

### Remuneration & Terms of Service Committee (R&TS)

# Minutes of the Meeting held on 22.7.21 via Teams

| Present:  |   |        |
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| Mark Polin<br>Medwyn Hughes<br>Jackie Hughes<br>Lucy Reid   | Health Board Chair Independent Member (IM) Independent Member Health Board Vice Chair   |        |
| In Attendance:  |   |        |
| Louise Brereton (LB) Sue Green (SG) Arpan Guha (AG) Liz Jones (LJ) Annemarie Rowlands (AMR) Jo Whitehead (JW)   | Board Secretary Executive Director of Workforce & Organisational Development (OD) Acting Executive Medical Director Assistant Director, Corporate Governance  Associate Director, Medical Regulation and Education (part meeting) Chief Executive |        |
| Agenda Item   |   | Action |
| R21.46 Apologies  |   |        |
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| R21.47 Declarations of interests  |   |        |
| The Health Board Vice-Chair declared her position with NHS Resolution and the Chief Executive declared that her husband was a GP on the Wales Performers List.  |   |        |
| R21.48 Draft minutes of previous meeting held on 22.4.21  |   |        |
| The minutes were approved as an accurate record.  |   |        |
| R21.49 Summary action log   |   |        |
| R21.49.1 The action log was reviewed; all actions were completed and closed.  |   |        |
| R21.50 Matters considered in private at the last meeting, to be noted in public   |   |        |
| It was noted that the following matters had been discussed in private at the last meeting: Harmonisation of pay for managed practices; Tribunal Report; Senior Interim Manager Update; Upholding Professional Standards in Wales; NHS (Performers Lists) (Wales) Regulations 2004 report; Professional Standards Case |   |        |

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| Management Update Report; Executive Director Appointments and Changes; Performance and Development Review of CEO and Executive Directors; Remuneration Report 20/21.   |     |  |
| R21.51 Nursing and Midwifery Council (NMC) Registration, Revalidation and Fitness to Practice Annual Report  |     |  |
| R21.51.1 The Associate Director, Medical Regulation and Education, attended to present this report. She stated that external referrals remained highest, whilst internal referrals remained low, and agreed to seek all-Wales comparative data from the NMC for future reporting. She advised that the NMC had revised its fitness to practice processes over the past year, such that it now advocated a centrally coordinated approach similar to that in place in the Health Board for a number of years.   | AMR |  |
| R21.51.2 The Associate Director highlighted the top 3 themes in terms of allegations, and the work to be done to learn from these, supported by the new Datix system. She added that the NMC had a backlog of cases due to the impacts of the pandemic and high turnover of staff. She went on to explain lapses in greater detail, and automatic extensions to revalidation dates due to Covid-19. In response to an IM's comment that it was not possible to determine employment status from the hearing outcomes reported, the Associate Director explained that the detail was held centrally, but not shared as the small number of cases risked identifying the individuals concerned. She confirmed that financial and other risk assessments were undertaken. The Health Board Vice-Chair commented that any action taken against the registrant was in the public domain, and she queried the table on page 2 of the report in terms of internal and external referrals and the need to understand the reasons and whether there was under- or over-reporting. The Associate Director described the processes in place and follow up arrangements, noting that some longstanding Tawel Fan and Hergest Unit cases remained ongoing. The Vice-Chair asked to be kept informed of these cases. | AMR |  |
| R21.51.3 The Executive Director of Workforce & OD stated that the Professional Standards Quarterly Report should have better links to NMC cases, and that unfortunately the Fitness to Practice Annual Report covered a different time period, being a calendar year, rather than a financial year, report. She suggested aligning the two by including live NMC cases in the Professional Standards Report so that the Committee would be apprised of the live employment impacts as opposed to receiving data that was 6 months out of date. It was agreed that this enhancement would be helpful in providing ongoing assurance to the Committee, and that the Executive Director would work with the Associate Director outside the meeting to finesse the detail of this. The Committee noted the content of the report presented and the processes currently in place. The Associate Director was thanked for attending and she left the meeting.  | SG  |  |
| R21.52 GMC Revalidation Update 2020  |     |  |
| R21.52.1 The Acting Executive Medical Director presented this update, explaining the dual aspects of appraisal and revalidation, the challenges arising from the pandemic, the Health Board's good compliance record, which stood at 99.5% for secondary care and 100% for primary care. Just one case involved a deferral, which  |     |  |

was being addressed, and the GMC anticipated many more deferrals as a consequence of the pandemic. The Health Board Vice-Chair queried the last page of the update, which referred to information reported in the Integrated Quality & Performance Report (IQPR) – however the IQPR did not in fact include the information in question. The Acting Executive Medical Director responded that the relevant data was provided to the team who produced the IQPR, but may not have featured in the final version of the document, but could be included in future if required.

R21.52.2 An IM pointed out that the reference to the Workforce Policies & Procedures Group on page 3 was not related to the subject matter of the update, and it must therefore have been intended to refer to the Doctors in Difficulty Group. The Executive Director of Workforce & OD explained the work that had taken place in respect of individuals who had been shielding during the pandemic, to enable them to maintain their clinical practice. Following discussion the Committee noted the update provided, including the future actions, scrutiny and assurance processes outlined. The Acting Medical Director was thanked for presenting the paper.

#### **R21.53 All Wales Policy Update**

The Executive Director of Workforce & OD explained that there had not been many new policies introduced during the pandemic; she presented the following for the Committee's attention, noting that easy-read summaries would be produced in due course:

- New Respect and Resolution Policy (all Wales) to replace the Grievance Policy and Dignity at Work Policy (both all Wales)
- BCUHB Dress Code Guidelines (revised).
- All Wales Raising Concerns Procedure for NHS Staff (to incorporate Speak out Safely)

The Committee noted the approved policy, guidelines and procedure.

#### R21.54 Any other business

None.

#### R21.55 Date of next meeting

The next routine meeting was scheduled for 21.10.21.

## R21.56 Resolution to exclude the press and public and move to private session

The Committee moved into private session.