

## Summary note of the meeting on 16 October 2018

### Attendees

Terence Stephenson, Chair  
Steve Burnett, GMC  
David Bailey, BMA Cymru Wales  
Shane Carmichael, GMC  
Kate Chamberlain, Healthcare Inspectorate Wales  
Josie Cheetham, BMA Cymru Wales  
Peter Donnelly, Health Education and Improvement Wales (HEIW)  
Alex Howells, Health Education and Improvement Wales (HEIW)  
Chris Jones, Welsh Government  
Chris DV Jones, Health Education and Improvement Wales (HEIW)  
Andy Grant, Swansea Medical School  
Philip Kloer, Hywel Dda University Health Board and FMLM  
Katie Laugharne, GMC  
Push Mangat, Health Education and Improvement Wales (HEIW)  
Stephen Riley, Cardiff University Medical School  
Keshav Singhal, British Association of Physicians of Indian Origin (BAPIO) Wales  
Richard Thompkins, NHS Wales Employers  
Kate Watkins, GMC  
Esther Youd, Academy of Medical Royal Colleges Wales

### Others present

Suzanne Gannon- Lewis, GMC  
Madhu Kannan, GMC Clinical Fellow  
Cerys Scarr, Wales Clinical Leadership Training Fellow  
Manel Tippet, GMC (notes)

## Welcome and Chair's introduction

- 1 The Chair welcomed attendees to the meeting, announcing that this would be his last UK Advisory Forum (UKAF) in Wales as Chair. He welcomed Keshav Singhal, Alex Howells, Push Mangat, Madhu Kannan, and Cerys Scarr to their first UKAF.
- 2 Members were reminded that the GMC is a UK-wide regulator that listens to the views from all four countries. The Chair said that he values the opportunity to discuss our work in Wales and to highlight matters of particular importance or concern.

## Actions from the previous UKAF meeting

- 3 Forum members noted the actions agreed at the meeting on 28 March 2018. These included:
  - Publishing a blog on raising concerns through the National Training Surveys (NTS): a blog was drafted but not published due to issues raised by the BMA Cymru Wales around confidentiality on the NTS. The specific issues raised were addressed, but we are looking more widely at doctors' confidence in providing feedback on their education and training environment. It was also noted that UKAF members received early sight of the NTS narrative reports.
  - Writing a letter regarding rota monitoring: we drafted a letter to Responsible Officers and employers with support from the BMA and others, outlining the requirements of our *Promoting Excellence* standards in this respect and the need for collective action to improve current systems of rota monitoring. All Health Boards have responded with contact details of their rota design leads and we are considering next steps with them.
  - Insight into views on reflective practice: we ran a workshop in May to inform consultation around the guidance on *the Reflective practitioner* and how it can be improved. The joint guidance has now been published and was very well received in Wales.

## Upstream regulation: preventing harm and supporting professionalism

### Workforce planning and leadership development: opportunities and challenges

- 4 The Chair invited Alex Howells, Chief Executive of Health Education and Improvement Wales (HEIW) to update the Forum on the development of HEIW including their roles and responsibilities, with a specific focus on their new functions of workforce planning and leadership development.
- 5 HEIW went live on 1 October. It is the 11<sup>th</sup> NHS body in Wales, set up as a Special Health Authority with its main roles including educating and training, and developing and shaping the healthcare workforce in Wales. The functions of the body were set

out by the Cabinet Secretary for Health and Social Care and education and training runs through the heart of the organisation, with a focus on supporting delivery of *A Healthier Wales*, Wales' new long term joint health and social care plan.

- 6 HEIW's remit covers the wider medical professional groups and will ensure that leadership development, workforce modernisation and improving careers encompasses all professions and all levels. The nature of the improvement function is still being refined.
- 7 Workforce planning is an immediate priority for HEIW with three main areas of focus:
  - Developing a long term health and social care strategy by November 2019.
  - Developing a national perspective on workforce planning whilst supporting local planning arrangements including at individual organisation and cluster level.
  - Focussing on the issues around workforce that are directly affecting staff and patients, such as timely and efficient access to services.
- 8 Forum members discussed issues relating to workforce planning, including: the impact of different service models and strategies which any workforce strategy should complement; the need to understand from existing data what resources we have and where they are; and considerations of what service needs might be in the future.
- 9 The group reflected on the implications for the role of the GMC and expectations of doctors in the future. HEIW's role is to ensure that the workforce reflects the changes in delivery, which includes the shift from secondary to primary care and from hospital to community as described in *A Healthier Wales*. The Forum discussed that for this to happen HEIW must ensure that they: Make primary care more attractive to trainees such as through creating a variety of roles, making training pathways more flexible, and working closely with medical schools to ensure that individuals are being directed into areas where there is greater need:
  - Encourage multi-disciplinary working including utilising pharmacists in different ways and maximising the new role of Physician Associates.
  - Explore social care solutions as well as medical ones.
  - Improve the morale of the workforce and ensure they are used efficiently.
- 10 Forum members were invited by HEIW to work more collaboratively on a progressive agenda, with a focus on social and health determinants. It was noted that *A Healthier Wales* sets out the creation of a National Clinical Plan for health services by the end of 2019, which will be delivered by the Chief Medical Officer for Wales with support from HEIW, and that development of this plan will require large-scale engagement.

- 11 **Leadership** is another priority and it was noted that the focus on leadership is also multi-disciplinary. HEIW is currently looking at Michael West's compassionate and values-based leadership work in line with the *A Healthier Wales* Plan under the quadruple aim of a well workforce.
- 12 It was noted that there are a number of existing leadership initiatives including the Academi Wales leadership programme, the Wales Clinical Leadership Programme, HEIW's Developing Doctors to Deliver, and the Quality Improvement skills training run by 1000 Lives. HEIW is also looking more widely at issues relating to staff engagement and workplace bullying in the context of leadership.
- 13 The Forum discussed how the GMC can facilitate change so that doctors value leadership and management, particularly in the early years during training. The revised *Outcomes for graduates*, the Medical Licensing Assessment (MLA), and the existing Generic Professional Capabilities Framework were all identified as potential vehicles for change.
- 14 The Forum agreed to recommend that the MLA should reflect the focus on generalist and community-based care and should include a section on leadership and management.

## Medical workforce, quality and safety

### Supporting a Profession Under Pressure

- 15 Forum members were provided with an update on GMC activity under the *Supporting a profession under pressure* programme and engaged in discussions on key issues and implications for Wales.
  - **Gross Negligence Manslaughter (GNM) and Culpable Homicide Review:** There were no responses from Welsh stakeholders to our calls for written evidence in the summer. However, the GNM workshop on 8 October was well attended and on 9 October, the Chairs of the CHC and the DCMO gave oral evidence to the panel. The evidence collected by the Review Panel to date is showing common themes, including the need to support healthcare staff. It was noted that the BMA has welcomed all of the reviews into GNM and CH.
  - **The Reflective Practitioner:** The Reflective Practitioner Guidance was published on 12 September. It was co-produced by the Academy of Medical Royal Colleges, the UK Conference of Postgraduate Medical Deans (COPMeD), the GMC, and the Medical Schools Council. The guidance was informed by stakeholders in all four countries and from workshops held around the UK and is an example of true collaboration.

Discussion followed around the concerns many still have that reflections will be used against them, and that reflective notes are not privileged despite our calls that they should be.

It was also noted that doctors have received varying degrees of training regarding how to be a reflective practitioner and the benefits this can bring in terms of learning. There was a call for the GMC to convey this message clearly to doctors.

- **Fairness – the Roger Kline Review:** The Review looks at why some groups of doctors are referred to us for fitness to practise concerns more or less than others. Earlier this year we commissioned Roger Kline to take forward a major, independent research programme to help us understand what drives this disparity across the UK.
- **Induction and Returners:** *Promoting excellence* stipulates the elements and importance of induction, but there may be some inconsistency in how this is delivered in practice. It was noted that Welcome to UK Practice sessions (WtUKP) are in high demand in Wales and are well received. The British Association of Physicians of Indian Origin (BAPIO) is in discussion with the British Council and partnering with the GMC to roll out WtUKP to the wider workforce.
- **Raising and acting on concerns:** It was noted that there has been interest in Wales regarding the role of Freedom to Speak Up Guardians in England and that we continue to talk to doctors on the front line to highlight our Raising Concerns guidance and discuss how they can make it work in practice.
- **Wellbeing:** Our Welsh Clinical Fellow is reviewing the existing research and programmes available in Wales. We have invited key stakeholders to attend one-to-one meetings with Dame Denise Coia and Professor Michael West. Anyone wishing to contribute to this work can contact the programme at [wellbeing@gmc-uk.org](mailto:wellbeing@gmc-uk.org).

## Systems and collective effect

### Insight, intelligence and collective effect

- 16 The Forum considered how insight and intelligence helps the GMC meet our corporate aims, and enables us to work more collaboratively with stakeholders. We know that we can work better with stakeholders by triangulating all data sources to get a collective picture of the whole. A large-scale exercise has been undertaken across the UK to better understand how we currently work with our stakeholders in all four countries, and to consider what good practice looks like.
- 17 Forum members were informed that following feedback from the March Forum we have endeavoured to analyse more of our data on a four-country basis, and provided

an outline of these efforts in relation to the National Training Surveys (NTS) and differential attainment. The Forum agreed that we should highlight to trainees where improvements have been made from their responses to the NTS.

- 18** The Forum discussed how we should use data to influence change. It was agreed that more could be done to identify what doctors are doing and what their specialist interests are so that we can make projections on the future workforce. It was suggested that we hold a Data Round Table in 2019 to discuss what data we hold and how best to triangulate with other sources around Wales, and how this might feed into HEIW's workforce planning remit described earlier.

### **Chair's closing comments**

- 19** The Chair thanked attendees for their contribution both at the meeting and during his tenure as Chair over the past four years, noting that he was saddened to be leaving the post at the end of the year. He gave special thanks for the GMC Wales team for their efforts in ensuring that we are a collaborative and professional organisation.
- 20** The next UKAF meeting will take place on 27 March 2019, Chaired by Dame Clare Marx.