



Healthcare Professionals Forum (HPF)

Minutes of the meeting held on Friday 2nd September 2022 via Microsoft Teams

Present:

Gareth Evans	GE	Acting Executive Director of Therapies and Health Science and Executive Lead of HPF
Mandy Jones	MJ	Nursing Representative (Vice Chair)
Ian Douglas	ID	Dental Representative
Manon Haf	MH	Optometry Representative
Dr Tim Davies	TD	Primary and Community Care Medical Representative
In Attendance:		
Teresa Owen	TO	Executive Director of Public Health
Claire Wilkinson	CW	Deputy Director – Operational Workforce
Rona Newton	RN	PA to Executive Director of Therapies and Health Science – for minutes

It was noted that the meeting was being recorded in Teams for administrative purposes only.

H22/23 Welcome, Introductions and Apologies

H22/23.1 The Vice Chair opened the meeting, and acknowledged due to the number of apologies that the Forum would not be quorate and therefore no decisions would be made, however, it was agreed that the meeting would continue in order to engage with the guest presenters.

H22/23.2 Apologies received:

Jane Wild, Healthcare Science Representative (Chair HPF)
 Adrian Thomas, Executive Director of Therapies and Healthcare Sciences
 John Speed, Community Pharmacy Representative
 Dr Faye Graver, Mental Health Medical Representative
 Fiona Giraud, Midwifery and Women's Services Representative
 Susan Murphy, Pharmacy and Medicines Management Representative
 Matt Joyes, Associate Director of Quality (Guest)

H22/24 Declarations of Interest

H22/24.1 No declarations of interest were made.

H22/25 Draft minutes of the meeting held on Friday 10th June 2022 – for approval.

H22/25.1. The Forum members accepted the minutes of the meeting held on 10th June 2022 as an accurate record of the meeting.

<p>H22/26 Matters arising and summary action log</p> <p>H22/26.1 Updates were provided for incorporation into the summary action log.</p>	
<p>H22/27 Public Health Update – Teresa Owen (TO), Executive Director of Public Health</p> <p>The HPF Vice Chair welcomed Teresa Owen, Executive Director of Public Health for the annual update to HPF members. TO clarified that she is also the Executive Director responsible for Mental Health and Learning Disabilities (MHL), Test Trace and Protect (TTP) and Welsh Language (WL) however noted that the MHL agenda was brought to HPF earlier this year, so would concentrate this discussion around Public Health (PH).</p> <p>There were three main areas under discussion at the meeting today:</p> <ul style="list-style-type: none"> • PH transfer / Operating Model • Responding to Ministerial Priorities – Work Plan • Commissioning Intentions <p>Aspects of the Ministerial priorities discussion included smoking cessation, infant feeding and healthy weight in relation to population health, also immunisations, Well North Wales partnerships; and the Mental Health and emotional wellbeing/Together for Mental Health Strategy and service delivery plan which was shared with the HPF members at the March meeting. A discussion ensued, which included highlighting optometry and dentistry in Public Health.</p> <p>The Vice Chair thanked TO on behalf of the members for joining the HPF, for her valuable time and the important information shared.</p> <p>[Teresa Owen left the meeting]</p>	
<p>H22/28 Quality Strategy update – Erika Dennis, Quality Lead Manager on behalf of Matthew Joyes, Associate Director Of Quality, Quality Directorate</p> <p>It was noted that this agenda item was withdrawn from the agenda prior to the meeting and guest attendees stood down. The Draft Quality Strategy will be forthcoming at a later date.</p>	
<p>H22/29 People Strategy update – Claire Wilkinson (CW), Interim Deputy Director – Operational Workforce, Workforce and Organisational Development</p> <p>The Vice Chair welcomed Claire Wilkinson, Interim Deputy Director of Operational Workforce to discuss the People Strategy update. CW clarified that her position has been extended to March 2024, and that going forward she will also be responsible for the management and leadership of the Organisational Development function, and on the part two element of the Stronger Together programme.</p> <p>Presentation slides were sent in advance to HPF members to review in order to make best effective use of time at the meeting in discussion. The People Strategy and Plan, and the First year Delivery Plan which have both been signed off by the Health Board;</p>	

the First year Delivery Plan used to develop the People Strategy and Plan Workbooks, and the Delivery Plan aligned to the 5 programmes of Stronger Together documentation were also shared in support of the presentation slides for discussion.

Aside from the key themes of the Stronger Together programme, in recognising and highlighting the problem statement regarding recruitment, CW wished to focus on the thoughts of the members of HPF and allow the members the opportunity to feedback what they feel could be done differently in order to improve the process currently in place. A discussion ensued and members appreciated the perception and challenges of the problems with recruitment and retention, issues with elements of establishment control and the TRAC system were noted, and the general attraction and branding of BCUHB.

HPF members were invited to contact CW if they have an interest in becoming involved in the improvement process, communication and engagement, and members would be very welcome to join the next workshop.

The Vice Chair thanked CW for joining the meeting and taking the time to bring forward the recruitment discussion with the members.

[Claire Wilkinson let the meeting]

H22/30 Chair's and member's summary reports

H22/30.1 HPF Member Report_ Nursing

Members received the Vice Chair and Nursing representative written summary for information from Mandy Jones and noted the following:

Good News to Share:

Mrs Angela Wood, has commenced as the Executive Director of Nursing and Midwifery Services BCUHB.

The operating model for Nursing is progressing. To date the following posts have been appointed to:

Deputy Executive Director of Nursing (Acute services)– Ms Mandy Jones

Deputy Executive Director of Nursing (Primary and Community Services) - Ms Chris Lynes

Integrated Health Economy Director of Nursing East – Andrea Hughes

Integrated Health Economy Associate Director of Nursing East – Naomi Holder

Integrated Health Economy Associate Director of Nursing Central – Jane Woollard

Positive feedback following formal launch of the revised Non Medical Prescribing policy July. Focused on raising awareness and supporting manager of non medical prescribers to understand the governance.



Quick guide for
MM03 managers.pp

Facilitating Practice Learning in Community Hospital. Dolgellau.



Facilitating practice
learning in commun

WNCR Welsh Nursing Clinical Records roll out completed for East. Progressing to Central.

Key Issues for attention of HPF:

NMC Nursing & Midwifery Council. A public consultation on proposed changes to the education programme standards. Before Brexit, when the UK left the European Union, the standards had to follow the same rules as all other countries in the European Union. This consultation is to propose how the standards for the UK can be improved by making some changes.

H22/30.2 HPF Member Report_ Dentistry

Members received the Dentistry representative written summary for information from Ian Douglas and noted the following:

Good News to Share:

The Dental Academy in Bangor is getting closer to opening

Key Issues for attention of HPF:

There is a number of significant NHS GDS contracts being handed back to the LHB. One of the reasons is that Providers are finding it increasingly difficult to retain their performers within the NHS system

There are general and widespread R&R issues.

The LHB restructure may have a disruptive effect on the provision of NHS dentistry if stability is lost and fragmentation occurs.

The LHB is shortly to go out to tender to try and procure more NHS services across the area

H22/30.3 HPF Member Report_Primary and Community Care

Members received the Primary and Community Care representative written summary for information from Dr Tim Davies and noted the following:

Good News to Share:

In July a 4.5% pay rise for all GPs, junior Drs and consultants was announced in Wales, subject to contract changes, this seemed reasonable at the time.

Key Issues for attention of HPF:

August 2022 – the main GP issues continue to be workforce shortage (poor recruitment and retention), excess/very high demand for access, limited capacity from a diminishing/sick workforce (covid is still causing significant absences, as are holidays the first proper ones for many years now). In addition, we have limited timely referral options and more management to do whilst patients are frustratedly waiting, if they cannot afford private care. Many patients are coming back from ED who have not been seen or didn't want to wait (ED waits often >12 hours), and many afraid to call ambulances or attend ED and similarly refusing admission when we deem it necessary. We have had WAST unable to offer any transport on several occasions now, leaving relatives no option but to carry in infirm patients.

We continue to press for a **Secondary Care Dashboard** to enable ease of information about what is and is not currently actively happening in the hospital outpatient settings. As said previously some 20% of our consultations are about waiting times/deteriorating needs and no specialist appointment timescale.

Setting up of **LHB communication hubs**/patient advocate departments are being pushed by GPCW and WG to try and stop GPs becoming simply admin hubs for secondary care delays, but so far nothing is happening, which is very frustrating. These issues form part of about 20% of our consultations so are all adding to the dismay at delays in seeing/contacting GPs.

Sustainability concerns remain across the patch but are particularly acute in Colwyn Bay and the Conwy Valley areas. We need to strive to make the jobs less onerous and more attractive by cutting the workload and making shifts manageable. Older GPs are also being encouraged to retire by the pensions mess which BMA keep asking government to sort.

As secondary care struggles to see patients and the backlog plans are slipping further we are seeing more and more work slipping into primary care as discharge letters and many referral letters ask us to start inappropriate meds, and perform monitoring which used to be done in secondary care. This all adds pressure and scares off more potential GPs! See link to **communication standards for Drs in Wales** these have been endorsed since 2018 in attempts to stem the work slippage:

[all-wales-communication-standards-between-primary-and-secondary-care.pdf](https://gov.wales/all-wales-communication-standards-between-primary-and-secondary-care.pdf)
(gov.wales)

Adhering to these is polite, courteous, good medical practice and will help rebuild some of the worth of GPs we hope. Some newer consultants are following these really well, starting new meds themselves, issuing sick notes and giving pts blood forms for monitoring, others not at all asking us to prescribe amber drugs and monitor with no shared care plans. We keep trying to give gentle reminders!

Within the QI (**quality improvement**) part of the GP contract this year there is a data quality project which should help capture just how busy GPs are, to help address capacity and access problems, but many surgeries are struggling to complete the complex spreadsheets and keep up with these areas (capturing our plethora of activity is very complicated as a lot happens on the hoof and between booked patients) and the QAIF and enhanced service demands are also proving difficult to achieve - these

thresholds for GP payment are now back to normal pre covid requirements. Many are fearing they won't achieve these areas and will have a financial hit risking their sustainability.

GP Estates - many are very cramped and with more and more services, e.g. stroke outreach, asking to come to surgeries, as well as increased training demands surgeries do not know what to do. Also with bills rocketing (some renewal quotes up 300%) GPs will have to charge an increased service charge to services but many departments seem to have no funding for this. GPs are not a charity so the GP estates expansion needs urgent planning or health centres/community bases need better utilisation.

H22/30.4 HPF Member Report_ Optometry

Members received the Optometry representative written summary for information from Manon Haf and noted the following:

Good News to Share:

- Paul Cottrell has been appointed as interim optical advisor. There are reports that a permanent OA has been appointed to begin the role in September.
- New NWROC committee elected at AGM May 2022. Sian Joesbury will continue for an extended term
- Optometry Wales progressing well in contract reform negotiation. OW are looking to organise some practice sessions over the next few months to detail how practices will be supported through this new way of working and what contractual obligations they may have.
- With the support of OA, BCU is collating email details for practitioners to improve communication and for IG training to prepare to implement EPR.
- A recent information session was hosted by Sharon Beattie, OA for Cardiff & Vale UHB on OpenEyes Electronic Patient Record and OpenEyes electronic referral system.
- Eye Care Collaborative meeting went ahead in July 2022. Eye Care Pathway Highlight report was shared, stating that there was good progress re Diabetic Retinopathy (ODTC) pathway, Cataract pathway: outsourcing Spa Medica on target, however there were some on-going challenges regarding theatres and staffing concerning onsite cataract patients and recruitment was a threat regarding AMD pathway
- Discussions on-going regarding expanding Diabetic Retinopathy ODTC with expressions of interest to be shared soon
- IOP pathway in process of being signed off and rolled out
- Bilateral pathway signed off with BCU for onsite surgery however Spa Medica don't use autorefractor between first and second eyes which would lead to some delays. Bilateral pathways have lots of benefits to patients, HB and primary care due to reduced number of appointments required.

Key Issues for attention of HPF:

- Cataract outsourcing still on-going. Some surgery is taking place at sites (mainly complex). Concerns have been raised re patients being seen

out of turn with some longer waiters with poorer vision waiting longer than recent referrals with better vision. Some recently referred “green” patients seen before longer waiting “amber/red”. This is being looked into by HB and practitioners encouraged to report any irregularities/inequities to HB for investigation. Patients are being discharged from Spa Medica and Wrexham after only having one eye operated on despite being referred in for both eyes. Roger Hasslett Pan BCU clinical lead progressing. Hopefully a lot of the above issues will be discussed, risks identified and suggested solutions in an on-going meeting scheduled mid August.

- North Wales now have 10 IP qualified optometrists who are still waiting for prescription pads to be signed off. Hopefully an IPOS scheme can be implemented soon
- National Digital Programme: Some delays as electronic patient index functionality is not working at the moment so OpenEyes cannot be rolled out until this is fixed. Also waiting on information governance data processing impact assessment to be completed. All primary care optometrists need to complete the IG toolkit as well as information security training.
- There are vacancy challenges and recruitment issues across all sites resulting in referrals not being processed in a timely manner. There is also evidence of recorded delivery referrals not being received/processed, and WECS triage optometrists report that they aren’t receiving regular triage work.
- Workforce review in BCU was highlighted as an outcome recommendation in a recent audit and will be conducted. Roger Haslett has highlighted the difficulties to recruit in North Wales and it has been suggested that the development of the regional treatment centres will make North Wales a more attractive area to work and will hopefully help with recruitment challenges.

H22/30.5 HPF Member Summary Report - Midwifery and Women’s Services

Members received the Midwifery & Women’s services representative written summary for information from Fiona Giraud and noted the following:

Good News to Share:

National Student Survey results – Bangor University Rated No 1 for Midwifery across the UK

Results from the National Student Survey were released in July and the undergraduate midwifery programme at Bangor University scored an overall satisfaction rate of 98% and were top scoring midwifery programme in the UK.

Key Issues for attention of HPF:

None

H22/30.6 HPF Member Report_ Healthcare Science (HCS)

Members received the Healthcare Science representative written summary for

information from Jane Wild (apologies noted) and noted the following:

Good News to Share:

Healthcare Scientists at BCUHB came together in July to discuss collaboration and the progression and continued implementation of *'Healthcare Science in NHS Wales - Looking Forward'* at BCUHB. This was well attended with representation from across HCS professions. There was agreement that there would be significant benefits in increased collaboration and networking and next steps were agreed. A Terms of Reference is being developed for a BCUHB HCS network and the next meeting being arranged for the Autumn.

Key Issues for Attention of HPF:

The next Advancing Healthcare Awards Wales Conference and Award Ceremony is taking place on 18th November 2022. HCS at BCUHB are being encouraged to make nominations. Healthcare Science Cymru 2023 conference will also be taking place on Wednesday 15th March 2023.

The National Healthcare Science Network's recommendations for Consultant Clinical Scientists have now been formally communicated to Health Boards and Trusts. Link to the paper and recommendations are included below.

<https://heiw.nhs.wales/files/consultant-clinical-scientist-recommendations-englishpdf/>

<https://aagic.qig.cymru/files/consultant-clinical-scientist-recommendations-cymraegpdf/>

H22/07.7 HPF Member Summary Report - Pharmacy and Medicines Management

Members received the Pharmacy and Medicines Management representative written summary for information from Susan Murphy and noted the following:

Member area update

- A Medicines Management Strategy is in development to support the Quality Strategy 2022-2025.
- A national program is on-going to develop an electronic prescribing and medicines administration (EPMA) multi-vendor framework to support a tender process to find the best system for Wales. In July 2022, a BCU secondary care electronic prescribing and medicines administration (EPMA) bid was approved by Welsh Government to commence pre-implementation work in North Wales.
- Pharmacy Technical Services are critical to ensuring the most vulnerable patients in Wales are able to receive the benefits of increasingly sophisticated approaches to diagnosis and therapy. The provision of systemic anticancer therapy, parenteral nutrition and nuclear medicine all rely on the aseptic preparation and manipulation of medicines by these services. The Transforming Access to Medicines

Programme Business Case has been approved by Welsh Government to develop a National Technical Service hosted by NWSSP and will result in the development of a regional north Wales Hub. This transformation program is in progress and the anticipated opening of the north Wales hub is scheduled for 2030.

Good news to share:

The pharmacy led hepatitis C rapid test and treat service that began as a project based in Wrexham and Flintshire and was extended across Denbighshire and Conwy last year has now treated over 90 patients from disadvantaged and marginalised communities. The project won the “improving public health outcomes” in the Advancing Healthcare Awards Wales last year and the health board has now approved a long term business case for pharmacy funding so that the rapid test and treat service can continue and extend further into Anglesey and Gwynedd. The service has reduced the test and treat pathway from over 6 months to just two weeks and the positive impact of the project on the lives of patients has been covered in the local press.

[Rapid treatment programme having 'life changing' impact on homeless people living with hepatitis c](#) – Wrexham.com

['Life-changing' treatment for homeless people with hepatitis C](#) – The Leader

Key Issues for Attention of HPF:

None

H22/31 Items to be received for information:

H22/31.1 Minutes of the National Joint Professionals Advisory Committee (NJPAC) meeting held on 1 July 2022

The minutes were received and noted.

H22/31.2 Minutes of the Quality, Safety and Experience Committee held on 3 May 2022

The minutes were received and noted.

H22/32 Summary of information to be included in Chair's report to the Board

- Public Health Update

HPF members supported the transition of the public health team into the health board. The importance of prevention, early detection and wellbeing is evident and the HPF members can see how the Public Health Team can influence the integrated health communities to ensure population health is firmly embedded within their planning.

- People strategy

<p>HPF members were encouraged by the work Claire is leading on relation to recruitment and attraction. Members welcomed the liberation of the recruitment process being proposed. Members recommended that a wide, broad and innovative approach is considered within the national constraints to address local needs and offer incentives aligned to increasing tuition fees and promotion of grow your own. The focus on promoting a positive learning environment being offered was encouraged by celebrating success within our wider communities.</p>	
<p>H22/33 Date of next meeting noted as: Friday, 2nd December 2022 to be held 9.30-12.30 via Microsoft Teams</p> <p>HPF future meeting dates: Friday 3rd March 2023</p>	