Regional Offices:

♦ Facilitate and support effective partnerships to commission services.
♦ Broker strategic and financial solutions as necessary to resolve conflicts and ensure delivery of objectives across local health communities.
♦ Provide strategic leadership including supporting the development of managerial and clinical leadership, career development and succession planning.
♦ Older People and Long Term Care Policy Directorate - Policy relating to the health and social care interface, including Delayed Transfers of Care, encouraging joint working, community care for adults with learning disabilities, social services aspects of physical and sensory disability, policy and funding for provision of residential care.
♦ Performance and Operations Directorate - Responsible for performance management and developing the performance framework, policy development and targets for waiting times and monitoring of emergency pressures, and ambulance policy / commissioning.
♦ Resources Directorate - Responsible for financing of NHS and social care in Wales, information services and health enabling technologies, emergency planning, and NHS human resources policy including training and development of NHS staff.

4.3 Office of the Chief Nursing Officer

The Chief Nursing Officer is the Assembly Government’s most senior nursing advisor and provides policy and professional advice on nursing and nursing issues in Wales.

4.4 Office of the Chief Medical Officer

The Chief Medical Officer provides professional and medical advice to the Assembly First Minister, Assembly Minister for Health and Social Services and other members of the Assembly Cabinet as required on issues relating to the medical, dental, scientific, pharmaceutical and environmental health matters.

A range of reports produced by the Office of the Chief Medical Officer is available at: http://www.cmo.wales.gov.uk/content/publications/reports/index-e.htm.

4.5 Office of the Chief Dental Officer

The Chief Dental Officer provides advice on all aspects of dentistry in Wales including training, professional networks, policy development, service monitoring, and national negotiations.

This information is updated regularly, this printed copy may soon become out of date.
The Chief Dental Officer's website can be found at:
http://www.cmo.wales.gov.uk/content/work/chief-dental-officer/index-e.htm.
5 The NHS in Wales: Regulation and inspection bodies

5.1 Council for Healthcare Regulatory Excellence

This UK-wide body was set up on 1 April 2003 as the Council for the Regulation of Healthcare Professions, to co-ordinate the activities of the various bodies that regulate health professionals and to promote best practice in their regulatory activities. The professional bodies are the General Medical Council, Nursing and Midwifery Council, Allied Health Professions Council, General Dental Council, General Optical Council, Royal Pharmaceutical Society, General Osteopaths Council and the General Chiropractic Council.

5.2 Commission for Healthcare Audit and Inspection (The Healthcare Commission)

This is a new body established in 2004, under the Health and Social Care (Community Health and Standards) Act 2003 following recommendations in the Kennedy report of the public enquiry into children’s heart surgery at the Bristol Royal Infirmary\(^5\). The Commission for Healthcare Audit and Inspection (CHAI) is an independent body which enforces standards and assesses performance in NHS healthcare facilities across England in relation to national reviews of particular kinds of healthcare (such as cancer healthcare). It also reviews services which are commissioned from the NHS in Wales by English purchasers, and “cross border” Special Health Authorities operating in Wales (for example, it monitors and reviews how effectively NICE guidelines have been implemented), and publishes national performance data.

On 31 March 2004 CHAI replaced the Commission for Health Improvement, which was responsible for improving the quality of patient care in England and Wales. CHAI provided advice and guidance to NHS bodies on improving the quality of care, and undertook reviews of NHS services and assessments of NHS performance. It conducted inspections of NHS services and investigations into serious service failure, and reviewed the implementation of National Service Frameworks and the uptake of guidance produced by the National Institute for Clinical Excellence (NICE) (see paragraph 7.8 below). CHAI published an annual report on the quality of services to NHS patients.

5.3 Healthcare Inspectorate Wales

The Healthcare Inspectorate Wales (HIW) was launched on 1st April 2004 to implement a programme of inspection across the NHS in Wales in relation to quality, national clinical standards and patient safety, focussing upon clinical governance, patient care across agencies and sectors, and strengthening public involvement.

The NHS in Wales: Public, patient and community involvement

*Improving Health in Wales* set out the following measure to improve public and patient involvement in Wales:

♦ a cross sector Patient Advocacy and Support Working Group has been set up to examine ways of modernising patient support and liaison.

♦ A review of ways of modernising patient advocacy and support (to have been completed in 2001).

♦ By 2003, an Expert Patient Programme to be established to support individual patients.

Local Health Board members include lay members and representatives from local voluntary organisations. Statutory health bodies and their partners, including local authorities, have new duties to consult with the public on health services in their areas and around the development of Health, Social Care and Well-Being Strategies.

6.1 Community Health Councils (CHCs)

There are currently 20 CHCs covering the whole of Wales. Community Health Councils were originally established in England and Wales in 1974 as independent bodies to represent the interests of users of the NHS in their areas. They have a duty to keep under review the operation of the health service in their areas, a right to be consulted by former Health Authorities planning changes to services and a right to inspect Health Authority or NHS Trust premises.

Whilst Community Health Councils have been abolished in England since 1 September 2003, in Wales they have been retained and given new powers. Under the *Health (Wales) Act 2003* CHCs are responsible for providing independent complaints advocacy services in Wales and are entitled to inspect the premises of a much wider range of organisations, including nursing homes where NHS care is provided and independent primary care contractors such as GPs.

The Board of Welsh Community Health Councils, the umbrella organisation for CHCs, is a statutory body which advises and supports CHCs in the performance of their functions.

6.2 Local Health Alliances

Local Health Alliances were established in 1999 in Wales to create local partnerships to improve health and reduce health inequalities in local communities. Led by local authorities, they comprise representatives from the voluntary, public and private sectors and aim to tackle local health issues affecting public health including poverty, employment, education, housing, transport services, crime prevention, environmental hazards, leisure and recreation. They work to improve co-ordination and information sharing between health and environmental interests, develop local health promotion, and support community action to improve health, living conditions and life chances.

There are 22 Local Health Alliances in Wales and they have boundaries co-terminous with Local Health Boards and local authorities. Each Local Health Alliance has a co-

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6 A list of Local Health Alliances and their contact details can be found at the Health Professions Wales website.
ordinator. A Wales Alliance Network provides national co-ordination, guidance, and facilitates dissemination of information and good practice.

Local Health Alliances have been actively involved in the development of Community Strategies and Health and Well Being Strategies in their localities, although their level of involvement varies according to local circumstances.

Further information is contained in the Assembly guidance, Developing Local Health Alliances in 1999, although the Welsh Assembly Government is in the process of contracting a review / evaluation of the activity of Local Health Alliances which is expected to report in May 2005, and will be posted to the website of the Assembly's Chief Medical Officer (http://www.cmo.wales.gov.uk/content/index.htm).

6.3 The Health Service Ombudsman for Wales

The Health Service Ombudsman for Wales investigates complaints made by or on behalf of people who are not satisfied with the treatment or service provided by or on behalf of the NHS.

Under the Public Service Ombudsman (Wales) Act 2005, which received Royal Assent on 7 April 2005, a new Public Services Ombudsman for Wales has taken over responsibilities in Wales of the Health Service Ombudsman, Welsh Administration Ombudsman, Welsh Local Government Ombudsman and the Social Housing Ombudsman.8

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7 Developing Local Health Alliances, Welsh Assembly Government, 1999
8 Discussed further in the MRS Research Paper, 05/001 The Public Service Ombudsman (Wales) Bill.
The following section outlines some of the main specialist and support services operating in Wales or providing support to the NHS in Wales.

### 7.1 National Public Health Service for Wales (NPWS-W)

The National Public Health Service for Wales (NPWS-W) is a service of the NHS in Wales which has, since 1 April 2003, assumed most of the public health functions of the former Health Authorities and the Welsh Public Health Service Laboratory. NPWS-W provides support and expert advice to Local Health Boards, local authorities and other bodies in Wales which have statutory responsibilities and other duties in respect of public health. It provides public protection, communicable disease surveillance, disease prevention and control, and laboratory services. In particular, it:

- helps to assess local health needs,
- advises on evidence-based practice,
- promotes health and well being, and
- develops the capacity for public health in Wales.

The NPWS-W carries out a health needs assessment of the area covered by each LHB and provides public health input and expert advice to the local Health, Social Care and Well Being Strategy being jointly developed by each LHB and local authority. It also works in partnership with LHBs and local authorities to provide support with statutory public health functions. A Wales Healthcare Associated Infection Sub Group (WHAISG) evaluates the systems in place to monitor, prevent and control healthcare associated infections in Wales and advises the NPWS-W's Committee for the Control of Communicable Disease with regard to their effectiveness.

The NPWS-W also works closely with the Wales Centre for Health, Health Commission Wales, the Welsh Assembly Government, and the Health Protection Agency.

The all-Wales NHS Child Protection Service is a key part of the NPWS-W covers all the functions previously ascribed to health authorities by the Children Act 1989 and in subsequent guidance.

The NPWS-W operates from three regional offices with boundaries coterminous with those of the NHS Wales Department. The NPWS in Wales is professionally accountable to the Chief Medical Officer in Wales.

### 7.2 Health Protection Agency (HPA)

The Health Protection Agency is a national organisation for England and Wales, established as a special health authority on 1 April 2003. From 1 April 2005 HPA will become a UK wide organisation following merger with the National Radiological Protection Board. It is dedicated to protecting health and reducing the impact of infectious diseases, chemical hazards, poisons and radiation hazards. It brings together the expertise of health and scientific professionals working in public health, communicable
disease, emergency planning, infection control, laboratories, poisons, chemical, and radiation hazards.

The HPA and its expert committees provide advice and guidance on health protection to the National Assembly for Wales and NPHS-W. In particular, it contributes expertise to the health emergency planning process undertaken by the Welsh Assembly Government. However, some of the functions of HPA in England, such as ‘field services’, the Public Health Laboratory and the Communicable Diseases Surveillance Centre are undertaken in Wales by the National Public Health Service Wales (see paragraph 7.1).

7.3 Health Professions Wales

On 30 November 2004 the First Minister announced that the functions of Health Professions Wales will be wound up and transferred to other services by April 2006. Its functions will move into the Workforce Development Unit of the National Leadership And Innovations Agency for Healthcare (see paragraph 7.6 below).

Health Professions Wales was established in April 2002 and is responsible for overseeing and developing the training of nurses, midwives, health visitors, and of the broad range of professionals allied to health e.g. physiotherapists, radiographers, occupational therapists, physiotherapists, paramedics etc.

Health Professions Wales performs a number of functions around the education and training of health professionals, including providing careers information, managing training bursaries, approving and monitoring Welsh education providers in nursing, midwifery and health visiting and overseeing the creation of “nurse consultant” and “allied health professional consultant” posts in Wales. Some of these functions are undertaken in co-operation with the UK Nursing and Midwifery Council and Health Professions Council.

7.4 Wales Centre for Health

On 1 April 2005, the Health Minister Dr Brian Gibbons AM launched the new Wales Centre for Health (WCH), set up by the Welsh Assembly Government under new provisions in the Health (Wales) Act 2003. An independent body, the WCH will support the public health function in Wales and promote health protection and health improvement. Specifically, the WCH will collate public health data, co-ordinate surveillance of health trends, and open up wider public health training in Wales to strengthen the public health workforce. It will work in partnership with the statutory, voluntary and academic sectors to provide public health advice, information, research and multi-professional development for staff with public health responsibilities. A shadow Wales Centre for Health was established in 2004, hosted by Velindre NHS Trust pending the establishment of the statutory body.

7.5 Centre for Health Leadership Wales

The Centre for Health Leadership Wales (CHLW) was established in May 2001 as an independent organisation within the NHS, located within the Swansea NHS Trust. It provides leadership development programmes for managers, clinicians and other health-related staff across Wales, as well as for those working in local government and the civil service. CHLW also provides a consultancy service on personal development, team development and organisational development to healthcare and related organisations to enable them to adapt to the changing environment in which they work. When the National Leadership and Innovations Agency for Health was created in November 2004 (see paragraph 7.6 below), the work of the CHLW was transferred to the new organisation.
7.6 **The National Leadership and Innovations Agency for Healthcare (NLIAH)**

The establishment of the National Leadership and Innovation Agency for Healthcare brings together the functions of the Innovations in Care Team (IiC) previously based at the Welsh Assembly Government, the CHLW and strategic workforce redesign capability.

The Health and Social Care Review, advised by Derek Wanless, highlighted the need to redesign and renew health services, together with increasing the emphasis on prevention and promoting improved health status. The Review also emphasised the need to review leadership and managerial skills portfolios, to ensure that the NHS has the capacity and capability to deliver the most challenging agenda.

The purpose of NLIAH is to support NHS organisations at all levels to develop the capacity and capability to deliver the change agenda, helping to embed effective leadership, innovation and renewal across the NHS in Wales. There will also be a facility for a trading / consultancy arm: NLIAH Enterprises.

7.7 **NHS Direct Wales**

NHS Direct is a national, 24-hour, bilingual telephone helpline and website for people with non-emergency health problems. The service offers telephone access to a qualified nurse and aims to provide clinical advice to support self-care and appropriate self-referral to NHS services, as well as access to more general advice and information. Funding and monitoring for NHS Direct Wales comes within the remit of the Health Commission Wales (Specialist Services), and the service is hosted by Swansea NHS Trust.

7.8 **The National Institute for Clinical Excellence**

The National Institute for Clinical Excellence (NICE) is an England and Wales Special Health Authority established in 1999 to provide patients, health professionals and the public with authoritative, robust and reliable guidance on current “best practice”. NICE produces guidance in three areas of health:

- the use of new and existing medicines and other treatments within the NHS in England and Wales - technology appraisals
- the appropriate treatment and care of patients with specific diseases and conditions within the NHS in England and Wales - clinical guidelines
- whether interventional procedures used for diagnosis or treatment are safe enough and work well enough for routine use - interventional procedures.

In July 2004, the Department of Health published the findings of its review of Arms Length Bodies, one of the recommendations of which was that NICE should take on the public health functions of the Health Development Agency, an English body, which will be abolished. As alternative arrangements are already in place for NICE’s new public health functions in Wales, NICE will be re-established as a Special Health Authority with responsibility for England only, with plans for Wales to have a service level agreement with NICE for certain elements of its work.
7.9 **National Clinical Assessment Authority (NCAA)**

The NCAA was established on 1 April 2001 as a Special Health Authority in England. The Welsh Assembly Government has drawn up a Service Level Agreement with the NCAA for its Welsh service, which is provided from an office in Cardiff. The National Clinical Assessment Authority (NCAA) aims to provide a support service to LHBs and Trusts which are faced with concerns over an individual doctor.

7.10 **The National Patient Safety Agency (NPSA)**

The primary purpose of the NPSA is to promote patient safety by reducing clinical error. It operates a national system for reporting and learning from adverse incidents and near misses across the NHS. NPSA aims to reduce the potential for adverse incidents recurring by disseminating information and advice on safety. The NPSA aims to promote an open and fair culture in the NHS, encouraging all healthcare staff to report incidents without undue fear of personal reprimand. NPSA was set up as a Special Health Authority in England in 2001, and since 2002 has operated in Wales under a partnership agreement with the Welsh Assembly Government to enable the health service in Wales to contribute to, and benefit from, the reporting system.

7.11 **Welsh Health Estates**

Welsh Health Estates provides professional and technical support services on estate matters to NHS property holding bodies and the NHS Wales Department. Services cover estate management, building and engineering issues.

7.12 **Welsh Health Supplies**

Welsh Health Supplies is a service provider to the NHS in Wales and is managed by Bro Morgannwg NHS Trust. Its role is to provide two services to Welsh NHS Trusts in relation to the supply of goods and materials: the negotiation of contracts, and material management.

7.13 **Welsh Health Legal Services**

Welsh Health Legal Services provides legal services to the NHS in Wales and is managed by Conwy and Denbighshire NHS Trust.

7.14 **Velindre NHS Trust**

Velindre NHS Trust provides cancer services for south east Wales from its base at in Cardiff. It also manages a number of specialist and support services including:

7.14.1 **Cervical Screening Wales**

The aim of Cervical Screening Wales is to ensure that cervical screening is delivered in a consistent manner across Wales, according to national published standards and, in particular, that all eligible women receive the same level of service and quality care for the same level of need. It provides a single cervical screening programme across Wales, with uniform policies, standards and protocols.

7.14.2 **Antenatal Screening Project**
The Antenatal Screening Project is developing a national system for managing and monitoring antenatal screening programmes in Wales to ensure consistency, quality assurance and equality of access.

The implementation of Antenatal Screening Wales will provide a sustainable all Wales framework to improve the standard of antenatal screening offered to women. It will be the first step in developing an effective, appropriate, uniform, quality antenatal screening programme for Wales which includes all Wales policies and standards and service monitoring, audit and reporting.

7.14.3 Welsh Cancer Intelligence and Surveillance Unit

The Welsh Cancer Intelligence and Surveillance Unit was established in 1997, having evolved from the former Welsh Cancer Registry. Its primary aim is the systematic collection of information about cancer incidence and mortality within the population of Wales. This information is used to make judgements about the demand for screening and treatment, the effectiveness of these services, epidemiological research into the causes of cancer, research into cancer prevention, clinical research and for the education of the public.

7.14.4 Newborn Hearing Screening Wales

Newborn hearing screening was introduced in Wales in March 2003 and operates throughout Wales. The aim of the screen is to identify babies with significant hearing impairment as early as possible. Early detection leads to improved outcomes in speech and language development and in the general well-being of the child and family. The screen will be offered, within the first week of life in most cases, to all babies whose mothers reside in Wales and will be completed by trained screeners in both the hospital and community setting. Parents will be given written information antenatally, throughout the screening and, if required, assessment process.

7.14.5 Welsh Blood Service

The Welsh Blood Service is a NHS unit responsible to the National Assembly for Wales. It collects, processes, tests and stores blood, which it then delivers to hospitals throughout Wales except North Wales, which is covered by the National Blood Service. It also provides blood reference services and antenatal blood testing services to hospitals, and runs the Welsh Transplantation and Immunogenetics Laboratory for investigating tissue matches for organ transplants.

7.14.6 Breast Test Wales

Breast Test Wales provides a breast-screening programme for women in Wales aged 50 to 65, which will gradually be extended to 70 years of age. Women are invited every three years to one of six mobile units operating throughout Wales, or one of the three Breast Test Wales static centres at Llandudno, Swansea or Cardiff. Breast Test Wales is part of the UK-wide NHS Breast Screening programme.

7.14.7 Health Solutions Wales

HSW provides a range of information, telecommunications and IT related services to the NHS in Wales. These include web services, project management, software services, consultancy and policy development. Provision of information covers such areas as public health medicine, waiting times, healthcare information and data management and the
Health of Wales Information Service (HOWIS). HSW also processes all prescriptions dispensed by dispensing contractors in Wales and calculates payments due to them.
Glossary of abbreviations

BMA   British Medical Association
BSC   Business Services Centre
CHAI  Commission for Healthcare Audit and Inspection
CHC   Community Health Council
CHI   Commission for Health Improvement
CHLW  Centre for Health Leadership Wales
DES   Directed Enhanced Services
GMS   General Medical Services
GP    General Practitioner
GPC   General Practitioners Committee (of the British Medical Association)
HCW   Health Commission Wales
HIW   Health Inspectorate Wales
HPA   Health Protection Agency
HPW   Health Professions Wales
LES   Local Enhanced Services
LHB   Local Health Board
LHG   Local Health Group
NCAA  National Clinical Assessment Authority
NES   National Enhanced Services
NICE  National Institute for Clinical Excellence
NLIAH National Leadership and Innovations Agency for Healthcare
NPHS-W National Public Health Service for Wales
NPSA  National Patient Safety Agency
SaFFs Service and Financial Frameworks
Bibliography of key policy documents relating to the NHS in Wales

*Children Act 1989*

*Developing Local Health Alliances*, Welsh Assembly Government, 1999
http://www.wales.gov.uk/subihealth/content/keypubs/developlocalheal/pdf/developlocalhea_a_e.pdf

*Government of Wales Act 1998*

*Health Act 1999*

*Health and Social Care (Community Health and Standards) Act 2003*

*Health (Wales) Act 2003*

*Improving Health In Wales: A Plan for the NHS with its Partners*, February 2001
http://www.wales.gov.uk/subihealth/content/keypubs/pdf/nhsplan-e.pdf

*National Health Service and Community Care Act 1990*

*NHS Planning and Commissioning Guidance 2002*

*Public Service Ombudsman (Wales) Act 2005*

*The National Health Service Reform and Health Care Professions Act 2002*

http://www.wales.gov.uk/subieconomics/hsc-review-e.htm
References


6. A list of Local Health Alliances, together with their contact details can be found at: http://www.hpw.wales.gov.uk/wahpdlla_e/scripts/fe_lha/lhadetails_details/lhadetails_list.asp.


Sources

Department of Health website:
http://www.doh.gov.uk/index.htm


Health of Wales Information Service website:
http://www.wales.nhs.uk/index.cfm


House of Commons Research Paper 01/95 The National Health Service Reform and Healthcare Professions Bill 2001

House of Commons Research Paper 02/61 The Health (Wales) Bill 2002

NHS Wales Department, Welsh Assembly Government

A  Contact details for specialist and support services operating in Wales

All Wales Medicines Strategy Group
Welsh Medicines Partnership
C/o Department of Pharmacology
Therapeutics & Toxicology
University of Wales College of Medicine
Cardiff CF14 4XN
029 2074 5466
http://www.wales.nhs.uk/awmsg

Antenatal Screening Project Wales
18 Cathedral Road
Cardiff CF11 9LJ
029 2078 7837
http://www.velindre-tr.wales.nhs.uk/antenatal/

Board of Welsh Community Health Councils
Ground Floor Front
Park House, Greyfriars Road
Cardiff
CF10 3AF
029 20 235558
http://www.patienthelp.wales.nhs.uk

Business Services Centre
Mamhilad House
Mamhilad Park Estate
Pontypool
NP4 0IP
01495 765065

Breast Test Wales
18 Cathedral Road,
Cardiff CF11 9LJ
029 2039 7222

Cancer Genetics Service for Wales
Institute of Medical Genetics
University Hospital of Wales
Heath Park
Cardiff CF14 4XW
029 2074 6620
Website: http://www.cgsw.wales.nhs.uk

Cancer Services Co-ordinating Group
18 Cathedral Road
Cardiff CF11 9LH
029 2038 8734

Cardiac Networks of Wales
C/o Cardiac Networks Co-ordinating Group
3rd Floor
Cathedral Road
Cardiff CF11 9LH
029 2019 6173

Centre for Health Information Quality
Highcroft
Romsey Road
Winchester
Hampshire SO22 5DH.
01962 872264
http://www.hfht.org/chiq/index.htm

Cervical Screening Wales
Cervical Screening Wales (Headquarters),
18 Cathedral Road
Cardiff CF11 9LH
029 2078 7828
http://www.velindre-tr.wales.nhs.uk/csw/index.html

Congenital Anomaly Register and Information Service (CARIS)
c/o Level 3 - West Wing,
Singleton Hospital
Swansea SA2 8QA
01792 285241
http://www.caris.wales.nhs.uk

Council for Healthcare Regulatory Excellence
1st Floor, Kierran Cross
11 Strand
London
WC2N 5HR
020 7389 8030
http://www.chre.org.uk

Health Commission Wales
Unit 3a
Caerphilly Business Park
Caerphilly
CF83 3ED
029 2080 7575

Health of Wales Information Service
http://www.wales.nhs.uk/

Health Service Commissioner for Wales
The Parliamentary and Health Service Ombudsman
Millbank Tower
Millbank
London
SW1P 4QP
0845 015 4033
http://www.ombudsman.org.uk
Email: phso.enquiries@ombudsman.org.uk
Health Solutions Wales
Healthcare Inspectorate Wales
Local Health Alliances
National Clinical Assessment Authority
NHS Direct Wales
National Institute for Clinical Excellence
National Patient Safety Agency
National Public Health Service for Wales
Velindre NHS Trust
Velindre Road
Whitchurch
Cardiff CF4 2TL
029 2061 5888
http://www.wales.nhs.uk/sites/home.cfm?ORGID=368

New Born Hearing Screening Wales
18 Cathedral Road
Cardiff CF11 9LJ
029 2078 7811
http://www.screeningservices.org/nbhw/

Wales Centre for Health
14 Cathedral Road
Cardiff CF11 9LJ
029 2019 7744
http://www.wch.wales.nhs.uk

Wales Office of Research and Development for Health and Social Care
National Assembly for Wales
Cathays Park
Cardiff CF10 3NQ
029 2082 6564
http://www.wch.nhs.wales/index.htm

Welsh Blood Service
Ely Valley Road
Talbot Green
Pontyclun CF72 9WB
01443 622000
http://www.welsh-blood.org.uk/

Welsh Cancer Intelligence and Surveillance Unit
14 Cathedral Road,
Cardiff CF11 9LJ
029 2037 3500
http://www.wales.nhs.uk/sites/home.cfm?OrgID=242

Welsh Health Estates
Bevan House
Lambourne Crescent
Llanishen
Cardiff CF14 5BG
029 2031 5500
http://www.wales.nhs.uk/whe/

Welsh Health Legal Services
Bevan House
Lambourne Crescent
Llanishen
Cardiff CF14 5BG
029 2031 5500

**Welsh Health Supplies**  
Bevan House,  
25-30 Lambourne Crescent,  
Cardiff CF14 5GT  
029 2031 5500  

**Welsh Medicines Resource Centre (WeMeReC)**  
Academic Centre  
Llandough Hospital  
Penarth CF64 2XX  
029 2071 6117  

**Welsh Risk Pool**  
100 Bowen Court, Ffordd William Morgan, St Asaph Business Park, St Asaph,  
Denbighshire  
01745 536750
B Membership of Local Health Boards


The full text of the WSI 2003 no. 149 can be viewed at: http://www.wales-legislation.hmso.gov.uk/legislation/wales/wsi2003/20030149e.htm

3. - (1) A Board shall be comprised of the members described in this Regulation.

   (2) The officer members shall be -

       (a) the chief officer;
       (b) the medical officer;
       (c) the finance officer; and
       (d) the nurse officer.

   (3) The non-officer members shall be -

       (a) the chair;
       (b) the vice-chair;
       (c) up to four local authority members, a minimum of one of whom must be an elected member of the council of that local authority, and one of whom must be a senior social services officer of that local authority;
       (d) a public health specialist;
       (e) up to three general medical practitioner members;
       (f) a pharmacist member;
       (g) a dental practitioner member;
       (h) an optometrist member;
       (i) a nursing, midwifery or health visiting member;
       (j) a therapy member;
       (k) up to two voluntary sector members;
       (l) up to two community lay members, one of whom shall be a carer; and
       (m) four associate members.

   (4) In addition to the number of members referred to in paragraph (1) above, the Board may from time to time appoint such co-opted members as appear to it to be necessary or expedient for the performance by the Board of its functions.
C  Local Health Boards – contact details:

Anglesey LHB
17 High Street
Llangefni
Ynys Môn LL77 7LT
01248 751 229
http://www.wales.nhs.uk/lhg/home.cfm?ORgID=272

Conwy LHB
Glyn Colwyn
Nant Y Glyn Road
Colwyn Bay
Conwy LL29 7PU
01492 536 586
http://www.wales.nhs.uk/lhg/home.cfm?ORgID=268

Blaenau Gwent LHB
Station Hill
Abertillery
Blaenau Gwent NP13 1UJ
01495 325400
http://www.wales.nhs.uk/lhg/home.cfm?ORgID=280

Denbighshire LHB
Ty Livingstone
HM Stanley Hospital
St Asaph
Denbighshire LL17 ORS
01745 589601
http://www.wales.nhs.uk/lhg/home.cfm?ORgID=269

Bridgend LHB
North Court
Daivd Street
Bridgend Industrial Estate
Bridgend CF31 3TP
01656 754400
http://www.wales.nhs.uk/lhg/home.cfm?ORgID=266

Flintshire LHB
Preswylfa
Hendy Road
Mold
Flintshire CH7 1PZ
01352 744103
http://www.wales.nhs.uk/lhg/home.cfm?ORgID=271

Caerphilly LHB
Ystrad Mynach Hospital
Caerphilly Road
Ystrad Mynach CF82 7XU
01443 862056
http://www.wales.nhs.uk/lhg/home.cfm?ORgID=281

Gwynedd LHB
Eryldon
Ffordd Campbell
Caernarfon LL55 1HU
01286 672451
http://www.wales.nhs.uk/lhg/home.cfm?ORgID=273

Cardiff LHB
Trenewydd
Fairwater Road
Llandaff
Cardiff CF5 2LD
029 2055 2212
http://www.wales.nhs.uk/lhg/home.cfm?ORgID=262

Merthyr Tydfil LHB
Units 2a & 4a
Pentrebach Business Centre
Triangle Business Park
Merthyr Tydfil CF48 4TQ
01685 358500
http://www.wales.nhs.uk/lhg/home.cfm?ORgID=263
Carmarthenshire LHB
Thyssen House
Heol y Bwlch
Bynea
Llanelli
Carmarthenshire SA14 9SU
01554 775693
http://www.wales.nhs.uk/lhg/home.cfm?RGID=251

Monmouthshire LHB
Chepstow Community Hospital
Tempeast Way
Chepstow
Monmouthshire NP16 5YX
01291 636400
http://www.wales.nhs.uk/lhg/home.cfm?RGID=282

Ceredigion LHB
The Bryn, North Road, Lampeter,
Ceredigion SA48 7HA
01570 424100
http://www.wales.nhs.uk/lhg/home.cfm?RGID=259

Neath Port Talbot LHB
Suite C
Britannic House
Llandarcy
Neath SA10 6JQ
01792 326 500
http://www.wales.nhs.uk/lhg/home.cfm?RGID=245

Newport LHB
Wentwood Wards
St Cadoc's Hospital
Caerleon NP18 3QX
01633 436 200
http://www.wales.nhs.uk/lhg/home.cfm?RGID=283

Swansea LHB
Kidwelly House, Charter Court
Phoenix Way
Swansea Enterprise Park
Swansea SA7 9FS
01792 784 800
http://www.wales.nhs.uk/lhg/home.cfm?RGID=267

Pembroke LHB
Unit 5
Merlins Court
Winch Lane
Haverfordwest
Pembroke SA61 1SB
01437 771 220
http://www.wales.nhs.uk/lhg/home.cfm?RGID=260

Torfaen LHB
Block C,
Mamhilad House
Mamhilad Industrial Estate
Pontypool NP4 OYP
01495 745 868
http://www.wales.nhs.uk/lhg/home.cfm?RGID=284

Powys LHB
Mansion House
Bronlys
Brecon LD3 OLS
01874 711661
http://www.powyslhb.wales.nhs.uk/

Vale of Glamorgan LHB
2 Stanwell Road
Penarth
Vale of Glamorgan CF64 2AA
029 2035 0600
http://www.wales.nhs.uk/lhg/home.cfm?RGID=265

Rhondda Cynon Taff LHB
Unit 17/18, Centre Court
Treforest Industrial Estate
Pontypridd CF37 5YR
01443 824 400
http://www.wales.nhs.uk/lhg/home.cfm?RGID=264

Wrexham LHB
Wrexham Technology Park, Rhyd
Broughton Lane, Wrexham
Wrexham LL13 7YP
01978 346500
http://www.wales.nhs.uk/lhg/home.cfm?RGID=270
D Local Health Board and Regional Offices boundaries
E Welsh NHS Trusts

**Welsh Ambulance Service NHS Trust**
HM Stanley Hospital,
St. Asaph LL17 0WA
01745 532900
Website: [www.was-tr.wales.nhs.uk](http://www.was-tr.wales.nhs.uk)

**Bro Morgannwg NHS Trust**
Trust Headquarters,
71 Quarella Road,
Bridgend CF31 1YE
01656 752 752
[www.bromo-tr.wales.nhs.uk](http://www.bromo-tr.wales.nhs.uk)

**Cardiff and Vale NHS Trust**
University Hospital of Wales,
Heath Park,
Cardiff CF14 4XW
029 2074 7747
[www.cardiffandvale.wales.nhs.uk](http://www.cardiffandvale.wales.nhs.uk)

**Carmarthenshire NHS Trust**
Mynydd Mawr Hospital,
Tumble,
Llanelli,
Carmarthenshire SA14 6BU
01269 841 343
[www.carmarthen.wales.nhs.uk](http://www.carmarthen.wales.nhs.uk)

**Ceredigion and Mid Wales NHS Trust**
Bronglais General Hospital,
Caradog Road,
Aberystwyth,
Ceredigion SY23 1ER
01970 623 131
[www.ceredigion-tr.wales.nhs.uk](http://www.ceredigion-tr.wales.nhs.uk)

**Conwy and Denbighshire NHS Trust**
Ysbyty Glan Clwyd,
Sarn Lane,
Rhyl,
Denbighshire LL18 5UJ
01745 583 910
[www.conwy-denbighshire-nhs.org.uk](http://www.conwy-denbighshire-nhs.org.uk)

**Gwent Healthcare NHS Trust**
Grange House, Llanfrechfa Grange, Cwmbran
NP44 8YN
01633 623623
[http://www.gwent-ha.wales.nhs.uk](http://www.gwent-ha.wales.nhs.uk)
North East Wales NHS Trust
Wrexham Maelor General Hospital,
Croesnewydd Road,
Wrexham LL13 7TD
01978 291 100
http://intranet.new-tr.wales.nhs.uk/

North Glamorgan NHS Trust
Prince Charles Hospital,
Merthyr Tydfil
CF47 9DT
01685 721 721
http://www.nglam-tr.wales.nhs.uk

North West Wales NHS Trust
Ysbyty Gwynedd,
Penrhosgarnedd,
Bangor LL57 2PW
01248 384 384
http://www.northwestwales.org

Pembrokeshire and Derwen NHS Trust
Withybush General Hospital,
Fishguard Road,
Haverfordwest,
Pembrokeshire SA61 2PZ
01437 764 545
http://www.pdt-tr.wales.nhs.uk/

Pontypridd and Rhondda NHS Trust
Trust Management Offices,
Dewi Sant Hospital,
Albert Road,
Pontypridd CF37 1LB
01443 486222
http://www.pr-tr.wales.nhs.uk/

Swansea NHS Trust
Central Clinic,
Trinity Buildings,
21 Orchard Street,
Swansea SA1 5AT
01792 651 501
http://www.swansea-tr.wales.nhs.uk/

Velindre NHS Trust
Velindre NHS Trust Corporate Headquarters, Unit 2 Charnwood Court, Parc Nantgarw,
Nantgarw, Cardiff, CF15 7QW
029 2061 5888
F  NHS Trust boundaries

NHS Trusts

Local Authority boundary (as at April 2003)

NOTE
The Welsh Ambulance Services NHS Trust, based in North Wales, provides ambulance services for the whole of Wales.