Thank you to the Committee for their valuable work in this important area of medical recruitment. The Committee’s consideration of the oral and written evidence presented before them has produced a helpful report and recommendations.

Recruitment and retention challenges within the medical workforce are not unique to Wales. However, we acknowledge there is more to be done which is why we are taking positive action to attract more health professionals across the country and investing in education and training is key to developing our workforce.

I have set out my response to the report’s individual recommendations below.
Detailed Responses to the report’s recommendations are set out below:

**Recommendation 1**
The Committee recommends that:
The Cabinet Secretary for Health, Well-being and Sport should agree and publish by September 2017 a clear action plan and timeline for establishing the new single body [Health Education Wales].

**Response: Accept**

The Welsh Government is committed to establishing the new single body, to be called Health Education and Improvement Wales by April 2018. I set out the way forward in a Written Ministerial Statement on 6 July and will follow up with a clear action plan and timeline in September.

**Financial Implications** – There are no specific financial implications following this recommendation, although the wider programme to establish HEIW will require transitional funding which has been factored into in-year financial plans.

**Recommendation 2**
The Committee recommends that:
The Welsh Government should work with the Deanery (or any successor body) and the medical schools in Wales to secure a sustained increase in the number of Welsh-domiciled students applying to medical schools within Wales.

**Response: Partially Accept**

The number of Welsh Domiciled students who are accepted in medical schools in Wales has improved because of changes made by both Swansea and Cardiff Medical Schools. Admission criteria is ultimately a matter for medical schools. However, we continue to work with medical schools on increasing the number of Welsh-domiciled students applying to medical schools in Wales. We will be working with medical schools to sustain, and build on, the improvements made in 2017.

**Financial Implications** – None

**Recommendation 3**
The Committee recommends that:
The Welsh Government should work with the Deanery (or any successor body) and medical schools in Wales to develop a programme of support and advice on medical schools admissions and interviews for pupils in Wales.

**Response: Partially Accept**
Admission criteria is ultimately a matter for medical schools. We will continue to work with medical school on this. We are developing a widening access programme across healthcare professions, including medical. Cardiff and Swansea Medical Schools successfully ran a work experience scheme during Summer 2016 for school pupils interested in pursuing a medical career. We are building on this approach and aim to expand the number of places available this Summer.

Financial Implications – None

Recommendation 4
The Committee recommends that:
The Cabinet Secretary should discuss and agree plans with the medical and clinical schools in Wales that will enhance and develop undergraduate medical training in Wales. This plan should include an increase in undergraduate medical school places, and an increase in the percentage of Welsh-domiciled students securing those places.

Response: Partially Accept

On 18 July I issued a written statement in which I recognised the case for an increased level of medical education to take place in North Wales. This needs to be set within the context of a Wales wide approach to medical education and I will be working with the Cabinet Secretary for Education to agree a way forward. This will include working with stakeholders to develop and implement a collaborative approach based upon Cardiff, Swansea and Bangor Universities working more closely to deliver this increase in medical education opportunities in north Wales.

All parties have confirmed a willingness to work together to deliver programmes which would result in students having the option of spending a far greater period of their studies in North Wales.

Financial Implications: There are no specific financial implications for this collaborative work, but any increase in places to aid this collaborative work will incur costs to education and health budgets, this will need to be taken into account at the point of policy decisions being taken

Recommendation 5
The Committee recommends that:
The Welsh Government should set out a clear plan to develop opportunities for undergraduate medical education in North Wales. This should include a new centre for medical education in Bangor. The Cabinet Secretary should announce a decision within the timescales he has set for ‘summer 2017’.

Response: Partially Accept
On 18 July a written statement was issued confirming the Government’s position that there is no case for a new medical school to be established in North Wales. The statement went on to recognise the case for an increased level of medical education to take place in north Wales. This needs to be set within the context of a Wales wide approach to medical education. We will continue to work with stakeholders to develop and implement a collaborative approach based upon Cardiff, Swansea and Bangor Universities working more closely to deliver increased medical education opportunities in north Wales.

All parties have confirmed a willingness to work together to deliver programmes which would result in students having the option of spending a far greater period of their studies in north Wales. I will update Assembly Members in the Autumn term.

Financial Implications – There are no specific financial implications for this collaborative work, but any increase in places to aid this collaborative work will incur costs to education and health budgets, this will need to be taken into account at the point of policy decisions being taken

Recommendation 6
The Committee recommends that:
The Welsh Government should work with the Deanery (or any successor body) and medical schools to develop proposals to increase time in general practice, as a key part of both the undergraduate curriculum and trainee doctor foundation training.

Response Accept
Cardiff and Swansea medical schools are already working to expand the level of exposure to general / community based medicine within their medical degree programmes. We are working with the medical schools to establish how these opportunities can be expanded in future years.

In parallel we are working with the Wales Deanery to consider how trainees in their foundation years can gain greater exposure to non hospital based care. Any decisions will need to be taken in light of the outcome of the UK wide Shape of Training Groups recommendations about changes to postgraduate medical training.

Financial Implications – Any additional costs would be drawn from existing programme budgets through a reprioritisation of existing W&OD funding streams.

Recommendation 7
The Committee recommends that:
The Welsh Government and Deanery (or any successor body) should develop and agree proposals for an increase in the number of training places, targeted
Response: Accept

Last year we agreed we should aim to more closely align the timescales for decisions made about both medical and dental training places and non medical training places. Progress has been made and on 18th July the NHS Joint Executive Board considered both medical and dental commissioning and Non Medical Commissioning proposals. These papers identified priority areas for investment based upon engagement with NHS organisations. The process will continue to be refined as Health Education Improvement Wales takes responsibility for this activity in the future.

Financial Implications – Any increase in priority areas, in the absence of reductions in other areas will increase the overall funding requirements, this together with methods of funding will need to be taken into account at the point of policy decisions being taken

Recommendation 8
The Committee recommends that:
The Welsh Government should:
- seek appropriate amendments to regulations to enable Post-F2 doctors to work as locums in general practice;
- continue discussions with the UK Government on performers list regulation with the aim of enabling doctors to be on the performers list in both England and Wales.

Response: Partially Accept

Welsh Government will continue discussions with UK Government on an England and Wales performers list. Welsh Government will also consult with Royal College General Practitioners (Wales); General Practitioners Committee (Wales); Wales Deanery; NHS Wales Shared Services Partnership; NHS Wales and other key stakeholders on the extent to which the current Wales performers list requirements can be improved to make it easier for GPs living in England to work in Wales.

On the Post F2 question, we will continue to work with the Wales Deanery and others to explore this issue further.

Financial Implications - There are no financial implications associated with this recommendation.

Recommendation 9
The Committee recommends that:
The Welsh Government should work with Welsh medical schools, local health boards and the Welsh Deanery (or any successor body) to develop a joint action plan for rural medical training and education, drawing on experience and best practice from elsewhere, both nationally and internationally.

Response: Accept

This has been the subject of several discussions with the Wales Deanery and we are currently considering the detail of a formal proposal to develop and deliver Rural Health Credential/Rural Health Learning Programmes in Wales.

Financial Implications – There are no financial implications associated with these discussions about credentials in Wales.

Recommendation 10
The Committee recommends that:
The Welsh Government must focus on robust long term workforce planning by commissioning work which involves the key stakeholders in NHS Wales, Welsh medical schools, medical students and medical trainees to develop a comprehensive, all-Wales evidence base in respect of recruitment and retention. This would serve to inform recruitment strategies and campaigns.

Response: Accept

Last year we agreed we should aim to more closely align the timescales for decisions made about both medical and dental training places and non medical training places. Progress has been made and on 18th July the NHS Joint Executive Board considered both medical and dental commissioning and Non Medical Commissioning proposals. These papers identified priority areas for investment based upon engagement with NHS organisations. The process will continue to be refined as Health Education Improvement Wales takes responsibility for this activity in the future.

Financial Implications – Any increase in priority areas, in the absence of reductions in other areas will increase the overall funding requirements, methods of funding will need to be taken into account at the point of policy decisions being taken.

Recommendation 11
The Committee recommends that:
The Welsh Government should ensure an evaluation is undertaken of the scope, reach and impact of the Train, Work, Live campaign, with a focus on outcomes achieved and lessons to be taken forward. These lessons should inform an on-going annual recruitment campaign for doctors.

Response: Accept
A formal evaluation of the medical /GP phase of the Train Work Live campaign will be undertaken by officials in April 2018.

This is a long term sustained marketing campaign aimed at increasing the number of healthcare professional working in NHS Wales and it will continue over the coming years during which the scope and activity of the campaign will be refreshed based on lessons learnt from previous phases/ years.

Financial Implications – None

Recommendation 12
The Committee recommends that:
The Welsh Government should provide an update to the Committee by the end of 2017 (and annually thereafter) on the impact of the GP Incentive Scheme, and examine and undertake work to identify potential options for other financial or similar incentive schemes to attract and retain potential and practising doctors.

Response: Accept
Reporting arrangements will be established on the basis requested by the Committee. An evaluation of the incentives scheme will be undertaken over the summer to inform further policy decisions.

Financial Implications – None

Recommendation 13
The Committee recommends that:
The Welsh Government should work with key stakeholders to develop options for ensuring the delivery of a single, national point of access for detailing current medical vacancies within Wales.

Response: Accept
Secondary care medical and dental vacancies are currently published on the NHS Jobs website and are the national point of access. The Welsh Government is working closely with NHS Shared Services Partnership to develop a similar approach for primary care vacancies. Discussions are underway to encourage the use of NHS Jobs as the sole point of access for GP practice vacancies.

Financial Implications – None

Recommendation 14
The Committee recommends that:
The Welsh Government should collate and publish the numbers of medical vacancies within Wales in order to inform long term and robust work-force planning strategy.
Response: Accept

Response
Welsh Government will work with Workforce, Education and Development Services and NHS Wales to develop a mechanism for the collation and publication of medical and dental vacancies.

Financial Implications – None

Recommendation 15
The Committee recommends that:
The Welsh Government should continue dialogue with the UK Government to emphasise the importance of quickly clarifying the ability of EU nationals to continue and commence working in the UK.

Response: Accept

Recommendation 16
The Committee recommends that:
The Welsh Government should continue dialogue with the UK Government to seek assurances about the ability of EU nationals to work as medical professionals in Wales in the future.

Response: Accept

Response to R15 & R16
The UK Government has committed to introducing an Immigration Bill to set out how immigration to the UK for EEA and Swiss nationals will be managed in future.

Protecting the rights of citizens from other EU countries and beyond who currently live and work in Wales is a critical issue. They make a huge and valued contribution to our economy, our public services and our communities – people must not be treated as ‘bargaining chips’.

The Welsh Government is clear that after Brexit we want to enable people from the EU and the rest of the world to be able to come to Wales to train and work within our NHS and to live within our communities. We welcome their contribution both to the health of our nation but also to the strength and vibrancy of our local communities.

Financial Implications – None

Vaughan Gething AM
Cabinet Secretary for Health, Well-being and Sport