Rt Hon Rhodri Morgan AM First Minister/Prif Weinidog Cymru

DP 352 /03-07

Llywodraeth Cynulliad Cymru Welsh Assembly Government

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Kirsty Williams AM The National Assembly for Wales Cardiff Bay CF99 1NA

/24 June 2003

Dear Kivsty

I agreed, during plenary on 22 May, to write to you further regarding Welsh patients being treated at Foundation Trusts in England.

Foundation Trusts will be set up under the Health and Social Care (Community Health and Standards) Bill. Part 1; 1-35 and Schedules 1-4 (England only) allow for the introduction and set up of NHS foundation trusts, along with an Independent Regulator of NHS Foundation Trusts, in England. There is no equivalent power in Wales.

Although NHS Foundation Trusts are public benefit corporations authorised under Part 1 of the Bill to provide goods and services for the purposes of the health service in England, this will not preclude them from providing services to patients outside of England.

As you are aware Welsh patients currently receive treatment in England (and English patients in Wales) through reciprocal arrangements that have been developed between hospitals and commissioning bodies based, in the main, on geographical circumstances. These arrangements are applicable to both secondary and tertiary services. The expectation is that these arrangements will continue.

This situation also applies to the part of Deeside that falls within the designated area of the Countess of Chester Hospital. The resident population is Welsh and therefore it is a Welsh organisation that is responsible for commissioning services on their behalf, albeit that those services are provided by an English Trust. This arrangement is not expected to change, especially when the effect on the Countess of Chester's viability is taken into consideration, if they should choose not to provide services for a population of some 50,000 people.



As I have confirmed during the Plenary debate the Welsh Assembly Government currently has no plans to introduce Foundation Trusts in Wales.

Our Strategy here in Wales is based on co-operation, local decision-making and continuous improvement. This approach was agreed following wide consultation and collaboration with both the service and the public.

The Boards of the new Local Health Boards are widely representative of the local professionals and the community and are well placed to identify local needs and commission local services that meet these needs.

This new structure is designed to bring significant real improvements to NHS Wales in terms of better services for patients, a better way of focusing the needs of communities and a better way of collectively resolving local problems. This will include continuing to commission services from both Welsh and English providers, including Foundation Trusts, based on activity needed to meet operational requirements.

I hope that this has fully answered your concerns.

Yours Rhadn