Thanks to the extraordinary efforts of the profession over the last year, we are now cautiously moving from simply working to protect patients, staff, and the NHS and instead towards reducing the backlog seen across the health service.

This of course comes with its own challenges, however as staff have shown over the past two-and-a-half years, they are more than up to the task. The backlog can only be reduced if staff are given the support they require from Welsh Government and other leaders.

Despite the challenges of the last year, we have nonetheless made some significant progress and achieved a great deal to support members as they continue to work through difficult times.

We have successfully persuaded Welsh Government to support access to ‘recycling’ of the employer’s contributions to doctors’ pensions. This ensures consultants can access a greater proportion of their total reward package and brings them into line with GP Principal colleagues. For both GPs and Consultants, however, we still need to work to release the centrally funded part of employer contributions for recycling.

Despite some health boards not initially implementing this, following pressure through LNCs, we have ensured that all health boards in Wales have now put this in place.

Similarly, after delivering the 2021-22 DDRB pay award recommendation for all doctors in Wales, we continued our discussions with the Health Minister, in partnership with other unions, to agree further pay enhancements for those working in secondary care and employed by health boards.
These led to:

- a permanent additional day of annual leave for employed staff
- a commitment to improve wellbeing support
- an additional one-off 1% payment to eligible F1 and F2s
- an opportunity to sell back a proportion of unused annual leave.

To address the need to change work practices during the pandemic, and the subsequent increased demands put upon consultants and SAS doctors to tackle the backlog of work, we agreed enhanced rates of pay for these doctors.

Following on from last year’s agreement of a new contract for SAS doctors in Wales - meaning better pay progression and shift patterns and the opening of a new specialist grade across Wales - we have also provided job planning advice and support through a job planning workshop.

This represents an important milestone for SAS doctors, further building the grades as a fulfilling and positive career choice. And thanks to our success in persuading the Welsh Government to fund a pay continuity agreement for those transferring to the new contracts, there has been an excellent take-up of the new specialty doctor contract.

In primary care, our collaborative working relationship with Welsh Government and NHS Wales resulted in a contractual agreement for 21/22. This will go some way to supporting practices working under extremely difficult conditions at present.

The contractual arrangements in place will see GPs and their staff rewarded for their extraordinary efforts during a time of unprecedented demand, with investment enabling the DDRB’s recommendation of a 3% uplift for GPs and their staff to be met.

Furthermore, recognising the immense current pressures, the agreed Additional Capacity Funding over the next three years will help to address the deficit GPs face in manpower to deliver the services they wish to. Additionally, we have ensured there are clear commitments for Protected Learning Time sessions, which ensures practices have the breathing space to develop and train their teams to better recognise patient needs.

The BMA Cymru Wales member relations team has successfully supported several GPs regarding their employment status, IR35 classification and associated employment legal rights after it became apparent that several health boards had chosen to adopt blanket applications of IR35 status for doctors working in out of hours services or managed practices.

Over the past year, we have also worked to support those doctors at the very start of their medical careers here in Wales. Through working with key stakeholders, we have improved non-contractual conditions for doctors training in Wales. This has ensured trainee doctors get greater flexibility with LTFT training, rollover of unspent individual study budget and improvements to the relocation reimbursement policy, including a doubling of the maximum amount that can be claimed in a year.

It is critical that we retain our frontline workforce, and working to ensure trainees are fully supported to develop their skills and are made to feel welcome, is crucial to this.
To attract and retain new consultants and help alleviate existing workforce pressures, BMA Cymru Wales has negotiated new annual recruitment and retention payments for those joining, or already on, the first part of the consultant pay scale in Wales.

Over £1 million has been paid out in these additional payments across 2020-21 and 2021-22. This has ensured the money has been retained within the consultants’ pay envelope and helped ensure starting salaries for new consultants in Wales have been more on a par with those in England.

The pressures of the past two years have however shown that staff also need additional support for their own mental health and wellbeing. Without this, more and more staff will choose to leave a profession they love and cherish, only adding further to current pressures.

This is why we have secured a commitment from Welsh Government to deliver a fully funded Occupational Health Service for all health care workers in Wales. A newly launched Canopi service will provide free and confidential mental health support for healthcare staff across Wales with an additional £1.5m of funding per year. However, we must continue to do more if we are to make sure staff across Wales have access to timely OH support. It is simply unacceptable that the 2020 figures showed there were less than five full time equivalent occupational health support workers across the whole of the Welsh NHS.

In addition, along with the other health unions, we successfully negotiated ongoing enhanced financial support for those suffering with long-covid along with provisions to allow for a supported and prolonged phased return to work.

With the additional bank holiday in 2022 to celebrate the Queen’s platinum jubilee, we ensured doctors in Wales were entitled to paid leave on 3 June 2022. Those doctors who were required to work on this date are entitled to time off in lieu and payment.

In addition to securing the pay and support staff need to carry out their roles, we also need to see improvements in the technology and facilities that we use on a daily basis if we are to make progress in reducing patient waiting lists.

Through working with partner organisations, we have continued to lobby Welsh Government to bring forward electronic transfer of prescriptions in Wales, as recommended by an independent review which they commissioned. We have also ensured that BMA Cymru Wales, represented by GPC Wales, has a voice on the Minister’s professional advisory board taking these developments forward.

Wales is lagging behind other parts of the UK, with both England and Scotland having had similar systems in operation for some time. It should therefore not be impossible to rapidly introduce capacity this side of the border. For this reason, we continue to work as a critical friend to Welsh Government as they suggest that full rollout here will take up to five years.

If the pandemic has shown us anything, it is that when trusted to make decisions and work flexibly for the benefit of patients, frontline staff can excel in their roles.
For this reason, we continue to remind Welsh Government and NHS leaders that they cannot simply return to the old ways of working. Equally, they cannot simply implement all the changes made rapidly throughout the pandemic either.

Instead, they must listen to the staff who have been trusted up until now. With this guidance and experience, leaders have the opportunity to ensure that the changes that are implemented are appropriate and will make significant long-term differences to the experiences of staff and patients alike.

To aid this, we have launched a new web portal, so that members’ views, experiences, and proposals can be collected and used to inform our representations to Welsh Government and health boards. We’ll also be running a series of events across each health board to further build on the proposals submitted via the portal, to make sure that the Minister hears first-hand from the frontline about the changes that are needed and, crucially, how those changes should be implemented.

In 2021 we supported almost 1,500 members in Wales, across all branches of practice, with individual employment advice on issues including working arrangements, remuneration, leave, contract checking and contract arrangements.

The net promoter score for Wales for this year so far is a very impressive 73.3, with an average of 4.7 out of 5 across seven service domains, despite an increase in casework. This feedback has come from our members, and clearly shows that the work we’re doing at BMA Cymru is valued and helping our members.

We will continue to support our members and be there to assist their individual needs, to ensure they can continue to do their jobs effectively.

<table>
<thead>
<tr>
<th>Member role</th>
<th>Number supported</th>
<th>Main areas of support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consultants</td>
<td>425</td>
<td>Working arrangements, remuneration and leave</td>
</tr>
<tr>
<td>SAS doctors</td>
<td>153</td>
<td>Contract arrangements, working arrangements and remuneration</td>
</tr>
<tr>
<td>Junior doctors</td>
<td>569</td>
<td>Contract checking, working arrangements and remuneration</td>
</tr>
<tr>
<td>GP Partners</td>
<td>135</td>
<td>Partnerships, contract arrangements for staff and leave</td>
</tr>
<tr>
<td>Sessional GPs</td>
<td>147</td>
<td>Annual leave, contract checking and contract arrangements</td>
</tr>
</tbody>
</table>

Dr David Bailey
Chair, BMA Welsh Council