



Healthcare Professionals Forum (HPF)

Minutes of the meeting held on Friday 5th March 2021 via Microsoft Teams

Present:	
Mr G Evans	Therapies Representative (Chair)
Prof M Rees	Specialist & Tertiary Medicine (Vice-Chair)
Mr A Thomas	Executive Director of Therapies and Healthcare Sciences (Lead)
Ms S Murphy	Hospital and Primary Care Pharmacy
Dr J Nankani	Primary Care and Community Medical
John Speed	Community Pharmacy
Ms Jane Wild	Scientific Advisory
Mr J Studer	Mental Health Advisory
Fiona Giraud	Midwifery and Women's Services
Manon Haf	Optometry Advisory
In Attendance:	
Simon Evans-Evans	Interim Director of Governance
Matthew Joyes	Acting Associate Director Of Quality Assurance And Assistant Director Of Patient Safety And Experience
Mark Wilkinson	Executive Director of Planning and Performance
Ms Rona Newton	PA to Executive Director Therapies and HCS – for minutes
H21/01 Welcome, Introductions and Apologies	
<p>H21/01.01 The Chair opened the meeting and welcomed those present. The HPF members made their introductions for the benefit of new member Manon Haf who has joined the HPF as the representative for Optometry.</p> <p>H21/01.02 Apologies received: Ms Mandy Jones, Nursing Advisory.</p>	
H21/02 Declarations of Interest	
<p>H21/02.01 No declarations of interest were made.</p>	
H21/03 Draft minutes of the meeting held on Friday 4th December 2020 – for approval.	
<p>H21/03.01. The Forum members accepted the minutes of the meeting held on 4th December 2020 as an accurate record of the meeting.</p>	
H21/04 Matters arising and summary action log	
<p>H21/04.01 Updates were provided for incorporation into the summary action log – all previous actions are now closed.</p>	

H21/05 Targeted Intervention Improvement Strategy – Simon Evans-Evans

The Chair welcomed Simon Evans-Evans (SEE) to discuss the Targeted Intervention Improvement Strategy at BCUHB.

A set of draft presentation slides were shared with the group prior to the meeting covering the following points:

- Targeted Intervention Improvement Framework
- Maturity Matrices
- Outcomes Framework
- Self-assessment and assurance process @ BCU
- Implementation timeline

An interactive and informative discussion ensued around engagement of the strategy and integration of the programme throughout the local health care professions across North Wales. A question and answer session followed.

SEE noted that HPF as an advisory group and input from the group, as well as individuals within the group would be welcomed. SEE will look at how the input and the role of the HPF can be formally integrated into the processes, which are currently at design stage.

The Chair thanked SEE for his time and his informative presentation at the meeting. The Chair also acknowledged the strong level of support to improve the governance across the network and that people are keen to engage.

[Simon Evans-Evans left the meeting]

H21/06 Chair's and members' written updates

H21/06.1 HPF Written Summary Update – Therapy Services / HPF as Associate Board Member

Members received the Therapy Services / HPF as Associate Board Member Written Summary for information from Mr Gareth Evans and noted the following:

Good News to Share:

1. The launch of the NHS Wales Covid Recovery app was on the 20th January. The app is a support tool for adults recovering from Covid 19 that can be used alongside or independently of formal Covid 19 Rehabilitation. Several BCUHB staff were involved in its design.

<https://allwales.icst.org.uk/landing/covid-recovery-app/>

2. An all-Wales recruitment streamlining process for some AHP and Health Care science professions commences in February 2021. This is similar to the approach undertaken in other professions where students studying in Wales, under the Welsh bursary, can be matched into Band 5 jobs as they graduate ensuring an improved pipeline of newly qualified registrants for Health Boards.

Key Issues for attention of HPF:

As Chair of HPF I have attended the following:

1. QSE Committee on the 15/01/2021
2. Health Board on the 21/01/2021
3. Board workshop on the 04/02/2021

The key focus of Board's attention throughout this period has continued to be its ongoing response to the Covid 19 pandemic and its plan for 2021 and beyond.

Updates or topics worthy of particular note at the Board meeting and workshop have been:

Beyond Special Measures - Targeted intervention and a maturity matrix
Board Assurance Framework and corporate risks.
Financial performance
Audit Wales structured assessment and Annual Audit report.
Update on the Vaccination programme
Strategy vision and values of BCUHB

H21/06.2 HPF Written Summary Update – Healthcare Science

Members received the Healthcare Science Member Written Summary for information from Ms Jane Wild and noted the following:

Good News to Share:

The first Welsh cohort of level 4 HCS apprentices have registered this month. This is an 18 month programme of work based learning educating and providing clinical/practical skills that will enable both new (apprentices) or existing staff to fulfil B4 associate HCS roles. This training route is very welcomed and an integral part of the workforce and training plans for HCS.

H21/06.3 HPF Written Summary Update – Mental Health and Learning Disability Division**Good News to Share:**

Whilst during Covid Phase 1 the division took a cohorting approach, using certain units as admission units and others as green long-stay places, in phase 2 it was decided to switch back to local admissions, wherever possible, keeping care close to home. So far, this is working well, and we are ironing out variations between the different areas.

Pathway work continues to be under way. We have various pathway streams aiming to uniform standards of care between the different sites, smooth out difficulties of transitions between services and develop closer co-working relationships between our Liaison services and the general hospital sites.

Covid levels among staff and patients remain low and manageable at every site.

Though demand in form of referrals to services as well as demand on inpatient beds is far higher than it was during Phase one, and indeed significantly exceeds usual non-Covid referral rates, so far services are keeping up with demand.

Key Issues for Attention of HPF:

Recruitment of medical staff remains a serious challenge especially for the West. Out of 15 psychiatric consultant posts in the West 5 are covered by substantive consultants, all others are vacant or covered by agency locums. Vacant posts are impossible to fill, with no CVs forthcoming. The Health Board appears to still not allow us to go past Medacs to outside vendors, even though Medacs is notoriously under-focused on psychiatric service representation.

The ongoing lack of appropriate IT support, especially the lack of equipment and digital notes, makes safe working, i.e. working from home for community nurses, remote assessments and reviews and remote note keeping a very difficult task.

In two of our areas (Central and West) OPMH organic wards for patients suffering from dementia are located away from the DGH in what are deemed community hospitals, even though these patients are acutely unwell and often require multi-disciplinary input. Efforts are being made to relocate these Wards to the main DGH sites, though this will need Board support. At the same time, several of our Community Mental Health Teams are still located in hospital sites rather than on bases within the community they are serving. Business plans are being worked on to find appropriate community sites.

Discussion ensued within the group highlighting similar difficulties with recruitment of specialist roles in Pharmacy and Therapies departments and agency provision of locums. Chair and Executive Lead to arrange a discussion with Executive Director of Workforce and Organisational Development outside of the meeting.

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H21/06.4 HPF Written Summary Update – Nursing

Members received the Nursing Member Written Summary for information from Ms Mandy Jones and noted the following:

Good News to Share:

- Continued commitment of the teams during unprecedented challenges
- Ysbyty Enfys
- Vaccination programme
- Support to provider settings

Key Issues for attention to HPF:**FFP3 Masks**

Equipment recall for 8833 FFP3 masks leading to a potential supply shortfall. Immediate action taken to re fit staff solely fitted to 8833 by fit testers. Usage significantly reduced. Current stock monitoring undertaken via PPE operational to maintain supply whilst awaiting delivery of all Wales stock. All Wales stock delivered.

Outbreak control team meetings

Daily Outbreak control team meetings continue. Nosocomial mortality reviews linked to outbreaks undertaken. SoP developed in relation to new Covid-19 inpatient testing regime to support the conducting of a further single re-test per patient on day 5 following admission. The aim is to capture the asymptomatic carriers of the virus and minimise spread of the virus.

Outbreak learning:

Staff and patient movement,

Reinforcement of infection prevention behaviour and practice. - social distancing guidelines, hand washing, wearing of face masks and appropriate use of PPE at all times particularly during ward rounds, breaks and handover' test of change on two sites re ward rounds.

Promotion of a virtual approach to services with patients.

Health and Safety risk assessment of the work environment

Segregation work

Additional cleaning hours

Estates have addressed ventilation issues (East)

H21/06.5 HPF Written Summary Update – Primary Care and Community Medical

Members received the Primary Care and Community Medical Member Written Summary for information from Dr Jay Nankani and noted the following:

Good News to Share:

Covid vaccination progress in Primary care

Key Issues for attention to HPF:

Vaccination priorities for BAME front line workers – discussion ensued regarding specifically BAME staff who should, but have not yet received the Covid vaccination, whether this is an administrative issue or a reluctance for individuals within these groups to accept the vaccination. Either way, these issues will be followed up with the vaccination team as a matter of urgency.

Concerns from LMC that Secondary care work being reverted to GP's without the capacity available

No information on Secondary care dashboard regarding waiting times, opening clinics

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etc.

H21/06.6 HPF Written Summary Update – Midwifery

Members received the Midwifery Written Summary for information from Fiona Giraud and noted the following:

Good News to Share:

- Midwifery PADR Compliance remains at 90-92%
- Midwifery CTG Compliance – 65% end of January (Target 100% by 31/3/21)
- Midwifery PROMPT Compliance – 71% end of January (Target 100% by 08/21)
- E-learning – 88-89% Compliance

Key Issues for attention to HPF:

1) Midwifery Streamlining 2021

The number of midwifery graduates from health education courses each year are identified through the education commissioning process. Annual workforce plans submitted by Health Boards inform the number of students required to meet the future workforce and service needs.

In 2017 Welsh Government amended the long-standing NHS Wales bursary scheme introducing a requirement for recipient students to work in Wales for two years on completion of a BSc programme or 18 months on completion of a pre-registration PG Dip/MSc.

The process by which new midwifery registrants have been recruited into the workforce has developed over recent years. The collaborative approach across Health Boards and HEI's has been acknowledged by HEIW. However, following evaluation of the 2020 recruitment process it transpired that not all students in Wales were offered posts and the majority offered were part time posts with a view to increasing hours as they became available. This led to students appealing to be released from the bursary contract so that they could take up positions outside of Wales.

In BCUHB, as previously reported all 25 Midwifery graduates were offered some contracted hours with the Health Board in September 2020 and their hours increased as hours/vacancies became available. Two students chose to accept offers outside of Wales to ensure full time contracts. This was not the position throughout Wales. As a consequence HEIW has recommended that Streamlining is introduced for the 2021, Midwifery graduate output.

This recommendation was proposed without prior engagement with the Midwifery Profession via the Heads of Midwifery Advisory Group in Wales (HOMAG) and without a full risk assessment or impact assessment on Service sustainability or safety as a consequence.

Of note as a Health Board, recently de-escalated from Special Measures with ongoing WG targeted intervention and scrutiny explicitly required not to hold any vacancies, we have clearly stated that holding vacancies to facilitate the implementation of Streamlining in Midwifery is not an option. This is to ensure that Services remains Birth Rate Plus compliant throughout the year, which is a national workforce requirement for all maternity services and preserves patient safety and service sustainability.

In response, the Heads of Midwifery Advisory Group in Wales has offered to work with HEIW colleagues to develop terms/principles to support this potential introduction in Wales to ensure that all Stakeholders fully understand the financial implications and impact on Maternity Services in Wales if the agreed principles are not observed.

2) Consultant Midwife Appointment

The successful candidate is due to commence in March 2021

H21/06.7 HPF Written Summary Update - Pharmacy and Medicines Management

Members received the member written update from Susan Murphy from the Pharmacy and Medicines Management advisory and the following information was noted:

Good news to share:

- We have worked hard to maintain a secure supply chain for drugs for BCU. We have established a pan BCU medicines procurement team to mitigate risk of medicines shortages from Brexit and COVID stock pressures with a focus on critical care medicines. Weekly reports identify shortages and plans put in place to mitigate the risk.
- We have undertaken a number of quality Improvements that has seen a reduction in number of medicines management Datix at ward level minimising patient harm with Safer Medicines Practice Groups established to review incidents and develop a pan BCU work programme to reduce risk. Escalation via the Patient safety and Quality groups.
 - We have undertaken significant work around omissions/delays and the medication administration process. We have held a number of education & training events. Recording education events as improvement tools. E.g. second check of CDs, insulin.
 - Timely Make it Safe Reviews for medication incidents. Review of Datix and one to one support for staff involved in drug administration errors if needed.
 - Implementation of Self Administration Policy across YG.
 - Utilisation of digital scanner technology to provide timely medication supply to Covid areas.
 - Implementation of electronic prescribing within renal services all drugs administered during dialysis are now prescribed on an electronic system ("Vitaldata") across YG and Alltwen.
 - We have supported the development and validation of the prescribing

element of “Symphony” within ED.

- We have supported the Covid vaccination program leading on the purchase and distribution of vaccines being responsible for the cold chain and the integrity of the vaccine. We have also provided clinical support for front line staff.
- Managing staff capacity: Investment in pharmacy specific recruitment video and social media messages to support recruitment as staff shortages are impacting on operational and clinical pharmacy service. We are recruiting for our junior grade posts and have received a number of high calibre applicants.
- Replacement of pharmacy stock control and labelling system (EDS) planned April/May 2021 with the implementation of the WellSky system. This is a key project that will modernise our pharmacy system and financial monitoring of costs.
- In YGC the production unit is being refurbished over the next 6 months and will provide security of supply of injectable medicines and chemotherapy when completed.

Key Issues for attention to HPF:

Staff capacity during Covid surge and vaccination program:

- We need urgently to agree funding and recruit staff to support COVID vaccination program.
- Business case in development for funding for additional pharmacy staff support to community hospitals. Higher acuity, increased flow and increased beds has led to recognition that weekly visits cannot provide the support needed. Pharmacists are currently transcribing and writing patient discharge prescriptions.
- We are seeing high levels of stress and anxiety.

H21/06.8 Members received a verbal summary update for information from **Optometry** member Manon Haf and noted the following:

Good news to share:

- New Optometric advisor appointed - Rachel Freeman
- More patients referred to ODT
- Ongoing work to develop “Covid Pathways” for IOP’s and Fields to all WECS accredited- ease pressure on secondary care and provide care closer to home

Key Issues for attention to HPF:

- Concerns re Glaucoma Backlog, but measures being developed (as above)

- Concerns re cataract Backlog and insourcing – Questions being asked as to why outside providers can do cataract surgery whilst BCU consultants are not.

H21/06.9 Members received a verbal summary update for information from **Vice Chair/Secondary and Tertiary Care** member Professor Michael Rees and noted the following:

Good News to Share:

There are now significant developments in the reinstatement of face-to-face support for staff who are in need of support. This will be carried out by extending and enhancing psychology time in East and West combined with widening support by the use of counsellors and coaches.

In addition, there will be the establishment of a wellbeing programme. There are also welcome developments on staff accommodation under the lead of the estates department.

Key Issues for attention to HPF:

Currently staff are experiencing high levels of stress with several acute situations occurring which if not attended to could result in staff experiencing breakdown and illness. Wellbeing and acute staff support are now extremely important in maintaining staff health during this pandemic.

H21/06.10 Members received a verbal summary update from **Community Pharmacy** member Mr John Speed and noted the following:

Good News to Share:

Some pharmacies in BCU are now delivering Covid vaccinations, with plenty more who are willing to administer the vaccine, there was an issue with the supply of the vaccine which temporarily slowed this programme slightly however the supply is now moving again.

Some services have resumed, and audits, safety and quality work which started prior to which were suspended during the Covid season have now started to be rolled out again.

H21/07 Quality Assurance Update – Matthew Joyes, Acting Associate Director of Quality Assurance and Assistant Director of Patient Safety and Experience.

The Chair welcomed Matthew Joyes (MJ), Acting Associate Director of Quality

Assurance and Assistant Director of Patient Safety and Experience to the meeting to present the annual Quality Assurance update. MJ introduced himself and his role at BCUHB and shared slides highlighting points of review of the year 2020/21 and a look ahead to 2021/22 highlighting some of the key priority programmes.

MJ outlined the Health and Social Care (Quality and Engagement) (Wales) Act and the changes that the Act will introduce, also the implementation of a new Quality Strategy for BCUHB for 2021-2024 which will focus on the following:

- Patient Safety Strategic Plan
- Patient and Carer Experience Strategic Plan
- Clinical Effectiveness Strategic Plan

A question and answer session ensued. MJ welcomed any feedback from the Forum members regarding ideas for areas of improvement and focus for the wider clinical professionals around quality for the next few years.

The Chair thanked MJ very much his time at the meeting for the presentation; in particular covering the importance of the potential implications of the Quality Act, and highlighting all the good developments which are planned for the next 12 months.

[Matthew Joyes left the meeting]

H21/08 Items to be received for information:

H21/08.1 Quality, Safety and Experience Committee held on 3rd November 2020

The minutes were received and noted.

H21/08.2 Draft HPF Annual Report 2020-21

The Draft HPF Annual Report 2020-21 was received and noted.

H21/09 Summary of information to be included in Chairs report to the Board:

- The Forum welcomed the information about progress towards a Targeted Intervention improvement framework. Members were keen that the engagement domain was strengthened by links to staff wellbeing and an ability for staff to speak up safely. In addition the HPF felt in a position to support the ongoing assessment of progress during the period of targeted intervention and members asked for further consideration on how the standing advisory groups of the Health Board could, within their remit, assist in this process.
- The group supported the quality assurance report from the Assistant Director of Patient Safety and Experience and noted several promising developments to be introduced in the next 12 months. The members advise that appropriate organisational resources are directed to fully meet the implementation of the Health and Social Care (Quality and Engagement) (Wales) Act 2020.
- A presentation on the Health Board's operational plan for 2021-22 highlighted a

focus on transformation alongside a new systematic approach to quality improvement. The Forum repeat its previous advice that a workforce strategy is essential to underpin the successful delivery of any plan and that service transformation requires identified clinical capacity to provide the clinical leadership to inform and implement any case for change.

- Member's reports identified some difficulties encountered in the use of the Health Board's model to source all agency staff through a single agency. In addition members noted some concern about the extent to which vaccine inequality is being experienced in North Wales, specifically in relation to BAME groups.

H21.10 Planning for 2021 – 24 Update – Mark Wilkinson, Executive Director of Planning and Performance

The Chair welcomed Mark Wilkinson (MW) for a further planning update focussed on the next three years from 2021 to 2024. MW noted that the timescale is significant and that Welsh Government have, due to the uncertainty of the Covid pandemic, indicated that Health Board plans should focus on one year plans, with some financial tables being revisited on a quarterly basis resulting in shorter timescales and making planning very difficult.

MW shared a number of slides and detailed the following during his presentation:

Outcomes for 2021/22 to 2023/24
 Focused Priorities for 2021/22

A question and answer session ensued and members of the Forum engaged in discussion regarding the planning presentation.

On behalf of the Forum members, the Chair thanked MW very much for his valuable time in joining the meeting and for sharing the plans and information with the members.

[Mark Wilkinson left the meeting]

H21/11 Date of next meeting noted as: 4th June 2021 from 9.30am – 12.30pm via Microsoft Teams

Future scheduled HPF meeting dates were noted:

Friday, 4th June 2021
 Friday, 3rd September 2021
 Friday, 3rd December 2021
 Friday, 4th March 2022

H21/11.1 AOB

The Chair noted that this would be Professor Michael Rees' final meeting of his current tenure as Vice Chair and as representative of Secondary and Tertiary Care advisory. The Chair and Lead Executive both wanted to take the opportunity on behalf of the Forum and the Health Board to recognise his outstanding commitment and thank him for his valued contribution and attendance during his membership tenures, which span

the last 8 years.	
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