MR 10

Ymchwiliad i recriwtio meddygol Inquiry into medical recruitment

Ymateb gan: Age Cymru Response from: Age Cymru

Inquiry Response

Medical Recruitment

November 2016

Introduction

Age Cymru is the leading charity working to improve the lives of all older people in Wales. We believe older people should be able to lead healthy and fulfilled lives, have adequate income, access to high quality services and the opportunity to shape their own future. We seek to provide a strong voice for all older people in Wales and to raise awareness of the issues of importance to them.

We are pleased to respond to the Health, Social Care and Sport Committee's inquiry into the medical recruitment. The proportion of the population aged 65 and over in Wales has been growing at a faster rate than the proportion of the population aged between 18 and 64 and this is a trend that will continue in coming decades. The number of individuals aged 65 and above in Wales is expected to increase from around 600 000 in 2013 to almost 900 000 in 2037¹. The need for health and social care increases with age, and the number of those aged 85 or over is growing at an even faster rate than those aged 65 plus. In order to meet the health and social care needs of this population, we need to ensure sufficient recruitment of a relevant workforce that is suitably trained and integrated, with the appropriate skills mix available.

General comments

¹ LE Wales (April 2014): Future of Paying for Social Care in Wales. First report to the Welsh Government.





- It is imperative that training and recruitment (as well as funding) address existing gaps in provision. For example, we are aware that in some places older people's services in secondary care, for example older people's mental health services have not been available 24/7, whereas they are available 24/7 for what is known as the working population. The lack of such a service can be highly problematic if an older person with dementia, cognitive impairment or a chronic mental health condition is admitted outside these service hours. It is therefore essential that medical recruitment focuses not just on currently unfilled places, but also upon gaps in the service provision.
- As the Welsh population ages, increasingly frail older people are living with, and managing, multiple co-morbidities. It is therefore important that approaches to recruitment bring together multi-disciplinary teams in primary, community and secondary care, who are able to treat the person holistically. For example, we are aware of problems that have arisen due to people living with dementia being treated for other conditions by staff who are not well trained to deal with symptoms or behaviour that may arise from a dementia. As a consequence, we also believe that dementia care training is fundamental for a medical workforce to treat older people effectively, especially as the number of dementia cases continues to rise and with the recent evidence that dementia is now the leading cause of death in England and Wales. Appropriate support can have a significant impact on quality of life for people managing multiple long-term life-limiting illnesses.
- We would also argue that in light of Wales' ageing demographic profile that there is a need for more geriatric specialists in a range of healthcare professions. For example, we know from data collected by the Wales Cancer Intelligence and Surveillance Unit (February 2016) that the rate of new cancer cases generally increases with age, as does the rate of cancer deaths. We are therefore concerned that more attention should be given the recruitment of staff specialising in providing services, such as oncology, to older people.
- We welcome the recent move towards more innovative and pro-active recruitment campaigns to attract staff to the NHS in Wales, such as 'Work.Train.Live' for GPs and 'Mountain Medicine' from the Emergency Department in Ysbyty Gwynedd. Wales needs to be seen as an attractive environment in which to work, but also in which to live, if staff are to be recruited and retained in post. Such campaigns should be evaluated for the extent to which they have impacted upon recruitment rates to unfilled posts in Wales.

• With regard to the implications of Brexit for the medical workforce, at this point it is not possible to know what the final outcome will be. However, we note that the social care sector has also recruited at least as heavily from the EU migrant workforce. Further aggravating recruitment and retention problems in the social care workforce contains the potential for serious knock-on implications for the experience of staff in NHS Wales, meaning the impact of Brexit on the social care workforce cannot be ignored in this respect.

We hope these comments are useful and would be more than happy to provide further information if required.