



A HEALTHIER WALES- A VOICE FOR ALL

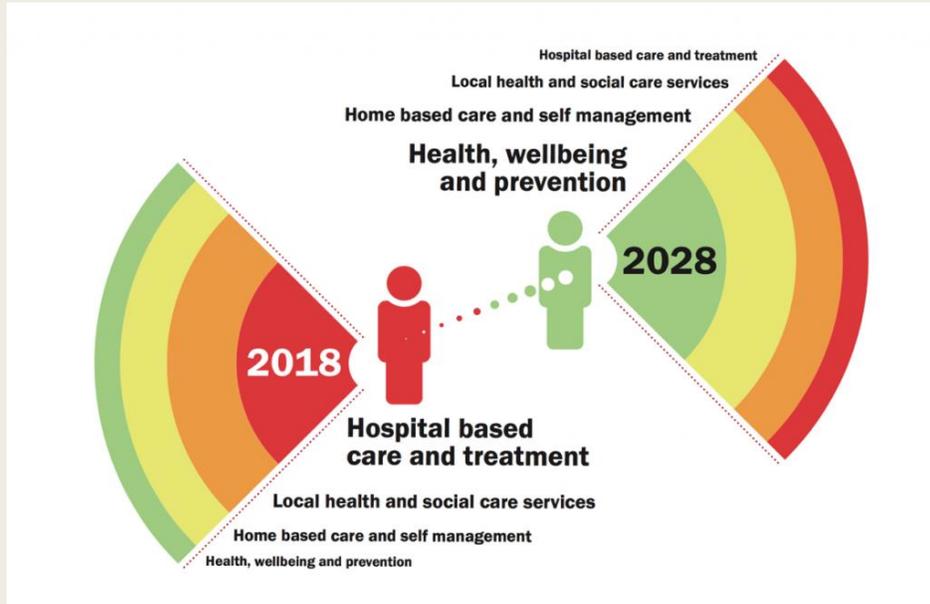
**EMWAA CONFERENCE
SATURDAY 24TH SEPTEMBER 2022**

Dr Heather Payne

**Paediatrician; Senior Medical Officer, Welsh Government
Chair of Covid-19 Moral and Ethical Advisory Group for Wales**

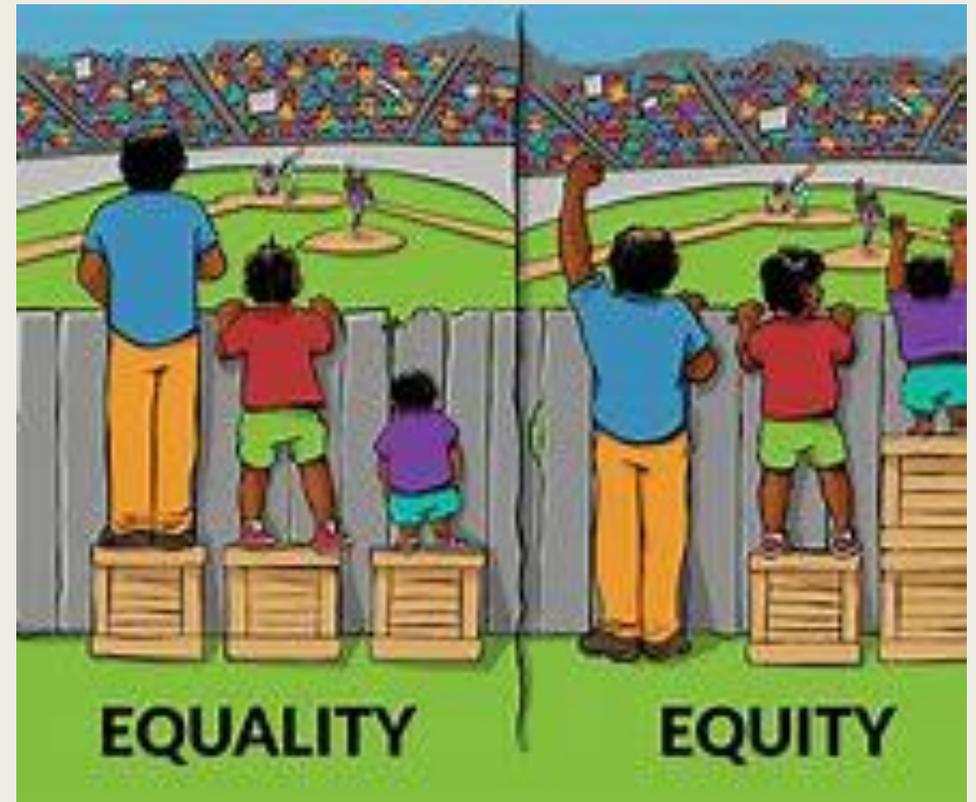


Voluntary organisations in Wales are seen as equal partners in the Welsh Government's 'A Healthier Wales' vision for Wales.



Equality Act 2010

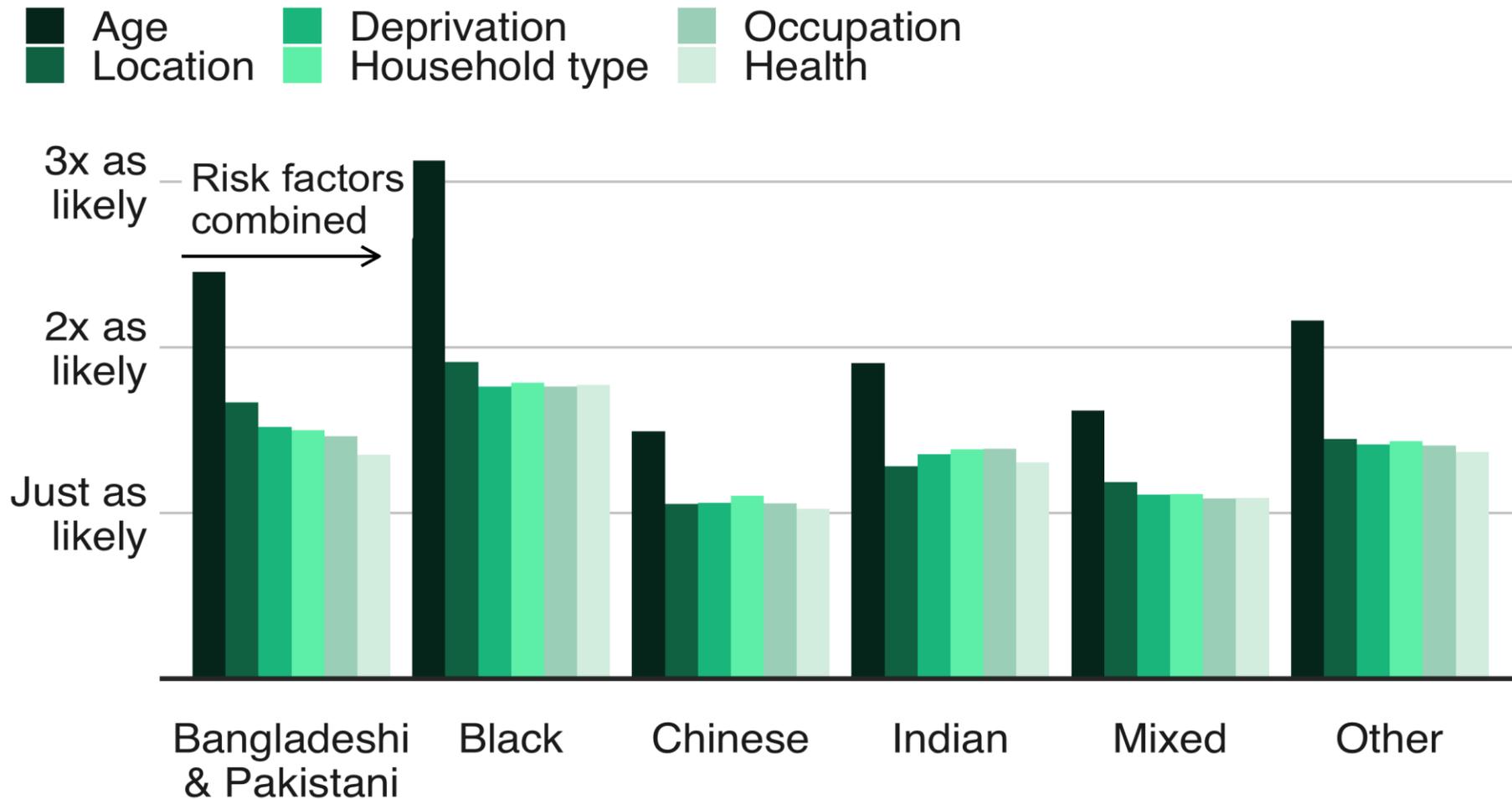
Protected Characteristics





Black men more likely to die with coronavirus

Death risk compared to white men after taking into account



NHS Wales COVID-19 Workforce Risk Assessment Tool



RISK ASSESSMENT TOOL

Assign values for the hazard severity and likelihood on a scale from 1 to 4, then multiply them together to give a rating of low-, medium-, and high-risk.

Severity	1	Negligible: Causing minor injury that requires first aid or less.
	2	Minor: Causing non-serious injury, illness, or damage that requires medical aid; not life threatening.
	3	Serious: Causing severe injury, serious illness, that is disabling or lifelong, or property and equipment damage.
	4	Imminent danger: Causing death, widespread occupational illness, or loss of facilities.
Likelihood	1	Remote: Unlikely to occur, but conceivable
	2	Possible: Could occur at some point
	3	Probably: Likely to occur eventually
	4	Likely: Occurs repeatedly or is expected to occur

Severity (of hazard) X **Likelihood** (of occurrence) = **Overall Risk**

SEVERITY	4	4 Medium	8 Medium	12 High	16 High
	3	3 Low	6 Medium	9 Medium	12 High
	2	2 Low	4 Medium	6 Medium	8 Medium
	1	1 Low	Low	Low	4 Medium
		1	2	3	4

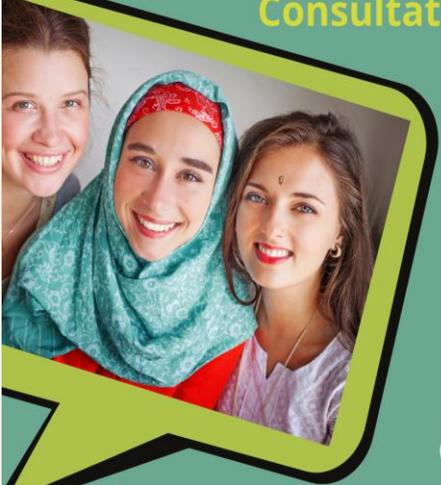
Likelihood (Probability)

The risk matrix rating (low, medium, high,) indicates the level of response required as you determine how you will control the hazard.

Low Risk	Medium Risk	High Risk
1-3	4-8	9-16
CONTINUE WITH THE TASK. Ensure existing control measures are used as intended. Watch for new hazards to develop.	PAUSE. What new control measures can you introduce to reduce the risk? Reassess after new control measures are in place.	STOP. Do not proceed. Determine what course of action you will take. Have all workers and your supervisor sign off before you begin work.

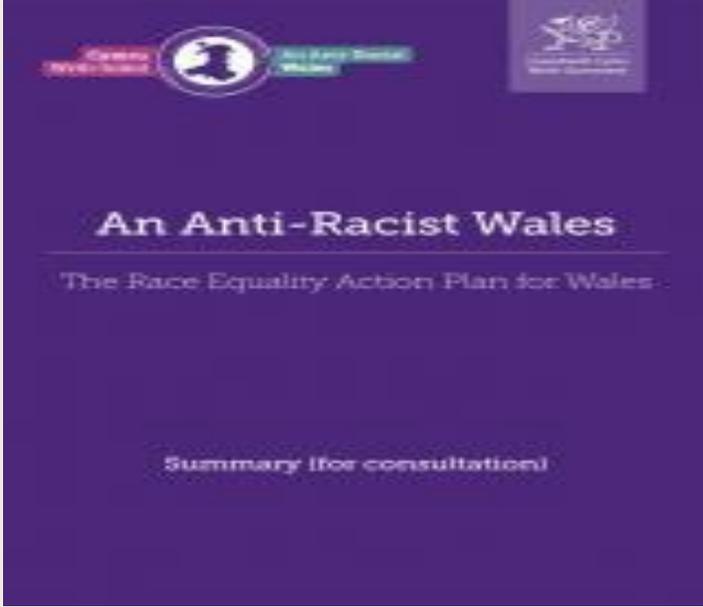
First Ministers Covid-19 Race Disparity Advisory Group 2019

Consultation out now!



Race Equality Action
Plan: An Anti-racist
Wales

Closing date: 17th June 2021



An Anti-Racist Wales
The Race Equality Action Plan for Wales

Summary (for consultation)

Dealing with ethical challenges in healthcare in Wales during the Covid-19 pandemic

- Ethical issues in the pandemic:
- The UK CMOs advisory group- MEAG:
- The need for advice specific to Wales:
- Broad citizen voice included in CMEAG Wales:
- Statement of Core Values and Principles:

CMEAG Wales principles and law underpinning ethical delivery of health care were articulated as:

- Respect
- Minimising overall harm from the pandemic
- Fairness
- Working together
- Reciprocity
- Keeping things in proportion
- Flexibility
- Good decision making

COVID -19

Non Pharmaceutical Interventions



COVID-19

Testing and vaccines

Dose	Vaccine name	Batch number	Venue	Date
1				
2				

You can find information about COVID-19 vaccines at:
111.wales.nhs.uk/LiveWell/Vaccinations/

A sore arm, slight fever, headache or tiredness is common after vaccination and may last up to a week.

If you have concerns following your vaccination, please **telephone NHS Wales on 111**. If 111 is not available in your area, please call **0845 46 47**. Calls to NHS 111 Wales are free from landlines and mobiles. Calls to 0845 46 47 cost 2p per minute plus your telephone provider's usual access charge.

If it is a medical emergency, please dial 999.

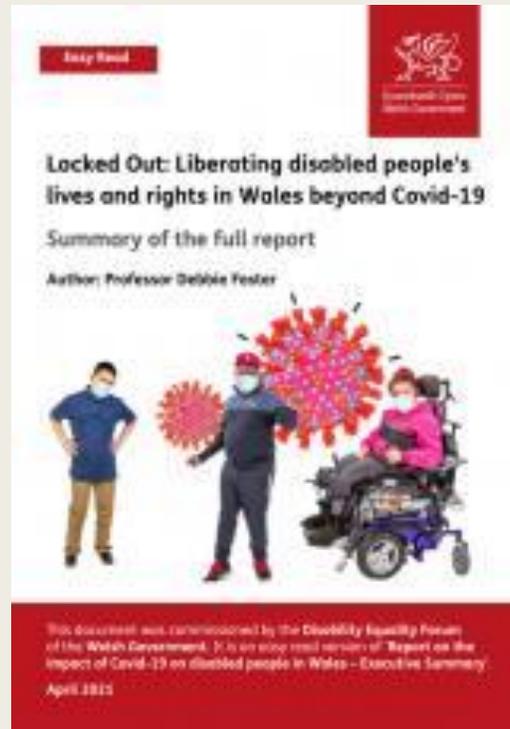
 Mae Brechu'n ochuô bynydau
vaccination saves lives







NPIs worsening inequalities



Questions addressed by CMEAG Wales:

- **DNACPR decisions**
- **Clinical prioritisation for treatment escalation**
- **Balancing the 4 harms of covid and Non pharmaceutical interventions (NPIs)**
- **Hospital visiting policies**
- **Administration of vaccine and the use of restraint**
- **Vaccine prioritization**
- **Access to Clinical Ethics advice and support for NHS organisations**
- **Moral distress in staff**
- **Themes recurring in CMEAG Wales advice**

COVID-19 and older people/care homes

DO NOT ATTEMPT CARDIOPULMONARY RESUSCITATION
Yorkshire & Humber Regional Form for Adults and Young People aged 16 and over

In the event of cardiac or respiratory arrest NO attempts at cardiopulmonary resuscitation (CPR) will be made. All other treatment should be given where appropriate.

NHS No	Hospital No	Next of Kin / Emergency Contact
Name	Relationship	
Address	Relationship	
Postcode	Date of Birth	Tel Number

Section 1 Reason for DNACPR: Select as appropriate from A - D (see reverse)
Details of all discussions, mental capacity assessments and MDT decisions must be recorded in the patient's notes.

A. CPR has been discussed with this patient. It is against their wishes and they have the mental capacity to make this decision.

B. CPR is against the wishes of the patient as recorded in a valid advance decision
The right to refuse CPR in an Advance Decision only applies from the age of 18.

C. The outcome of CPR would not be of overall benefit to the patient and:
i) They lack the capacity to make the decision or
ii) They have declined to discuss the decision
This must be discussed with relevant others wherever possible (details overleaf)
This **has** been discussed with (name) Relationship to patient:

D. CPR would be of no clinical benefit because of the following medical conditions:

Even in situations in which CPR is not expected to be successful, it is still good practice to explain to the patient and/or relevant others why CPR will not be attempted.
This **has** been discussed with the patient
This **has not** been discussed with the patient because it would cause them unnecessary distress
This **has** been discussed with (name) Relationship to patient:

Section 2 Healthcare professionals completing DNACPR form (see reverse)

Name & Designation	Name & Designation (Counter Signature if required)
Organisation	Organisation
Signature	Signature
Date	Date

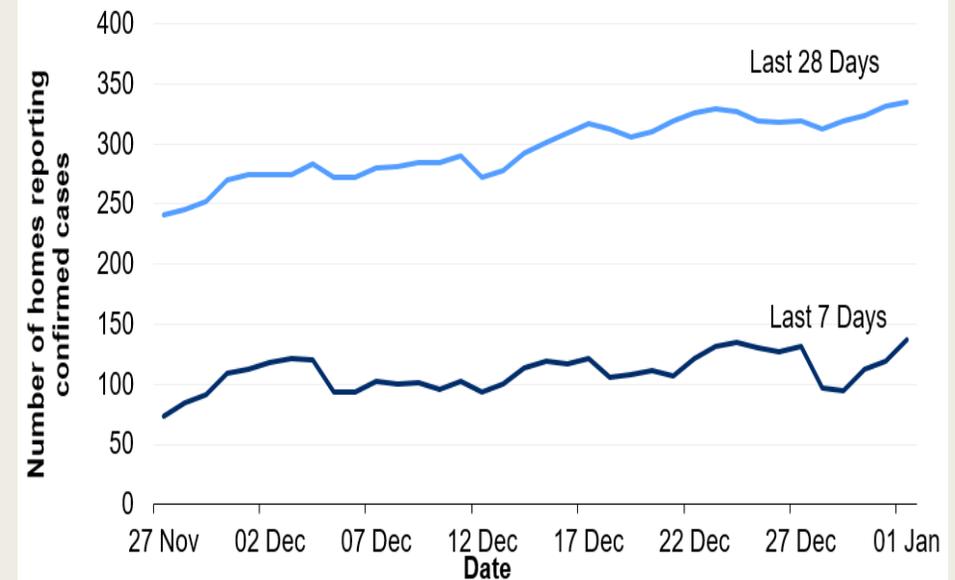
Section 3 Review of DNACPR decision (if appropriate)

This order is to be reviewed by: Date:

Review Date	Full Name and Designation	Signature	S18 applies	Next Review Date
			<input type="checkbox"/> (not)	
			<input type="checkbox"/> (not)	

AMBULANCE CREW INSTRUCTIONS
If Cardiopulmonary Arrest occurs, please do not attempt CPR. All other appropriate treatment should be given.
Any other specific instructions:

Chart 1: Number of adult care homes which have notified CIW of one or more confirmed cases of COVID-19 in the past 7 or 28 days, up to 1 January 2021



Source: Notifications of Cases received by Care Inspectorate Wales

Good decision-making

– means: those making decisions about healthcare act with openness and transparency, in line with professional and legal responsibilities, and:

- consult people as much as possible in the time available and provide adequate time for their decision making (with an advocate if wished), especially around end of life care and Do Not Attempt Cardio-Pulmonary Resuscitation (DNACPR) decisions
- involve people as much as possible in aspects of care planning that affect them, taking into account their individual needs and preferences
- promote equity by assessing and responding to individual need, avoiding blanket policies based on protected characteristics especially disability or age
- take into account all relevant views expressed and be open to challenge
- be clear about what decisions need to be made, and the model of care or analysis being applied
- be open about what decisions have been made, and why, and who is responsible for making them
- try to ensure that no person or group is excluded from being involved in decision making that affects them
- be accountable for the decisions taken or not taken.
- take decisions reasonably, rationally, based on evidence, with a clear, practical process.
- record decisions and actions along with the justification or reasons for them.

COVID-19, children and schools

Rules and guidance on meeting up

	England	Scotland	Wales	Northern Ireland
 How many people outdoors?	Six from multiple households	Up to six aged 12+ from two households*	Up to 30 outdoors	Up to 15 outdoors
 At what distance?	1m 'plus'	2m apart - aged 12+ only (less in some premises)	2m apart - age 11+ only (less in some premises)	2m apart
 Indoors	Six from multiple households	Up to six aged 12+ from two households*	Up to six aged 11+ from an "extended household"***	Six from two households

*In Scotland, under 12s from the two households don't count towards total
**In Wales, under 11s from "extended household" don't count towards total

BBC



What next:

- Dealing with the backlog fairly
- Possible recurrence of pandemic
- Staff wellbeing
- Ethical expectations of services

On 1 June 2020, The Health and Social Care (Quality and Engagement) (Wales) Act became law.



- Welsh Government is now working to bring the Act into force in spring 2023.
- The Act will:
 - strengthen the existing duty of quality on NHS bodies and extend this to the Welsh Ministers in relation to their health service functions;
 - establish an organisational duty of candour on providers of NHS services, requiring them to be open and honest with patients and service users when things go wrong;
 - strengthen the voice of citizens, by replacing Community Health Councils with a new all-Wales Citizen Voice Body that will represent the interests of people across health and social care; and
 - enable the appointment of Vice Chairs for NHS Trusts, bringing them into line with health boards.

Promoting equity, diversity and inclusion

- Equality Act 2010 Protected Characteristics
- Coproduction
- Ways of listening and hearing
- Allyship- check in, call out, report, escalate

Diolch --- Thankyou

Questions?