

Bwrdd Iechyd Prifysgol Bae Abertawe Swansea Bay University Health Board



Meeting Date	09 August 20	22	Agenda Item		5.1 (ii)
Report Title	Medical Workforce Board Update				
Report Author	Mrs Sharon Vickery, Assistant Director of Workforce and OD				
Report Sponsor	Dr Richard Evans, Executive Medical Director				
Presented by	Dr Richard Evans, Executive Medical Director				
Freedom of Information	Open				
Purpose of the Report	This report is submitted to the Workforce and OD Committee to provide an update on the work of the Medical Workforce Board.				
Key Issues	This report sets out the recent work of the Medical Workforce Board, setting out the risks associated with the medical workforce.				
Specific Action	Information	Discussion	Assurance	Appro	oval
Required	\boxtimes				
(please choose one only)					
Recommendations	That the Workforce and OD Committee notes: -				
	The work that has been considered by the Medical Workforce Board at its meeting on 24th June 2022				

MEDICAL WORKFORCE BOARD UPDATE

1. INTRODUCTION

To set out for the Workforce and OD Committee the recent issues that the Medical Workforce Board considered at its meeting on the 24th June 2022.

2. BACKGROUND

Medical Education

- Following the HEIW site visit to GIM in Morriston an updated report has been provided to HEIW in June.
- The HEIW site visit to T&O was held on 21st June 2022 with the recommendations from the formal visit encouraging. T&O have been providing monthly reports to HEIW and to the GMC which have been deescalated to a reduced frequency of updates, the frequency of which to be decided by the GMC.
- The recommendations following this recent visit was that they wish the Health Board to look at rota optimisation to reduce gaps in the rota to hopefully reduce the Junior Doctor's stress, and to improve training in fracture clinic. They wish the Health Board to look at the Consultant Care of the Week model as they want the Health Board to have some kind of team structure and admitting Consultant responsible for patient care afterwards.
- There is a site visit for Core Trainees due soon which will include the T&O trainees. The training for T&O trainees should improve once the new theatres are up and running.
- The subject of a half a day in the trainee timetable which HEIW refer to as a SPA session, they wish for this to be incorporated into the T&O Juniors timetable which is a HEIW policy across the Health Boards for Junior Doctors. These recommendations appear to be reasonable and deliverable.
- HEIW have sent around 6 concerns, 2 of the main themes are patient safety or bullying, these are reported to HEIW via the Reporting Concerns mechanism which is outside of the training survey and work has been ongoing with the writing of reports.
- In relation to the Acute Medical Services Redesign the Educational meetings are due shortly with an attendance list which includes HEIW, Unit Managers, and Rota Designers to talk through any issues around training and education. This is also keeping HEIW informed of the progress with the first meeting scheduled for the 14th July.
- From the interviews held for the PA's appointments have been made to 10 out of the 13 posts submitted to the matching scheme.

Medical Efficiency Programme Board

Update on Recruitment Plans Agency & Bank Controls

- Correspondence is being sent out to the Service Group Directors to submit their recruitment plans. There is a need to have a position of where they currently are to enable the Health Board to view the bigger plan.
- The aim is to have this information for the next MWPB meeting on the 25th July so that feedback is presented on how things are progressing. It should include a brief template so that it can be formally tabled

Health Board Updates

Recruitment

- The Medical HR department are seeing an increase in applications with the junior grades. There have been 311 applicants for the post of Clinical Fellow in the ED department.
- The problem area is around the Consultant posts with the Medical HR Department looking at how to enhance the adverts and revisit posts that are currently on hold to establish what the long term plans are, and to look to see about appointing other types of grades into those posts.
- Additional information is being requested from the Service Groups trying to identify if locums are sitting in vacant posts that are being advertised. There is a need to track that when that person is appointed and on-boarded to understand from the Service Group when they are taking the locum out and report what the cost of that locum is to capture the saving.
- There is engagement with BAPIO on a new initiative around GP's where in England Trusts are employing and seconding them into GP practices. The first meeting to be held on the 7th or the 14th July to understand the process and to establish if this could be an option.
- The first Specialist Doctor post in Oncology has closed with 1 applicant. It has been agreed that the post is regarded as at a high enough level to have the Service Group Medical Director on the interview panel.

Revalidation & Appraisal

- The deferrals for 2022 continue to be slightly higher, there have been a few multiple deferrals for individual doctors and the GMC have requested further information and a timeline from the Responsible Officer for the GMC to make their final decision on multiple deferrals.
- Four overdue appraisal letters have been sent to secondary care colleagues, following the 'additional step process' these doctors are working to a deadline to complete their appraisal.
- The breach of duty appraisal letters have been suspended and work is on-going to achieve an improved way of working with the Legal Team.
- The Service Group Medical Directors are being kept up to date with succession planning of the Appraisal Leads.

• The Revalidation Quality Review for SBUHB is due on 5th October 2022 to give the Welsh Government assurances that there are robust systems and processes in place to support medical revalidation

New SAS Contract

- The exercise is due to finish at the end of June 2022. There have been 44 letters dispatched with 23 doctors who have opted to move to the new T&C's equalling 52%. There are a small number of doctors 2 or 3 who have returned from sickness absence where the pay element will not be funded by Welsh Government.
- There are 6 Associate Specialists who have expressed an interest to move across, however, these would be pay protected at marked time.
- There will be some operational challenges mainly on understanding who is on the old and new contract, particularly in relation to job planning to ensure the correct T&C's are used and potentially there could be up to 5 sets of T&C's for this grade of staff.

Allocate Module

Medic on Duty Rollout

- The system is completely live with all aspects of the system in Learning and Disabilities, and there appears to be no difficulties in transitioning over from Intrepid to the Medic on Duty system. There is still a small amount of work to be completed in Mental Health due to outstanding job plans.
- Work is continuing with Medicine in Singleton with one issue being the timeliness of the signing off of the leave and therefore the team are working with the Clinicians to try to improve the speed of the sign off.
- The team are currently building the rest of the Medicine area in NPT which should be live imminently using all the system.
- The implementation is slower than predicted due to staff turnover and Finance removing 1 post. The team are at least 33.3% slower than they would have been if they had had the full team in place due to the funding issues.
- The team are due to move to Surgery in Morriston in September, however, it is being queried if this should continue or be revised for the team to work on a more stable area as Surgery is currently going through a large significant amount of service change. This will be discussed by the Service Group Directors and feedback provided.

Facilities and Fatigue Charter

• Following the Directorates' Task & Finish Group meetings the first meeting of the Steering Group is due to take place, however there is no confirmed date.

3. GOVERNANCE AND RISK ISSUES

There are risks associated with the supply of the medical workforce and the costs of locum cover.

4. FINANCIAL IMPLICATIONS

There are financial risks associated with the supply of the medical workforce and the costs of locum cover.

5. **RECOMMENDATION**

That the Workforce and OD Committee note: -

 The work that has been considered by the Medical Workforce Board at its meeting on 24th June 2022.

Governance and Assurance						
Link to Enabling Objectives (please choose)	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities					
	Partnerships for Improving Health and Wellbeing					
	Co-Production and Health Literacy					
W	Digitally Enabled Health and Wellbeing					
	Deliver better care through excellent health and care services achieving the					
	outcomes that matter most to people					
	Best Value Outcomes and High Quality Care					
	Partnerships for Care					
	Excellent Staff					
	Digitally Enabled Care					
	Outstanding Research, Innovation, Education and Learning					
Health and Care Standards						
(please choose)	Staying Healthy					
	Safe Care					
	Effective Care					
	Dignified Care					
	Timely Care					
	Individual Care					
	Staff and Resources	\boxtimes				
Quality, Safety and Patient Experience						
A sustainable medical workforce is key for the quality of patient care.						
Financial Impli	cations					
There are financial risks associated with the supply of the medical workforce and						
the costs of locum cover through the agency cap project						
Legal Implicati	ons (including equality and diversity assessment)					
Not applicable						
Staffing Implications						
None						

Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)				
Not applicable				
Report History	Thirteenth report in this format.			
Appendices	None			