FOURTH ASSEMBLY HEALTH AND SOCIAL CARE COMMITTEE LEGACY

Inquiry by the National Assembly for Wales’ Health and Social Care Committee

Response from BMA Cymru Wales

25 September 2015

INTRODUCTION

BMA Cymru Wales is pleased to provide a response to the inquiry by the National Assembly for Wales’ Health and Social Care Committee entitled ‘Fourth Assembly Health and Social Care Committee Legacy’.

The British Medical Association (BMA) is an independent professional association and trade union representing doctors and medical students from all branches of medicine all over the UK and supporting them to deliver the highest standards of patient care. We have a membership of over 153,000, which continues to grow every year. BMA Cymru Wales represents some 7,000 members in Wales from every branch of the medical profession.

RESPONSE

BMA Cymru Wales has been grateful for the continuing opportunity it has had over the fourth Assembly term to contribute to a number of different inquiries that have been undertaken by the Health and Social Care Committee. We recognise the importance of assisting elected members in being able to undertake decisions from an informed perspective, as well as in ensuring that elected members undertaking a scrutiny role are able to hear directly from frontline practitioners.

As the only professional organisation which represents doctors from all branches of medical practice, as well as medical students, we are often uniquely placed to provide a perspective from right across the profession. It has therefore been pleasing to have been able to contribute both written and oral evidence for a good number of health-related inquiries, including those concerned with the committee’s increasingly important function in scrutinising emerging Welsh Bills.

Whilst we fully appreciate the committee’s broad remit, if we were to highlight one concern in the way it has undertaken its work during the current Assembly term it would be that, on occasions, we have felt it has undertaken too many concurrent inquiries. Given that topic-based inquiries are now undertaken at the same time as the not inconsiderable work which is required to scrutinise Bills, this has at times led us
to question if the committee has had sufficient capacity to do justice to so many inquiries at once. The committee might therefore wish to consider if it might have been preferable to have undertaken fewer inquiries, in order that some individual inquiries might have been covered in greater depth.

We offer such a view in an attempt to be constructive, rather than to merely be critical. From our own perspective, we have often found it challenging to respond to what can at times be a significant number of inquiries that may be of relevance to our members, particularly given the number of other inquiries and Welsh Government consultations in which we also have an interest.

At times, we have been concerned by the comparatively short time-frame that has been given for submitting written evidence for inquiries, including some occasions when we have been asked to submit such evidence earlier than the scheduled deadline because the committee then wants to call us to give oral evidence. This has meant it has sometimes been difficult for our staff to adequately consult with our members within the time available regarding points that they may wish to see included, as well as to then seek endorsement of our draft evidence by the wider membership ahead of its submission.

As a minimum, we would therefore suggest that stakeholder organisations such as ourselves are ordinarily given at least two months to compile and submit written evidence – although we accept there may be some exceptional circumstances which could mean this is not possible on every occasion.

In terms of our views regarding what we believe will be the three biggest challenges for health and social care in Wales over the next five years, we would suggest the following:

**Supporting the people of Wales to live healthier lives**

In order to tackle persistent inequalities in health, and to protect the most vulnerable in our society, we consider that health and well-being implications need to be considered in all aspects of policy-making. We feel there also needs to be a clear focus given to enabling individuals to develop an increased awareness of, and sense of responsibility for, their own health and well-being. To further these aims, we believe that people must be provided adequate opportunities to make informed choices, whilst Government policy needs to prioritise tackling the challenging link between poverty and poor health outcomes.

**Creating a sustainable NHS in Wales**

We feel it is vital to prioritise the creation of an NHS workforce that is fit for the future. We recognise that high-quality patient care goes hand in hand with a highly motivated and committed medical workforce. It is essential therefore that our dedicated professions are supported, recognised and appropriately remunerated within a stable NHS. BMA members, however, report that they feel increasingly de-professionalised, repeatedly devalued and worryingly isolated. The challenge for Welsh Government going forward will be to provide the resources, policy and structures for professionalism to flourish. Workforce planning needs to be dynamic, robust and proactive, taking into account medical training requirements as well as changing service demands and workforce composition with appropriate action to address recruitment and retention challenges.

**Assuring the quality and safety of patient care**

Our members feel that more could be done to support and protect frontline services so that clinical quality and patient safety, rather than financial or process-focused targets, are paramount across the NHS. We feel that the Welsh Government needs to recognise that the imposition of financial or organisational targets can create incentives that conflict with clinical judgement. A culture of openness needs to be created within the NHS, rather than one where raising concerns can leave doctors feeling harassed or marginalised. Raising concerns by staff should be welcomed, positively reinforced and acted upon so that it becomes routine and everybody’s business to identify and put right concerns early wherever they occur.