

MINUTES OF THE MEETING HELD WEDNESDAY 21ST FEBRUARY 2024

TIME: 6PM – 8PM, **LOCATION:** COMMITTEE ROOM A, TY HYWEL AND MS TEAMS

PRESENT (SENEDD): Jenny Rathbone MS (Chair); Eluned Morgan MS; Sian Gwenllian MS, Sioned Williams MS, Helen Fychan MS, Bronwen Davies – Abortion Rights Cardiff; Tessa Marshall – Breast Cancer Now; Viv Rose – BPAS; Alice Fairman – BPAS; Diana Dobryzynska – BPAS; Caroline Sherf – Cardiff and Vale UHB; Judith Cutter – Cardiff and Vale UHB ; Sarah Thomas – The Fostering Network; Hanna Andersen – WEP; Rachael Joseph – FTWW; Georgina Forbs – Aneurin Bevan UHB, Beth Hales – FTWW; Anna Cooper; FTWW

PRESENT (ONLINE): Amanda Davies – Swansea Bay UHB; Debbie Shaffer – FTWW; Alison Scouler – Socialist Health Association Cymru; Meena Upadhyaya – FTWW; Lucy Grieve – BPAS; Lisa Nicholls – FTWW; Carina Harigan – FTWW; Willow Holloway – Disability Wales; Dr Aimee Grant – Swansea University; Ceilidh Harris Al Amodi – SANDS; Sarah Ford – FTWW; Rosie Walworth – RCOG; Dee Montague – FTWW; Sarah Griffith – Cardiff Metropolitan University; Rachel Hawks – Verity PCOS; Jade Heffron – Endometriosis UK; Wendy Diment; Sofia Gamiero – Cardiff University; Donna Davies – FTWW; Jane Dickson – Aneurin Bevan UHB; Jill Rundle – NWF I Wales Committee; Councillor Jasmin Chowdhury – PHW; Rhiannon John – FTWW; Julie Richards – FTWW; Helen Perry – NYAS; Sarah Anne Evans – FTWW; Louise Evans – FTWW; Jacky Boivin – Cardiff University

APOLOGIES: Sarah Murphy MS, Delyth Jewell MS, Joyce Watson MS, Llyr Gruffydd MS, Rhun ap Iorwerth MS, John Griffiths MS, Becci Frost – FTWW, Jo Whitfield – Beat

1. WELCOME, MINUTES, MATTERS ARISING, AND AGM

Minutes: Minutes accepted.

Matters arising: Letter of response from the Welsh Government about abortion care targets was disseminated amongst CPG members and was noted by people in the meeting.

2. UPDATE ON DEVELOPMENT OF A WOMEN'S HEALTH PLAN

Remarks by Minister for Health and Social Care, Eluned Morgan MS

- Minister thanked everyone for coming along and wanted to discuss positive changes to how women's health is tackled in Wales
- Minister wanted to look through women's lens (not just gynaecology related, but everything including how women are treated when accessing general health services eg heart attacks)
- Minister had started with a Quality Statement on women's health to set out public expectations, and as a tool for health boards to measure women's experiences

- Minister said things have not moved as quickly as she would have liked since 2022, but as she doesn't run health boards, a lot of the responsibility falls rightly to health boards in terms of delivery
- Minister spoke about the Discovery Report released in 2022 and the importance of speaking to women about their experiences. Engagement was undertaken with women across Wales and 4000 responses were logged and will feed into the next phase
- Minister said the new Clinical Lead for Women's Health – Dr Helen Munro – will play a key role in delivering the expectations set out in the Quality Statement
- Work is underway to recruit a Strategic Network Manager to work with the Clinical Lead
- the Welsh Government's message for healthcare remains: *"Make Every Contact Count"*
- There will be a long, medium, and short term delivery plan published in the coming months

3. OPEN DISCUSSION

Sian Gwenllian MS asked if there was a ballpark for when the Women's Health Plan will be published

- Minister stated that it has to be an NHS-led plan. The government had been waiting for the Clinical Lead to be appointed so that they can lead the development of the plan along with other experts
- Minister wants a short term version of the plan published by the end of 2024
- Minister has instructed her officials to redistribute research money to have more money spent on women's health research

Dr Caroline Sherf stated that abortion services were on a knife edge due to the small number of NHS doctors trained to provide care and the lack of succession planning. She asked if something could be done to stop women having to be sent to England for treatment when it's such a common procedure

- Minister stated that she will look at ICPs (*What are they?*) and acknowledged that continuity of abortion care is crucial. She will pick this up urgently with her officials and be back in touch to provide an update

Alison Scouller asked for more information about the Discovery Report phase of the development of the Women's Health Plan

- Minister stated that the government had tried to get in touch with as many women as possible. There was a mix of surveys and follow-up focus groups and they managed to get approximately 3,000 responses

Debbie Shaffer asked more about the Discovery Report too. She spoke about the importance of making sure that patients and advocates co-producing things as often structures in the NHS no longer exist to allow this. She asked for a commitment to emphasise the importance of patient voices within the national strategic clinical network and health boards where voices are so crucial to improving service delivery

- Minister thanked FTWW for their helpful report and said that the contents were reflected back in the Discovery Report

- Minister stated that we want more co-production but also for things to be clinician-led. She hopes that when the Clinical Lead starts she will make inroads on this to take advantage of the numbers of women leaders in health in Wales who are keen to be involved

Anna Cooper spoke about her experience of severe endometriosis which has caused her to lose her bladder and parts of her bowel. She asked what the plans were for improving referrals and wait times in Wales, given that Wales lags behind, with the average time to get an endometriosis diagnosis in Wales was nine years

- Minister was sorry to hear of Ms Cooper's experience with endometriosis and prior to coming into the job wasn't aware of how prevalent it was but has been looking at it and how to drive down waiting lists
- Minister was clear that she didn't want to just focus on diagnosis, but also on the quality of treatment in Wales. She believes that diagnosis and treatment pathways can be worked on individually to strengthen service resilience

Tessa Marshall asked about issues round breast cancer. In particular the high instances of women presenting with symptoms to GPs and the need to commit to better aftercare

- Minister stated there were real opportunities around this, but that since Covid they've had to chase people to attend their breast screenings at an increased rate. Part of improving pathways for women was to make sure increased numbers of women are presenting to the service in the first place

Cllr Jasmin Chowdhury who works as a Public Health Wales practitioner, wanted to know more about which demographics were harder to reach, and raised the MBRRACE report as an example of how we need to make more of an effort with engagement

- Minister agreed that findings of the MBRRACE report are very concerning – particularly around healthcare practitioners and the system not listening to women
- Minister highlighted that a lot more is known now that we didn't know before and we need to embed the changes that are needed in the service

Dee Montague spoke about chronic conditions such as ME and fibromyalgia and the impact they can have. She highlighted the barriers created by so much focus being placed on diet and exercise by the health care service and stated that prevention is sometimes used as a get out of jail free card. Dee asked if the Minister would commit to address these barriers faced and also ask how the social model of disability would be embedded across the healthcare system

- Minister stated that millions had been invested to look at chronic conditions and the impact of Long Covid
Minister understands the point on prevention but that she won't apologise for it as there are many health consequences of being obese and it's right that the healthcare system encourages the reduction of that. She said that sensitivity is important but it is probably Wales' biggest health challenge. She stated that work is underway to embed the social model of disability

Meena Updhyaya commented that genetics and genomics had not been mentioned in the Discovery Report. Meena highlighted that some genetic syndromes only affect women and that for example, women's fertility can be compromised by them, and there are biomarkers that can detect this. She wondered if the power of this is being taken into account within the development of the Women's Health Plan

- Minister agreed that a lot of the issues were connected to genetics and genomics and highlighted that there are a lot of brilliant female geneticists in Wales who are leading the world and we hope that they will work together with the new Clinical Lead to make sure they are included in the work being done

Viv Rose from BPAS echoed what Dr Sherf had said earlier about abortion care. She said that it was concerning that in the last two months they couldn't treat two women for abortion care because they needed specialist treatment. Viv highlighted the difficulties faced by women who had to go to London twice for treatment for such a common procedure

- Minister stated that we are a small nation and it can be hard to have specialists on the everyone's doorstep. She said that she would have a look at abortion treatment in relation to travelling

Sarah Thomas from the Women's Institute stated that less than 70% of women in Wales are attending their cervical screening tests and that there are a lot of barriers. Sarah highlighted different innovative ways that we can reach more people as well as educate the public on the differences between the five gynaecological cancers

- Minister said that she had a lot of conversations recently about how they can bolster the numbers better, and that this would be addressed in the Women's Health Plan

4. AOB

NEXT MEETING: TBC
