



## Healthcare Professionals Forum (HPF)

Minutes of the meeting held on Friday 2<sup>nd</sup> December 2022 via Microsoft Teams

<b>Present:</b>		
Gareth Evans	GE	Acting Executive Director of Therapies and Health Science and Executive Lead of HPF
Jane Wild	JW	Healthcare Science Representative (Chair)
Mandy Jones	MJ	Nursing Representative (Vice Chair)
Ian Douglas	ID	Dental Representative
Fiona Giraud	FG	Midwifery and Women's Services Representative
Manon Haf	MH	Optometry Representative
Dr Tim Davies	TD	Primary and Community Care Medical Representative
Dr Chris Thorpe	CT	Specialist and Tertiary Care Medical Representative
Susan Murphy	SM	Pharmacy and Medicines Management Representative
Steven Grayston	SG	Therapy Services Representative
<b>In Attendance:</b>		
Phil Meakin	PM	Associate Director of Governance
Gill Harris	GH	Interim CEO
Hugh Mullen	HM	Interim Regional Treatment Centre Programme Director
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.		
<b>H22/34 Welcome, Introductions and Apologies</b>		
<p><b>H22/34.1</b> The Chair opened the meeting and welcomed those present. The Chair noted the absence of apologies for Adrian Thomas, previously the Executive Lead at HPF who has recently retired. The Chair wished to note gratitude for Adrian Thomas's support and contributions to the HPF over the years, and the members joined the Chair in wishing Adrian a very long and happy retirement.</p>		
<p><b>H22/34.2</b> Apologies received: John Speed, Community Pharmacy Representative Dr Stuart Porter, Mental Health Medical Representative</p>		
<p><b>H22.34.3</b> The Chair noted that there are three members, herself as Healthcare Science Representative, Mandy Jones, Nursing Representative and John Speed, Community Pharmacy Representative whose first term tenures are due to be renewed on 7 December 2022, and the process of renewals will be initiated following the meeting.</p>		
<p><b>H22.34.4</b> The Chair extended a special welcome to two new members at HPF. Stuart Porter, who unfortunately had to send his apologies for today's meeting, joins the HPF as a temporary member in the absence of Dr Faye Graver, Primary and Community</p>		

<p>Care Medical representative who is currently on maternity leave; and Steven Grayston, who joins us as the Therapy Representative while Gareth Evans is acting as Lead Executive. The HPF members made their introductions for the benefit of the guest presenters and the new members.</p>	
<p><b>H22/35 Declarations of Interest</b></p> <p><b>H22/35.1</b> No declarations of interest were made.</p>	
<p><b>H22/36 Draft minutes of the meeting held on Friday 2 September 2022 – for approval.</b></p> <p><b>H22/36.1.</b> The Forum members accepted the minutes of the meeting held on 2<sup>nd</sup> September 2022 as an accurate record of the meeting.</p>	
<p><b>H22/37 Matters arising and summary action log</b></p> <p><b>H22/37.1</b> Updates were provided for incorporation into the summary action log.</p> <p><b>H22/37.2</b> The Exec Lead gave a verbal update regarding action relating to the appointment of deputies and clarification concerning the process that will be employed to formally appoint deputies, and their specific role within the group. For clarity, the commitment of the main member must be adhered to as per the current Terms of Reference; however, the use of the deputy is deemed to be useful in order to keep the meetings quorate, as members are so few in number. The Terms of Reference will be formally amended to reflect this change and will then need to be presented at the Health Board for ratification.</p> <p><b>H22.37.2</b> The Clinical Strategy paper was shared with the members, as was the Clinical Senate Terms of Reference and members were invited to comment on both.</p>	
<p><b>H22/38 Targeted Improvement (TI) Update</b> - Presentation by Phil Meakin (PM), Associate Director of Governance</p> <p>The Chair welcomed the Associate Director of Governance to update the HPF members on the position of Targeted Intervention within BCUHB, what has changed since the last update and key areas of focus of importance to our patients and staff.</p> <p>PM gave a brief introduction of his previous experience and current responsibilities then went on to highlight the definition of 'Targeted Intervention' and the specific changes relating to BCUHB in more detail. It was noted that a formal self-assessment had taken place and targets agreed by the Board and with Welsh Government for the next 12 month period.</p> <p>Following the presentation, a question and answer session ensued. It was confirmed that the HPF representatives would continue to be welcomed at the TI Evidence and Outcomes group meetings that will be ongoing.</p> <p>The Chair thanked Associate Director of Governance very much for joining the meeting and for the very interesting and informative discussion with the members.</p>	

[Phil Meakin left the meeting]

## **H22/39 Annual CEO Update** – verbal update from Gill Harris (GH), Interim CEO

The Chair welcomed the Interim CEO to the HPF meeting and the members made their introductions.

The Interim CEO began the verbal update with good news to share and to say thank you and congratulations to everyone regarding the awards received over the last 12 months, across both Wales and the UK, and in particular, the event held at Venue Cymru on 21 October celebrating the achievements of our staff across the Health Board. It was a fantastic event that highlighted the phenomenal amount of progress and innovation that was required to continue throughout times of Covid and the pandemic, keeping patients both safe and informed, and we need to continue to recognise the work being taken forward when times are tough.

Unfortunately, there continues to be significant challenges in terms of our workforce and gaps in our workforce and our ability to care for patients. However, thanks go out for the care and compassion, on every level, which is amazing at a time when there is tiredness and stress, added to that facing an incredibly difficult winter, also now facing industrial action and troublesome and challenging times ahead.

The Interim CEO is having conversations with colleagues and teams on the cost of living crisis, a number of staff are really suffering and taking ideas to Executive colleagues to see how we can support our staff during these incredibly difficult times. It was noted that it is important to ensure that team leaders are listening to staff, and recognition that it is not easy to acknowledge financial difficulties, particularly in the lead up to Christmas, which is a considerable additional burden on top of the general stresses of daily life.

A number of refugees have been accommodated within North Wales, and thanks go out to our colleagues stepping up to help support local authorities with that action, with safeguarding and screening that needs to be undertaken and once again recognising the additional stress for our public health colleagues.

It was noted that the Duty of Quality and Candour becomes live in April 2023. The Nursing and Quality team have been doing a huge amount of work on this, and have moved into a more transparent and positive space with this.

There are conversations taking place with Air Ambulance concerning their flying base. Our own engagement colleagues are fully involved in this wider engagement exercise, to ensure that our public are also fully involved with us on this process, and WAST colleagues are having their own conversations.

As mentioned earlier in the update, winter planning is in progress, working with Local Authority colleagues and WAST, who are experiencing similar problems regarding staffing of care homes, care home packages and trying to prevent people being admitted into the hospitals. A lot of work is being done to develop the primary care strategy, the accelerated cluster programme, and how we can work differently with pharmacy colleagues, optometry colleagues and therapy colleagues to look for

alternatives before going through the emergency department route. A huge amount of engagement is taking place and the timeline for this strategy is before the end of March.

In relation to the Targeted Intervention presentation, financial challenges and performance challenges puts us under Welsh Government (WG) scrutiny and by end of this financial year believe to be in deficit by 10 million. It is important to try to prevent unnecessary expenditure to bring the Health Board back to a break-even position, and we are working with teams for a greater level of flexibility, and credibility.

The Integrated Health Community Director's are beginning to look for ways to work differently, making decisions locally to best support our patients and best support our innovation. The Healthcare Inspectorate Wales visited Ysbyty Glan Clwyd (YGC) earlier this week, there was acknowledgement that improvement work is gradual, however we know there is more to be done. There was recognition of the engagement of staff even under the current pressures.

The Interim CEO summed up the update to say that a huge amount work is going on across the HB, there is a focus on progressing business case's to support more planned activity at speed, and support more green activity in order to support both unscheduled and planned care. The planning framework was presented this week, and progress is ongoing for the Integrated Mid Term Plan (IMTP), which is due to be presented to WG in March 2023.

A questions and answer session ensued.

The Chair thanked the Interim CEO very much for the comprehensive and informative annual update.

[Gill Harris left the meeting]

**H22/40 Introduction to Regional Treatment Centres - Presentation by Hugh Mullen (HM), Interim Regional Treatment Centre Programme Director**

The Chair welcomed the Interim Regional Treatment Centre (RTC) Programme Director to the HPF meeting and introductions were made by the members present.

The presentation and discussion slides regarding the RTC's were shared with the Forum members prior to the meeting.

The presentation included the following:

- Update from the presentation shared at the HPF meeting June 2022
- Establishment of Programme and summary of progress to date
- Overview of complexity and challenges
- Invitation for continued involvement and engagement

The Interim Programme Director gave an overview of the RTC programme including the Strategic Outline Case, the scope of the programme, the model base and the requirement for transformational change. Also a list of specialities included within the RTC model.

The programme update included the focus of the recent work to drive the development forward; strengthening of programme governance including the creation of the Strategic Clinical Reference Group; engagement with external suppliers; completion of a model of care; continued engagement with Welsh Government (WG) and refining the plan establishing realistic timescales for the required work.

It was emphasised that clear effective comprehensive communication and engagement is ensured and the opportunity to join the HPF meeting today is welcomed. The Interim Programme Director extended the offer to meet and engage with any groups that the HPF members represent separately. It was highlighted that the clinical support will be key to the successful development of the proposal and the views of the members on how best to engage and communicate would also be welcomed.

A question and answer session ensued.

The question of locations and workforce were raised, and the potential for the RTC's to be operational a minimum of 6 days per week.

In terms of the workshops, there was a request that an invitation is extended for a pharmacy representative to attend, also for a further conversation with the Chief Pharmacist and the three pharmacy directors.

The question of preparation of starting the pathway work and giving sufficient time to upskill the workforce was raised. Project managers are being appointed in order to support the pathway work, which will be starting in January 2023 and will expect that to be multi disciplinary. Further questions in terms of workforce and in terms of delivering service by appropriate medical nursing staff and availability to perform the work were raised. Emphasis was requested to be placed on the multi disciplinary aspect of the workforce, and finance to support this right from the start of planning.

A question regarding sufficient clinic rooms to deliver the services required was raised, and if growth factored in to the space plans.

There was a question as to whether there would be consideration for integration of dentistry into the RTCs.

Future proofing for technological and IT advances over the next 4 to 5 years was also raised. The digital workstream is due to start this month.

The Chair thanked the Interim RTC Programme Director very much for joining the HPF meeting, and for the useful, informative and engaging discussion.

[Hugh Mullen left the meeting]

## **H22/41 Chair's and member's summary reports**

The Chair noted for information that she was in attendance at a number of meetings since the last HPF meeting, including Health Board Workshops; Health Board Meetings; Board to Board meetings; and the National Joint Professionals Advisory Group (NJPAC).

### **H22/41.1 HPF Member Report\_Healthcare Science (HCS)**

Members received the Healthcare Science representative written summary for information from Jane Wild and noted the following:

**Good news to share:**

The Community Cardiac Physiology team in BCUHB have won the NHS Wales Award for Improving Health and Wellbeing.

A number of national Healthcare Science programmes have been set up and are progressing well. BCUHB HCS colleagues are contributing to these programmes that are focussed on:

- Culture and integrating
- Quality and Safety
- Research and Innovation
- Service Transformation
- Workforce and Education

Healthcare Science Cymru 2023 conference will be taking place on Wednesday 15th March 2023.

**Key Issues for Attention of HPF:**

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 include below.

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

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

A number of HCS programme spotlight sessions have been set up focussing on the Consultant Clinical Scientist paper with the next one being on Higher Specialist Scientist equivalence and entry on the HSS register.

BCUHB will benefit from considering the recommendations within this paper in order to maximise the value of Consultant Clinical Scientists at BCUHB

**H22/41.2 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:**

Funding for x3 metastatic clinical specialist nurse post and x3 bereavement nurses to support the three integrated health communities

**Key Issues for attention of HPF:**

*Nurse Staffing Levels (Wales) Act 2016* a formal annual presentation to the Board is required detailing the respective nurse staffing levels for each individual ward

pertaining to sections 25B to 25E of the Act.

This report and accompanying appendices aimed to assure the Board that the legislative requirements associated with Section 25B of the Act and “*duty to calculate and take steps to maintain nurse staffing levels*” are being maintained.

*Harm review Panels* – Covid HCAI commencing.

*Safe Care Partnership* - Improvement Cymru, the Institute for Healthcare Improvement (IHI) and NHS Wales Health Boards and Trusts have joined together to create the Safe Care Partnership.

Every health board and trust in Wales has the opportunity to join the partnership. Improvement Cymru initiated the partnership to accelerate the pace and scale of improvements in patient safety on a national scale by drawing together international expertise, national support and local knowledge. Health boards and trusts are being coached and supported by Improvement Cymru and IHI to improve the quality and safety of care across their systems.

The Safe Care Collaborative will aim to demonstrate significant improvements and performance by focusing on the following four work stream areas:

1. **Leadership for patient safety improvement** - Working together to support development of the culture and learning system within each health system and across NHS Wales.
2. **Safe and effective community care** - Keeping people safe in community settings through prevention of deterioration and appropriate response to acute health care needs is achieved.
3. **Safe and effective ambulatory care** - Keeping people safe in the ambulatory care environment, preventing hospital admissions and treating acute care needs in the most appropriate settings.
4. **Safe and effective acute care** - Keeping people safe in hospital, ensuring that structures and processes



SAfe care  
partnership.pdf

Nursing Support Workers' Day on Wednesday 23 November.

### **H22/41.3 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 has opened in Bangor

#### **Key Issues for attention of HPF:**

I would imagine the issues are very similar to the other professions.

R&R is very difficult and wage costs are escalating. Energy and material costs have increased greatly.

The existing NHS contract means that the only way practices can increase income to cover additional costs is to offer treatment privately in addition to their NHS contracts.

Contract Reform is unsettling many practices as targets are proving unattainable and risk of clawback is a threat. The management team are very aware of this and are doing their best to provide reassurance.

A small number of practices have handed back contracts. Practice targets for next year not yet decided by WAG and this is causing some concern amongst practices.

#### **H22/41.4 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:**

Oct 2022 New GMS contract for 22-23 announced - 4.5% overall pay rise, and hopefully less bureaucracy.

##### **Key Issues for attention of HPF:**

Recruitment, medical retention problems with GMS and managed surgeries still huge. Ongoing slippage of secondary care work, and growing patient frustration with hospital waiting times.

#### **H22/41.5 HPF Member Summary Report\_Optomety**

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

##### **Good News to Share:**

- Optometric Advisor – Richard Price has started in post. He is progressing IOP pathway and gathering communication details to ensure that all practices are on the BCU communication database.
- Primary Care contracting manager for optometric practices has also been appointed.
- There has been agreement and clarification on second eyes (cataract) being outsourced to Spa Medica. Current outsourcing 600+/month so on target to meet WG target March 2023 (not to exceed 104 week wait).
- Contract Reform is progressing
- Audit on referrals to Wrexham Maelor showed lots of learning opportunities, and highlighted the need for one central address for referrals (for all sites) as non urgent referrals and expedites were being sent via emergency email, when this was not the most appropriate route
- ODT contracts due to expire March 2023, but hopes to expand via expression of interest in interim of implementation of new contract

- GRIT looking at cataract activity across BCU

### Key Issues for attention of HPF:

- Clinical Lead has handed in his notice and is planning on “retiring and returning” to a 0.5 post. So once again BCU are looking for a Pan-BCU clinical lead
- Harder to recruit an Ophthalmologist on a 0.5 contract so hoping to recruit WTE and share between Wrexham and Abergele
- Lack of admin staff resulting in some referrals from July only being scanned in mid-October
- Workforce shortages across all sites and specialities, recruitment difficulties.

### H22/41.6 HPF Member 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:

**Health Education and Improvement Wales – (HEIW)** – A proposal to develop a programme of work to support improvements required from a workforce and education perspective within the NHS Maternity and Neonatal Service in Wales was presented in September 2022 and supported by Service Lead. Please see full proposal attached.



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**HEIW Maternity and Neonatal Workforce Transformation Programme** – As part of the above proposal this programme will prioritise and focus on the following;

- Engagement and Healthy Workforce.
- Attraction and Recruitment
- Seamless Workforces Models
- Educational and Learning
- Leadership and Succession
- Building a Digitally Ready Workforce.

**Maternity and Neonatal Safety Support Programme (MatNeon SSP)** – remains in Discovery phase with a final report to be published in February 2022.

**MatNeo Safety Champions** – Local Champion for Maternity (0.6wte) and Neonatal (0.4wte) have been appointed, will commence in November 2022 and be managed by Improvement Cymru.

**Midwifery Streamlining** – 28 newly qualified midwives have been appointed to the

Health Board. With their introduction, the Midwifery Services is fully compliant with Birth Rate Plus requirements and has no vacancies at present.

**Key Issues for Attention of HPF:**

No issues for escalation or for HPF's attention.

**H22/41.7 HPF Member Summary Report\_ Mental Health Medical**

Members received the Mental Health Medical representative written summary for information from Stuart Porter and noted the following:

**Good News to Share:**

Mother and baby unit development is progressing. NHSE and NHSW have agreed funding for an eight bedded MBU on the Countess of Chester site. Two beds will be ring fenced for women from North Wales. Plans are in place to ensure robust interpretation for Welsh speaking women and to recruit Welsh speaking staff to key roles. Likely time scale to the unit opening is 18-24 months.

Funding has been agreed for a team base for the Early Intervention Service in the East. The team is likely to be able to start holding cases in the near future.

111+2 is a WG mandated programme where a citizen with issues related to mental wellbeing can directly access a trained call handler called a Mental Health Wellbeing Practitioner to be assessed. This will enable the citizen to speak to someone to find help and solutions to address their mental wellbeing issues in a timely manner. GPs will be able to direct any individuals with mental wellbeing issues to this service. It is anticipated that this service will not only improve access to care for these individuals but also reduce the need to contact GP/GPOOH or ED with these issues. In North Wales- recruitment and training are currently underway with a plan to go live in Mid-January 2023.

**Key Issues for attention of HPF:**

Staffing remains a pressure in certain areas of the service. Particularly adult community mental health services and senior medical staff.

**H22/41.8 HPF Member Summary Report\_Therapy Services**

Members received the Therapy Services representative written summary for information from Steven Grayston and noted the following:

**Good News to Share:**

**A few staff have won awards as follows:**

Dawn Leoni, Head of Speech and Language Therapy (west) Advancing Health Care Award in the Compassionate Leadership section – ceremony on the 18<sup>th</sup> November

2022

There were 3 other BCUHB therapy nominations shortlisted too at those awards, Alaw Haf Jones in the Speech and Language Therapy Assistant category, Jackie Pottle in the rehabilitation category (see below) and Jackie again in the new ways of working category for her work in the development of a pan Wales OT ovarian cancer prehabilitation service.

Jackie Pottle (AHP Cancer lead BCUHB) also won a Macmillan Professional Excellence award in Innovation for her work in setting up a Cancer Related Fatigue service (this was on the 9<sup>th</sup> November); and

Fran Waldock (Prison Dietitian) was also awarded Clinical Nutrition Professional of the Year 2022

### **Key Issues for attention of HPF:**

Therapies are in the process of setting up the AHP Collaborative in North Wales, which are being established in each Health Board in Wales and these will feed into the pan cluster teams across North Wales, which are also in the process of being set up/reformed from the various versions that have been in place before.

The aim will be to have a therapy lead on each of the 14 clusters across North Wales, with the collaborative providing the opportunity to learn and share across.

Therapies will no longer be required to formally take part in the streamlining process in Wales, which aligned student placements to jobs on graduation. This was somewhat restrictive as a process as it did cause some recruitment delays. That said, it did align commissioned places to jobs within Wales but at the expense of being able to widen the recruitment net in a timely way. Going forward, some elements of streamlining will remain but there will be more flexibility to recruit.

Therapies will be working on a recruitment strategy in relation to workforce pressures that are being felt across professional groups.

### **H22/41.9 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**

- Update on development of a pharmacy school in North Wales. We are pleased to report that the first stage of the GPHC accreditation process has completed. University is progressing with a view for recruiting students in 2024.
- A pilot project to support medicines optimisation in care homes was undertaken early 2022. Early indications suggest benefits across the multidisciplinary teams and a number of significant clinical issues were identified and addressed to reduce risk of harm and maximise therapeutic outcomes. We are currently scoping wider role out of this service for 2023/24.

- A pilot project has commenced in two community pharmacies to provide an adherence support service in December 2022, with a view to revising and rolling out further in January 2023. This service, along with a wider engagement programme, will support adherence for patients who live in their own homes using a patient-centred holistic approach to maximise therapeutic outcomes and minimise adverse effects. The programme is being rolled out using an agile methodology to help develop the service structure and supportive work undertaken alongside for best effect and efficiency.

#### **Good News to Share:**

- A virtual / in person recruitment event was held on the 24<sup>th</sup> November. A BCU wide event held in each of the three pharmacy staff that outlined the Healthier Wales Vision for Pharmacy; outline the changes by HEIW to pharmacy education over the next two years; how BCU pharmacy leads will support junior staff to develop and finally top tips around interview preparation and techniques. We are working hard to retain our junior staff and also to build links with universities and others to share our “brand” across the UK.

#### **Key Issues for attention of HPF:**

None

#### **H22/41.10 HPF Member Summary Report\_Specialist & Tertiary Care**

Members received the Specialist & Tertiary Care representative verbal summary for information from Dr Chris Thorpe and noted the following:

- Usual challenges and pressures around getting the work done
- Lack of bed space
- Not enough staff to deliver the care required
- Being unable to discharge patients home in a timely manner
- Recruitment and retention a constantly challenging situation
- There has been a decrease in the ability to use the internet and intranet recently which is also having an impact on services within the hospital site at Bangor

#### **H22/42 Items to be received for information:**

##### **H22/42.1 Minutes of the National Joint Professionals Advisory Committee meeting held on 11 November 2022**

The minutes were received and noted.

##### **H22/42.2 Minutes of the Quality, Safety and Experience Committee held on 5 July 2022**

The minutes were received and noted.

##### **H22/42.3 Minutes of the People, Partnerships, Population Health Committee**

**meeting held on 20 May 2022 and 12 July 2022**

The minutes were received and noted.

**H22/43 Summary of information to be included in Chair's report to the Board**

- **Targeted Intervention**  
HPF members were pleased that the forum will continue to contribute to the targeted intervention programme through HPF representation on the TI evidence and outcomes group.
- **Regional Treatment Centres**  
HPF members supported the approach being taken to develop clinical pathways and new models of service delivery in preparation for the regional treatment centres' availability. Members highlighted the need for workforce considerations within the early planning phases from both a capacity and capability perspective, with specific emphasis on the multi-professional requirements for the RTCs. HPF members highlighted the current challenge in releasing clinical staff to focus on the transformational change that will be required to maximise the impact of the RTCs and that this was a risk that should be considered.
- **IMTP**  
HPF members were pleased to be able to provide feedback to planning team colleagues on the IMTP at a dedicated workshop in November. Members recommended that consideration be given to the development of clear decision and implementation processes related to any disinvestment or substitution of services.
- **Workforce**  
HPF members wish to acknowledge pressures on existing workforce that are increased due to recruitment and retention challenges. The HPF welcomed longer term plans associated with the development of the North Wales Medical and Health Science School and were very supportive of a joined up approach to the training and development of the broad healthcare workforce required in North Wales. The members suggested that there may be opportunities to build upon existing plans to provide novel and collaborative approaches to education and training and HPF would be happy to provide further input and advice as the plans for the North Wales School develop.  
The forum also discussed the importance and potential benefit of developing broader support systems for early career professionals or staff moving into North Wales, including consideration of support related to accommodation provision, opportunities for social interaction and general well-being support.

**H22/44 Date of next meeting noted as: Friday, 3rd March 2023 to be held 9.30-12.30 via Microsoft Teams**