



# Bwrdd Iechyd Prifysgol Abertawe Bro Morgannwg University Health Board



Meeting Date	19 April 2018		Agenda Item	5b			
Report Title	WAO Consult	ant Contract follo	ow up audit in 2	016			
Report Author	Dr Pushpinde	r S Mangat, Dep	outy Executive M	1D			
Report Sponsor	Professor Hai	mish Laing, Exec	cutive MD				
Presented by	Dr Pushpinder S Mangat, Deputy Executive MD						
Freedom of	Open		-				
Information							
Purpose of the	The purpose of the report is to set out the progress made						
Report	against the recommendations of the WAO Consultant						
_	Contract follow up audit in 2016						
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Key Issues	There a suite of interconnected and related actions that						
	are being undertaken to address the recommendations in						
	the report.						
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Specific Action	Information	Discussion	Assurance	Approval			
Required	<b>1</b>	<b>~</b>	<b>✓</b>				
(please ✓ one only)							
Recommendations	Members are asked to:						
	Note the report and the actions take to deliver the						
	recommendations						

# **WAO Consultant Contract Follow-Up Audit in 2016**

#### 1. INTRODUCTION

The purpose of the report is to set out the progress made against the recommendations of the WAO Consultant Contract follow up audit in 2016.

#### 2. BACKGROUND

An action plan was developed to address the recommendations of the report and was reviewed and agreed by the Audit Committee in 2016. A follow up report was provided in November 2017.

Since then, progress has been made in a number of areas and some completed, but there is still work to undertake.

#### 3. GOVERNANCE AND RISK ISSUES

All the recommendations were wholly or partly in our plans to address before the Audit took place and as such provide a framework to assess progress. Some recommendations have not been achieved in the timescales originally envisaged due to factors outside of the Health Board's control.

The update on the current position is as follows;

# Job Planning R1 R2 R3 R4 R5 R6 R9 R11 R13 R14 R15 R16 R19

Revised Comprehensive Job planning guidance was finally agreed with the BMA in Autumn 2017. Training has since been provided to Senior and Middle Medical Managers and to Senior and Middle Operational managers. This has been rolled out and further training provided on request.

#### eJob Planning R1 R3 R4 R5 R6 R9/10 R13 R14 R15 R16 R19

This platform will allow us to ensure timely completion and recording of job plans. Furthermore it will provide us with information to ensure annual job planning occurs. Implementation was delayed by winter pressures but is progressing. A revised deployment timetable was agreed by Unit Directors in April 2018 for completion in July 2018.

# Appraisal Revalidation processes R6 R11 R12 R16

These processes are now reasonably mature, and have been subject to Internal Audit scrutiny and Peer review. The link between PDPs from Appraisal and Health Board requirements will be in the remit of our new Unit Appraisal Leads. (3 have been appointed and the remaining 2 are being recruited).

### Information for Consultants R7 R8 R9/10 R15 R16

This domain will be an ongoing and continuous process. Different specialties will have different information needs to support their job plans. There is often guidance from the parent College that can assist. We have a number of sources for information to support job planning. These are much easier in areas where activities are process driven and easily audited. These include Theatre management systems, outpatient databases, RTT data, Waiting lists, diagnostic activity (e.g. endoscopy), length of stay and discharge summary completion and clinical variance dashboards.

#### **SPA R17/18**

SPA activity is recorded and managed in the same way as DCC. All individual Consultants are likely to require at least one SPA to support their role. However extra time now requires discussion and agreement in job plans. Outcomes will also be required for specific SPA activities (teaching, audit, research etc). We have created and applied tariffs to some SPA activities.

# 4. FINANCIAL IMPLICATIONS

There are no new financial implications for the committee to consider.

# 5. RECOMMENDATION

Members are asked to:

• **Note** the update.

Governance and Assurance								
1 2 4 4 5	Dromoting and	Delivering	Domonotrating	Coouring	Embodding			
Link to	Promoting and enabling	Delivering excellent patient	Demonstrating value and	Securing a fully engaged	Embedding effective			
corporate	healthier	outcomes,	sustainability	skilled	governance			
objectives	communities	experience and		workforce	and			
(please ✔)		access			partnerships			
		<b>✓</b>	<b>V</b>	<b>✓</b>	<b>/</b>			
Quality, Safety and Patient Experience								
Ensuring the health board has Job Planning processes for Consultants is a key								
factor in the quality, safety, value and sustainability of our services								
Financial Implications								
No financial implications for the committee to be aware of.								
Legal Implications (including equality and diversity assessment)								
Staffing Implications								
No immediate staffing implications for the committee to be aware of.								
Long Term Implications (including the impact of the Well-being of Future								
Generations (Wales) Act 2015)								
The report outlines work undertaken by the Medical HR and the Medical Directors								
Department to address the findings of WAO Consultant Contract follow up audit in								
2016. This will hopefully help with long term management and engagement with								
our Secondary care Medical Workforce.								
Report History		This report was first received by the committee in 2016.						
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Appendices	None.	None.						
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