





Meeting Date	13 December	2022	Agenda Item	5.1	
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	Open				
Information					
Purpose of the	This report is submitted to the Workforce and OD				
Report	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	Approval	
Required					
(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 28th October				
	2022				
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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 28th October 2022.

2. BACKGROUND

Medical Education

- From the last HEIW targeted visit to the Trauma and Orthopaedics (T&O)
 Department in Morriston, the Health Board has requested a reduction in the
 risk rating due to the ongoing progress exhibited by the department, which
 will help with the staff morale and recruitment. The next HEIW (Health
 Education and Improvement Wales) site visit to the T & O Department is to
 be confirmed
- The HEIW Risk Register responses have been submitted, however, the ED (emergency department) response to the training aspect has been returned to the department for a re-draft and this will be sent on to HEIW once this is available.
- There is a HEIW site visit to Core Surgery taking place on the 17th November 2022, and a HEIW site visit to Emergency Medicine on the 18th November 2022.
- There are two weekly meetings of the Reconfiguration of Acute Medical Services Group, which include HEIW to ensure education and training needs are maintained in light of the impending service changes.
- In terms of Undergraduate (UG) issues there is ongoing work with the SIFT sub-committee and in liaison with Swansea Medical School in reviewing and targeting expenditure to optimise UG learning. There is ongoing liaison with the Clinical Placements Lead in ensuring AMSR continues to support undergraduate placements or PA (physician associate) and general medicine degree programmes.
- The Physician Associate Steering Group have advised that the GMC (General Medical Council) PA regulation has been delayed until 2024.
- A CPD (continued professional development) and appraisal process support for departments and PAs within the Health Board has been developed.
- From the Wales matching scheme 10 out of 13 PA posts have been appointed with a potential start date of 28th November 2022. The deadline for the next round of internship submissions is Mid-February and HEIW commissioning number for 2023 from Swansea Bay is 4.
- There remains a challenge around retaining the PA staff at the end of their 18 months internship due to funding.

- There is an issue as PA's are requesting non-ionising radiation investigations. They are able to request certain investigations such as MRI or Ultrasound in certain Health Boards. In Swansea Bay, however, there is a difference where in Morriston they can request MRI but in Singleton they cannot and therefore it would be good to produce a policy particularly as their registration is delayed until 2024 so there is a need to do something for this workforce.
- Aneurin Bevan have shared 2 draft policies one of which is in place in terms
 of extending the role and what they could do, and this may provide ideas on
 how to further develop the role.

Service Groups Updates

Singleton

- A named doctor appointment has been made to the Safeguarding post.
 This is a real success story as this post has remined vacant for some time.
- Two Consultant appointments have been made to both General Paediatrics and Breast Surgery.
- A large exercise has taken place in General Paediatrics around the Consultant rotas with all working on one established rota which is due to start in January 2023.

Morriston

- The AMSR (acute medical services redesign) meetings are on-going, and the Consultant and Junior Doctor rotas have been constructed. The templates have been discussed with the Junior Doctors and HEIW and the immediate feedback is quite positive.
- There is a slight issue with not being able to provide 6 weeks' notice for the start date of the 5th December required for the changes to the rotas.
- Morriston at present has a shortage of Consultant Anaesthetists, and currently there is no Clinical Director, however, appointments have been made to 3 additional leads in Anaesthetics.
- An advert has been placed for a Consultant Interventional Radiology post.
- The process of the intensity banding questionnaire which all Consultants across the Health Board have been asked to complete, is that meetings are taking place on a Directorate by Directorate basis and where it is clear that the intensity banding need to reduce this is being enacted.
- Locum costs have come down in comparison to this time last year but there is still a large locum cost in Medicine and ED at Morriston. , However, the expectation is that after the 5th December when the Medical intake will be moved out of ED this may reduce.
- There are issues with the Burns and Plastic senior hours officer (SHO) rota which is a very fragile rota.

Mental Health

No further update

Medical Efficiency Programme Board

Update on Recruitment Plans Agency & Bank Controls

 All Unit Medical Directors are unaware of what the expected medical savings targets are for next year. For this current year they were asked to save £1,000,000 however, they are not currently aware of the figure for 2023-24.

Health Board Updates

Recruitment

 The recruitment tracker has been circulated and a response has been received from Mental Health, Radiology and Medicine at Morriston, however, nothing at present had come in from Singleton or Neath Port Talbot, therefore the timeframe of the 31st of October 2022 has been extended by a few weeks.

Revalidation & Appraisal

- The Quality Assurance review had taken place on the 5th October 2022 and there had been very good positive feedback
- Some colleagues are experiencing difficulties with obtaining patient feedback and the ITU department have devised a user satisfaction survey which is going to be ratified and signed off by the Medical Director, for use if it is necessary for people to use it.
- In relation to Safe Guarding children an issue has been highlighted where a
 doctor seeing a patient in clinic thought that they only required a level 2,
 however, if seeing children the need is for a level 3, therefore people are not
 sure on what level they need and this requires to be addressed.
- At the All Wales Revalidation Appraisal Group it was flagged that Wales is quite high for deferral rates.
- The All Wales policy has been ratified.

New SAS Contract

- There is currently the potential for CESR posts at the Specialist Grade or Senior Clinical Fellow level. This is at an early stage and work is underway to establish which grade would be the best approach.
- If the Health Board can achieve CESR rotational posts then Swansea Bay would be the first in Wales to advertise posts in this way which would also potentially be for the Specialist roles as well.

Allocate Module

Medic on Duty Rollout

- The direct engagement model with Medacs for lots of reasons are seeing a reduction in what is being allocated to Medacs and there is usage of other agencies across the Health Board.
- Work currently being undertaken with each of the Service Groups and Specialities to look at what is being escalated to Medacs, what is being escalated out to other agencies and what is being used internally so that there is a broader picture in terms of the locum usage that is taking place in those individual areas.
- This should provide more intelligence around what is being used and will also ensure that as part of the Health Board's replacement strategy that there is a plan in place for all of the locum positions that are known about.
- Information is being gathered for a list of the off contract usage which has happened in the last 6 months. However when looking at the ledger it only shows the cost and not the period of time that coverage happened, however it would provide a starting point.

Monitoring Update

- The Medical HR Department will be undertaking monitoring over the next 2 months. The only department that will not be monitored will be Medicine in Morriston as the rota changed in August and a monitoring exercise has already been undertaken and this will have to be re-monitored following the AMSR.
- The team are currently collating all the rotas within the services to map them against the templates to ensure that they are being monitored against what the doctors are working to try to avoid any issues during the monitoring process. It is hoped to complete the monitoring by the end of November.
- There is an historical issue within the Cardiology department with the SPR's rota which are being working through with some of the previous trainees and management teams to resolve, however, there may be a financial impact to the Health Board.
- There is also an issue with the Burns & Plastics SHO rota with the Medical HR team working with the juniors to resolve that issue.
- For one department the Health Board has had to come to a financial compromise to resolve the issues of the junior doctors. As Swansea Bay are in the Single Lead Employer model it has been stated that it would be the Health Board who would have to attend the Audit Committee to give assurance that this is correct and therefore the Health Board is being held accountable by Single Lead Employer.

Facilities and Fatigue Charter

- This is being assessed in the Health Board with the incorporation of a Steering Committee and Task and Finish Groups at the Health Board sites.
- Meetings have been held at Morriston, NPTH, Mental Health, and Primary and Dental Care have also been consulted. The Domains under scrutiny are rostering & rota design, induction, training, facilities/common room/mess, catering, and travel.
- There has been good progress to date at all sites with Local Negotiating Committee (LNC) representation at the meeting who was happy with the

- process. There are no issues which are not able to be resolved by the Delivery Units to date, however there may be an issue in relation to out of hour accommodation and rest areas in Morriston.
- A template has been circulated and the information will be collated to assess if everyone is compliant with a report being prepared for the next Steering Group meeting which is due to take place on 5th December 2022.
- On an All Wales basis it recognises that part of the Charter is aspirational in the sense of that not all Health Boards will be able to achieve absolutely everything as there will be limitations, but it is important that issues are captured within the process so the risk to the organisation can be raised and that the Junior Doctors know that they have been listened to.

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 28th October 2022.

Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	Governance and Assurance					
Objectives (please choose) Partnerships for Improving Health and Wellbeing Co-Production and Health Literacy 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 Staying Healthy Safe Care Effective Care Dignified Care Timely Care Individual Care Staff and Resources Quality, Safety and Patient Experience A sustainable medical workforce is key for the quality of patient care. Financial Implications There are financial risks associated with the supply of the medical workforce and the costs of locum cover through the agency cap project Legal Implications (including equality and diversity assessment) Not applicable Staffing Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015) Not applicable Report History Eleventh report in this format.			promoting and			
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Appendices	Appendices	None				