

Bundle Education, Commissioning & Quality Committee (Open) 8 October 2020

AGENDA

ECQC Agenda 8 October 2020 (Open) V4.docx

- 1 PRELIMINARY MATTER
 - 1.1 Welcome and Introductions
 - 1.2 Apologies for Absence
 - 1.3 Declaration of Interest
 - 1.4 Minutes of the Education, Commissioning and Quality Committee held on 16 September 2020
 - 1.4 - Unconfirmed ECQC Minutes_2020-09-16 (Open) V3 approved by RH.docx
 - 1.5 Action Log
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 - 1.6 Matters Arising
- 2 EDUCATION PERFORMANCE AND QUALITY
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- 3 GOVERNANCE MATTERS
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 - 3.3 To Receive the Draft Unconfirmed Minutes from the Multi-Professional Education & Quality Group Meeting held on 23 September 2020
 - 3.3 Draft Unconfirmed Minutes from Internal MPEQG Meeting 23.09.20.pdf
 - 3.4 Terms of Reference of the New Internal and External Facing Advisory Groups on Education and Training
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 - 3.5 DRAFT Forward Work Programme 2021
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- 4 STRATEGIC ISSUES
 - 4.1 Briefing Paper - Enshrining the Positive Lessons from COVID-19: Defining the 'New Normal' for Education and Training in Wales
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 - 4.2 Update on Strategic Review of Healthcare Education in Wales
 - 4.3 South Wales Trauma Network Training Needs Assessment
- 5 CLOSE
 - 5.1 Any Other Business
 - 5.2 Reflection on Today's Committee
 - 5.3 Date of Next Meeting: Tuesday, 9 February 2021 at 10:00am either by Microsoft Teams or HEIW Meeting Room 1, Ty Dysgu

EDUCATION, COMMISSIONING AND QUALITY COMMITTEE (Open)

Thursday, 8 October 2020
10:30 – 13:15

Via Microsoft Teams/Teleconference

AGENDA

PART 1	PRELIMINARY MATTERS	10:30-10:40
1.1	Welcome and Introductions	Chair/ Oral
1.2	Apologies for Absence	Chair/ Oral
1.3	Declarations of Interest	Chair/ Oral
1.4	To Receive and Confirm the Minutes of the Committee held on 16 September 2020	Chair/ Attachment
1.5	Action Log	Chair/ Attachment
1.6	Matters Arising	Chair/ Oral
PART 2	EDUCATION PERFORMANCE AND QUALITY	10:40-11:00
2.1	Quality Management Update	Medical Director/ Attachment
2.2	Summary of Local Education Provider Commissioning Review 2019-2020	Medical Director/ Attachment
PART 3	GOVERNANCE MATTERS	11:00-12:00
3.1	Evaluation of Committee Effectiveness	Board Secretary/ Attachment
3.2	Annual Review of Committee Terms of Reference	Board Secretary/ Attachment
3.3	To Receive the Draft Unconfirmed Minutes from the Multi-Professional Education & Quality Group Meeting held on 23 September 2020	Interim Director of Nursing/ Attachment
3.4	Terms of Reference of the new Internal and External Facing Advisory Groups on Education and Training	Board Secretary/ Attachment
3.5	Draft Forward Work Programme 2021	Board Secretary/ Attachment
PART 4	STRATEGIC MATTERS	12:00-13:00
4.1	Briefing Paper - Enshrining the Positive Lessons from COVID-19: Defining the 'New Normal' for Education and Training in Wales	Medical Director/ Attachment
4.2	Update on Strategic Review of Healthcare Education in Wales	Director of Finance/ Oral

4.3	South Wales Trauma Network Training Needs Assessment	Dr Dindi Gill Dr Bethan Nicholas Sue West-Jones Rachel Taylor/ Oral
PART 5	CLOSE	13:00-13:15
5.1	Any Other Business	Chair/ Oral
5.2	Reflection on Today's Committee	Chair/ Oral
5.3	Date of Next Meeting: Tuesday, 9 February 2021 at 10:00am either by Microsoft Teams or HEIW Meeting Room 1, Ty Dysgu	Chair/ Oral

In accordance with the provision of Section 1(2) of the Public Bodies (Admissions to Meetings) Act 1960 it shall be resolved that representatives of the press and other members of the public be excluded from the latter part of the meeting on the grounds that it would be prejudicial to the public interest due to the confidential nature of the business transacted. This section of the meeting is to be held in private session.

UNCONFIRMED

**DRAFT Minutes of the Education, Commissioning and Quality Committee
held on 16 September 2020
Via Microsoft Teams/Teleconference**

Present:

Dr Ruth Hall
Tina Donnelly

Chair and Independent Member
Independent Member

In Attendance:

Dafydd Bebb
Angela Parry
Martin Riley
Eifion Williams
Dr Tom Lawson
Kay Barrow

Board Secretary
Interim Director of Nursing
Deputy Director of Education, Commissioning and Quality
Director of Finance
Postgraduate Medical Dean
Corporate Governance Manager (Secretariat)

PART 1	PRELIMINARY MATTERS	Action
ECQC: 16/09/1.1	WELCOME AND INTRODUCTIONS	
	The Chair welcomed everyone to the meeting.	
ECQC: 16/09/1.2	Apologies for Absence	
	Apologies for absence were received from Prof. Pushpinder Mangat (Medical Director)	
ECQC: 16/09/1.3	Declarations of Interest	
	The following declarations of interest were noted in relation to agenda item 2.1: Eifion Williams – Member of the Swansea University Finance Committee and a student at the University of Wales St David's; Angela Parry – Holds an Honorary Contract with Cardiff University; Tina Donnelly – Fellow of the University of South Wales.	
ECQC: 16/09/1.4	To Receive and Confirm the Minutes of the Committee held on 2 July 2020	
	The minutes of the meeting held on 2 July 2020 were confirmed as an accurate record, subject to the following amendments: <ul style="list-style-type: none"> ECQC 02/07/2.3 Draft Annual Education and Training Plan: Remove the word 'also' from the last sentence of the third 	

	<p>paragraph on the top of page 6, so that the start of the sentence reads 'This had also informed the approach to'.</p> <ul style="list-style-type: none"> • ECQC 02/07/4.1 Draft Committee Self-Assessment Checklist: Remove the words 'Although there was' from the start of the last sentence of the final paragraph on page 7 and capitalise the 's' in the word 'some' and add the words 'were expressed' after the word 'concern', so that the sentence reads 'Some concern was expressed regarding the length and the number of questions'. 	
ECQC: 16/09/1.5	Action Log	
	<p>The Committee received the Action Log and noted that a number of actions deferred due to the impact of the COVID 19 Pandemic were either scheduled for consideration at the October meeting or on the Forward Work Programme for consideration in early 2021. It was confirmed that those items would be kept on the Action Log until they had been completed.</p> <p>The Committee considered the Action Log and the following verbal updates were received:</p> <ul style="list-style-type: none"> • ECQC 21/10/2.2 KPMG Review of Health Professional Education: The Committee noted the position in relation to the Welsh language Clinical Dictionary and Welsh language resource management was being reviewed and that an update would be provided at the October Committee. 	
Resolved	The Committee agreed for an update at its October meeting regarding the Welsh language resource management and Welsh language Clinical Dictionary.	AP/DB
	<ul style="list-style-type: none"> • ECQC 21/10/2.2 KPMG Review of Health Professional Education: The Deep Dive of the Strategic Review of Health Professional Education had been scheduled into the Board Development Forward Work Programme for April 2020 however, as a result of COVID 19 this item had been postponed. It was confirmed that the contract specification and Invitation to Tender (ITT) had been developed and was a separate item on today's Committee agenda. <p>Angela Parry advised that a Deep Dive into a number of bursary appeals for Allied Health Professionals (AHP) had been undertaken and that a report would be presented to the October Committee.</p>	
Resolved	<p>The Committee:</p> <ul style="list-style-type: none"> • agreed that the action relating to the Deep Dive of the Strategic Review of Health Professional Education at a Board Development Session under the action ECQC 21/10/2.2 be removed from the action log. • agreed to receive a report on the Deep Dive of the AHP Bursary Appeals. 	<p>DB</p> <p>AP</p>

ECQC: 16/09/1.6	Matters Arising	
	There were no matters arising.	
PART 2	STRATEGIC ISSUES	
ECQC: 16/09/2.1	Health Professional Education Contract Specification	
	<p>The Committee received the report.</p> <p>In presenting the report, Eifion Williams and Martin Riley provided an overview of the review of the Health Professional education contracts and the development of the final Strategy for Education. The Strategy was a two-phased approach, with the first phase focussed on pre-registration postgraduate programmes, and the second phase on post registration education such as, advanced and extended education programmes.</p> <p>The work to review the contracts and develop the Strategy had been overseen by a Programme Board. As Chair of the Programme Board, Eifion Williams asked the Committee to note the excellent commitment of the members of the Programme Board in undertaking the work for Phase 1, as well as the contribution made by the Shared Services Procurement and Legal Teams. He asked that the Committee recognise the contribution of Stephen Griffiths, Director of Nursing, prior to his retirement at the end of May 2020 and the support from Martin Riley.</p> <p>The Committee acknowledged the extensive work of the Programme Board, the contribution made by Stephen Griffiths and the support provided by Martin Riley. The Committee considered in detail the final procurement proposals in relation to the Health Professional Education Contracts and made a number of recommendations to clarify and strengthen the documentation.</p> <p>It was noted that the Strategic Review of Health Professional Education Phase 1 seeks to secure pre-registration health professional education for Wales for the next 7 to 10 years. The programme of work has been an opportunity to undertake a whole system review of the shape and focus of the current education and training provision; consider the education specifications and programmes required to support the NHS in Wales going forward; and take into account lessons learnt as a result of COVID 19 with the increased use of virtual technology in place of face to face teaching.</p> <p>The Review Programme included work carried out by KPMG involving extensive stakeholder engagement and research of international best practice. The key emerging principles from the review align with 'A Healthier Wales'; the new Workforce Strategy</p>	

for Health & Social Care and HEIW's Strategic Aims and Objectives. These key components have been included within the new contracts in order to ensure innovation and delivery of high-quality education provision. The contracts also facilitate partnership working within health and social care. Concerns were raised regarding the need to reflect the emphasis on inter-professional and blended learning more explicitly within the covering report.

The Review supported the approach to the Lotting Strategy, which enhanced widening access to education and training to provide increased opportunities for students from all parts of Wales, and moves away from one supplier provision, where viable. Some concerns were expressed about the capacity and resources within universities to meet the delivery requirements. The Committee was reassured that this had been satisfactorily explored and the Strategy based on the Strategic Review Programme's findings.

The Committee raised questions in relation to the pricing model and the financial implications of a fixed fee per student, noting that enhancements would be paid to those education providers who meet certain criteria to widen access and encourage educational attainment. The financial approach was consistent with the Welsh Government's emerging policy "A More Equal Wales – Commencing the Socio-economic Duty". Prior to agreeing the financial model, the education providers had been consulted on the approach to setting a fixed fee. The analysis of projections and cost benefits needed to be made more explicit within the covering report.

Concerns were raised in relation to attrition and the way it had been articulated within the documentation. How it was to be monitored and challenged needed to be more explicit. The governance arrangements within the contract specification, which detailed the requirement for three contract business meetings each year to review the finance, performance and quality for each provider, also needed to be made more explicit within the covering report.

The Committee queried the membership of the Evaluation Panel and the potential for conflicts of interest. Whilst there were processes in place for the appointment of appropriate Panel members in terms of declaring interests and potential conflicts, this needed to be clearly stated within the covering report. The Committee felt, due to variation in standards across the UK, that the Panel would benefit from academic representation from across the four nations.

The Committee queried the weighting of the scoring assessment for the digital element within the evaluation.

	The requirement for the Board's inclusion in the governance arrangements needed to be more explicit in the covering report.	
Resolved	<p>The Committee, subject to the amendment of the documentation to reflect the Committee discussion, the Committee agreed to:</p> <ul style="list-style-type: none"> • endorse the plan and procurement strategy, for consideration by the Board; • recommend submission of the ITT and Contract Specification to the Board; • recommend to the Board that the Procurement Report be submitted to the Director of Procurement Services in NWSSP and the Welsh Government. 	EW/AP
ECQC: 16/09/2.2	Strengthening Welsh Language Provision	
	<p>The Committee received the report.</p> <p>In presenting the report, Dafydd Bebb advised that through the work undertaken to review the contracts, HEIW has been able to incorporate a number of measures to strengthen Welsh language skills and awareness for all students within the contract specification.</p> <p>The Committee was pleased to see the measures taken to strengthen Welsh Language Provision within the Health Professional Education Contract Specification aimed to create an environment that will support providers in the provision of Welsh language education and enhance the Welsh language skills of the future NHS workforce.</p>	
Resolved	The Committee noted the report.	
PART 3	EDUCATION PERFORMANCE AND QUALITY	
ECQC: 16/09/3.1	Terms of Reference for the Education Sub Groups	
	<p>The Committee received the revised Terms of Reference for the Education Sub Group.</p> <p>In presenting the Terms of Reference, Dafydd Bebb advised that following discussion at Executive Team, it had been suggested that the two group were to be classed as Advisory Groups and their titles to be changed to reflect the nature of the Groups. The internal facing group to be known as the Multi-Professional Education and Quality Group (MPEQG) and the external facing group to be known as the Education Advisory Group (EAG).</p> <p>The Executive Team had also suggested that the focus on quality be strengthened within the role of the internal group, with its remit to include the development of the Annual Quality Statement, a new requirement for HEIW in 2020/21. The focus for the external group will be to provide advice and support to the Committee.</p>	

	<p>The Committee considered the revisions and the extent of the membership of both groups and, in particular the number of members of the internal group. It was highlighted that SAS doctors were not represented, although noted that this may be addressed shortly, when SAS doctors come within the remit of the Medical Deanery.</p> <p>It was confirmed that the Council of Deans was content for their Chair to represent the universities as a member of the external group with the potential for the Vice Chair as the deputy representative.</p> <p>A query was raised about whether the nomination of deputies should be explicit within the Terms of Reference. It was clarified that usual practice was for a deputy to attend in the stead of a member, however, it was emphasised that the deputy needed to have decision making authority.</p>	
Resolved	The Committee, subject to the amendment of the Terms of Reference to reflect the Committee discussion, agreed that each of the new Advisory Groups should review their Terms of Reference at their inaugural meetings.	DB
PART 4	CLOSE	
ECQC: 16/09/4.1	Any Other Business	
	There was no other business.	
Resolved		
ECQC: 16/09/4.2	Reflection on Today's Committee	
	The Chair advised that she would provide an overview of the Committee discussion at the Board as part of her Committee Chair's Key Issues Report.	
ECQC: 16/09/4.3	Date of Next Meeting	
	The date of the next meeting was confirmed for Thursday, 8 October 2020 at 10.00am in the Conference Room, Ty Dysgu, Nantgarw.	

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Dr Ruth Hall (Chair)

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Date:

Education, Commissioning and Quality Committee (Open)
16 September 2020
Action Log

(The Action Sheet also includes actions agreed at previous meetings of the Education, Commissioning and Quality Committee and are awaiting completion or are timetabled for future consideration for the Committee. These are shaded in the first section. When signed off by the Education, Commissioning and Quality Committee these actions will be taken off the rolling action sheet.)

Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
ECQC: 16/01/3.1	Performance Report of Education Contracts			
	Explore the potential for a celebratory event either annually or 6-monthly with service providers.	Interim Director of Nursing	TBC	Postponed. This will be picked up once the current emergency has passed.
ECQC: 16/01/3.3	New Arrangements for Annual Commissioning Process for Post Graduate Education			
	Summary Report to be presented to the Committee in October 2020.	Medical Director	October 2020	Item on the October Committee agenda.
ECQC: 02/07/1.5	Action Log			
	ECQC 21/10/2.2 KPMG Review of Health Professional Education:			
	<ul style="list-style-type: none"> The availability of Welsh Language Resources including the Welsh Clinical Dictionary to be explored further in terms of how these resources would be managed, updated and shared across other organisations to support Welsh language provision. 	Board Secretary	October 2020	Verbal update to be provided at the October Committee.



Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
	ECQC: 16/01/2.4 Major Trauma Network: Training Needs			
	<ul style="list-style-type: none"> The date for the relaunch of the implementation of the Major Trauma Network was anticipated to be in the Autumn. 	Medical Director	October 2020	The Clinical and Training Leads are attending the October Committee.
ECQC: 02/07/2.1	Update on COVID 19			
	<ul style="list-style-type: none"> The presentation on the 'new normal' to be converted into a briefing paper, and that the lessons learnt be captured for the purposes of implementation and monitoring. 	Medical Director	October 2020	Item on the October Committee agenda.
ECQC: 02/07/3.2	Quality Assurance Review of Post Graduate Medical Education (PGME) During COVID 19 Pandemic			
	<ul style="list-style-type: none"> A further paper on the quality assurance of education for other multi-professional areas be presented at the next Committee meeting in October 2020. 	Medical Director/ Interim Director of Nursing	October 2020	Item on the October Committee agenda.
ECQC: 02/07/4.1	Draft Committee Self-Assessment Checklist			
	<ul style="list-style-type: none"> The evaluation of the Self-Assessment Checklist be presented at the next Committee meeting in October 2020. 	Board Secretary	October 2020	Item on the October Committee agenda
ECQC: 02/07/6.1.1	Inequalities in Educational Attainment and Recruitment			
	<ul style="list-style-type: none"> A discussion paper be presented at the next meeting of the Committee to consider how HEIW may approach mitigating the impact of inequalities in context of educational attainment and recruitment. 	Interim Director of Nursing	Early 2021	A new Differential Attainment Group has been established to take this work forward. Item added to the Forward Work Programme for early in the 2021.



Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
ECQC: 02/07/6.1.2	Forward Work Programme			
	<ul style="list-style-type: none"> An updated Forward Work Programme to be presented to the October Committee meeting. 	Board Secretary	October 2020	Item on the October Committee agenda.
ECQC: 16/09/1.4	Minutes of the Meeting held on 2 July 2020			
	<ul style="list-style-type: none"> ECQC 02/07/2.3 Draft Annual Education and Training Plan: Remove the word 'also' from the last sentence of the third paragraph on the top of page 6, so that the start of the sentence reads 'This had also informed the approach to'. 	Board Secretary	Within 1 week	Completed.
	<ul style="list-style-type: none"> ECQC 02/07/4.1 Draft Committee Self-Assessment Checklist: Remove the words 'Although there was' from the start of the last sentence of the final paragraph on page 7 and capitalise the 's' in the word 'some' and add the words 'were expressed' after the word 'concern', so that the sentence reads 'Some concern was expressed regarding the length and the under of questions'. 	Board Secretary	Within 1 week	Completed
ECQC: 16/09/1.5	Action Log			
	<ul style="list-style-type: none"> ECQC 21/10/2.2 KPMG Review of Health Professional Education: The action relating to the Deep Dive of the Strategic Review of Health Professional Education at a Board Development Session under the action ECQC 21/10/2.2 be removed from the action log. 	Board Secretary	Within 1 week	Completed.



Minute Reference	Agreed Action	Lead	Target Date	Progress/ Completed
	<ul style="list-style-type: none"> A report on the Deep Dive of Allied Health Professional Bursary Appeals to be presented at the October Committee. 	Interim Director of Nursing	October 2020	Item on the October Committee agenda.
ECQC: 16/09/2.1	Health Professional Education Contract Specification			
	<ul style="list-style-type: none"> Subject to the amendment of the documentation to reflect the Committee discussion, the Committee, agreed to: <ul style="list-style-type: none"> endorse the plan and procurement strategy, for consideration by the Board; recommend submission of the ITT and Contract Specification to the Board; recommend to the Board that the Procurement Report be submitted to the Director of Procurement Services in NWSSP and the Welsh Government. 	Director of Finance/ Interim Director of Nursing	September 2020	Item on the September Board agenda.
ECQC 16/09/3.1	Terms of Reference for the Education Sub Groups			
	<ul style="list-style-type: none"> Subject to the amendment of the Terms of Reference to reflect the Committee discussion, agreed that each of the new Advisory Groups to review their Terms of Reference at their inaugural meetings. 	Board Secretary	September 2020	Terms of Reference considered at the MPEQG on 23 September 2020 and on the October Committee agenda.



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Addysg a Gwella Iechyd
Cymru (AaGIC)
Health Education and
Improvement Wales (HEIW)

Meeting Date	8 October 2020	Agenda Item	2.1
Report Title	Quality Management Update		
Report Author	Mandy Martin Dr Malcolm Gajraj		
Report Sponsor	Professor Pushpinder Mangat		
Presented by	Professor Pushpinder Mangat		
Freedom of Information	Open		
Purpose of the Report	To provide the Education, Commissioning & Quality Committee with an update on quality management activity within the Medical Deanery.		
Key Issues	<p>6 areas of risk are currently in enhanced monitoring status with the GMC.</p> <p>1 area has significant reconfiguration pending where Medical Deanery is working closely with the Health Board</p> <p>Arrangements are being made to resume visit activity via virtual means.</p>		
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance
	✓		
Recommendations	<p>Members are asked to:</p> <ul style="list-style-type: none"> Note 		

Quality Management Update

1. Introduction

The Quality Unit works to improve patient care and patient safety through the monitoring and development of high-quality education and training and provision of Faculty and infrastructure to support this. Activity is undertaken in collaboration with Speciality, Foundation and GP Schools along with Local Education Providers (LEP) across NHS Wales to ensure high quality educational environments for trainees and links between educational and clinical governance.

Excellence in postgraduate medical training in Wales is supported by our core remit comprising delivery of educational governance via mechanisms including:

- a) Commissioning of, and expectations for, provision of Postgraduate Medical and Dental Education (PGMDE).
- b) Application of a Quality Management Framework (QMF) including scheduled and responsive components to ensure that when training does not meet national standards, changes are facilitated and implemented to improve quality. The QMF provides reassurance to the General Medical Council (GMC), the regulator, to approve training sites and programmes.
- c) Support for PGMDE provision across NHS Wales including trainers and training infrastructure.

These mechanisms are necessarily interlinked. However, for reporting purposes each component is considered separately and cross-referenced as appropriate to contextualise information. This report is primarily concerned with the provision of an update on quality management.

2. Governance & Risk Issues

There are currently six areas within the Medical Deanery which are in enhanced monitoring status with the GMC. An update on each of these areas and other relevant information is provided in the subsequent sections.

2.1 Paediatric Surgery, University Hospital of Wales

Placed in Enhanced Monitoring in April 2017 with trainees having previously been temporarily removed in 2015. Since then HEIW has been working with the Health Board in order to improve the training environment with a view to assessing the suitability of reintroducing the trainees. Approval for trainee reallocation was granted in June 2019 and, since then, one ST commenced training in August 2019 with a further trainee took up their post by February 2020.

Prior to COVID-19 the objective evidence was that there had been good progress in addressing the concerns and the reintroduction of trainees had largely been successful with a good level of oversight by the Health Board. The previous visit arranged for 21st April 2020 was postponed due to the COVID-19 pandemic. HEIW has therefore made arrangements to undertake a Targeted Visit in order to gain a detailed review of how the department has been impacted by COVID-19 prior to a wider review in collaboration with the SAC and GMC.

De-escalation from enhanced monitoring status requires the following:

- Evidence of a sustainable rota which could support training, (GMC Requirement R1.12).
- A case load that enables trainees to meet the curricula requirements, (GMC Requirement R1.17)
- Evidence of multi-disciplinary meetings, (GMC Requirement R1.17)
- Appropriate educational supervision, (GMC Requirement R1.17).
- Pre-admission clinics, (GMC Requirement R1.17).
- An environment which is conducive to a positive learning experience, (GMC Requirement R3.3).
- A teaching programme which is compliant with the BBC Consortium, (GMC Requirement R1.16).

Next steps:

Monitoring arrangements will remain in place and a formal Targeted has been arranged for the October 2020.

2.2 Obstetrics & Gynaecology Prince Charles & Royal Glamorgan Hospitals

This department has been in “enhanced monitoring” since December 2017 for concerns relating to clinical supervision and reconfiguration of services. The department has been the subject of a critical report by the RCOG into Obstetric Services more generally. The training issues however were considered to have improved and this has been evidenced through monitoring and a more formal targeted visit was undertaken on 23rd October 2019 with the GMC present. The Quality Unit have continued to collaborate with the Health Board and a further visit arranged for 29th April 2020 was postponed due to the COVID-19 pandemic. However, monitoring with the local team has continued and the visit has been re-scheduled for 14th October 2020. The visit will be undertaken virtually with the GMC in attendance. In addition, a member of the Independent Review Panel has been invited to attend although we are currently waiting confirmation of their availability.

The following is necessary to secure de-escalation from enhanced monitoring status:

- Evidence that improvements to date are sustainable (GMC Standards S1.1 and S1.2).
- Resolution of the patient safety concerns around A&E pathways (GMC Standard 1.1).
- Access to ultrasound training, (GMC Requirement R1.20).

Next steps:

A visit will be undertaken on 14th October in order to inform next steps.

2.3 Obstetrics & Gynaecology Princess of Wales Hospital

This department has been in “enhanced monitoring” since January 2019 for concerns relating to clinical supervision, adequate experience, curriculum coverage and reconfiguration of services. A further visit took place on 23rd October with the GMC present in order to monitor progress more formally. At the visit it was evident that the patient safety issues identified at the previous visit had been addressed and the experience of the foundation and GP trainees had improved. We have continued to liaise with the local team to monitor progress and a visit has been arranged for 30th November 2020.

The following steps are necessary to ensure de-escalation from enhanced monitoring status:

- Evidence that the previous improvements are sustained (GMC Standards S1.1 and S1.2).
- Evidence that ST trainees can meet the requirements of the curriculum (GMC Requirement R1.17).
- Evidence that trainers have appropriate time for training within their job plans (GMC Requirement R4.2).
- Enhanced clarity around consultant presence on the labour ward (GMC Standard R1.7)

Next steps

A visit to review progress has been arranged for 30th November 2020 to enable a more formal assessment around progress to be obtained.

2.4 Medicine, Wrexham Maelor Hospital

A planned visit was undertaken on 19th July 2019, the third in a series of visits. At this visit, it was noted that there were persistent concerns around the ability of the trainees to meet the requirements of the curriculum due to an inappropriate balance between training and service provision. Given the persistent nature of this concern, the issue was referred to the GMC for consideration of enhanced monitoring status. This was subsequently applied in September 2019.

Prior to COVID-19 we were aware that the Health Board had taken a number of steps to address the concerns and there was some evidence that de-escalation may be possible prior to the pandemic. However, we are aware that the pandemic has had a significant impact on medicine as a specialty and COVID has reached North Wales slightly later than in the rest of Wales. We will therefore continue to engage with the Health Board regarding this issue with a view to identifying an appropriate time to arrange a formal review through a visit.

The following steps are necessary in order to consider de-escalation from enhanced monitoring:

- Evidence that there is an appropriate balance between training and service provision and that this can be sustained (GMC Requirements R1.12, R1.7, R1.12).

Next steps

The Quality Unit will continue to liaise with the local team to monitor progress and will arrange a visit at an appropriate time.

2.5 Emergency Medicine, Morriston Hospital

A visit was undertaken to consider the training experience in Emergency Medicine at Morriston Hospital on 9th January 2020. At the visit the panel were concerned that there had been a significant deterioration in the training experience. Given the concern that progress had fallen behind, combined with the lack of a clear plan on how to address the concerns in the short term, the issue was referred to the GMC for Enhanced Monitoring status and confirmation from the GMC that this status would be applied was received in February 2020.

Prior to COVID the Health Board have reported that progress had been made in relation to recruitment. During the pandemic pressures on emergency departments have eased and we will therefore need to take this into account when undertaking a formal review of progress through a virtual visit which has been arranged for 4th November 2020.

The key issues for which action is required are as follows:

- Evidence that rotas are designed to minimise the adverse effects of fatigue and workload (GMC Requirements R1.12 e).
- Evidence that there are sufficient suitably qualified staff to ensure that trainees have appropriate clinical supervision and working patterns, particularly within the paediatric area (GMC Requirement R1.7).
- Ensure the provision of adequate educational supervision and time to complete the assessments as required by the curriculum, (GMC Requirement R1.19).
- A culture that seeks and responds to feedback from learners and educators on compliance with standards of patient safety and care as well as education and training (GMC Requirement R1.5).

Next Steps:

A further visit has been arranged for 4th November 2020 in order to monitor progress more formally.

2.6 Trauma & Orthopaedics, Morriston Hospital

This department was placed in enhanced monitoring in January 2019 due to concerns about clinical supervision, supportive environment, adequate experience, induction and workload. A good level of progress had been made in addressing a number of the concerns within the department immediately prior to COVID-19 particularly in relation to the previously identified patient safety issues. The remaining concern relates to the need to ensure that there is adequate elective exposure. (GMC Requirements R4.2 and R1.17). However, like all surgical specialties COVID-19 has had a significant impact on the ability of the department to provide non urgent surgery. We are therefore taking steps to ensure that trainees continue to be supported through the pandemic as routine operating starts to resume. The Medical Deanery has supported the

Medical Director in allowing trainees to acquire experience outside the main NHS hospital sites (e.g. Private Hospitals). Plans for a further visit during the spring were postponed due to the COVID pandemic. Whilst there are plans for a further visit to be undertaken, consideration is being given to the most appropriate time to undertake this.

Next steps:

Ongoing monitoring in collaboration with the Health Board with a further visit to be arranged at an appropriate time.

2.7 Grange University Hospital

Aneurin Bevan University Health Board will be opening The Grange University Hospital during November 2020. This is not in “enhanced monitoring” but merits close attention from HEIW as with any significant reconfiguration. The Medical Directorate has had a number of collaborative discussions with the Health Board about the integration of education and training during the planning of this site. We are working closely with colleagues to address training issues as they arise. The main issues are as follows:

- Ensuring that the arrangements that will be in place to ensure that all trainees have an appropriate induction.
- Ensure that all trainees have an appropriate level of clinical supervision both in and out of hours. In particular, the need to ensure that all foundation trainees as well as other junior trainees have access to on site clinical supervision at all times as per GMC requirements.
- Confirmation of educational governance arrangements taking into account the impact of rotas requiring working across multiple sites.
- Establishing appropriate rest and education facilities at the site.

The Quality Unit are taking advantage of the existing excellent working relationships with the Health Board around these concerns and an update on progress will be provided in future reports.

3. Specialty Reporting

It is our intention to prepare reports for major specialty groups.

As part of our responsibility for ensuring appropriate governance within medical training programmes, the Quality Unit have a reporting process in place which is designed to review approaches across training programmes and share best practice.

This process has been recognised as burdensome from an administrative point of view and is being updated and streamlined, whilst still providing appropriate information which can be analysed in a consistent manner - particularly in terms of monitoring trends over time and to sharing practice.

These changes to the process are relatively new and have been well received by training programme leads. Consideration is being given to how to further develop this approach to drive up standards in the longer term.

In the interim the most recent reports are currently being analysed with feedback to training programmes being finalised and a key themes report will be available in due course.

4. GMC National Training Surveys

The GMC National Training Surveys which usually take place in March each year were postponed in the due to the COVID-19 pandemic. However, the GMC have undertaken a shorter survey of trainees and trainers across the UK which aimed to focus upon wellbeing and to understand trainee and trainer experiences of working during a pandemic. The live survey period was much shorter with a completion window of just three weeks instead of the traditional six to seven weeks. In addition, given the pressures on the workforce the survey was not marketed as being mandatory this year and neither was it possible to target individuals to encourage completion. Whilst this approach was appropriate, as anticipated response rates were much lower than in previous years. Nevertheless, the Quality Unit developed a communications strategy which struck a balance between encouraging completion without adding pressure and consequently our response rate compared favourably to the rest of the UK as detailed within the table below.

	HEIW Response Rate	UK Average Response Rate	HEIW Ranking
Trainee Survey	53.26%	48.67%	2 nd highest, (Defence Deanery came first but with around 100 trainees they are not directly comparable).
Trainer Survey	33.8%	24.3%	1 st

The GMC have indicated that the results of the survey will be available in November. However, it should be noted that it will not be possible to directly compare the results of this survey to previous years due to a complete change in question set. A further update on the results will be provided once the Quality Unit has had time to analyse the findings.

5. HEIW Open

At the beginning of October, the Quality Unit will launch HEIW Open a generic email account which trainees can utilise to raise concerns directly with HEIW. This approach has been introduced in response to the findings of anecdotal feedback as well as the results of the GMC National Trainings Surveys which have consistently reported Wales as having the lowest score for reporting systems across the UK with a gradual decline in the overall score in recent years. The idea behind this initiative is not to replace local reporting systems but to act as a safety value to complement local approaches and signpost sources of local support. In addition, one of the key challenges around addressing training concerns is that there can be a perception that where concerns are raised action isn't taken and this is reflected within the survey results. This perception may be because of the time lag associated with implementing

action plans. In order to help address this we have embedded into HEIW Open a mechanism to ensure that the feedback loop is closed. Operational guidance on how concerns raised through this approach has been developed and appropriate consultation with Local Education Providers and the BMA has been undertaken with general support for this approach. This does not preclude a trainee raising issues about their training further through the HEIW complaints or raising concerns policies.

Governance and Assurance			
Link to IMTP strategic aims (please ✓)	Strategic Aim 1: To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'	Strategic Aim 2: To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs	Strategic Aim 3: To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels
		✓	
	Strategic Aim 4: To develop the workforce to support the delivery of safety and quality	Strategic Aim 5: To be an exemplar employer and a great place to work	Strategic Aim 6: To be recognised as an excellent partner, influencer and leader
	✓		
Quality, Safety and Patient Experience			
The maintenance of high-quality training is closely associated with patient safety. The development of alternative approaches to quality management is essential to maintain an environment that ensures good quality patient care, by enabling appropriate training and support for trainees is available and delivered.			
Financial Implications			
There are no financial implications associated with this report.			
Legal Implications (including equality and diversity assessment)			
Staffing Implications			
No implications for HEIW staff have been identified.			
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)			
Report History	None		
Appendices	None		



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Cymru (AaGIC)
Health Education and
Improvement Wales (HEIW)

Meeting Date	8 October 2020		Agenda Item	2.2
Report Title	2019-20 Commissioning Review			
Report Author	Mandy Martin			
Report Sponsor	Professor Pushpinder Mangat			
Presented by	Professor Pushpinder Mangat			
Freedom of Information	Open			
Purpose of the Report	To provide the Education, Commissioning & Quality Committee with an overview of the 2019-2020 Commissioning Process			
Key Issues	The need to reflect on the 2019-20 Commissioning Process with a view to informing the future format.			
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance	Approval
	✓			
Recommendations	Members are asked to: <ul style="list-style-type: none"> • Note 			

2019-20 Commissioning Review

1. Introduction

The Quality Unit in the Medical Deanery works to improve patient care and patient safety through the monitoring and development of high-quality education and training and provision of Faculty and infrastructure to support this. Activity is undertaken in collaboration with Speciality, Foundation and GP Schools along with Local Education Providers (LEP) across NHS Wales to ensure high quality educational environments for trainees and links between educational and clinical governance.

Excellence in postgraduate medical training in Wales is supported by our core remit comprising delivery of educational governance via mechanisms including:

- a) Commissioning of, and expectations for, provision of Postgraduate Medical and Dental Education (PGMDE).
- b) Application of a Quality Management Framework (QMF) including scheduled and responsive components to ensure that when training does not meet national standards, changes are facilitated and implemented to improve quality. The QMF provides reassurance to the General Medical Council (GMC), the regulator, to approve training sites and programmes.
- c) Support for PGMDE provision across NHS Wales including trainers and training infrastructure.

These mechanisms are necessarily interlinked. However, for reporting purposes each component is considered separately and cross-referenced as appropriate to contextualise information. This report is primarily concerned with the provision of a summary of the 2019-20 commissioning cycle to date.

The commissioning process has been subject to internal audit which achieved reasonable assurance (subject to ratification by October Audit committee).

2. Background

The primary objectives of the Commissioning process are outlined below:

- a) To undertake an annual review of all Local Education Provider, (LEP) activity across Wales specifically referencing the need for compliance with the GMC's standards for medical education and training as outlined within 'Promoting Excellence'. These standards are applicable to the continuum of medical education and training i.e. undergraduate and postgraduate education and training.
- b) To establish the extent to which organisations have been able to deliver against the requirements of HEIW's Expectations Agreement. This Expectations Agreement provides governance around the financial allocations for the delivery of postgraduate medical and dental education in Wales.
- c) To provide an opportunity to acknowledge and share good practice.

At the time of writing this summary report, three commissioning meetings had been postponed due to the COVID-19 pandemic and therefore cannot be included within this summary report, these are:

- Betsi Cadwaladr University Health Board which has been rearranged for 24th November 2020.
- Powys Teaching Health Board which will now take place on 27th October 2020.
- Public Health Wales NHS Trust. This meeting was intended to take place on 22 September 2020 but was cancelled at short notice due to the second wave.

3. GOVERNANCE AND RISK ISSUES

3.1. Operational Arrangements

In operational terms the process comprises two key steps. Firstly, completion of the self-reporting template by the Local Education Provider. This template is mapped to GMC Standards and reviewed by HEIW's Quality Unit. Secondly, the commissioning meeting is held to facilitate a strategic discussion around education and training.

In order to enhance efficiency and explore the potential for commissioning to incorporate HEIW's wider remit, the following changes around the commissioning meeting were introduced this year:

- The pre-meeting which usually takes place immediately before the commissioning meeting was removed in order to foster a greater sense of transparency between HEIW and the LEP.
- The meeting was chaired by HEIW's CEO this year which ensured parity with the representation from the LEP.
- Relevant information was exchanged in advance of the meeting to try to streamline the agenda such as responses to specific questions raised by LEP's and relevant national updates.
- The format of the meeting was extended to incorporate HEIW's wider remit for all healthcare professionals in the second part of the meeting. This was undertaken as a pilot this year with a view to considering the potential to extend commissioning in future years. The meeting agenda is outlined below:

Part A: The Commissioning Meeting

- An overview of the commissioning agreement between HEIW and the LEP
- Future training grade allocations to LEP's
- Compliance with GMC Standards
- The undergraduate perspective
- Financial accountability

Part B: The Multi professional Learning Environment

- HEIW Multi professional update
- Local education and training matters

3.2. Engagement

HEIW's role in the commissioning LEP's has the potential to be challenging with the need to obtain assurance around governance, infrastructure and learning environments challenging where appropriate as well as conveying a will to work in partnerships with LEP's. However, whilst there were areas for which assurance was required there was a positive level of engagement from all representatives. An appropriate level of representation both in terms of executive personnel and the relevant professions was evident and supported appropriate discussion. The inclusion of all healthcare professionals was largely welcomed by LEP's. However, as the agenda for HEIW's wider remit was a pilot for this year it would be timely to consider what the wider healthcare workforce requirement is of the commissioning process and what could be more appropriately achieved through other processes. Such discussions for medical education have commenced with a view to developing recommendations for the future in order to enhance efficiency and ensure that commissioning remains true to its purpose.

3.3. All Wales Key Themes

The reports of the individual commissioning meetings that have been undertaken to date have highlighted a number of pan Wales themes as outlined within the paragraphs below:

- **Workforce Development**

The majority of the commissioning meetings included a dedicated section to incorporate a discussion around HEIW's wider remit around the education of the healthcare workforce in its entirety which was welcomed by all LEP's. Given the challenges with recruitment particularly within the medical workforce, this provided an opportunity to highlight the need for the wider workforce to be incorporated within LEP's IMTP and for HEIW to be seen as part of the solution to workforce challenges.

Whilst traditionally there may have been concern that supporting a wider range of learners would reduce learning opportunities from medical trainees, there was some evidence that if managed appropriately such challenges could be avoided. Discussions with Aneurin Bevan UHB for example highlighted that where there was a clear strategy around the management of learning opportunities for all healthcare professionals that in fact the opposite is true. The need to ensure that there were clear development opportunities and recognition for all was also highlighted as being essential in ensuring a positive culture and sustainability.

- **Curriculum Change**

The commissioning meeting provided a helpful opportunity to extend previous discussions with LEP's around curriculum changes. In particular, further discussion around the introduction of the IMT Curriculum introduced in August 2019 was held with all LEP's. This discussion was of particular importance given the potential for rota gaps associated with difficulties in predicting attrition rates and the number of trainees that would complete the two or three year programme depending upon their career preference. Consequently, there was a need to develop workforce plans based upon assumptions around different scenarios in

order to mitigate against the risk of gaps. The utilisation of non training grades and other healthcare professionals was discussed as being a partial solution to the challenges.

In addition to specific discussions around the IMT curriculum changes, where relevant other curriculum changes were further highlighted. The purpose of this discussion was to reinforce the need for LEP's to adequately prepare to accommodate future changes, e.g. Medical and Clinical Oncology was a focus of discussions at the Velindre meeting.

- **Reporting Systems**

Reporting systems has been identified as a theme across Wales through the GMC National Trainee Survey. The Quality Unit have been taking this forward with LEP's through quality management processes. Given the concerns with the 2019 survey results it was appropriate to highlight this as a theme in the commissioning meetings. Several Health Boards were noted to be taking active steps to improve approaches to raising concerns with the following points being of particular note:

- LEP's were exploring options to close the feedback loop where concerns are raised which can be challenging given the transient nature of the training grade doctor population.
- The need to enhance training grade doctors understanding of the concerns management process and manage expectations around the timeframes associated with concerns resolution was highlighted as being an important step.
- The need to ensure wider learning across directorates and health professions was noted. The role that simulation training can have in achieving this was recognised both in terms of ensuring improvement and developing a learning culture rather than apportioning blame.
- One LEP highlighted that they were seeking to improve Datix so that departments had to demonstrate evidence of learning. However, whilst this was considered to be a positive approach anecdotal evidence indicates that Datix is considered to be a cumbersome system which may be a barrier to raising concerns.
- Training grade doctors often had a preference of raising concerns through the medical education team or department committee structures. To this end there was some evidence of local fora or committee structures to ensure that there was a supportive way of raising concerns which directly involved training grade doctors in identifying solutions. Whilst this approach was not encouraged for patient safety related concerns, it could be helpful in managing issues around rotas, teaching and some of the operational issues around education and training. However, there was a mixed level of success with such approaches.

- **Simulation Training**

The importance of a multi-professional approach to simulation was emphasised at a number of meetings. In particular, simulation training was considered to be an effective tool to foster a culture of learning from events thereby reducing the potential for a blame culture. Departmental and in some areas directorate wide approaches were found to be helpful in maximising opportunities for learning. Many Health Boards had taken steps to improve the availability of simulation facilities in order to support organisational learning. However, there was an acknowledgement of the need to further increase capacity across Wales to ensure sustainability and improve accessibility. Locating simulation facilities in the heart of clinical settings was noted to be particularly beneficial in maximising opportunities to utilise facilities due to the reduction in time away from service pressures required. HEIW confirmed that it was developing a simulation plan to ensure the implementation of a pan Wales infrastructure. The need for an all Wales simulation strategy and the importance of an effective communications plan being embedded into this was acknowledged and it was confirmed that this was a priority area for HEIW.

- **Wellbeing**

The need to foster a more strategic approach to workforce wellbeing has been an emerging theme in recent years. This has been reinforced by the development of the Fatigue and Facilities Charter and the GMC's work on burnout through the National Training Surveys. Addressing recruitment challenges is clearly an important part of ensuring staff wellbeing. However, in addition to this some Health Boards highlighted that they were taking a more strategic approach. Specific examples include Aneurin Bevan UHB who had taken steps to prioritise wellbeing within their IMTP. The Health Board were noted to be having discussions with Welsh Government around the establishment of a wellbeing centre of excellence at The Grange University Hospital. The purpose of this centre would be to undertake research and develop best practice to improve staff wellbeing across NHS Wales as well as providing rest facilities for staff. This discussion provided the opportunity for HEIW to facilitate this work in Aneurin Bevan. HEIW were also pleased to similarly assist Swansea Bay UHB taking forward work to enhance staff wellbeing through facilitating mindfulness workshops and undertaking work around compassionate leadership based upon the work of Michael West.

The importance of appropriate rest facilities has been raised by the GMC who sought to gather some initial feedback on provision as part of the 2019 National Training Survey. In addition, the need to ensure appropriate rest facilities has also been highlighted recently through the NHS Wales Fatigue and Facilities Charter. The impact that the lack of appropriate facilities can have on trainee wellbeing and recruitment and retention was highlighted. Whilst the Quality Unit has not undertaken a comprehensive review of rest facilities, some Targeted Visits have highlighted a lack of appropriate rest facilities within specific departments. Whilst this may be difficult to address in the short term due to the lack of space, the need for this to be appropriately incorporated into plans for the new hospitals such as the next University Hospital of Wales was emphasised. In addition, previous visits have highlighted challenges with the lack of appropriate accommodation facilities within Hywel Dda UHB. Whilst the Health Board have taken some steps to improve

the situation, the accommodation quality is still considered to be unacceptable and the impact that this may have on recruitment and retention was highlighted.

- **Eduroam**

HEIW's work to secure the rollout of Eduroam for trainees and trainers across NHS Wales was highlighted. This was a particularly positive development addressing historic concerns around adequate bandwidth and would enable individuals to access NHS accounts from their mobile devices and this had been successfully achieved in some locations. The need for some LEP's to ensure that appropriate infrastructure was in place and local security blocks were reviewed was highlighted with an offer of support from HEIW to resolving issues. The rollout of Eduroam would enable Wales to be the first provider of Eduroam across NHS sites.

3.4. LEP Specific Issues

In addition to the all Wales themes identified within section 3.3 above, a number of LEP specific points were raised. These points are outlined below:

- **Aneurin Bevan University Health Board**

- The Health Board expressed concern around the historic funding models surrounding the allocation of training grade doctors. The Health Board considered that as they had more senior trainees they were disadvantaged and expressed a view that a more equitable approach would be for the funding to follow the trainee. HEIW made a commitment at the meeting to take forward the recommendations arising from the Scott Report with Welsh Government. Whilst this was specifically raised by Aneurin Bevan UHB, such a review would have implications for LEP's across Wales.
- There was recognition that there were effective links between local quality control and HEIW's Quality Unit. Whilst there were no issues in enhanced monitoring at the time of the meeting concern around the patient safety issues associated with the inappropriate signage advertising Ysbyty Ystrad Fawr as a local Emergency Centre were repeated. This issue has been previously been raised on numerous occasions to the Health Board and Welsh Government through the quality management framework. However, there are no immediate plans to change the signage until the opening of The Grange University Hospital opens.
- Risks around the introduction of The Grange as an additional training site were highlighted due to the plans for the out of hours model to be based upon two sites. Given that the opening of the site is imminent with a potential impact on a number of specialties, the Quality Unit have since followed up on these discussions with an explicit request for clarity that arrangements are in place to ensure the provision of appropriate induction, clinical supervision and educational governance are in place and this will continue to be monitored through the quality management framework.

- **Cardiff & Vale University Health Board**

- There was an acknowledgment that there were effective links between the Health Board and HEIW's Quality Unit in relation to the management of medical education and training concerns. Whilst Paediatric Surgery was noted to be in enhanced monitoring, there was evidence that effective progress had been made and once there was evidence of sustainability this was likely to be de-escalated.
- The Health Board is in the early stages of planning UHW2 and the need for early discussions to ensure that education and training is appropriately incorporated into the planning and ultimately implementation stages were highlighted.

- **Cwm Taf University Health Board**

- Obstetrics and Gynaecology across the Health Board was noted to be in enhanced monitoring with evidence of good progress at Prince Charles/Royal Glamorgan Hospitals. However, progress was less apparent at the Princess of Wales Hospital although action plan implementation was noted to be at an earlier stage. In addition, non-medical Emergency Medicine students were removed in February 2020 and whilst it was acknowledged that the Health Board Nursing Director had taken steps to address this, Emergency Medicine for medical trainees was also highlighted as being a high risk concern due to concerns around the sustainability of the training environment given three sites in the Health Board recruitment challenges.
- Following the boundary change a new organisation wide strategy for clinical and educational governance to be implemented from April 2020 based on a three site locality based structure with overriding strategic drivers to help ensure consistency.
- The Health Board highlighted the need for a funding model to support the infrastructure required to support multi-professional roles. In addition, the Health Board requested a review of the existing funding streams for the support of medical education and training which were reported to have remained unchanged in recent years. HEIW made a commitment to work with Welsh Government around funding models to support education and training for all healthcare professionals at the meeting.

- **Hywel Dda University Health Board**

- There were no issues in enhanced monitoring and training concerns were in hand with an effective relationship between the Health Board and HEIW's Quality Unit.
- Simulation facilities were noted to be a challenge for the Health Board. In addition, whilst accommodation challenges were highlighted for undergraduate education, previous evidence through HEIW's quality

management framework had highlighted similar challenges for postgraduate medical trainees.

- The Hywel Dda meeting was undertaken directly prior to the COVID-19 lockdown and consequently only part one of the meeting took place. However, recruitment challenges prompted a discussion around the role that non-medical roles could play with the Health Board being encouraged to consider how Physician Associate roles could be incorporated into their IMTP.

- **Swansea Bay University Health Board**

- Emergency Medicine and Trauma & Orthopaedics training at Morriston Hospital were noted to be in enhanced monitoring with action being taken forward in respect of both areas.
- Obtaining feedback from trainees through the TDEC Trainee Doctors Education Committee was noted to be challenging. The Health Board were therefore introducing a Chief Registrar post which they hoped would enhance links between the trainee cohort and Faculty Team although it was too early to understand the effectiveness of this approach.

- **Velindre NHS Trust**

- There was an acknowledgment that HEIW was not monitoring any training concerns for Velindre NHS Trust.
-
- The Trust reported experiencing an increase in demand and the development of the new hospital and an effective workforce plan to support this was therefore essential. The Trust was continuing to work in partnership with HEIW in order to shape training provision to support this.

4. FINANCIAL IMPLICATIONS

Whilst there are no immediate financial implications associated with this report, it should be noted that LEP's are raising concerns regarding the points below. HEIW has committed to undertake a review of the funding models associated with these areas and there is therefore the potential for future financial implications should the recommendations of these reviews be taken forward:

- The existing funding model for providing the infrastructure to support medical education and training.
- The need for a funding model to enable the Health Board's to support multiprofessional education and training.
- The historic funding models associated with the allocation of training grade doctors.

5. RECOMMENDATION

Specific recommendations for each LEP have been made within individual commissioning reports and include actions for both HEIW and LEP's. In relation to the commissioning process as a whole, the following two recommendations have been made:

- That the Quality Unit draws the current cycle of commissioning to a conclusion and will review the purpose and process for medical commissioning following which a set of recommendations will be made.
- That the wider healthcare professional representatives within HEIW consider their requirements in relation to the future of commissioning.

Governance and Assurance			
Link to IMTP strategic aims (please ✓)	Strategic Aim 1: To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'	Strategic Aim 2: To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs	Strategic Aim 3: To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels
		✓	
	Strategic Aim 4: To develop the workforce to support the delivery of safety and quality	Strategic Aim 5: To be an exemplar employer and a great place to work	Strategic Aim 6: To be recognised as an excellent partner, influencer and leader
	✓		
Quality, Safety and Patient Experience			
The maintenance of high-quality training is closely associated with patient safety. The development of alternative approaches to quality management is essential to maintain an environment that ensures good quality patient care, by enabling appropriate training and support for trainees is available and delivered.			
Financial Implications			
There are no financial implications associated with this report.			
Legal Implications (including equality and diversity assessment)			
Staffing Implications			
No implications for HEIW staff have been identified.			
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)			
Report History	None		
Appendices	None		



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Addysg a Gwella Iechyd
Cymru (AaGIC)
Health Education and
Improvement Wales (HEIW)

Meeting Date	8 October 2020		Agenda Item	3.1
Report Title	Evaluation of the Education, Commissioning and Quality Committee Effectiveness Review			
Report Author	Kay Barrow, Corporate Governance Manager			
Report Sponsor	Dafydd Bebb, Board Secretary			
Presented by	Dafydd Bebb, Board Secretary			
Freedom of Information	Open			
Purpose of the Report	To present to Education, Commissioning and Quality Committee (ECQC) with the outcomes from the annual self-assessment exercise 2019/2020, to consider the suggested actions and any further improvements that could be made.			
Key Issues	Members are invited to consider the evaluation of the Committee Effectiveness Review (Appendix 1).			
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance	Approval
		✓		
Recommendations	<p>The Education, Commissioning and Quality Committee is asked to:</p> <ul style="list-style-type: none"> • Discuss the findings of the ECQC self-assessment exercise 2019/2020. • Consider any further improvements that could be made to improve the Committee's effectiveness. 			

EVALUATION OF THE EDUCATION, COMMISSIONING AND COMMITTEE EFFECTIVENESS REVIEW

1. INTRODUCTION AND BACKGROUND

Members of the Education, Commissioning and Quality Committee (ECQC) have been asked to complete a questionnaire to consider the Committee's effectiveness, and to consider their individual understanding, role and contribution to the Committee.

The 2019/2020 version of the questionnaire has been developed in response to the Committee's requirement for reflection and continual improvement. It includes additional questions to inform the evaluation and the key themes for discussion. The questionnaire also invites suggestions on any areas for improvement to assist the Committee in drawing up its own plan for development. Such suggestions may include focussing upon future training and/or development, or changes to the Committee's own processes and procedures.

The self-assessment questionnaire was circulated for completion by 28 August 2020. Of the two invited responses from ECQC Members, both have been completed and returned.

Of the six invited responses from ECQC In Attendance Members, three have been completed.

The completed Self-Assessment Checklist is attached at Appendix 1.

The respondents to the survey were also asked for comments on the following key areas and the responses received are outlined below.

1. The Committee's key successes in the past year were?

- The setting up and agreement of TOR, the agreement to establish two advisory groups. Gaining feedback from Regulators. REVIEW of single commissions of delivery of programmes and ensuring this is reviewed and common processes for contracting is put in place. Reviewing the current provision and engagement of an external agency to review contracting processes and making recommendations ahead of new commissioning models.
- Reviewing the contracting and advising Board of the need to extend the current contract for one year due to circumstances.
- Agreeing the Commissioning figures following the review of IMTPs and recommending to the Board the Commissioning recommendations for submission to Welsh Government.
- Becoming established as a sub-Committee providing credible, effective assurance
- Watching over and scrutinising critical areas of business, including the Strategic Review, Workforce Strategy, Annual HPE Plan
- Reviewing and assuring the effectiveness of quality monitoring processes particularly during COVID.

2. The Committee's major shortcomings in the past year were?

- Due to COVID not being able to fully establish the two sub groups, whilst we have agreed membership and meetings these were not enabled due to restrictions of access imposed by Government Guidance due to lockdown.
- Mainly due to COVID:
 - failure to get the internal and external sub-groups operational
 - Difficulty maintaining full public involvement during COVID Zoom/Teams-based meetings.
- Grasping breadth of business
- Adding value
- Attendance
- Challenge
- Leadership and giving direction / advice
- Agreeing establishment of 2 sub groups

3. What could be improved at the Committee's meetings, and how?

- Still early days but I am happy with the meetings / agenda / contribution from all members.
- Continue inviting external participants (eg Deans) as observers
- Flexibility in frequency and length
- Bilingual capacity
- Developing an induction approach
- Using the resources represented by the subgroups
- Security about quoracy.
- As previously mentioned – an additional independent member would add value.

4. What training would help you perform your Committee role more effectively?

- I think I will review this once we have seen way in which we are going to determine scrutiny of quality agenda in education provision going forward.
- Welsh language skills.
- It would be useful to have an induction document outlining committee functions and relationships across HEIW

5. What areas should the Committee focus on in future?

- New contracting process. Quality of provision. Learner experiences and effectiveness of data to commission workforce training going forward.
- Equity and differential attainment (in all its contexts)
- Quality assurance across all health professional groups
- Information, evidence, intelligence and research needs
- Understanding impacts, outcomes and value
- Digital agenda including 'soft' applications (use for opinion polls, reflections) to support whole Welsh geography
- Underpinning the development of compassionate leadership

- Wellbeing, in the education and training context
- As set out in the IMTP and ToR – ToR have been reviewed and are deemed fit for purpose – although continual (annual) review is good practice.
- The Committee focus is appropriate, an additional emphasis on quality has been discussed.

2. GOVERNANCE AND RISK ISSUES

In accordance with Section 8.2.1 of HEIW's Standing Orders, the Board Secretary, on behalf of the Board, shall oversee a process of regular and rigorous self-assessment and evaluation of each Committee's performance and operation including that of any sub committees established and groups.

Undertaking an annual self-assessment provides assurance to the Board that the Committee is discharging its duties effectively. The Board shall use the information from this evaluation activity to inform:

- The ongoing development of its governance arrangements, including its structures and processes;
- Its Board Development Programme, as part of an overall Organisation Development framework; and
- The Board's report of its alignment with the Assembly Government's Citizen Centred Governance Principles.

3. FINANCIAL IMPLICATIONS

There are no financial implications associated with the Committee Effectiveness Review.

4. RECOMMENDATION

The Education, Commissioning and Committee is asked to:

- **Discuss** the findings of the ECQC self-assessment exercise 2019/2020.
- **Consider** any further improvements that could be made to improve the Committee's effectiveness.

Governance and Assurance			
Link to IMTP strategic aims (please ✓)	Strategic Aim 1: To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'	Strategic Aim 2: To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs	Strategic Aim 3: To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels
	✓	✓	✓
	Strategic Aim 4: To develop the workforce to support the delivery of safety and quality	Strategic Aim 5: To be an exemplar employer and a great place to work	Strategic Aim 6: To be recognised as an excellent partner, influencer and leader
	✓	✓	✓
Quality, Safety and Patient Experience			
Undertaking an annual self-assessment provides assurance to the Board that the Committee is discharging its duties effectively.			
Financial Implications			
There are no financial implications.			
Legal Implications (including equality and diversity assessment)			
There are no legal implications.			
Staffing Implications			
There are no staffing implications.			
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)			
The review of effectiveness will be completed regularly and supported by a rolling programme of improvement and assessment.			
The review of effectiveness assesses whether the Committee is discharging its duties in accordance with the Committee Terms of Reference			
The review is integral to the Governance report included in the organisation's annual report.			
Report History			
Appendices	Appendix 1 – Completed Education, Commissioning and Committee Self-Assessment Checklist		



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Health Education and
Improvement Wales (HEIW)

**EDUCATION, COMMISSIONING AND QUALITY COMMITTEE (ECQC)
COMMITTEE EFFECTIVENESS REVIEW**

Question		Yes	No	N/A	Comments/Suggestions for Future Arrangements
The Role/ Purpose of the Committee					
1	The role of the Committee is understood and clearly defined in its Terms of Reference.	X			Good progress made in clarifying and understanding role; can build on and consolidate this now.
2	Committee Members understand their individual role and what is expected of them.	X			Agreed but there are only 2 members which, 1. Can give quorate issues 2. Places a lot of pressure on the 2 individuals 3. Additional membership could widen scope and influence of Committee
3	The Committee has clear mechanisms in place to keep it aware of topical, legal and regulatory issues, particularly in relation to external NHS and Welsh Government planning and commissioning requirements.	X			Maybe scope to focus these around the Committee's particular needs, moving forward
4	The Committee is aware of the areas in which it can take decisions under the Scheme of Delegation.	X			
5	The frequency and scheduling of Committee meetings are sufficient to carry out its functions and responsibilities.	X			The chair does arrange additional telephone calls if she feels we need to have a meeting or discussion reference agenda / meeting frequency and content. Sufficient so far: future business may require flexibility in meeting frequency and timing. Although the timing around the Education & Training Plan needs to always be taken into account when scheduling meetings.

Question		Yes	No	N/A	Comments/Suggestions for Future Arrangements
6	The Committee has established and follows an agreed plan for the year.	x			The committee is within its first year and as such revised the terms of reference and needed to be established prior to the development of a year plan.
7	Overall, the Committee is effectively fulfilling its Terms of Reference.	x			The Executive team are very helpful and the Board Secretary very approachable in helping with TOR, etc. Need to evolve and build on the Committee's first-year experiences
Scope of Work					
8	The Committee receives sufficient and timely information to review, understand and assess the issues for discussion, on which to base its decisions.	x			A challenge to maintain this throughout pandemic but good information available to HEIW Board generally and our Committee papers have been comprehensive: we could usefully consider any wider specific needs of the Committee after/if 'normal' arrangements resume. Due to the nature of business and the need for everything to go to Exec's before Committee it can be a tight turn around but this is always well managed by the Corporate Team. Don't know- only recently joined membership but seems appropriate from initial experience.
9	The quality of presentations made to the Committee is appropriate.	X			We've had some outstanding presentations.
10	The Committee understands the issues which are on the horizon for HEIW which may impact on its areas of work.	X			This was an important issue to get right and it also did mean clarification of the role of the Audit Committee and how duplication of effort did not arise.
11	The work of the Committee culminates in appropriate recommendations to the Board.	X			I have not heard from any Board member that recommendations have been inappropriate. Regular written and verbal feedback provided to the Board. Increasingly, reported items have generated interest and response - both welcome and valuable.
12	The Board takes due regard of the recommendations from the Committee.	X			And also delegates work streams to the committee to bring back recommendations to the Board for consideration. For example, in relation to Annual Plan which the Committee commended highly to the Board.

Question		Yes	No	N/A	Comments/Suggestions for Future Arrangements
					<p>I'm not a member of the Board so can't answer this- however, from review of minutes of the Board I believe the committee and the Board to work well and effectively together.</p> <p>Don't know- haven't experienced full circle of information yet.</p>
13	The Committee has effective escalation arrangements in place to alert relevant individuals and committees of any urgent/critical matters that may compromise training and education and affect the operation and/or reputation of HEIW.	X			<p>This is an area that could be reviewed and how these escalation arrangements differ / complement the Board agenda.</p> <p>Escalation arrangements work well throughout HEIW reflecting the quality of communication links and work interactions: the Committee benefits from these.</p>
Assurance					
14	The Committee works effectively with its designated Sub-Groups.	X	X		<p>Yes - Although this is a new committee in real terms and has not been established as long as the audit committee, we still have two sub – groups that have not met due to the intervention of COVID 19 but going forward this needs to be a priority.</p> <p>No - Pandemic response meant deferring setting-up the two subgroups and needs redressing as soon as feasible through technology or other means; also worth revisiting the subgroups' ToR in the light of COVID experience.</p> <p>Sub groups are only just being established.</p> <p>Don't know- still trying to understand the links between various groups.</p> <p>These are currently being established</p>
15	The Committee is effective in establishing evidence and providing timely advice to the Board in relation to developing HEIW commissioning plans to meet the identified population training and education needs.	X			<p>This has been undertaken and given the changes in contracting arrangements this will be kept under review.</p> <p>Yes, however the Committee has been concerned about available workforce data quality, validity and completeness, noting efforts wider than HEIW to improve these. In time, this should enable better intelligence and evidence in support of HEIW's commissioning role. The Committee needs to continue to watch over and support this ongoing area of work.</p> <p>Appropriate areas for research identified should be recommended to the Board.</p>

Question		Yes	No	N/A	Comments/Suggestions for Future Arrangements
16	The Committee is effective in establishing evidence and providing timely advice to the Board in relation to developing HEIW's annual plan and integrated medium-term delivery plan.	X			<p>Extensive communication and work has been undertaken by staff within the organisation, and both the Chair and IM have been informed regularly and as an induction just after setting up the committee, considerable work in providing back ground information was also shared in order that we could establish the changes needed and review how evidence is collated.</p> <p>Both of these requirements fulfilled.</p> <p>I have recently joined the committee and have not had the opportunity to observe this throughout an entire year.</p>
17	The Committee is effective in establishing evidence and providing timely advice to the Board in relation to determining a suite of performance and assurance measures to assess delivery against integrated plans and objectives.	X			<p>The Wales Audit office have attended and provided feedback regarding Board Governance in terms of the meetings in Board and Audit Committee and some of the evidence at these meetings has been provided by the papers to the Board from the Committee. Going forward it is important that we focus more on the Quality of Education provision and this should be a key work stream during the next year.</p> <p>This has been a key development area for HEIW as a whole. It will continue to evolve as performance and assurance measures are refined in line with plan adjustments. The Committee will need to continue to keep abreast of any changes, particularly as/when we emerge into the post-COVID 'new normal'.</p>
18	The Committee is effective in establishing evidence and providing timely advice to the Board in relation to reviewing, monitoring and improving HEIW performance against specific performance measures as determined by the Board.	X			<p>This is an area upon which to develop and focus more, it has commenced this agenda in recent meetings, i.e. In relation to contracting for short course provision which resulted in a review of contracting and presentation to Board Meeting of a paper by the Finance Team.</p> <p>Should extend the Committee's deep-dive approaches to explore in detail evidence and outcomes in key performance areas, on behalf of the Board.</p> <p>As above- initial view is yes it is but I need to gain more experience of this committee and its links with Board and other groups to be able to judge more comprehensively.</p>

Question		Yes	No	N/A	Comments/Suggestions for Future Arrangements
19	The Committee is effective in establishing evidence and providing timely advice to the Board in relation to ensuring alignment of the HEIW's plans with partnership plans developed with, Health Education Institutions.	X			<p>This is early days in terms of seeking to develop new commissioning for the next 5 years, the inherited contract was due to end but has needed to be extended due to COVID and the unavailability of access with all staff due to home working arrangements by organisations enforced by Governments Guidelines.</p> <p>Much effort invested in ensuring full engagement of key partners and valuable working relationships established by staff. Looking forward, the Committee itself needs to extend its understanding of HEI needs, drivers, challenges and opportunities.</p> <p>As above- initial view is yes it is but I need to gain more experience of this committee and its links with Board and other groups to be able to judge more comprehensively.</p>
20	The Committee is effective in providing assurance to the Board regarding the strength of HEIW's performance management and accountability arrangements.	X			<p>Where these have been identified, given the short life span of the committee to date, what has been produced is effective but this is an area for development and testing and adjusting as we mature as a committee.</p> <p>A close working relationship with HEIW's AAC has been established, through a variety of mechanisms, to ensure appropriate respective coverage and avoid gaps – this needs to continue.</p> <p>As above- initial view is yes it is but I need to gain more experience of this committee and its links with Board and other groups to be able to judge more comprehensively.</p>
21	The Committee is effective in providing assurance to the Board regarding achievement against the HEIW's plans and objectives determined by the Board.	x			<p>This area needs developing to enable the Committee to advise the Board of the value achieved through its range of activities.</p> <p>As above- initial view is yes it is but I need to gain more experience of this committee and its links with Board and other groups to be able to judge more comprehensively.</p>
22	The Committee is assured of the procedures and indicators in place to identify concerns in relation to individuals, services and the organisation.	x			<p>As above- initial view is yes it is but I need to gain more experience of this committee and its links with Board and other groups to be able to judge more comprehensively.</p> <p>This has not arisen whilst I have been a member of the committee.</p>

Question		Yes	No	N/A	Comments/Suggestions for Future Arrangements
23	The Committee is aware of the work of regulatory authorities and external bodies, including the outcomes of their work.	x			HEIW staff successes in establishing and maintaining sound working bases with regulators and other external bodies, within Wales and wider, are worthy of note and appreciated.
24	The Committee is effective in establishing evidence and providing timely advice to the Board in relation to the quality and experience of education and training.				<p>This is an area which under development, whilst education contracting is scrutinised, we have established consumer (student feedback session) however Medical Evaluations have been in place for a long time and these processes do work well. Work is also reviewed across each of the Countries to ensure Wales quality and experience remain at high satisfaction levels.</p> <p>New approaches are being tried and efforts to obtain in depth feedback from trainees and trainers extended and improved, strongly supported by the Committee – quality of the whole learning experience will be a growing area of focus.</p> <p>Initial impression is yes but I need to gain more experience of this committee and its links with Board and other groups to be able to judge more comprehensively.</p>
25	The Committee is effective in providing assurance to the Board with regard to improving the experience of students/trainees and all those that come into contact with services.	X			<p>We need to ensure that as time progresses we can see trends and we should ensure that analysis is undertaken and reported at regular intervals with recommended improvement actions as required.</p> <p>As above- initial view is yes it is but I need to gain more experience of this committee and its links with Board and other groups to be able to judge more comprehensively.</p> <p>Great efforts invested by staff in listening and responding to feedback from students and trainees, providing leadership and Wellbeing services. The Committee continues to support this strongly.</p>
26	When areas of good practice emerge from the Committee's deliberations, there are effective arrangements in place for them to be shared with other committees/executives as appropriate.	x		with AAC, the Chairman, Executive Directors and others.

Question		Yes	No	N/A	Comments/Suggestions for Future Arrangements
Meetings					
27	Committee meetings are scheduled with sufficient time to cover all agenda items, including discussion and answering questions.	X			So far, but this may not remain the case and flexibility important. Yes – Agenda is always packed but the time-management of the Chair enables all agenda items to be considered with enough time to discuss appropriately.
28	Committee meetings are managed and controlled effectively, and conducted in a business-like manner.	X			Zoom/teams-based meetings have worked well throughout COVID. Always.
29	The Committee meeting dynamic encourages full participation and open communications.	X			It remains a Committee objective to have fully bilingual meetings. All members and Officers are afforded the opportunity to contribute. Everyone has an equal voice.
30	Meeting time is used well with issues getting the time and attention proportionate to their importance.	X			The agenda is full and given the time taken to read papers and check some issues ahead of the meeting this is helpful. This has been the case but now need to rebalance timings to ensure adequate attention given to Quality in future.
31	The length of the Committee's meetings is appropriate in relation to the agenda.				In the main I would agree. ...so far. If they continue to be virtual then consideration will need to be given to duration as long virtual meetings are more challenging
Membership					
32	Committee Members receive induction, advice and ongoing development opportunities to support them in their role.	X	X		Yes - Very full induction took place. This is a new Committee with no new independent members so far – it would be sensible to develop some induction arrangements for the future. No As new member I have had warm welcome but no formal induction to understand relationship of committee with rest of HEIW.
33	Committee Members have the collective skills, knowledge and expertise to fulfil its Terms of Reference and to advise and assure the Board.	X			I value members of staff who are responsible for operational delivery of the agenda to attend meetings and it is helpful to have their feedback. An additional independent member would enhance resilience and broaden the available range of skills and experience.

Question		Yes	No	N/A	Comments/Suggestions for Future Arrangements
34	Committee Members have a good understanding of the HEIW's planning and commissioning activities e.g. training needs assessment, prioritisation, design, delivery and performance management.	X			Some members have been members of the three different organisations that existed prior to the establishment of HEIW so the historical knowledge is very helpful. The Committee is growing understanding of how these activities play out at local level across the whole of Wales.
35	The Committee is the right size and sufficiently diverse.	X			See 33 above. As previously mentioned, I believe the Committee should add another independent member of HEIW. I understand the reasons why this has not happened to date – due to some independent members having affiliations with Universities in Wales – however if there was an opportunity to add a member I believe it would add a new dimension and further improve what is already a high performing committee.
36	Committee Members come to meetings prepared and ready to contribute.	X			Always.
37	There is consistent attendance and timely arrival by Members at Committee meetings.	X			Always. Don't know – recent member.
38	Attendance at Committee meetings is evaluated as a criterion for continued membership on the Committee.	X			Don't know – recent member.
Support for the Committee					
39	An appropriate agenda is set before Committee meetings and is followed.	X			Preliminary 'agenda-setting' meetings have been valuable and appreciated. There is always a pre-meet to determine the agenda.
40	The Committee receives clear and concise papers which focus on the key issues and priorities	X			Not necessarily 'concise' but background provided has been relevant and important. Papers are clear but due to the scale and scope of the business are not always concise!
41	The agenda and papers are received in a timely manner in advance of the meetings to allow time for appropriate review and preparation.	X			Mostly – some disruption due to COVID understandable – but this is an important Committee requirement. There is always room for improvement for most committees in this area and fine balance between too soon and too late.

Question		Yes	No	N/A	Comments/Suggestions for Future Arrangements
42	The Committee receives appropriate advice from or via the Executive Team and staff.	X			This is excellent.
43	The Committee enjoys a good working relationship with management and significant issues are reviewed with the Chief Executive Officer or the relevant Lead Executive Director(s).	X			Thank you.
44	The minutes of the meetings are accurate and reflect the discussion, next steps and/or action articulated by Members.	X			Again, thank you.



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Health Education and
Improvement Wales (HEIW)

Meeting Date	8 October 2020	Agenda Item	3.2
Report Title	Review of Committee Terms of Reference		
Report Author	Kay Barrow, Corporate Governance Manager		
Report Sponsor	Dafydd Bebb, Board Secretary		
Presented by	Dafydd Bebb, Board Secretary		
Freedom of Information	Open		
Purpose of the Report	To provide an update to the Education, Commissioning and Quality Committee (EC&QC) in relation to the review of its Terms of Reference and Committee Membership and to ask the Committee to review its own Terms of Reference.		
Key Issues	<ul style="list-style-type: none"> September Board, approved the following in respect of the of the EC&QC Committee Membership as detailed in paragraph 2 of this report: <ul style="list-style-type: none"> the reappointment of the members of the EC&QC to be brought forward to September 2020 so that it is aligned with the Audit & Assurance Committee; the reappointment of the existing EC&QC members for a further one-year period; the appointment of a Committee Vice Chair; a new member to the EC&QC to provide increased resilience and capacity to the Committee. <p>The EC&QC is also invited to review its own Terms of Reference and to recommend amending the same to reference the Vice Chair role within its membership section (see Appendix 1).</p>		
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance
			Approval ✓
Recommendations	<p>Members are asked to:</p> <ul style="list-style-type: none"> note the alignment of the appointment date of this Committee with the Audit & Assurance Committee; note the reappointment of the existing Committee Members for a further one-year period; note the further changes to its Committee Membership; recommend to the Board that the Committee's terms of reference be amended to reference the Vice Chair role within its membership section (see appendix 1). 		

REVIEW OF COMMITTEE TERMS OF REFERENCE

1. INTRODUCTION

It is good governance practice for the Committee Terms of Reference to be reviewed annually. The current Education, Commissioning & Quality Committee (EC&QC) Terms of Reference were updated following the 'Future Ways of Working' review undertaken on behalf of the Board and subsequently approved by the Board at its November 2019 meeting.

This report provides the EC&QC with the outcome of HEIW Chair's review of Committee membership which was approved by the Board on 24 September 2020.

2. BACKGROUND

As a consequence of the COVID-19 Pandemic, the Chair, supported by the Board Secretary, undertook a governance review of the membership of the Board's Committees. The Chair also met with each of the Independent Members as part of their annual appraisal process and considered the Members' backgrounds and areas of interest and expertise.

As the tenure of the existing EC&QC members was due to cease at the end of November 2020, the Board approved the reappointment of the existing Members of the EC&QC to be brought forward to September 2020, so that the appointment date for this Committee aligned with the Audit & Assurance Committee.

The Board approved the reappointment of existing Committee members for a further one-year period and the following changes to Committee membership:

- **Education, Commissioning & Quality Committee**

Chair:	Dr Ruth Hall (re-appointment)
Vice Chair:	Tina Donnelly (re-appointment)
Members:	Ceri Phillips (new appointment)
	Dental Dean (Professor David Thomas – new appointment)
	Pharmacy Dean (Professor Margaret Allan – new appointment)
	Postgraduate Medical Dean (Dr Tom Lawson – new appointment)

Deputy Member: Gill Lewis (re-appointment)

3. GOVERNANCE AND RISK ISSUES

Good governance practice is to regularly review committee membership to support appropriate scrutiny and assurance arrangements.

4. FINANCIAL IMPLICATIONS

There are no financial implications for the Committee to consider.

5. RECOMMENDATION

Members are asked to:

- **Note** the alignment of the appointment date of Members to this Committee with the Audit & Assurance Committee;
- **Note** the reappointment of the existing Committee Members for a further one-year period;
- **Note** the further changes to its Committee Membership;
- **Recommend** to the Board that the Committee's Terms of Reference be amended to reference the Vice Chair role within its membership section (see appendix 1).

Governance and Assurance			
Link to IMTP strategic aims (please ✓)	Strategic Aim 1: To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'	Strategic Aim 2: To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs	Strategic Aim 3: To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels
	Strategic Aim 4: To develop the workforce to support the delivery of safety and quality	Strategic Aim 5: To be an exemplar employer and a great place to work	Strategic Aim 6: To be recognised as an excellent partner, influencer and leader
			✓
Quality, Safety and Patient Experience			
Ensuring the Board carries out its business appropriately through its Committees and aligned with its standing orders is a key factor in the quality and experience of students and trainees.			
Financial Implications			
There is no direct financial impact associated with the proposals.			
Legal Implications (including equality and diversity assessment)			
It is essential that HEIW complies with its Standing Orders.			
Staffing Implications			
There is no direct staffing impact associated with the proposals.			
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)			
No direct long-term implications.			
Report History	Membership of the A&AC and the EC&QC is reviewed by the Board on an annual basis.		
Appendices	Appendix 1 – Committee Terms of Reference		

Education, Commissioning and Quality Committee Terms of Reference and Operating Arrangements

Date: October 2020

Review Date: Annually

1. Introduction

In line with Section 3 of the Standing Orders, the Board shall nominate annually a committee which covers education, education commissioning and quality management of education provision and contracts. This Committee will be known as the Education, Commissioning and Quality Committee.

The terms of reference and operating arrangements set by the Board in respect of this Committee are detailed below.

These terms of reference and operating arrangements are to be read alongside the standard terms of reference and operating arrangements applicable to all HEIW committees.

2. Purpose

The purpose of the Education, Commissioning and Quality Committee ("the Committee") is to:

- **Advise** and **assure** the Board and the Chief Executive (who is the Accountable Officer) on whether effective arrangements are in place to plan, commission, deliver and quality manage education systems and provide assurance on behalf of the organisation.
- Where appropriate, **advise** the Board and the Chief Executive on where, and how, its education systems and assurance framework may be strengthened and developed further.
- Recommend to the Board education training plans including investment in new programmes and disinvestment in others. .
- Recommend to the Board on strategic matters relating to Education Commissioning and Education Quality.
- **Recommend** the specification of tender documents in respect of Education to the Board

3. Delegated Powers

With regard to its role in providing advice to the Board, the Committee will:

- i. Provide assurance to the Board as to the effective management and improvement of the quality of HEIW's education and related research activities.
- ii. Recommend to the Board areas for investment/disinvestment in education and training plans taking into account value based commissioning.
- iii. Recommend to the Board the national annual education and training plan.
- iv. Alert the Audit and Assurance Committee and the Board to any matters requiring governance action, and oversee such action on behalf of the Board.
- v. Oversee the development, implementation and updating of strategies, policies, structures and processes for the governance of education and training which shall including taking a forward looking and strategic view.
- vi. Seek assurance of the effective performance, monitoring, management and value of education and training programmes and contracts, including the identification and management of related risk.
- vii. Monitor compliance of education and training activities with:
 - a. statutory and regulatory requirements, including equity, equality legislation and Welsh language requirements and;
 - b. with NHS Wales policy and other relevant policies and HEIW's priorities in relation to equity, equality and diversity, person-centred care and participation, and educational quality.
- viii. Monitor HEIW's compliance with delegated responsibilities given to it by health regulators i.e. GMC, GDC and GPhC as delegated to HEIW.
- ix. Promote collaboration within HEIW and with external agencies in relation to educational and training governance which shall include wellbeing.
- x. To work collaboratively with other HEIW Board standing committees.

- xi. Scrutinise the specification of education tender documents.
- xii. Recommend the specification of tender documents to the Board for Education.
- xiii. Recommend undertaking research on Education, Quality and Commissioning to the Board.
- xiv. Engage with Board Development Sessions with regards to making recommendations on strategic matters relating to Education Commissioning and Education Quality.
- xv. Seek assurance in respect of risk areas within its area of responsibility and highlight material areas of concern to the Audit and Assurance Committee.
- xvi. Highlight any issues out of the ordinary to the Board.

The Committee will review and agree its forward work programme on an annual basis, and will recommend it to the Board for approval.

4. Membership, Attendees Quorum and Term

4.1.1 Members

A minimum of two members, comprising:

- Chair: Independent Member
- ~~Members – 1 Independent Member in addition to the Chair~~
- Vice Chair: Independent Member

The Chair of the organisation shall not be a member of the Committee, but may be invited to attend by the Chair of the Committee as appropriate.

4.1.2 Deputy Independent Member

The Board may appoint a Deputy Independent Member for the Committee. Where a member of the Committee is unable to attend a Committee meeting, then the nominated Deputy may attend in his or her absence as a member of the Committee. If a Deputy attends a Committee as a member of the Committee then the Deputy shall be included for the calculation of a quorum and may exercise voting rights.

4.2 Attendees

In attendance:

- Director of Nursing
- Medical Director
- Director of Finance and Corporate Services
- Board Secretary
- Head of Education, Commissioning and Quality

In addition to this, others from within or outside the organisation who the Committee considers should attend, will be invited taking account of the matters under consideration at each meeting.

The Chief Executive shall be invited to attend, at least annually, to discuss with the Committee the process for assurance that supports the Annual Governance Statement.

4.3 Quorum

At least **two** members must be present to ensure the quorum of the Committee, one of whom should be the Committee Chair (or Vice Chair where appointed).

4.4 Terms

Immediately following the establishment of HEIW the Members shall be appointed for an initial period of two years. Thereafter Members shall be appointed for a term of one year.

5. Frequency of Meetings

Meetings shall be held no less than quarterly and otherwise as the Chair of the Committee deems necessary – consistent with HEIW's annual plan of Board Business.

6. Relationships and accountabilities with the Board and its Committees/ Groups

The Committee must have an effective relationship with other committees or sub-committees of the Board so that it can understand the system of assurance for the Board as a whole. It is very important that the Committee remains aware of its distinct role and does not seek to perform the role of other committees.

The Committee will maintain effective working relationships with HEIW'S Audit and Assurance Committee (AAC), and with HEIW's other Board committees and subcommittees. To strengthen liaison with the AAC, one Independent Member will serve on both committees.



HEIW Internal Multi-Professional Education and Quality Group (MPEQG)

Minutes

23rd September 2020 1pm-3pm

Teams Meeting

PART 1	PRELIMINARY MATTERS	ACTIONS
1.1	Welcome and Introductions	
	<p>Present: Angela Parry, Joint Chair (AP), Pushpinder Mangat, Joint Chair (PM), David Thomas (DT), Emma Kwaya-James (EK), Helen Baker (HB), Huw Owen (HO), Kirstie Moons (KM), Leona Walsh (LW), Martin Riley (MR), Tom Lawson (TL), Wendy Wilkinson (WW), Kerri Eilertsen-Feeney (KE) Dafydd Bebb (DB), Rachel Mooney (RM), Anton Saayman (AS), Margaret Allen (MA).</p> <ul style="list-style-type: none"> Angela Parry opened the meeting and welcomed members to the first HEIW Internal Multi-Professional Education and Quality Group (MPEQG) meeting. 	
1.2	Apologies for Absence	
	Chris Price (CP), Debra Roberts (DR), Kathryn Hodgson (KH), Nik Sheen (NS), Phil Matthews (PLM).	
PART 2	MATTERS FOR CONSIDERATION	
2.1	Terms of Reference for both the Internal Facing and External Facing Sub Groups	
2.1.1	<p>Members were asked to review the Terms of reference for the internal facing group (MPQEG):</p> <p>Purpose: The group agreed the statements listed under the Purpose of the group with the following amendments:</p> <ul style="list-style-type: none"> <i>“with information to support strategies, policies, structures and processes for the governance of education and training which shall include taking a forward looking quality and strategic view;”</i> Adjust wording to emphasise ‘governance’. i.e. to ensure governance of education and training with information... <i>“with information to seek assurance of the effective performance, monitoring, management, quality and value of education and training programmes and contracts, including the identification and management of related risk;”</i> <ul style="list-style-type: none"> - Consider including sharing of best practice locally, nationally and internationally. - Separate ‘Identification and management as risk’ as its own bullet point and join it together with latter bullet point: <i>“with support in highlighting any issues out of the ordinary for the ECQC”</i> 	

	<ul style="list-style-type: none"> Agreed to invite Race Council Cymru. Emma Kwaya-James to resource other groups to represent wider inclusion. Add Service User Representative – Emma Kwaya-James can recommend Noted that the BMA form part of the partnership forum Further membership suggestions for consideration: <ul style="list-style-type: none"> Patient group or Lay representative Youth Parliament representative Medical School representative SIFT representative <p>Timing/frequency of meeting</p> <ul style="list-style-type: none"> To take place one week after the internal group meeting 	EK
2.2	Welsh Language Plans for Next Year	
	<p>Huw Owen presented to the group regarding Welsh Language plans for the next year. Presentation attached for information:</p>  <p>Cymraeg yn AaGIC 2020 i 21.pptx</p> <p>The group thanked HO for his presentation.</p>	
2.3	Equality and Inclusion	
	<ul style="list-style-type: none"> Emma Kwaya-James presented to the group regarding Equality and Inclusion and the positive work that is currently taking place across HEIW. Examples include linking in with the Welsh Clinical Leadership Fellows and the Trainee Think Tank and identifying opportunities to upskill our current and future workforce; improving the service user experience. EK has spoken with service users who have faced challenges and are keen to feed into these training opportunities. The group thanked Emma Kwaya-James for her presentation. 	
2.4	Education Governance	
	<p>Rachel Mooney & Anton Saayman presented to the group regarding Education & Governance. Presentation attached for information:</p>  <p>Training Governance overview V2.pptx</p> <p>The group thanked Rachel Mooney & Anton Saayman for their presentation.</p>	
PART 3	CLOSE	
3.1	Any Other Business	
	There was no other business	
3.2	Date of Next Meeting:	
	To be agreed	



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Addysg a Gwellu Iechyd
Cymru (AaGIC)
Health Education and
Improvement Wales (HEIW)

Meeting Date	8 October , 2020		Agenda Item	3.4
Report Title	Terms of Reference of the new Internal and External Facing Advisory Groups on Education and Training			
Report Author	Dafydd Bebb, Board Secretary			
Report Sponsor	Dafydd Bebb, Board Secretary			
Presented by	Dafydd Bebb, Board Secretary			
Freedom of Information	Open			
Purpose of the Report	<p>To further consider and support the amended terms of reference for the two new advisory Groups for the Education Commissioning and Quality Committee (EC&QC):</p> <ol style="list-style-type: none"> 1. Multi- Professional Quality and Education Group (MPQEG) and 2. Education Advisory Group (EAG) (together being 'the Two Advisory Groups'). 			
Key Issues	<p>The establishment of the Two Advisory Groups was approved in Q1.</p> <p>The terms of reference of the Two Advisory Groups have been subject to further review at the last meeting of the EC&QC held on 16 September and by the first meeting of the MPQEG held on 23 September.</p> <p>The draft terms of reference are attached at Appendix 1. (Appendix 1.1 is a clean version and Appendix 1.2 is the same document with track changes showing.)</p>			
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance	Approval
				✓
Recommendations	<p>Members are asked to recommend that the Board approve the amended draft terms of reference (see Appendix 1.1) for the:</p> <ol style="list-style-type: none"> 1. Multi-Professional Quality and Education Group (MPQEG) and ; 2. Education Advisory Group (EAG). 			

TERMS OF REFERENCE OF THE INTERNAL AND EXTERNAL FACING ADVISORY GROUPS

1. INTRODUCTION

The purpose of the report is to ask the Education Commissioning and Quality Committee (EC&QC) to consider and recommend that the Board approve the proposed amendments to the terms of reference for the following advisory groups:

- Multi-Professional Quality and Education Group (MPQEG) and ;
- Education Advisory Group (EAG)(together the 'Two Advisory Groups').

The proposed terms of reference for the Two Advisory Groups are attached at Appendix 1.

2. BACKGROUND

The January meeting of the EC&QC considered the terms of reference for the Two Advisory Groups. In accordance with the recommendations from the Future Ways of Working the Two Advisory Groups were established on the following basis:

- the internal group, now referred to as the MPQEG, to ensure the co-ordination and oversight of all education activity across HEIW with representation from all directorates;
- the external group, the EAG, to advise on education and training priorities. This group will be tasked with identifying future education training requirements and considering future proposals and new education opportunities. This Group to have representation from HEIW and key stakeholders.

3. PROPOSAL

The first meeting of the MPQEG, held on 23 September considered its own terms of reference together with the terms of reference of the EAG.

The MPQEG recommended the following key changes to the terms of reference of the Two Advisory Groups:

- that membership of the MPQEG be streamlined;
- MPQEG to support identifying future education training requirements;
- that the Two Advisory Groups provide support and advice on differential attainment and wellbeing;
- that the papers for the Two Advisory Groups be reviewed by the Executive Team;

- the EAG membership to include representation from Diverse Cymru.

4. GOVERNANCE AND RISK ISSUES

The establishment of the Two Advisory Groups will enable the EC&QC and the Board to undertake greater scrutiny in respect of commissioning, monitoring and quality assessing education and training. Greater scrutiny will enable HEIW to manage and mitigate risk.

5. FINANCIAL IMPLICATIONS

There will be some additional cost associated with holding the Two Advisory Group meetings. However, this is deemed to be supporting a core function of HEIW.

6. RECOMMENDATION

Members are asked to recommend that the Board approve the amended draft terms of reference (see Appendix 1.1) for the:

1. Multi-Professional Quality and Education Group (MPQEG) and ;
2. Education Advisory Group (EAG).

Governance and Assurance			
Link to IMTP strategic aims <i>(please ✓)</i>	Strategic Aim 1: To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of ' <i>A Healthier Wales</i> '	Strategic Aim 2: To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs	Strategic Aim 3: To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels
	✓	✓	✓
	Strategic Aim 4: To develop the workforce to support the delivery of safety and quality	Strategic Aim 5: To be an exemplar employer and a great place to work	Strategic Aim 6: To be recognised as an excellent partner, influencer and leader

	✓	✓	✓
Quality, Safety and Patient Experience			
Ensuring greater scrutiny and assurance in respect of the HEIW's areas of responsibility in respect of the education and training is a key factor in the quality, safety and experience of patients receiving care.			
Financial Implications			
There will be some additional cost associated with holding Two Advisory Group meetings. However, supporting the Education Committee is deemed to be a core function of HEIW.			
Legal Implications (including equality and diversity assessment)			
No detrimental impact on equality and diversity.			
Staffing Implications			
There are none. The Two Advisory Groups will be supported by HEIW's core function.			
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)			
No direct impact.			
Report History	A draft of the terms of reference for the Two Advisory Groups was considered at the meeting of the EC & QC on 16 September and at a previous meeting of the Committee held on 16 January.		
Appendices	Appendix 1.1 – Draft Terms of reference for the Two Advisory Groups (Clean version). Appendix 1.2 Draft Terms of reference for the Two Advisory Groups (Clean version).		

HEIW MULTI-PROFESSIONAL QUALITY and EDUCATION GROUP (MPQEG) TERMS OF REFERENCE

Date: , 2020

1. Introduction

In line with Section 3 of HEIW's Standing Orders, the Board has authorised the establishment of an internal advisory group for the Education Commissioning and Quality Committee (ECQC) to ensure the co-ordination and oversight of all education activity across HEIW. This shall have representatives from all directorates and will be known as the Multi-Professional Quality and Education Group (MPQEG).

The terms of reference and operating arrangements set by the Board in respect of the MPQEG are detailed below.

These terms of reference and operating arrangements are to be read alongside the standard terms of reference and operating arrangements applicable to all HEIW committees.

ECQC papers and reports will be reviewed by the HEIW Executive Team prior to submission to the ECQC.

2. Purpose

The purpose of the MPQEG is to provide to the ECQC:

- with the draft national annual education and training plan;
- with support for the governance of education and information to support strategies, policies, structures and processes for education and training which shall include taking a forward looking quality and strategic view;
- with information to seek assurance of the effective performance, monitoring, management, quality and value of education and training programmes and contracts;
- with support in identifying future education training requirements and considering future proposals and new education opportunities, taking into account national and international developments, which would be considered by the MPQEG prior to submission to the EC&QC;
- with evidence to monitor compliance of high quality education and training activities in respect of statutory, regulatory and policy requirements, including equity, equality legislation and Welsh language requirements;
- with evidence for supporting HEIW's compliance with delegated responsibilities given to it by health regulators;
- with support in preparing the education tender documents for review by the ECQC;

- with support in highlighting any issues out of the ordinary for the ECQC, including the identification and management of related risk; ;
- with oversight for the drafting of the Annual Quality Statement;
- with support and advice on differential attainment and wellbeing of students and dissemination of best practice.

3. Chair, Membership, Attendees Quorum and Term

3.1 Chair

The Medical Director and Director of Nursing will co-chair the Group.

3.2.1 Membership

According to role and as approved by the Education Commissioning and Quality Committee, comprising:

Membership:

Director of Nursing

Medical Director

Director of Educational Improvement (Medical Deanery)

Postgraduate Medical Dean

Dental Dean

Associate Director for Dental Team Workforce Planning and Development

Dean of Pharmacy

Associate Dean – Head of Programme Delivery and Foundation Practice (pharmacy)

Head of RSU

Organisational Lead, Revalidation Support Unit

Head of Allied Health Professions]

Head of Nursing

Director of Digital

Welsh Language Services Manager

Workforce Equality and Inclusion Officer

3.2.2 Deputies

If a member is unable to attend a Group meeting then a nominated deputy may attend the meeting provided that the Chair agrees the nomination before or at the commencement of a meeting.

The Deputy shall have the same status as a Member and will count towards a quorum.

3.3 Attendees

Individuals from within or outside HEIW, who the MPQEG considers should attend, will be invited taking account of the matters under consideration at each meeting.

3.4 Quorum

At least half of the members must be present to ensure the quorum of the MPQEG, one of whom should be the Committee Co-Chair.

3.5 Terms

Membership of the MPQEG and its terms of reference shall be subject to an annual review by the ECQC.

4 Frequency of Meetings

Meetings shall be held twice a year and otherwise, as the Co-Chair of the Committee deems necessary.

EDUCATION ADVISORY GROUP (EAG) - TERMS OF REFERENCE
Date: , 2020
Review Date: Annually
<p>1. Introduction</p> <p>In line with Section 3 of HEIW’s Standing Orders, the Board has authorised the establishment of an advisory group which shall advise on education and training priorities for HEIW. This group shall have representatives from both within HEIW and external stakeholders and will be known as the Education Advisory Group (EAG).</p> <p>The terms of reference and operating arrangements set by the Board in respect of the EAG are detailed below.</p> <p>These terms of reference and operating arrangements are to be read alongside the standard terms of reference and operating arrangements applicable to all HEIW committees.</p> <p>EAG papers and reports will be reviewed by the HEIW Executive Team prior to submission to the EAG.</p>
<p>2. Purpose</p> <p>The purpose of the EAG is to provide to the Education Commissioning and Quality Committee (ECQC):</p> <ul style="list-style-type: none"> • with a multi professional, multi-disciplinary forum to advise on the discussion, development, scrutiny and commissioning of the education, training, learning and development needs of the health workforce within Wales; • with advice on promoting strategic alignment of policy development and service implementation in relation to workforce planning, education, quality and development; • with advice in respect of the training and education implications of proposed workforce changes in the Welsh and UK context; • with support and advice on promoting collaboration between HEIW and external agencies in relation to educational and training governance which shall include differential attainment and wellbeing of students and dissemination of best practice; • with any information highlighting issues outside of the ordinary to the ECQC
<p>3. Chair, Membership, Attendees Quorum and Term</p> <p>3.1 Chair</p>

The Medical Director and Director of Nursing will co-chair the Group.

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According to role and as approved by the Education Commissioning and Quality Committee comprising:

Membership:

From HEIW:

- Director of Nursing
- Medical Director
- Postgraduate Medical Dean
- Dean of Pharmacy
- Head of Education, Commissioning and Quality
- Dental Dean
- Head of Workforce Modernisation

Peer Group representatives:

- Health Board/Trust Medical Director
- Health Board/Trust Director of Nursing
- Health Board/Trust Director of Therapies and Healthcare Science
- Health Board Chief Pharmacist

Stakeholder representatives:

- Representative from the Council of Deans
- Representative from Wales Health Student Forum (WHSF) x2
- Representative from Post Graduate - Trainees x2
- Representative from Welsh Health Partnership Forum (WHPF) x4
- Social Care Wales
- Colleges Wales
- Coleg Cymraeg Cenedlaethol
- Diverse Cymru

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The terms of reference and membership of the EAG shall be subject to an annual review by the ECQC.

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Date: , 2020

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- with the draft national annual education and training plan;
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- with information to seek assurance of the effective performance, monitoring, management, quality and value of education and training programmes and contracts; ~~including the identification and management of related risk;~~
- with support in identifying future education training requirements and considering future proposals and new education opportunities, taking into account national and international developments, which would be considered by the MPQEG prior to submission to the EC&QC;
- with evidence to monitor compliance of high quality education and training activities in respect of statutory, regulatory and policy requirements, including equity, equality legislation and Welsh language requirements;
- with evidence for supporting HEIW's compliance with delegated responsibilities given to it by ~~lth regulators~~ health regulators;

- with support in preparing the education tender documents for review by the ECQC;
- with support in highlighting any issues out of the ordinary for the ECQC, including the identification and management of related risk; ;
- with oversight for the drafting of the Annual Quality Statement~~Plan~~₁:-
- with support and advice on differential attainment and wellbeing of students and dissemination of best practice.

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Postgraduate Medical Dean

Dental Dean

Associate Director for Dental Team Workforce Planning and Development

~~Director of General Practice~~

~~Associate Dean (Foundation)~~

~~Director of Postgraduate Secondary Care Training~~

Dean of Pharmacy

Associate Dean – Head of Programme Delivery and Foundation Practice (pharmacy)

~~Eye care Transformation Lead~~

Head of RSU

Organisational Lead, Revalidation Support Unit

~~Head of Professional Support Unit~~

~~Associate Dean – Head of Programme Delivery and Foundation Practice (Pharmacy)~~

~~Head of Education, Commissioning and Quality~~

~~Head of Workforce Modernisation~~

~~Head of Healthcare Science~~

Head of Allied Health Professions]

Head of Nursing

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Welsh Language Services Manager

Workforce Equality and Inclusion Officer

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Date: , 2020

Review Date: Annually

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EAG papers and reports will reviewed by the HEIW Executive Team prior to submission to the EAG.

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- ~~• with advice on the education and training commissioning plans;~~
- with a multi professional, multi-disciplinary forum to advise on the discussion, development, scrutiny and commissioning of the education, training, learning and development needs of the health workforce within Wales;
- with advice on promoting strategic alignment of policy development and service implementation in relation to workforce planning, education, quality and development;

- with advice in respect of the training and education implications of proposed workforce changes in the Welsh and UK context;
- with support and advice on promoting collaboration between HEIW and external agencies in relation to educational and training governance which shall include differential attainment and wellbeing of students and dissemination of best practice;
- ~~with support in identifying future education training requirements and considering future proposals and new education opportunities which would be considered by the EAG prior to submission to the EC&QC;~~
- with any information highlighting issues outside of the ordinary to the ECQC

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- Social Care Wales
- Colleges Wales
- Coleg Cymraeg Cenedlaethol
- Diverse Cymru ~~BAME~~ organisation [tbc]

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EDUCATION, COMMISSIONING AND QUALITY COMMITTEE
DRAFT FORWARD WORK PROGRAMME 2021 v1

9 February 2021	8 June 2021
<p><u>Strategic Matters</u></p> <ol style="list-style-type: none"> 1. Training Programme Directors 2. Addressing Inequalities in Educational Attainment 3. Update on Health Professional Education Contracts 4. Health Professional Student Allocations 2021/22 5. Measuring/Adding Value <p><u>Education Performance and Quality</u></p> <ol style="list-style-type: none"> 6. Summary of the 2020 Health Professional Commissioning Contract Performance 7. PGME Quality Management Report 8. NSS Reports <p><u>Governance Matters</u></p> <p><u>For information</u></p> <ol style="list-style-type: none"> 9. Reports from Internal and External Advisory Sub Groups 	<p><u>Strategic Matters</u></p> <ol style="list-style-type: none"> 1. National Annual Education Training Plan for 2022/23 2. Update on Health Professional Education Contracts <p><u>Education Performance and Quality</u></p> <ol style="list-style-type: none"> 3. Health Professional Education Annual Quality Review 4. PGME Quality Management Report 5. GMC Annual Quality Assurance Outcomes 6. Annual Speciality Training Reviews <p><u>Governance Matters</u></p> <ol style="list-style-type: none"> 7. Committee Self-Assessment 8. Committee Annual Report <p><u>For information</u></p> <ol style="list-style-type: none"> 9. Reports from Internal and External Advisory Sub Groups

2 September 2021	7 December 2021
<p><u>Strategic Matters</u></p> <p>1. Update on Health Professional Education Contracts</p> <p><u>Education Performance and Quality</u></p> <p>2. PGME Quality Management Report</p> <p><u>Governance Matters</u></p> <p>3. Evaluation of Committee Effectiveness</p> <p>4. Review of Terms of Reference</p> <p><u>For information</u></p> <p>5. Reports from Internal and External Advisory Sub Groups</p>	<p><u>Strategic Matters</u></p> <p>1. Update on Health Professional Education Contracts</p> <p><u>Education Performance and Quality</u></p> <p>2. GMC National Training Survey</p> <p>3. PGME Quality Management Report</p> <p>4. LEP Commissioning Review 2020/21</p> <p>5. NSS reports</p> <p><u>Governance Matters</u></p> <p>6. Review of Committee Terms of Reference</p> <p>7. Forward Work Programme 2022</p> <p><u>For information</u></p> <p>8. Reports from Internal and External Advisory Sub Groups</p>



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Addysg a Gwella Iechyd
Cymru (AaGIC)
Health Education and
Improvement Wales (HEIW)

Meeting Date	8 October 2020	Agenda Item	4.1
Report Title	Briefing Paper Enshrining the positive lessons from Covid-19: Defining the 'New Normal' for Education and Training in Wales		
Report Author	Pushpinder Mangat Medical Director HEIW		
Report Sponsor	Pushpinder Mangat Medical Director HEIW		
Presented by	Pushpinder Mangat Medical Director HEIW		
Freedom of Information	Open		
Purpose of the Report	To provide a written briefing relating to the presentation provided to the Board in Summer 2020		
Key Issues	Unique Opportunity for Change Digital Opportunities Modernisation Opportunities Value opportunities		
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance
			✓
Recommendations	Members are asked to: <ul style="list-style-type: none"> Note 		

Briefing Paper
Enshrining the Positive Lessons from COVID-19:
Defining the 'New Normal' for Education and Training in Wales

1. Introduction

The current COVID 19 epidemic has created an entirely new environment where change to our society has been rapid, necessary and unprecedented in our lifetimes. We will only know how well we have adapted in our NHS services when we evaluate our actions some way down the line. However, this has provided an unique opportunity for beneficial change, innovation, advancement, transformation and lasting benefits. ,

Excerpt from Future Doctor Report (HEE):

“The Future came sooner than we thought”

“One of the comments from those responding to our engagement believed that, despite the need for change, our aspirations for reform within a few years would fail without some significant event”

“A geopolitical crisis, major global recession or cataclysmic pandemic will be the most likely driver of change. With all the will in the world, without a step-change in the money and power available, current planned changes in how health and social care in the UK will be delivered will be at best partial.”

2. Background

The Medical Director of HEIW delivered a presentation at the June 2020 Board Development session and at the June 2020 ECQ committee on the opportunities presented by the changes following the appearance of the COVID 19 pandemic, and what the new normal should look like. This was received as an important recognition of the opportunities for HEIW to shape the skills of our future workforce and dovetail with the crucially important elements of our workforce strategy, “A Healthier Wales” and our IMTP. This paper aligns to the presentation and highlights its points for reference in the future.

3. Unique Opportunity

a. Appetite for Change

The Global nature of the pandemic and its impact in other countries mobilised the whole nation to change the way we were living to contain the spread of the virus and provide the NHS the capacity to deal with the expected surge of cases. This in retrospect appears to have been largely successful with the expectation that there would be a second surge of cases – a situation that has now materialised.

Many changes have happened out of necessity. Capacity was created both physically in space and equipment and in the workforce to support those patients who were the most severely affected requiring hospitalisation and

critical care. There was strong engagement between all layers of control (WG, Health Care organisations and Social Care) to create the trained workforce to deal with the epidemic. New clinical pathways were created and Respiratory teams took on the NIV/CPAP services.

Innovations such as telephone and video consultation were taken up widely rather than sporadically. Referral patterns changed – fewer admissions to hospital of elderly and those in nursing homes with respiratory and urinary infections. Fewer children with Gastrointestinal disorder attending hospitals. Fewer attendees at Emergency Departments (which has negative as well as positive impacts).

HEIW already had the templates (in bold) to support the wider NHS within the HEIW/SC Workforce Strategy:

- An Engaged, Motivated and Healthy Workforce
- Attraction and Recruitment
- Seamless Workforce Models
- **Building a Digitally Ready Workforce**
- **Excellent Education and Learning**
- Leadership and Succession
- **Workforce Supply and Shape**
- **Wellbeing**, Welsh Language, Inclusion

b. Role of HEIW

Within Wales HEIW contributed to the Government Machinery and maintained links with Health Boards/Trusts/NHS Organisations through a variety of means (PEER groups, Contributing to WG led meetings etc).

Many HEIW staff were freed to contribute in different ways (CEO secondment to WG, Clinicians freed to work on the “frontline”, trainees in dentistry and Pharmacy providing backup support in clinical areas, administrative support from a variety of sources).

Strong links were formed across the UK via the Regulators, Professional bodies and the Statutory Education Bodies to create a variety of supportive measures (e.g. suspension of Medical rotations, discussions concerning return of retirees).

Strong engagement with the Education Institutions facilitated early graduation and registration of medical students, mobilisation of the nurse, AHP and CS student workforce.

c. Lessons learned

Remote Consultations VC/Telephone primary care has revealed the need for further training in this type of consultation.

Video Discussions with Families/Friends – this was of huge importance for speaking to families of patients on critical care who were not able to visit. This may also require Training support.

Discussions with clinical colleagues and Clinical meetings (MDTs) have been instigated virtually. These will provide excellent training opportunities for students and Trainees.

The need for embedding multiprofessional simulation based training into all levels of education and training is accepted and HEIW has already started developing its role in this area.

Advances in transfer of Imaging being embedded and will provide valuable multiprofessional and multispecialty training opportunities

d. Undergraduate Training

HEIW must engage with our Education providers to ensure that we have Health Professionals who are ready to practice, particularly as we will increasingly need those with Generalist skills. The use of assistantships and meaningful Clinical Placement strategies will be needed to achieve this.

We need to encourage our Education Providers to embed Multiprofessional Team learning where possible to help breakdown interprofessional barriers and tensions.

Where possible, new ways of learning could allow shortening the duration of courses and points of registration.

Deliver graduates we need – not the ones we are given

e. Postgraduate Training

HEIW will need to ensure that we modernise Postgraduate Training to reflect the new ways of working.

Education in Digital methods of training and delivering services.

Incorporating a wider range of Generalist Skills and Portfolios.

Provide flexible training options to prepare for wider range of roles and portfolio careers.

Interprofessional training incorporating simulated training as routine.

Work with Regulators and Professional Bodies to ensure recognition of skills obtained “out of training”.

Work with Regulators and Professional Bodies to modernise and Digitise progression processes through training - Annual Reviews, Professional Exams, Training completion etc.

Work with Regulators and Professional Bodies to ensure progression is geared more to competency not duration or exit exams while maintaining standards

Work with Regulators and Professional Bodies to create Multiprofessional opportunities (Nursing, Midwifery, Allied Health Professionals, Clinical Scientists, Optometry) for progression to Consultant roles.

Create Advance Practice opportunities and development of MAPS (PAs, AAs, SCPs & ACCPs) geared to the NHS needs in Wales

Create an environment that welcomes and provides value to International Graduates to undertake postgraduate training in Wales.

Deliver Professionals we need – not the ones we are given

f. Other benefits

Many staff have changed to home working which has been challenging for some but have conferred benefits to others. There may be wellbeing opportunities to grasp and challenges to face with a change in the future balance of the pattern of working.

There are opportunities to reduce our Carbon footprint – Decreased use of paper, fuel. Reduced Physical conferences, travel and catering has saved money. Reduce road risk due to more homeworking.

The role of HEIW on a UK basis has been positive and collaborative. Links have been strengthened with SEBs, Professional bodies and Regulators. These will need to continue and be formalised as normal working in the future.

g. Current position

We are now experiencing a second peak of COVID cases.

We have already recommenced Postgraduate Medical, Dental and Pharmacy Preregistration training and rotations.

Future ARCP processes for Medicine and Dentistry will have the option of being done virtually. Future Deanery meetings will have encourage virtual attendance

There are lessons to be learned from how students and trainees were deployed during the first wave. HEIW's position is that staff, students and trainees should not be seen as an easy solution to the need for more staff to support immunisation and/or the second peak.

Taking students away from education towards the end of an academic year is very different to taking them out in the middle of an academic year where there would be risk of excessive disruption and potential detriment. The longer term impacts in the supply of trained professionals could be disrupted.

We should recognise that not everyone had a positive experience during the first wave and there was no educational benefit for some, alongside acknowledging the valuable experiential learning for others.

We acknowledge and accept that some students do work ad-hoc via local “bank” arrangements

4. RECOMMENDATION

That the ECQC note this paper

Governance and Assurance			
Link to IMTP strategic aims (please ✓)	Strategic Aim 1: To lead the planning, development and wellbeing of a competent, sustainable and flexible workforce to support the delivery of 'A Healthier Wales'	Strategic Aim 2: To improve the quality and accessibility of education and training for all healthcare staff ensuring that it meets future needs	Strategic Aim 3: To work with partners to influence cultural change within NHS Wales through building compassionate and collective leadership capacity at all levels
	Strategic Aim 4: To develop the workforce to support the delivery of safety and quality	Strategic Aim 5: To be an exemplar employer and a great place to work	Strategic Aim 6: To be recognised as an excellent partner, influencer and leader
Quality, Safety and Patient Experience			
There are many opportunities described within this paper which will have an positive impact on patient safety and quality			
Financial Implications			
There are no direct Financial impacts related to this paper, though the impact of a change to more remote working both for organisations and for elements of training have already resulted in financial benefits.			
Legal Implications (including equality and diversity assessment)			
None			
Staffing Implications			
None			
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)			
Report History	Presentation to June 2020 BDS and ECQC		
Appendices			