



### Healthcare Professionals Forum (HPF)

Minutes of the meeting held on Friday 13<sup>th</sup> September 2024 via Microsoft Teams

	<u>01.12.23</u>	<u>Workshop 01.12.23</u>	<u>01.03.24</u>	<u>07.06.24</u>	<u>13.09.24</u>
<b>Executive Health Board Lead Officer – Gareth Evans</b>	P	P	P	A	◆
<b>Executive Health Board Lead Officer – Teresa Owen</b>	◆	◆	◆	◆	A
<b><u>Welsh Medical Committee:</u></b>					
Primary and Community Care Medical Representative – Dr Tim Davies	P	P	P	P	P
Mental Health Medical Representative – Faye Graver	P	P	A	A	A
Specialist and Tertiary Care Medical Representative – Dr Chris Thorpe	X	X	P	A	◆
<b><u>Welsh Nursing and Midwifery Committee:</u></b>					
Community Nursing and Midwifery Representative – Emma Adamson (Vice Chair HPF)	P	P	A	P*	P
Hospital Nursing and Midwifery Representative – Naomi Holder	P	P	P	P	A
<b><u>Welsh Therapies Advisory Committee:</u></b>					
Therapies Representative – Steven Grayston	P	P	P	P	A
<b><u>Welsh Scientific Advisory Committee:</u></b>					
Scientific Representative – Jane Wild (Chair HPF)	P	P	P	P	P
<b><u>Welsh Optometric Committee:</u></b>					
Optometry Representative – Manon Haf	P	P	P	P	P
<b><u>Welsh Dental Committee:</u></b>					

Dental Representative – Jeremy Williams	A	A	P	A	A
<b><u>Welsh Pharmaceutical Committee:</u></b>					
Hospital and Primary Care representative – Sarah Kingman	P	P	P	P	P
Community Pharmacists Representative – Sally Harris	P	P	A	P	P
<b><u>Guests in attendance:</u></b>					
Paolo Tardivel, Director of Transformation and Improvement					P*
Rhys Blake, Associate Director of Planned Care					P*
<b><u>Corporate Governance Directorate:</u></b>					
Executive Business Manager - Llinos Roberts	◆	◆	P	P	A
<b>Secretariat HPF - Rona Newton</b>	P	X	P	A	P

Key:

**P** - In attendance / **P\*** - Present for part meeting / **A** – Apologies submitted

**X** – Not in attendance / **MC** – Meeting cancelled

**◆** Not a member of the Healthcare Professionals Forum at this time

It was noted that the meeting was not recorded on this occasion.

## **H24/25 Welcome, Introductory remarks and apologies**

**H24/25.1** The Chair opened the meeting and welcomed those present. The Chair wished to note a warm welcome to the new Executive Lead Teresa Owen, who unfortunately could not be present due to previous commitments.

**H24/25.2** The Chair wished to express a special note of gratitude to Gareth Evans for his support and longstanding contribution to the HPF over many years, previously as Therapies representative, Vice Chair, Chair and most recently Executive Lead for HPF in his role as Acting Executive Director of Therapies and Health Science.

**Action:** Prepare letter of thanks for Chair to send to Gareth Evans

**H24/25.3** Apologies received from:

Teresa Owen, Executive Lead HPF

Steven Grayston, Allied Health Professions Representative

Faye Graver, Mental Health Medical Representative

Jeremy Williams, Dental Representative

Naomi Holder, Hospital Nursing and Midwifery Representative

**RN**

## **H24/26 Declarations of Interest**

No declarations of interest were received.

<p><b>H24/27 Draft minutes of previous meeting held on 7th June 2024 for approval</b></p> <p>The minutes of the meeting held on 7 June 2024 were accepted as a true and accurate record of the meeting.</p>	
<p><b>H24/28 Matters arising and summary action plan</b></p> <p><b>H24/28.1</b> The Action Log was discussed and the following updates made:</p> <p><b>H24/28.2 Membership</b> – With regard to other vacancies on the HPF, it was agreed that this would remain on the Action Log until they were appointed to. This included vacancy, and deputies for all roles on the HPF. Due to a change in the Executive Director/Executive Lead HPF role, the letter for Expressions of Interest for the AHP representative will be issued from the new Executive Lead.</p> <p><b>H24/28.3</b> In relation to minute reference H24/20.2.3 Periods of Treatment, Sarah Kingman, Hospital Pharmacy representative confirmed the action is now closed, and wished to recognise that as a Health Board it has generally done well in moving towards the target of 56 day prescriptions.</p> <p><b>H24/28.4</b> In relation to minute H24/20.3.2 clinical supervision contracts, Steve Grayston, AHP representative advised the Chair in advance he would bring an update to the December meeting</p> <p><b>H24/28.5</b> In relation to minute H24/20.7.2 GP contracts, Dr Tim Davies advised that the LMC have been invited to offer feedback on the 6 point plan to various committees and confirmed the action is now closed.</p>	<p><b>JW/LR</b></p> <p><b>SG</b></p>
<p><b>H24/29 Special Measures update</b></p> <p>Verbal presentation by Paolo Tardivel (PT), Director of Transformation and Improvement</p> <p>The Chair welcomed Paolo Tardivel, Director of Transformation and Improvement, as a regular guest at HPF agreed that introductions with the members were unnecessary and continued directly to the presentation prepared with a number of slides.</p> <p>PT noted by way of introduction that the update would be amalgamating Special Measures with the Health Board's organisational plan. A timeline shared dated back to February 2023 when the Health Board was escalated into Special Measures, through to present day escalation criteria updated by Welsh Government and Special Measures integrated into the 3 year and Annual plan.</p> <p>The Special Measures Framework, which has been updated for 24/25 highlighted the following 6 areas: Quality of Care; Governance; Leadership capability and culture; Performance and Outcomes; Fragile services; Finance, Strategy and Planning; Escalation Criteria. It was noted that the De-escalation criteria is detailed in the framework document and that these priorities have been incorporated into the BCUHB Annual Delivery Plan</p> <p>PT summarised the ten external independent reviews, and noted whilst all those reviews have concluded, the actions which arose are being tracked for completeness.</p>	

Quarter 1 delivery of strategic objectives and highlights were noted, followed by aspects of key priorities to be delivered in Quarter 2 and the proposed managed approach to 'Major Change Programmes' reviewed.

An engaging question and answer discussion ensued.

The Chair thanked Paolo Tardivel for his continued updates, and thanked the members for their contributions to the discussion.

[Paolo Tardivel let the meeting]

## **H24/30 Chair and member written updates**

The Forum received the reports as part of the meeting papers, and representatives highlighted the following:

### **H24/30.1 HPF Member Summary Report Chair and HCS Sept 2024**

Jane Wild, Chair HPF and Scientific Advisory

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

The BCUHB HCS network and Betsinet pages are continuing to develop.

The next HCS network meeting is planned for 22nd October and the membership of the two network subgroups for research & innovation and quality & transformation are being confirmed.

The HCS Betsinet pages are growing, covering information about the HCS services, careers in HCS and a news section sharing the developments and achievements of both individual services and across HCS.

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

The national Healthcare Science programme continues to deliver across its streams of work focused on Research & Innovation, Workforce & Education and Service Transformation.

They are holding a series of in person event across wales to gather views from healthcare science profession across their key projects: training and education pathways; professional identity and career promotion. There will be an event in North Wales at Ysbyty Gwynedd and Ysbyty Glan Clwyd on 23rd September.

A piece of work exploring professional identity is also underway with the aim of making changes that may improve recruitment and retention, and promote wellbeing and a sense of belonging.

Welsh Government are currently recruiting a new Chief Healthcare Science Officer, a role within WG.

**As Chair of HPF I have attended the following since last HPF meeting in June 2024:**

27/06/2024 – Board development session

<p>10/07/2024 – Extraordinary Board meeting  24/07/2024 – Board briefing session  25/07/2024 – Health Board meeting</p>	
<p><b>H24/30.2 HPF Member Summary Report_AHP_Sept 2024</b>  Steven Grayston, Allied Health Professionals Representative - apologies noted</p> <p><b>Key Issues for attention of HPF</b></p> <p>The AHP Primary Care collaborative linked to the Strategic programme for primary care is due to have it's fourth meeting on September 13th with a focus on data collection and evaluations for AHP interventions. There will be reflection on funding streams for AHPs in primary care and identification of opportunities and risk, alongside presentations from Arts Therapies, Psychological Services, and Paramedicine in primary care.</p> <p>Funding has been made available via Welsh Government's 'Talk with Me' project which will allow us to funds some communication boards for councils.</p> <p>These communication boards contain a range of useful words specifically chosen to support children and their families within a park. The boards contain symbols, and the written word in both Welsh and English. These boards have been designed by a group of highly specialist speech and language therapists. They have been placed in parks across Wales, including north Wales.</p> <p>We have started the soft launch of the Speech and Language Therapy (SLT) Toolkit, to support colleagues working with children and young people with speech, language and communication needs. This was intended to be ready for the start of the school year, and our Toolkit for school-aged children.</p> <p>The Toolkit is still in development, and will ultimately support colleagues working across early years and school-age care and education settings to work with children and young people, and know the right time to refer to SLT. This will support the 'waiting well' agenda, but importantly reinforce a team approach to supporting speech, language and communication needs. It is an on-line tool, using Padlet, and will be linked from our BCUHB website.</p>	
<p><b>H24/30.3 HPF Member Summary Report_Community Nursing and Midwifery_Sept 2024</b>  Emma Adamson, Vice Chair HPF and Community Nursing and Midwifery Representative</p> <p><b>Good News to Share</b></p> <p>An unannounced Quality Peer Review was carried out by BCU Corporate team on the maternity unit at YGC.</p> <p>Several minor issues for immediate action were identified, all of which have been completed. Overall, the initial feedback was excellent, with the panel noting a clean and welcoming environment, a positive learning culture in which staff felt psychologically safe to raise concerns and effective MDT working. The service is awaiting the final report.</p>	

### Key Issues for attention of HPF

1. A BCUHB Digital Maternity Cymru Project Board had been established with the aim to progress a digital solution locally, in response to changes to funding package from WG
2. Local progression on the MatNeo SSP recommendations continues, based on local priorities. Continue to await further detail from NHS Executive regarding All Wales priorities during phase 2
3. The HEIW Perinatal Workforce 10-year plan is out for consultation until 11th October. The draft plan supports the development of a sustainable workforce capable of meeting the increasing demands of perinatal care. Comments are encouraged from anyone working in maternity or neonatal services or as an interested stakeholder.



ENG-perinatal-flyer-  
August-2024.pdf

4. Maternity services continue to highlight need for a health board approach to BCU Preconception Strategy. This has been raised with public health team and await confirmation of implementation plans for the strategy

### H24/30.4 HPF Member Summary Report\_Community Pharmacy\_Sept 2024

Sally Harris, Community Pharmacy Representative

#### Good News to Share

Urinary Tract Infection Reviews – this service has been included as a non-mandatory element of the Common Ailments service. 107 (76%) of pharmacies are now commissioned to deliver this service exceeding the target number of sites five months earlier.


Community Pharmacy Network - Applications for pharmacies in Trawsfynydd and Penrhyndeudraeth (replacing the Rowlands closures) approved and no appeals received. Awaiting opening of both in the upcoming months. New pharmacy in Towyn opened at the end of June.

#### Key Issues for attention of HPF

Challenges:

DPPs - we are still having difficulty in getting DPPs for pharmacists who would like to complete their IP training.

Periods of treatment – (move from 28 day prescribing to 56 day) given that this is a national priority to free up capacity for both community pharmacy and GP practices

<p>and was included in the GP LECES, we have variance in the adoption across BCU.</p> <p>CAS and PIPS referrals - these services are there to support primary care. Once again variance: we have areas where this works great, areas where we see inappropriate referrals and areas where we have capacity that isn't being used.</p>	
<p><b>H24/30.5 HPF Member Summary Report_Hospital Nursing and Midwifery_Sept 2024</b> Naomi Holder, Hospital Nursing and Midwifery Representative</p> <p><b>Good News to Share</b></p> <p>Teams and individual shortlisted for the RCN Wales awards</p> <p>23% rise in acceptances onto nursing courses across Wales</p> <p>Launch of the Quality Dashboard</p> <p><b>Key Issues for attention of HPF</b></p> <p>NMC Independent Cultural Review</p>  <p>nmc-independent-c ulture-review-july-20</p>	
<p><b>H24/30.6 HPF Member Summary Report_Hospital Pharmacy_Sept 2024</b> Sarah Kingman, Hospital Pharmacy and Medicines Management Representative</p> <p><b>Good News to Share</b></p> <p>Bangor University Pharmacy degree</p> <p>Intake of students to start from 2025. It brings a fantastic opportunity to locally invest in the training of pharmacists for N Wales and to develop the clinically skilled workforce we, and the wider NHS, need for the future.</p> <p><a href="#">Pharmacy MPharm   Bangor University</a></p> <p><b>Primary Care electronic prescription service (EPS)</b></p> <p>Meddygfa Gwydir in Llanrwst, Lonfa Surgery in Llandudno Junction and Cadwgan Surgery in Colwyn Bay are the latest GP practices in the Betsi Cadwaladr University Health Board (UHB) area to use EPS. This allows GPs and other prescribers to send prescriptions digitally to a community pharmacy or another dispenser chosen by the patient.</p> <p>Staff no longer have to print and sign a paper prescription form and there's no need for</p>	

patients or pharmacy staff to pick up prescriptions from the surgery. Meddygfa Gwydir and Lonfa Surgery are working in partnership with Boots pharmacies in Llanrwst and Llandudno Junction to deliver the service, while Cadwgan is connected to Old Colwyn Pharmacy and Boots Old Colwyn. Currently EPS is starting to be implemented in Bethesda Surgery and Blaenau Ffestiniog surgery in Gwynedd.

[More patients in north Wales are benefiting from the Electronic Prescription Service - Digital Health and Care Wales \(nhs.wales\)](#)

### **ePMA**

The new electronic Prescribing and Medicines Administration system, known as ePMA, will be rolled out to all hospitals across the health board.

It will replace paper-driven processes with a complete digitised system that will streamline prescribing in every ward and improve patient care.

The system will reduce the risk of medication errors by ensuring prescriptions are clear, legible, and complete, with built-in safety checks for allergies, drug interactions, and dosage accuracy

Digital to revolutionise hospital prescribing in North Wales - Digital Health and Care Wales (nhs.wales)

### **Staff achievements**

Pharmacy teams across BCU have recently celebrated their students' achievements across the board with our Pre-registration pharmacists and technicians passing their registration exams and becoming registered HCPs, as well as a number of pharmacists completing Diplomas and MSCs in their relevant areas of practice.

Our IHC West Pharmacy team recently held a poster presentation day to celebrate projects being undertaken by pharmacists, pharmacy technicians and pharmacy assistants. They had a chance to show case their work through their posters and also presented to the wider team. Prizes were awarded on the day for the following:

Best poster (Pharmacy Technician) –Nicola Evans and Reka Kiss

Best poster (Pharmacist) –Radharani Patel

Best presentation (Pharmacy Technician) – Melanie Owen

Best presentation (Pharmacist) – Yasmina Hamdaoui

### **H24/30.7 HPF Member Summary Report\_MHLD\_Sept 2024**

Dr Faye Graver, Mental Health Medical Representative

### **Good News to Share**

#### **Performance and Service Improvement**

- The National Collaborative Commissioning Unit and NHS Executive Quality and Safety Review across all Mental Health and Learning Disability inpatient sites in Betsi Cadwaladr University Health Board Action plan is 94% complete. This marks 78 out of 82 actions that have been completed.
- The HIW Discharge Action plan is 90% complete with 192 actions having been

completed and only 14 remaining to be delivered.

- Royal College of Psychiatry Invited review of Inpatient services Response Plan has received approval at the Health Board meeting held on 24th July 2024. Next steps aligned to the Governance Framework, including an Expert Advisory Group are being established.
- A further Divisional Learning Event is planned for September entitled “Change is the result of all true learning”.
- All MHL D services have been mapped to the Civica system which should provide real time patient, carer feedback to improve patient experience and inform service improvements and learning.

### Enablers

- MH&LD and DDAT are working with the Digital Health Care Wales National Team (DHCW) on the development of a business case for national procurement of an optimum system for an Electronic Patient Record (EPR). Expressions of interest have been invited and we await confirmation of funding from WG to procure and implement this significant change.
- The Wellness Work and Us service continues to provide individually bespoke support to all MHL D staff.
- A project board has been established for Roslin Capital development in Llandudno to house Substance Misuse Services this will benefit both staff and service users in providing a safe and welcoming environment
- Recruitment and Retention activity remains ongoing, including a streamlined recruitment process for Health Care Assistant’s and a divisional focus on the substantive recruitment to interim posts

### Key Issues for attention of HPF

Due to financial pressures within the organisation, budgets have been reduced for a number of projects and this includes some MH&LD services. We continue to review the implications for the year ahead.

Out of Area (OOA) placements have been a significant challenge and this remains a priority area, however, we are seeing sustained reductions in OOA utilisation as a result of our targeted efforts

### H24.30.8 HPF Member Summary Report\_Optometry\_Sept 2024

Manon Haf, Optometry Representative

### Good News to Share

- Pan-BCU Eye Care Collaborative Group has been re established. Chaired by Jim McGuigan, supported by all sites. All Wales ToR approved.
- Local Eye Care Groups have re established in Central and West. Meeting every 2 weeks, currently discussing cataract and Glaucoma pathways. East will re commence in September. This gives the opportunity for the development of collaborative working pathways between primary and secondary care to be explored and local site concerns be raised and addressed on a local level.
- Teach and Treat has finally launched at Holywell Hospital (August 14th) There are currently 5 optometrists undertaking their IP placements.

- NHS email roll-out is ongoing. 69% uptake in BCU to date
- Due to national delay in electronic referral/record solutions, Dewi Edwards has been exploring local solutions. There are several practices in West who are piloting email routine referral to YG, and there is a practice in East exploring Consultant Connect.

### Key Issues for attention of HPF

- No pan-BCU Ophthalmology lead in place (Lead has been identified but some delay due to finance)
- National delays on digital solutions – Dewi Edwards has been very supportive in his role in establishing interim solutions within BCU. Unfortunately his seconded role has now finished so there is uncertainty about how things will progress.
- Still concerns about cataract and Glaucoma waiting times (ongoing discussions at local level, OLG and ECCG)
- Activity at Primary Care OCTC's paused or reduced due to lack of admin staff. Business case submitted for admin support
- Optical Advisor is leaving post in October 2024 – concerns raised re previous delays in recruiting to post. Risk of delays in developing and implementing WGOS4 pathways if no OA in post

### H24/30.9 Primary and Community Care Medical – verbal update by Dr Tim Davies, Primary and Community Care Representative.

Currently waiting for the financial planning, the workforce strategy and the staff support elements that UK Government are deciding.

Good news that a lot of pathways in optics are taking patients away from GP and making it easier. However, some look at primary care as an easy target to offload to, and demanding more and more tests before referrals are made. Often the tests are nothing to do with the referral they are to do with checking the patient's fit for operation and other things, which should come at a later stage because not all these patients will need operations. Taking bloods and ECG shouldn't be necessary.

We are having to look at what to stop doing, to genuinely manage the whole population. We can't just focus on one little niche area.

There is currently a massive shortage of GPs that may be helped by the good news, which is the medical school starting in North Wales, but also the postgrad medical school in Chester when we're very near on the border. So, longer term, that should help stabilise the workforce. Other areas that have struggled, a lot of medical schools were set up years ago to help areas struggling for physicians.

Also this month, we thought initially the changes to death certification and the medical examiner might take work off GPs, however, doesn't look likely now. We no longer have to do cremation checks which we used to have to visit the crematoriums for, but everything else, we will still be expected to complete i.e. a certificate, liaise with the medical examiner, possibly be interrogated about all the hospital care and medical care for the past however many years before we actually issue the certificate. In a way the process has become confusing, because they've empowered GPs to do more

<p>certificates now, but they now have to discuss everything with the medical examiners.</p> <p>Generally, a lot of GPs are unmotivated, and don't know where to turn and are trying to reinstate some kind of work life balance, but are really struggling. BMA Wales have pulled together a good campaign "save our surgery" which has got all the figures on the massively increasing workload, decreasing finances and despondency among GPS. Most are wanting to retire in the next three years if they can afford to, which is sad. So, there is hope that politically, that does change.</p>	
<p><b>H24/31 Planned Care Update</b> - Verbal presentation by Rhys Blake, Associate Director of Planned Care</p> <p>The Chair welcomed Rhys Blake, Associate Director of Planned Care to the meeting and facilitated introductions of the members.</p> <p>A number of presentation slides were shared in relation to the current situation in Planned Care, the National objectives, the context underpinning how the Health Board is configured, and a way to organise for success going forward.</p> <p>The planned care programme was explained via a form of matrix, and proposed ways to improve the model with standard workstreams and clinical priorities. The need for clinical and professional engagement, determining the role of the networks, and create a clinical reference working group was highlighted.</p> <p>A positive, honest, open discussion ensued with the members present, and the feedback was welcomed. It was agreed that the HPF would be a useful Forum for regular engagement going forward.</p> <p>The Chair thanked Rhys Blake for his time and sharing the insight into the Planned Care programme, and noted the HPF would be happy to extend further invitations to join the meetings, as well as taking the opportunity to look at feedback between the quarterly meetings.</p> <p>[Rhys Blake left the meeting]</p>	
<p><b>H24/32 To be received for information :</b></p>	
<p><b>H24/32.1 Minutes of the Quality, Safety and Experience Committee</b></p> <p>The minutes of the QSE Committee held on 6 June 2024 were noted.</p>	
<p><b>HP24/32.2 Minutes of Planning, Population Health and Partnerships Committee</b></p> <p>The minutes of the PPHPC Committee held on 18 June 2024 were noted.</p>	
<p><b>H24/33 HPF Workshop plan 2024</b></p> <p>Discussion around the timing and value of the workshop</p>	

## **H24/34 Summary of information to be included in the Chair's Assurance Report to the Board.**

### **Clinical Strategy – Planned Care**

The HPF were pleased to welcome Rhys Blake, Associate Director of Planned Care. Rhys outlined the approach to planned care delivery and noted the need to develop a systematic approach and meaningful engagement. HPF members discussed the challenges associated with working across three IHC structures, the current lack of cold care sites to protect planned care activity and the lack of a clear clinical strategy. The Forum was encouraged to hear that there were plans to ensure that the clinical voice and clinical leadership, from across the professions, were being sought, to inform both the development and implementation of planned care.

### **Special Measures update**

Paolo Tardivel, Director of Transformation and Improvement attended to present an update on Special Measures. The Forum discussed the importance of continuing to engage with clinical teams in both the delivery of change and in the planning and management of that change. Forum members were pleased to hear that there was drive to better involve teams in the planning process and highlighted the importance of ensuring engagement with public and key partners early on in any process rather than at the end.

### **Membership update**

The Forum noted the end of tenure of Gareth Evans and wished to acknowledge and thank him for his significant contribution to the Forum over the last 8 years.

Gareth joined the HPF as the Therapies representative in March 2016, starting a second term in March 2020 during which time he served as both Vice Chair and Chair of the Forum. Gareth went on to fulfil the duties of the Executive Lead of HPF on behalf of the Health Board in his role as Acting Executive Director of Therapies and Health Science from 1 March 2022 to 31 July 2024.

There are current vacancies in representation for both the Allied Health Professionals and Specialist and Tertiary Care Medical. Appointment efforts are underway, and it is hoped that representation will be confirmed soon.

## **H24/35 Date of next meeting noted as: Friday 6 December 2024 to be held 09.00-12.00 via Microsoft Teams**

### **HPF Planning Workshop to be included on Friday 6 December 2024**

Proposed meeting scheduled for 2024/25:

Friday 7 March 2025