

Name of Group:	Strategic People Planning and Education group
Chair of Group:	Professor John Gammon, Specialist Advisor to Workforce & Education
Reporting Period:	10 October to 27 November 2023
Key Decisions and Matters Considered by the Group:	
<p>The purpose of this report is to provide the People, Organisational Development and Culture Committee (PODCC) with an update from the Strategic People Planning and Education Group (SPPEG) for assurance.</p> <p>SPPEG met for the first time on the 27 November 2023. As this was the first meeting, much of the discussion focussed on the structure and purpose of the group, which was summarised as to coordinate, oversee and to consider collective approaches to work streams in education and training that ensures action, delivery and added value to the Health Board and the education provision. The summary below reflected the main points:</p> <p>Terms of Reference:</p> <ul style="list-style-type: none"> • The Terms of Reference (ToR) were discussed, and amendments were suggested. It was agreed these would be re-submitted to the next SPPEG following changes in relation to the oversight and impact of policies, relationship to other educational groups and membership. • Recognising the broad scope of the SPPEG ToR, it was agreed that there was a need to collectively identify the key priorities of focus for 2024/2025. It was noted that these should be risk-based and provide the greatest impact. It is agreed that these would be explored and agreed in the next meeting. • It was agreed a workplan to be produced to demonstrate how the group will deliver the ambition within the ToR. <p>Progress towards Work Plan:</p> <p>Although the SPPEG work plan is still in its infancy, the following have already been added to ensure focus and oversight of progress being made:</p> <ul style="list-style-type: none"> • Report was submitted in relation to the number of statutory and mandatory learning modules, highlighting the differences per staff group. It was agreed that the quality relevance, priority and delivery of these learning interventions need to be reviewed and that this would need to be raised at all All-Wales Level. It was agreed a working group would be set up to review this training and propose a way forward. <p>External Partnerships:</p> <ul style="list-style-type: none"> • Health Education and Improvement Wales (HEIW) were in attendance and agreed to provide regular updates to the group to provide an oversight of the work being undertaken from an All-Wales/HEIW perspective. 	

- A Higher Education Funding Council for Wales (HEFCW) £900K Virtual Reality Simulation Project Interim Report was submitted, which outlines the partnership between Hywel Dda University Health Board (HDdUHB) and Swansea University to develop an interprofessional simulation-based learning virtual reality (VR) solution. This project supports higher education healthcare training needs and expand essential clinical content sessions, using an innovative and active learning approach. An approach that involves the identifying of key stress areas within healthcare systems particularly with NHS service providers who have ongoing pressures due to resource constraints, staff shortages, and high demand exacerbated by the challenges of a post-Covid-19 recovery. These resource pressures and stress factors are reflected similarly in higher-education delivery, resulting in a growing need to expand simulation-based education (SBE) modalities for healthcare training.

The solution involves the innovative use of state-of-the-art Virtual Reality (VR) technology, to tackle the growing needs of SBE to allow the enhancement of blended learning approaches to education and offer the opportunity to train individuals and teams in immersive, engaging and flexible ways. This is being achieved by using VR to develop the following modules designed for multi-professional use:

- Delirium
- Systematic Physical Examination of the Newborn Infant (SPENI)
- Blood Transfusion
- Aseptic Non-Touch Technique (ANTT)
- Hypovolemic Shock
- Do Not Apply Cardiopulmonary Resuscitation (DNACPR)
- Diabetic ketoacidosis (DKA)

All modules not only provide a variety of healthcare training-related scenarios and skill practice sessions, but also embed core skills and values needed by a healthcare team including communication, emergency management cases and patient empathy. The selection of these modules included a needs assessment ensuring impact across programmes for multi-professional and interprofessional training need priorities. Further updates will form part of the SPPEG Work Plan.

Governance and Risk:

- An implementation strategy for the policy for 'Developing New Clinical Roles (Job Descriptions, Competencies, Learning and Education)' was discussed, highlighting this policy replaces the previous EAGLE policy and has been through the consultation process and approved by PODCC. It was agreed that the purpose of the policy was to support new clinical roles and updated job descriptions and competencies for clinical roles through ongoing panels as part of the Clinical Education Governance Group (CEGG). It was agreed that outcomes of panels held should be reported to SPPEG for governance and oversight.

This highlighted the need to consider membership of CEGG, to ensure that all relevant professional groups would be able to review and challenge re-configured roles. It was agreed that further exploration was needed to identify the reclassification of roles, and how

these are managed and approved as this is currently out of scope of CEGG. It was agreed this will form part of the workplan going forward.

Matters Requiring People, Organisational Development and Culture Committee Consideration or Approval:

- PODCC are asked to take assurance from SPPEG on activities and decisions reported and are asked to note the progress and contents of the report.

Risks / Matters of Concern:

- Limited progress had been made in terms of implementation of the Interprofessional Education Strategy due to conflicting pressures within the organisation. Assurance was given that a progress update would be provided in the next SPPEG on the 20 February 2024.
- Issues raised with prescribing safely assessment (PSA). 38% of the F1's who had started have failed the PSA exam. Opportunities are given to pass the exam, September, March and June. If they don't pass on the third attempt, they can't progress to the F2 year. Currently there are 14 doctors who have not passed the PSA. A deeper dive will be submitted to the next SPPEG.
- A risk was noted that will be raised with NHS Wales regarding the risk share relating to HDdUHB picking up a higher proportion of overseas rotational doctors and the implications that this brings in terms of supporting further education, financial, etc.

Planned Sub-Committee Business for the Next Reporting Period:

Future Reporting:

- Updated ToR to be signed off by PODCC following amendments being agreed in SPPEG.
- Agree organisational educational and development key priorities for SPPEG for 2024/2025.
- A clear action based workplan to be produced to demonstrate how the group will deliver the ambition within the ToR.
- Interprofessional Education Plan will be submitted and monitored by SPPEG.
- Deep dive of challenges/risks and opportunities of meeting the standards of the General Medical Council (GMC) Practical Skills and Procedures Framework
- Review of statutory and mandatory training update will be submitted for the August 2024 PODCC meeting, following a full review and outcome of the Task and Finish Group.
- Further exploration as to how HDdUHB manages the reclassified of roles by profession.
- Need identified to create governance and consistency in the use of Annex 21, especially considering the growth of the use.
- Workforce Plan & Education Commissioning progress
- Revised higher awards process, which considers the use of various funding opportunities and compliments the annual plan, education and commissioning process.

Date of Next Meeting:

20 February 2024