## Minutes of the Cross Party Group on Stroke: 11 February 2020

# Fourth Evidence Session of the Inquiry into the implementation of the Welsh Government's Stroke Delivery Plan

## 1. Welcome, apologies and introductions

#### In attendance:

## **Cross Party Group Members**

Dr Dai Lloyd AM

## **Giving Evidence**

Prof Push Mangat, Health Education and Improvement Wales Dr Sian Lewis, Welsh Health Specialised Services Committee

## **Presenting**

Matt O'Grady, Stroke Association

#### **Other Attendees**

Katie Chappelle, Stroke Association
Carol Bott, Stroke Association
Dr Anne Freeman, Former Welsh Clinical Lead for Stroke
Martin Riley, Health Education and Improvement Wales
Dr Shakeel Ahmad, Welsh Health Specialised Services Committee
David Fitzpatrick, Stroke Survivor
Nick Cann, Stroke Survivor
Gareth Lee, NHS Delivery Unit
Tom Hughes, Welsh Association of Stroke Physicians
Two others from HEIW
Bethan Edwards, British Heart Foundation Cymru

Note: This list is likely to be incomplete

#### **Apologies:**

#### 2. Approval of minutes

No minutes presented from previous meeting.

## 3. Update on progress from actions agreed from last meeting; the way forward

No actions agreed at the previous meeting.

## 4. Evidence session: Additional Evidence

### **Health Education and Improvement Wales**

PM said stroke part of core medical training and additional training for those who want to specialise in stroke. Currently open to specialist training registrars with specific qualifications. Difficulty recruiting into training posts across UK and Wales no exception. Started with four posts last year, had to reduce to two but only recruited one. Recruited other specialists to remaining slots to think outside of box but won't gain qualification. Both posts filled for August this year.

Changes to medical training curricula on the way which may result in incorporation of stroke training into one or more specialities. Will help produce specialists. From 2022 and curricula currently awaiting national ratification on four nations basis.

PM gave information on modules and qualifications available around stroke. Other generic courses will relate to stroke.

Meeting organised with AF to see how Stroke Hub Wales and HEIW work overlaps. Already created leadership training for nurses in stroke care. Work underway on framework for stroke nurses in all four countries and HEIW looking forward to collaborating.

## **Welsh Health Specialised Services Committee**

SL outlined role of WHSSC. Traditionally WHSSC hasn't commissioned stroke services but asked to commission thrombectomy in 2018.

In 2019/20 funds identified for 32 patients (£800,000) to deliver thrombectomy for patients in south Wales. Despite funding being identified to date only five patients had received thrombectomy. Some patients also treated in Cardiff.

Contract agreed with Bristol to carry out thrombectomy but two specific problems with implementing contract. First problem relates to repatriation and hold up with WAST in putting in place. Bristol has made specific requirements requiring repatriation within six hours. Second problem is issues with image transfer between LHBs and North Bristol Trust. Solution identified by NWIS. Will require action from individual LHBs. Not part of WHSSC remit but have facilitated. Image transfers taking so long it isn't possible to transfer patients in a timely manner. Also exploring software solution.

In North Wales funding identified for twenty patients and to date three have received thrombectomy. Contract with the Walton. Walton about to increase service to seven days a week. Not clear why so few patients accessing thrombectomy. Not aware of any impediment and have raised issue with LHB.

One patient in mid-Wales and no formal funding arrangement. Paid on case by case basis with no ceiling. Patient accessed by NHS England pathway.

Key element moving forward is to strengthen service in Cardiff. Have been recruitment issues in Cardiff service. Now have two consultants with one about to finish training. Expecting to go to advert for third consultants. No financial barrier, problem is recruitment.

Longer term strategy is dependent on credentialing and whether it is possible to deliver via non-neuroradiologists. Need to think imaginatively about model.

SA gave an update on credentialing. Currently being looked at by the GMC.

## **Questions from Cross Party Group to the panel:**

FJ asked HEIW how they are planning on supplying medics interested in stroke as availability of consultants is a constraint on systems at present. HEIW highlighted that training of stroke is integral to all parts of medicine and that those working on stroke at present haven't always undertaken specific stroke training at present. Noted the issues with current model of training leading to only 14 out of 49 training spaces in the UK being filled. Model hasn't always proven to be attractive although training is good. Moving forward would prefer to see stroke as an integral part of medical curriculum rather than something which is opted into. Move is underway and isn't HEIW's role to set curriculum, but to implement. Shape of training review looked at these themes and all curricula being reviewed. Neurology an example of this. Stroke sub-section of curriculum will be standard part of neurology course. Other specialities haven't gone as far yet. Employers will need to advertise based on what services need or will lose expertise.

DF asked what was being done to retain staff as well as recruit, particularly in rehab. HEIW replied that making more courses available in rehab to enable access. Real focus on OTs and physios working in primary care. Retention not HEIW responsibility, but in terms of education courses pushing universities.

TH raised issue of need for trainees to support INRs working in thrombectomy.

#### **Stroke Association**

MO gave an overview of the potential contents of the CPGs inquiry report. These details have not been minuted due to the draft nature of the recommendations at present.

Dates, time and venue of next meetings:

24 March, 12.30pm, Committee Room 5

Topic for next meeting: Launch of the inquiry report

Meeting ends