

**RCoA Welsh Board meeting
Tuesday 17th October 2023
10-1pm
Hybrid meeting: Teams and Hilton Hotel Cardiff**

MINUTES

Members:

Dr Simon Ford, Chair and Regional Advisor	Dr Piotr Kurchasrki, Betsi Cadwaladr HBR (teams)
Dr Abrie Theron	Dr Stephan Clements, Betsi Cadwaladr HBR (teams)
Dr Jane Tanaka, Aneurin Bevan HBR	Dr Kath Eggers, Cwm Taf Morgannwg HBR
Dr Mark Sandby-Thomas, Cardiff & Vale University HBR	Dr Kathryn Lloyd-Thomas, Cwm Taf Morgannwg HBR
Dr Lewys Richmond, Swansea Bay HBR	Dr Matt Williams, Cwm Taf Morgannwg HBR
Dr Alun Thomas, Hywel Dda HBR	Dr Gianluca Longbardi, Trainee Representative
Dr Anna Williams, Betsi Cadwaladr HBR	*Vacancy, SAS Representative*

Ex-Officio:

Dr Helgi Johannsson, RcoA Vice President	Dr Danielle Huckle, Academic Representative (apologies)
Dr Libby Duff, HoSS	Dr Tomaz, Academic Representative
Dr Sonia Pierce, Regional Adviser Pain Medicine (apologies)	Jason Williams, PatientVoices@RcoA Representative (apologies)
Dr Tei Sheraton, Association of Anaesthetists	Dr Teresa Evans, Regional Adviser Intensive Care Medicine
Dr Peter Richardson, Clinical Director (apologies)	

Staff:

Mrs Sharon Drake, Deputy CEO
Dr Helgi Johannsson, Vice President
Ms Amy Wallwork, Policy and Public Affairs Assistant
Mrs Susan Rees, Presidents Office Coordinator (minutes)

Attending:

Dr Sean Tobin
Dr Hannah Saitch

1. Welcome and Ratification of Board Vice – Chair

Dr Simon Ford highlighted that the Board still does not have a representative for the SAS Fraternity in Wales on this board. Dr Ford asked the Board to discuss this position in their various

departments to try to seek a representative as it is important that this board fully represents the breadth of Wales. It was noted that there is also no representatives from Aberystwyth or Withybush Hospitals, but Dr Abrie Theron has been in touch with this hospital already.

2. Conflicts of Interest

None declared.

3. Minutes of the Previous meeting held on 29th March 2023

The minutes of the previous meeting held on Tuesday 29th March 2023 were circulated in advance of the meeting and were approved as a true and accurate record.

4. Matters Arising

Dr Ford noted the matters arising since the last meeting and their status of completion. The following updates were provided:

Completed Action: A joint letter of thanks to the outgoing previous Dr Range, Dr Bailey and Dr Maloney for their previous hard work on the board and their replacements welcomed.

Completed Action: To look through the Constitution of the Board to ensure it's ex-officio and Co-opted members are invited to the Board.

Completed Action: Dr Ford asked the Board to review the Terms of Office to ensure this is correct and the corresponding members have been updated.

TO CARRY FORWARD ACTION: Dr Ford, Mr Brūn and Ms Ward to consider how best the College and possibly the Association of Anaesthetists can advocate on the workforce issues experienced in Wales with the Health Minister. This needs further action after the EGM.

Completed Action: Dr Ford to write to the Medical Directors and on behalf of the Board write to the CEO and Medical Director with the Health minister on copy recognising the concerns raised within the Cwm Taf Morgannwg health board, safety concerns and burnout issues. The Health Minister was not copied as progress and engagement by the Healthboard was forthcoming.

Completed Action: The Welsh Board to issue a statement jointly with the Association of Anaesthetists on decommissioning the use of desflurane in Wales. This has been reviewed by the All Wales Medicines Strategy Group(AWMSG) responsible for licensing of drugs in Wales and has gone out for consultation. This has been completed and final approval will be sort on the 8th of November 2023. Following this, a statement will be made by AWMSG and WAB to confirm the suspension of procurement license for desflurane in Wales and its removal.

5. Welsh Board Chair's Report

Dr Ford presented the Chair's report and since the last meeting the following was highlighted: Dr Ford welcomed Miss Amy Wallwork to the Board replacing Miss Darcy Ward. Dr Ford acknowledged Darcy's previous hard work .

Dr Ford acknowledged Dr Theron's excellent work as Chair of the Academy of Medical Royal Colleges of Wales and his good work in leading the committee. Dr Ford also highlighted the return of the corresponding members to the Board which is appreciated.

It was noted that a College working group looking at the poorly performing anaesthetist had been convened. Dr Ford announced that Dr Ashish Wagle will be the Welsh representative on this Board.

6. RCoA College Report

Mr Helgi Johannsson (HJ) and Mrs Sharon Drake (SD) presented the College report and highlighted the following:

Anaesthesia Associates and EGM to be held on the evening of the 17th October 2023

Dr Johannsson outlined the issues precipitating the EGM which will take place on the evening of the 17th October 2023. There are six resolutions for the meeting. It was noted that the RCoA isn't opposing any of them and most of the clarifications are clear and comprehensive.

Dr Johannsson noted that post EGM, the college will establish a working group to see how the college can take forward the results of the resolutions.

The College will review how the AAs scope of practice can be optimised, but is part of a much bigger piece of work around improving Doctor's training. The resolution involving ANRO must avoid singling out ANRO as they are part of a larger issue of facilities and funding.

It was noted that NHS England have worked with ANRO to recruit 70 extra training posts made permanent in England which is good news.

The discussion of AA's in Wales continued and Dr Ford noted that statements from NHSE have affected doctors in Wales. NHS Wales and NHS Scotland have proposed a phased introduction to AA's which is very different to England. The challenge within Wales is to recognise the depth of feeling but also support AAs using a more considered approach. It was noted that the College are not responsible for the AA recruitment process or funding, as this is conducted by local Health Boards with only minor support in Wales.

Examinations update

It was reported that the college is launching a new role, which is called the Affiliate Examiner. This will provide a way to foster greater participation in the exam development process from a wider cohort including senior trainees and SAS doctors. It is one of the recommendations from the exams review where the College is aiming for a broader input into question generation making for a richer examination

The Affiliate role will focus on developing exam content and exam questions, rather than examining.. This will be launched during SAS week.

Council Voting and Elections.

Mrs Sharon Drake updated the Board that Council Elections are still open and close on Thursday 19th October 2023.

There are three consultant and two anaesthetist in training vacancies available in this year's ballot. More details can be found at <https://rcoa.ac.uk/council-2023-elections>.

It was noted that on this occasion, there are no SAS vacancies.

Membership Survey from RCoA Members on AA's

Mrs Sharon Drake reported that the college have conducted an independent report to produce a Membership survey and the CQ&R team are able to produce a report for the Welsh Board looking specifically at data from Welsh respondents.

Covid 19 Inquiry update:

SD highlighted some points from the report.

Policy and Public Affairs update:

Dr Simon Ford welcomed Miss Amy Wallwork, Policy and Public Affairs Assistant to the Board meeting and the following update was reported:

Political Engagement

The College have been accepted as a core participant for Module 3 of the Covid-19 Inquiry, following joint submission alongside FICM and the Association of Anaesthetists. The preliminary hearing took place on 28th February, with a second one due later this year. Module 3 of the Inquiry investigates the government and social response to Covid-19, as well as focusing on the impact the pandemic had on healthcare systems, patients and health care workers. This module will examine healthcare governance, primary care and the impact on NHS backlogs. Core participant status gives us privileged access to documents that will be examined and suggest lines of inquiry. The College was invited by the Inquiry team to deliver a response to module 3 which the College submitted in September 2023. We await further communication from the Covid 19 Inquiry team.

CQ&R and Perioperative Care update

The NAP 7 report on Perioperative Cardiac Arrest concludes and will be launched on the 17th of November. Invites for NAP8 topics have just gone out. The appetite for National Audit Projects continues.

CPOC:

Mrs Sharon Drake updated that the College is developing a perioperative care curriculum through Centre for Perioperative Care(CPOC) including surgeons, physicians and GP's. This is led by Dr Danny Conway from Manchester.

This work has been funded by HSEE looking at workforce and service needs to support perioperative care. The CQ&R team are working closely with NHSE to develop this.

Mrs Sharon Drake finally reported on the financial recovery plan of the College which is going well. The College is achieving its financial budgetary goal. The College have recently appointed a fundraising expert who will assist in generating funds to support our core work.

This core work includes the exams work, Equality Diversity and Inclusion(EDI) and perioperative care work.

Dr Simon Ford highlighted a few further points:

CESR Day 2023

Dr Ford reported that he attended a CESR Day in the autumn. The College received a significant increase in applications this year via the CESR Equivalence committee. If anyone is interested in joining the committee as a portfolio assessor, please let Dr Ford know.

ANRO Exams Investigation and the Report

Dr Ford informed the Board that the ANRO investigation did cause concern. The scoring errors affected candidates at the Welsh recruitment centre where scores were not correctly transcribed affecting post offers. The NHSE report was not sent to HEIW but was shared with them via Dr Sarah Harries the then Head of school.

It was noted that the HEE was encouraged by the College to publish the report at the time of investigation. There was a significant delay between report conclusion and publishing.

7. RA and Head of School (HoSS) Joint Report

Dr Ford and Dr Duff presented the Board with the RA and Head of School Joint Report circulated and provided key updates on the following:

College Tutors Meeting

Dr Duff reported on the College Tutors meeting was held in Sheffield in summer 2023 and was a great success.

Recruitment

The School has a 100% fill rate at core and ST. Training posts have seen a significant uplift in the last 3 years and in August 23 secured an additional 6 ST4 posts from Welsh Government, scattered across Health Boards. The total uplift in 3 years being 5 CT1, 5 ACCS, 15 ST4.

Dr Duff reported that in February 23, they appointed to 6 CT1 and 17 ST4 posts. In August 23, they appointed to 14 CT1, 16 ACCS and 22 ST4 posts. The current minimum numbers provided to ANRO for Feb 24 recruitment are 9 CT1 and 14-16 ST4 posts.

Dr Duff is expecting a total of 23 CCTs in 2023. The full retention data have not yet been detailed from HEIW. We are expecting 14 (60%) of these to remain as consultant in Wales as a minimum.

National recruitment Interviews have recently taken place for the February 2024 intake (2 days). The new format for online interviews (updated Qpercom platform) was initially used in April 23 and many are now familiar with this system. For new recruits, an interview training session was organised and well received prior to the day. We have recruited several ST7 trainees to join the interview panels for core training recruitment which has boosted numbers and seems popular.

Dr Duff reported that in the coming year there is a plan to reassess the Welsh training capacity across all Stages to help guide further expansion plans.

2021 Curriculum

There are very few trainees remaining on the 2010 curriculum and most have transitioned successfully. We are still working with two targets for Stage 1 (CT3) and 2(ST5) equivalence/certificate, but ARCP panels and trainers are familiar with this. There has been a lot of support provided from within the School to all trainers and this has been very well received.

Single Lead Employer

- There continue to be ongoing issues with front sheets when trainees rotate posts and Health Boards. HEIW are aware of this and are working with NWSSP/BMA to develop a new process for Feb 24. There remain concerns that must be addressed. Errors occurring in August 23 have created significant upset amongst trainees (more so LFTs). Trainees are frustrated at limited communication following any queries and have all been encouraged to include Dr Ruth Alcolado (Medical Director NWSSP) in to ongoing queries.

Transfer training

- The Wales critical care network are unable to continue delivery of the transfer training long-term. The Adult Critical Care Transfer Service (ACCTS) potentially can provide training delivery requiring funding. Discussions are ongoing with HEIW regarding funding. This is a mandatory aspect of training and the School is keen to formalise any new arrangement as soon as possible.

New posts and resignations

- Dr Sarah Harries stepped down as Head of School in the summer with

enormous recognition of her contribution to training in anaesthesia in Wales over many years. She has been awarded the RCoA Presidents medal which she will be receiving at the College Tutors meeting in 2024.

- Dr Graeme Lilley has taken over the ST TPD role after 8 years working as core TPD. Dr Mike Adamson has been appointed as the new core TPD. Dr Libby Duff has been appointed as the new Head of School.

Website

- The website is an ongoing source of lots of information for both trainees and trainers. Increasing range of virtual training resources to support Non clinical HALOs has proven popular, providing supportive evidence at ARCP.

Regional Advisors Report

Anaesthesia Associates (AAs)

In Wales there is a small cohort of established AA exclusively in Hywel Dda who have worked in a positive manner with trainees over many years. In 2020 HEIW undertook a scoping practice where it was felt that AAs would be a positive introduction to help the significant workforce deficit in anaesthesia. The training of AAs started in March 2023 with the support of HEIW using the UCL MSc. course. We currently have 2 AA students with an anticipated potential of up to 6 per year spread across several HB. Recruitment is currently on hold awaiting the outcome of the EGM.

CESR Rotation

There are a few recognised "bottle necks" in the training programme. A Welsh CESR rotation has been established to support CESR applicants and the training programme. Three posts are hosted by Swansea Bay and rotate 2 years Swansea and 1 year Cardiff to provide all the Stage 2/3 capabilities. Three candidates have been appointed from over 60 applicants and start in November. We have a Welsh representative on the CESR/Equivalence committee but would request more volunteers in supporting the College in this work. We look forward to the CESR rotation registration process which is in development at the College.

Consultant Recruitment

Over 30 Consultant jobs have been approved this year so far, 4 of which have been at the Specialist Grade. There is a greater recognition of the role these contracts can provide, supporting retention and colleague development.

We have ongoing challenges in supporting AAC panels with College representatives. If departments have difficulty in convening a panel, please contact Dr Ford as early as possible to help provide a representative. It is very important that appointments are not delayed for the want of a College representative.

Dr Ford highlighted to all CDs the need for a workforce and wellbeing paragraph in the Job descriptions. This has been a requirement since April 2023 and is a leading reason for job plan rejection.

Outsourcing

The practice of using companies to support extra work at weekends continues. Concerns have been raised around the quality of clinicians brought in to support the work and has raised some safety concerns. The governance process surrounding these companies is opaque and needs highlighting to departments for clarification of where risk management sits.

Strike Action

The Junior doctors of Wales have rejected the pay offer of the Welsh government this year and are currently in the process of balloting members on the question of strike action. The Consultants have not been balloted as yet.

2021 Curriculum

I would like to thank Dr Duff for her work in establishing the SIA curriculum, which has been the last step in the transition process. The range of non clinical SIAs is developing and this has been supported very effectively in the Welsh School of Anaesthesia.

College Support

Dr Duff thanked the College and the President for their rapid and effective support on a recent letter published in the national press. The messages I received from consultant colleagues and trainees following the response reflected the support felt from the College.

8. Regional Adviser Intensive Care Medicine report

Dr Teresa Evans and Dr Bethan Gibson provided an update on Intensive Care Medicine and the following points were highlighted:

Workforce:

- FICM posts. Ongoing issues recruiting to smaller DGH units. These predominate in rural locations. The FICM Remote and Rural units survey did not necessarily reflect this.
- CESR – x1 further successful candidate.
- Trainer burnout increasingly reported.

Training/Recruitment:

- HEIW training review planned for Princess of Wales, Cwm Taf. Overall reconfiguration plan for Cwm Taf Morgannwg UHB awaited. Urgent Ongoing review of ICM training provision in this location planned.
- Recruitment process ongoing 8 – 88% fill rate.
- Ongoing work for a split North Wales/South Wales rotation – BCUHB supportive as are HEIW . HB - Glan Clwyd, funding is supporting specialised blocks in North England.
- Transfer training – Lack of provision of transfer course. E-learning module in development, as well as many local solutions coming forward. Stage 1 FICM (non-anaesthetic dual trainees) supported to undertake shifts with ACCTS.
- LTFT – Increasing proportion requesting LTFT. (ICM 44%) Expansion in training numbers are not reflected as % slots are not shared yet. The dual trainees also lead to trainees in a training number for prolonged periods. Discussions with HEIW about sharing training 'numbers' progressing.

Tertiary services:

- Burns · SBUHB – ongoing building work to support the relocation of burns within the GICU footprint. The first phase of co-location of 3 Burns ICU beds into General ICU approved. Work commencing Dec 2023. (Loss 6 GICU beds through winter). Expected finish – Autumn 2024 (decrease GICU beds overall) The second phase of recovery of these bed numbers is at business case stage. Provisional indicators suggest no capital, meaning an overall decrease in GICU beds for the population.
- ECMO business case progressing in C&V.

WICIS /Network/Faculty

- The Welsh Clinical Informatics service (WICIS): Grange University Hospital Nov. 2023 – other HB 2024. Delay with implementation.
- The Welsh critical care network:
 - will move to be under the umbrella of the 'Critical Care, Emergency medicine and Trauma strategic network'
 - ICU capacity and reconfiguration of services
 - Transfer course (see above)
- NHS executive now effective

- Twice yearly meeting with the Health Minister – reconfiguration and modernisation of ICU a priority.

9. Regional Adviser Pain Medicine report

Dr Sonia Pierce provided an update on Pain Medicine and the following points were highlighted:

FPM roles update

Welcome to two new Faculty Tutors (Pain): Dr Valentina Jansen in Hywel Dda UHB and Dr Archana Awsare in Wrexham BCUHB (East). Thank you to the outgoing FTPs for their hard work in supporting our trainees over the years.

Dr Sonia Pierce has been appointed as an examiner for the FPMRCA examination, starting this month.

Advanced Training / SIA in Pain Medicine

Two trainees currently undertaking Advanced Training in Pain Medicine in Wales – one in Cardiff and one undertaking an Advanced Pain Fellowship as an OOPT in North Wales. There is continued healthy levels of interest from other trainees Pain Medicine SIAs for the years ahead.

Education Updates

We continue to hold annual study days in North and South Wales, which have been well received, delivering a range of educational material relevant for all stages of the curriculum. The Faculty of Pain Medicine has set up a new Education Subcommittee (FPMEDSC), of which I am Vice Chair, to further develop educational opportunities nationally. This includes UK wide online/hybrid training days, as well as other formats for learners. There are a number of upcoming events including the annual meeting in November FPM Annual Meeting 2023, Faculty of Pain Medicine and a communications skills course in January 2024 Effective conversations for pain clinicians: Using the consultation to empower self-management, Faculty of Pain Medicine (fpm.ac.uk). The FPM Learning platform continues to host up to date educational material including case reports and podcasts, relevant to all doctors interested in pain medicine, available here: FPM Learning at the Faculty of Pain Medicine. If anyone is interested in getting involved, please contact us: contact@fpm.ac.uk

Credentialing and Workforce

The General Medical Council has approved the Curriculum for the Credential for the Pain Medicine Specialist. For the first time ever, doctors who are trained in Pain Medicine, will be recognised on the GMC Register of Medical Practitioners. Credentialing will be integrated into the CCT curriculum for Anaesthesia but will also open the route of training to other specialities and to Specialty Grade Doctors. The aim of the Credential is to:

- Provide a much-needed increase in our current work force – most regions in the UK have less than 0.5 of a Pain Specialist per 100,000 population.
- To increase public safety as both employers and the public will be able to ascertain whether their Pain Specialist has been Credentialed and hence trained to the highest standards possible.

The five yearly FPM Census has recently been conducted and provides a rich source of workforce data, highlighting some of the challenges in pain services across the UK. The report will be published soon.

National Network Group for Persistent Pain

This group has been set up by the Welsh Assembly Government and is chaired by the Chronic Pain Leads for Wales. The Government have co-produced and refreshed the document "Living with Persistent Pain in Wales", and this was relaunched at an event in September 2023: Written Statement: Launch of refreshed Living with Persistent Pain guidance (18 September 2023) | GOV.WALES

10. Trainee Issues

Anaesthesia Associates (AA) – Dr Gianluca Trisolini Longobardi

The training of AAs in Wales is underway. Dr Gianluca Trisolini Longobardi asked the group whether since the last meeting in March 2023, has the college encountered any issues regarding impact of training in departments in England with the increase in AA recruitment? Dr Gianluca Trisolini Longobardi asked if the College is producing more detailed guidance on the introduction of AAs.

Industrial Action and impact on training

Gianluca Trisolini Longobardi noted that it is inevitable that BMA Cymru will ballot trainee members for industrial action. What is the impact of industrial action on trainees in England in regards of HALO completion and ARCP outcomes. It was asked if there was a review planned to measure the impact on training.

Mrs Sharon Drake reported that the college have written a brief to go to the Council meeting in November 2023 and will commission a report. There will be various feedback gathered from hospitals and there will be an academic independent review commissioned by the College looking at patient safety.

The strikes were discussed further. It was noted that the impact of these strikes may affect the FY1 and FY2 trainees. Dr Johannsson asked the Board if anyone hears of trainees having difficulties due to the strikes to please escalate this

11. Matters from Health Board Representatives

a. Cwm Taf Morgannwg HB

Dr Matt Williams, Dr Lloyd-Thomas and Dr Kath Eggers presented their health board reports for the Cwm Taf Morgannwg. The following points were raised:

Health Board Report for: Dr Kath Eggers Princess of Wales Hospital, Bridgend

Dr Eggers reported on the following:

- In sourcing teams – how does clinical governance work in other HBs when using these teams? We have had some issues which have fallen to our department to sort out when there has been adverse outcomes.
- ITU update: There has been an improvement with this issue in POW. There are 2 new locum ITU consultants starting soon.
- There are new ITU clinical fellows to provide a middle grade resident 1 in 8 rota, with a 3 tier rota structure starting by December.

Health Board Report for: Prince Charles Hospital, March 2023 – Matt Williams

Dr Williams reported on the ongoing restructuring of services across CTMs three sites. Discussions are ongoing, but no decisions have been made and the decision inertia is causing concern. Of note Max-Fax surgery reported to be leaving PCH, they currently provide emergency surgical airway cover.

Health Board Report for: Royal Glamorgan Hospital - Dr Kathryn Lloyd-Thomas :

- Still no resolution with the outcome of ITU services in RGH. There is limited clarity on the future of the ITU and the department has tried to be as proactive as possible to reach out to higher management on this. This has led to poor staff morale.
- Currently there is a question over what services POW and RGH will keep or

- lose.
- Job Planning issues are ongoing – this is brought up in each governance meeting and has been an issue since Covid –19.

The job planning process was discussed and is a legal requirement of the Hospital Trust to supply it. Dr Lloyd-thomas was advised to speak with her Trust and advise that other hospitals are able to produce job plans and to speak with them again.

c. Betsi Cadwaladr HB

Dr Piotr Kurchasrki, Dr Anna Williams and Dr Stephan Clements presented their health board reports for the Betsi Cadwaladr hospital and the following points were raised:

Health Board Report for: Wrexham Maelor Hospital - Dr Anna Williams

Betsi Cadwaladr had a further restructure last year and is now split into Integrated Healthcare Communities (East – Wrexham Maelor, Central – Ysbyty Glan Clwyd and West – Ysbyty Gwynedd). Aim to integrate organisation of primary and secondary care with an associated reshuffle and additional layer of management roles.

Back in special measures for the 2nd time (2015-2020, 2023-) due to financial irregularities vascular services and a 'dysfunctional senior executive team', appointed the 8th chief exec in 11 years and 11 independent board members were forced to resign.

Recruitment consistently remains a problem in North Wales. However, we have worked hard and are currently fully staffed in Wrexham. General on call rota - 1:11 – 1 locum, awaiting CESR, 1 speciality doctor – awaiting CESR, 9 substantive consultants, ICU rota more problematic 1:8 – 2 of these have been covered by adhoc locum shifts but this is also about to be fully staffed – though this may not last! Other permanent members of the department are a mixture of SAS and clinical fellows. 3 consultants on trauma rota and 1 consultant on ICU rota have retired and returned.

A lot of our CTs live in the Northwest and are put off applying for specialty training in Wales due to the period they must spend in South Wales when there are specialist centres close by in Liverpool and Manchester. Relocation expenses during training don't cover the money spent relocating to South Wales and this financial penalty is another disincentive. It was reported that Theatres also fully staffed though sickness (sometimes up to 20%) leads to some agency staff.

Big efforts to improve flow and productivity have been made under the guidance of a new matron and manager.

Unscheduled care - ongoing pressure at the front door, ambulance waits and beds remain a problem. Carpal tunnel surgery moved to outpatients – freeing up theatre space and reduced carbon footprint. There are low risk arthroplasty patients are being operated on as day cases centrally (Abergele) to reduce waiting times across the Health Board
Piped nitrous off across the site Prehab available for all major upper GI/colorectal patients

Health Board Report for : Glan Clwyd Hospital - Dr Piotr Kurchasrki:

- Obstetrics: increasing pressure on C-sections number delivery. Elective work impacting emergency elective C-section capacity. More Consultants needed for Antenatal Clinic
- Anaesthetics & Intensive care:
- Highest number of home discharges from ICU in the UK due to delayed transfer of care and lack of ward bed capacity for discharges.
- Burnout of ICU consultants, 4 more posts needed to accommodate the rota. Not enough funding for all beds. Capacity: 16, manned :13
- More ICU consultant posts will facilitate ICU service provision as well as anaesthetics. More funds needed, cheaper-long term than employing locums.

- SAS contracts: no directive on new contracts for entry points resulting in grievance process. Room to improve transition to the new SAS Charter.
- North West rotation for trainees – multiple feedback and requests to discuss NW rotation in addition or instead of Cardiff rotation.
- Difficulties in extra contractual cover, 5-6 list per week due vacant consultant posts.
- Business case for improved, electronic POAC rejected.
- There are a few more key points I would like to bring up for discussion in concise format.
- EPIC training programme ended, what lies ahead?
- Funding ICU issues due to PCI and Vascular service provision at YGC 200 more beds annually. Currently 850-900.

Health Board Report for: Ysbyty Gwynedd Hospital - Dr Stephan Clements

Dr Clements reported that for the last 3 years ACCTS has been providing a 24/7 transfer service for north Wales. As of the 1st October 2023 the night time service from 2000-0800 has been stopped due to financial constraints thus leaving a gap in the service. Once or twice per week we do not have sufficiently senior resident cover to enable release of a resident to undertake a transfer. For those nights we are asking Transfer trained volunteers to staff a Non-Resident Transfer cover slot. A day in lieu has been locally agreed if called out, rather than payment. BCUHB execs have so far refused to pay. The Board were asked to please support us in persuading BCUHB to provide us with financial support to provide this essential additional transfer cover overnight. This was discussed further in the meeting,

d. Aneurin Bevan HB

Dr Jane Tanaka noted that hospitals are working under extreme operational pressures which seem to be reflected throughout Wales and discussed below:

- Staff shortages – recent appointment of 5 specialist doctors, approval for a consultant post, backfills cancelled despite obvious effects to waiting lists.
- Bed pressures – push to do more lists and increasing acuity of patients in lower acuity hospitals, Surgical high care now very busy in RGH (to reduce pressure on GUH). Recent moves to start short stay arthroplasty and breast unit moved to YYF with a plan for 80% patients to be operated there to reduce the pressure on RGH.
- Extreme financial pressures – backfills cancelled, ban on extra payments (except emergency cover) and moves to streamline PAC processes and remove extraneous blood tests as one example.
- Infrastructure – NHH has structural problems throughout the wards.

e. Cardiff & Vale University HB: Dr Sandby-Thomas

- Rate card implementation. The trust has unilaterally implemented a rate card with much lower rates than the BMA advisory rate card. This is to replace all payments for ECLs
- ICU. Despite a visit and report from RCoA, there has been no change to the practice of Anaesthetic trainees been the first port of call to the ED to manage patients. This is a patient safety, training and workflow issue
- Cardiothoracic still at UHL. CTS was meant to move back to UHW in September 2023 but there was an issue with real estate planning/development. The knock-on effect of this is a 75% reduction in orthopaedic list capacity, thus increasing waiting lists. There is also a safety issue with lack of on-site CTS to support both cardiology (especially cath lab) and MTC services
- Poor staff retention is impacting services throughout anaesthetics, especially in Paediatrics, Obstetrics and ITU

- Videolaryngoscopy now established as first line airway management technique across UHW theatres (except Paeds)
- Move to NRfit for neuraxial/regional blocks commences in mid October

f. Swansea Bay University HB - Dr Lewys Richmond

Increase in theatre capacity at Neath Port Talbot Hospital (NPTH)

- 3 new theatres built
- 2 new theatres now online for primary joints and spines, not at increased acuity
- Burns service transfer to ITU project due to start imminently.
- Cubicles in ITU and one theatre to be modified to house the burns service going forward.
- Burns on call rota continues to be supported by general group of anaesthetists. The development may impact main theatres and recovery
- "Insourcing" continues
- Insourcing of theatre teams/clinical staff to perform weekend operating continues in Ophthalmic, Upper limb, paediatric ent/plastics.

12. Matters from corresponding member of the Board

Dr Ford provided updates from Corresponding members.

The All Wales Airway Group (AWAG) are active again, having held their AGM. Work on updating guidelines on front of neck access are planned for 2024.

13. Matters from Academic Representatives -

Professor Cristina Diaz-Navarro was welcomed to the Board.

Professor Diaz-Navarro is attending the board to outline her anticipated role. She leads the academic studies at University Hospital Wales in conjunction with Cardiff University. An update was provided on the projects to be undertaken. The department is very supportive and has undergone many changes over the years. They are reviewing the curriculum and the future of the academic systems.

14. Association of Anaesthetists Report

Dr Tei Sheraton has not provided a report and sent apologies. The Board to contact Dr Sheraton and confirm future representation.

15. PatientsVoices@RCoA Report

Jason Williams had sent apologies to the meeting and is still active as a representative.

16. Clinical Director report

Dr Peter Richardson, Clinical Director mentioned the potential for disruption for industrial action and there is hope this will be resolved. The financial climate was causing constraints nationally and reducing services at a time they should be increasing services. It is also restricting recruitment. The Health Board would like to have a long term financial health strategy and Dr Richardson also would like to receive any future report on the on the Covid-19 Inquiry from the college.

17. Correspondence

Dr Sunil Desari attended the Board on behalf of Welsh Pain Society and gave the following update:

- 1) All Wales Guidelines for safe and effective use of opioids for chronic non-cancer pain in adults from Welsh pain society was published recently. This a very useful resource for managing patients on opioids.
- 2) SwNAP- South Wales Acute pain network is working on updating all Wales pain assessment guidance with help from digital health Wales.

- 3) Regular Webinars by WPS on Pain medicine topics. Useful learning opportunity.
- 4) Multidisciplinary ASM 2023 held at Swansea on the 6th of October. ASM 2024 will be held in Cardiff, most probably in October. Good opportunity for trainees to present posters.
- 5) Seed corn funding from Welsh Pain Society for research into pain is available.

Applications can be sent through the website of the Welsh Pain Society by using the following link [Research & Innovation | Welsh Pain Society](#)

The Welsh Pain Society would like to thank the Welsh Board and is committed to work hand in hand with the Welsh board & RCOA, FPM and Welsh Government in supporting the cause of pain medicine in Wales.

18. Any other business

Dr Ford reported that the meeting with CMO took place on the morning of the 17th October and the following was highlighted to Dr Frank Atherton:

- The group reported back on Workforce morale
- AA's and PA's a gentler introduction would be appreciated in Wales
- Strike concerns were highlighted
- Suggestion of a continuous flow model as per the Bristol model, may facilitate patients through hospital.
- Not expecting too many covid issues over winter months
- Super regional health Board work for the future

Dr Ford will step down as RA from February 2024 and will continue on as Chair of the Welsh Board.

Board members Term of Office

Dr Ford to work with the Board secretary and Board to update the board membership and term of office document to support future election planning for 2024 and future years.

Date of next meeting Wednesday 20th March 2024 10:00 to 1:00 pm