PWYLLGOR DATBLYGU STRATEGOL A CHYFLENWI GWEITHREDOL
STRATEGIC DEVELOPMENT AND OPERATIONAL DELIVERY COMMITTEE

DYDDIAD Y CYFARFOD: **DATE OF MEETING:**	16 December 2022
TEITL YR ADRODDIAD: **TITLE OF REPORT:**	Cluster Integrated Medium Term Plan (IMTP) Monitoring Report – Quarter 2
CYFARWYDDWR ARWEINIOL: **LEAD DIRECTOR:**	Jill Paterson, Director of Primary Care, Community and Long Term Care
SWYDDOG ADRODD: **REPORTING OFFICER:**	Julia Chambers, Business and Risk Manager

Pwrpas yr Adroddiad (dewiswch fel yn addas) **Purpose of the Report** (select as appropriate)
Er Sicrwydd/For Assurance

ADRODDIAD SCAA
SBAR REPORT

Sefyllfa / Situation

The Integrated Medium Term Plan (IMTP) is the key planning document for Hywel Dda University Health Board (HDUHB) setting out the milestones and actions we are taking in the next one to three years in order to progress our strategy.

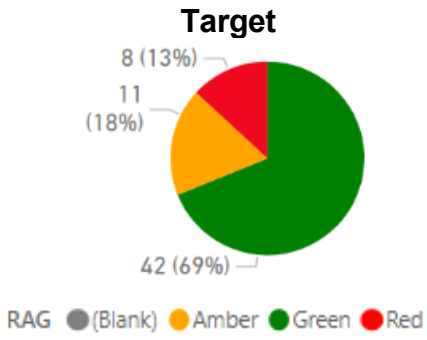
Each Cluster currently has its own IMTP setting out the vision, strategic overview and its priorities, based on the health needs of their population.

Cefndir / Background

Across the seven Clusters IMTPs, 61 objectives were identified for quarterly monitoring. Progress is discussed at each Cluster Meeting and at the Locality Leads meeting.

Asesiad / Assessment

Across the seven Clusters, 61 objectives were identified from the IMTPs. Over two thirds (69%) of these objectives (42) are reporting on target (green) to achieve the outcomes identified.



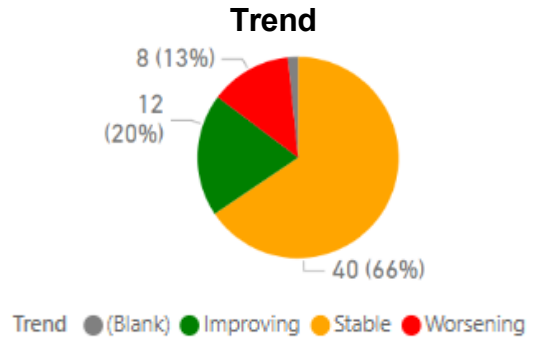
11 (18% of) objectives are of concern (amber) and have identified one or more of the following:

Amber	An amber indicator usually means one or more of the following: -Within 5% of target -A significant forecast overspend against the budget of more than 5% -Delays against critical milestones of more than 2 weeks -Problems with quality, but in the main expected benefits will be realised -Lack of resources which can be resolved by the lead / service -Dissatisfaction or resistance from stakeholders, but this can addressed by the lead / service

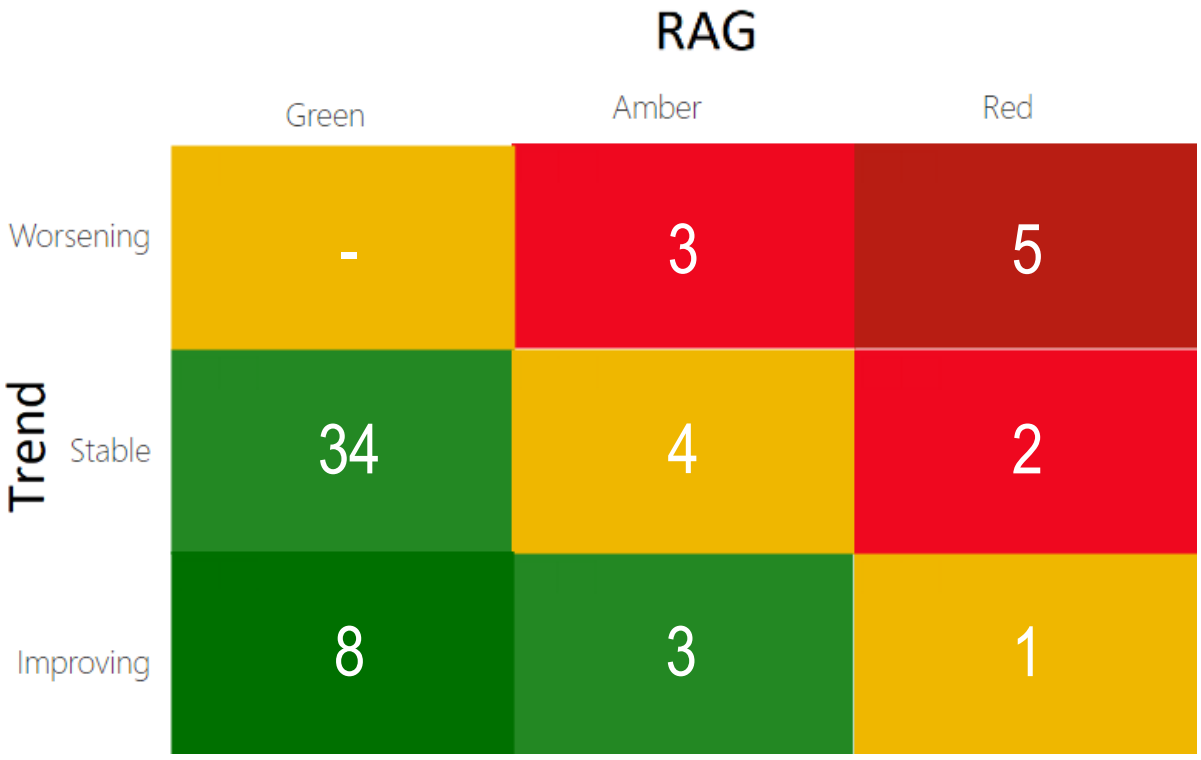
8 (13% of) objectives are of significant concern (red) and have identified one or more of the following:

Red	A red indicator usually means one or more of the following: -Significantly off target -A significant forecast overspend against budget of more than 10% -Delays against critical milestones of more than 4 weeks. -Significant problems with quality and expected benefits won't be realised -Significant lack of resources which cannot be resolved by the lead / service -Dissatisfaction or resistance from stakeholders

20% of objectives (12) have an improving trend (green). 66% of objectives (40) are stable (amber). However, 13% of objectives (8) are deteriorating / worsening (red).



The trend and target (RAG) information will be used to plot objectives on a risk grid (see below). This is used to identify where focused performance conversations are needed. For example, those falling within the green areas are progressing well and no attention is needed. However, those that fall within the red areas should be discussed and assessed to identify what resources / interventions are needed, or indeed if projects should continue if there is no feasibility of achieving their outcomes.



One objective 'IRISi Pilot Domestic Violence and Abuse Training' (TT0004) has an Amber RAG, but no assessment for trend.

Noteworthy improvement is seen for the North Ceredigion project to set up and deliver Community Catheter Clinics (NC0006). During the last quarter this project had been assessed as “red” and worsening; currently it is “amber” and improving. The project is still running with bank staff but is now more stable. The Cluster procured a bladder scanner for trials without a catheter. Measures indicate that patients are usually being seen within one week of discharge and satisfaction rates are high. The only negative comments are around travel time, as the clinic is currently only held once a week at Ystwyth Surgery. More data is needed to establish the exact numbers of patients receiving care in the community. Recent discussions held with the Urology Department who have shared plans around a service rollout that they are hoping to initiate. The Cluster will be working with the Department to compliment this work and further improve patient outcomes.

Appendix A provides an overview of all Cluster projects, including their aim, most recent update, RAG and Trend status.

Argymhelliad / Recommendation

The Strategic Development and Operational Delivery Committee is requested to receive assurance with regard to the steps being taken to ensure progress of Cluster IMTPs through the monitoring and development of their projects.

Amcanion: (rhaid cwblhau) **Objectives: (must be completed)**	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.2 Provide assurance to the Board that the planning cycle is being taken forward and implemented in accordance with University Health Board and Welsh Government requirements, guidance and timescales
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	All Health & Care Standards Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	All Planning Objectives Apply

Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	9. All HDdUHB Well-being Objectives apply

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Not Applicable
Rhestr Termau: Glossary of Terms:	Not Applicable
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Datblygu Strategol a Chyflenwi Gweithredol: Parties / Committees consulted prior to Strategic Development and Operational Delivery Committee:	Cluster Meetings Locality Leads

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Please refer to paper
Ansawdd / Gofal Claf: Quality / Patient Care:	Please refer to paper
Gweithlu: Workforce:	Please refer to paper
Risg: Risk:	Risks will be assessed as part of the ongoing monitoring of the cluster IMTPs.
Cyfreithiol: Legal:	As above
Enw Da: Reputational:	Hywel Dda University Health Board needs to meet the targets set in order to maintain a good reputation with Welsh Government, together with our stakeholders, including our staff
Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	Consideration of Equality legislation and impact is a fundamental part of the planning of service delivery changes and improvements.

Name and Code	Aim	Commentary	RAG	Trend
Two T's				
Support Mental Health needs of our population (TT0001)	Provision of sustained equitable access to Mental Health Services in rural areas. Provision of MIND Active Monitoring Services to ensure the right support at the right time is available for someone with mild to moderate mental health needs in Primary Care Expand MIND Active Monitoring to 11-18 year olds.	Three Mental Health support projects commissioned through MIND are well established within the cluster. These are Community Outreach Clinics,		
Delivery of Mental Health services for young people's mental health across the cluster area with focus on young suicide prevention (TT0002)	Improve awareness, knowledge and understanding of suicide and self-harm amongst the public, individuals who frequently come into contact with people at risk of suicide and self-harm and professionals in Wales. Deliver appropriate responses to personal crises, early intervention and management of suicide and self-harm. Provide information and support for those bereaved or affected by suicide and self-harm. Continue to promote and support learning, information and monitoring systems and research to improve our understanding of suicide and self-harm in Wales and guide action	Community Development Officer appointed and commenced in post on 25th April 2022 and she has commenced networking with local schools and Mental Health Organisations. CDO has also taken part in podcasts, attended Pride Events and the Eisteddfod. Suicide Prevention Overview Training is taking place for GP Practices on 28.09.2022 and further training will follow for other professional teams		
Psychological Breathlessness Support (TT0003)	Improve the capacity of patients to manage symptoms of breathlessness by - Increasing knowledge of breathlessness physiology. - Reducing anxiety associated with breathlessness. - Using behavioural change approaches to enhance functioning and reduce risk of deconditioning.	The Psychology Breathlessness Project has been operational for 18 months, commencing on January 25th, 2021. The multimorbidity approach has hat we have been able to offer psychological interventions to those who otherwise wouldn't have met criteria. This project concluded on 19th September 2022		
IRISi Pilot Domestic Violence and Abuse Training (TT0004)	To provide an evidence-based intervention that improves the general practice response to domestic abuse. Increase identifications and referrals of and for patients affected by DVA. Increase knowledge and awareness and challenge attitudes towards equality and domestic abuse, sexual violence and violence against women	Clinical Lead and Advocate Educator appointed and work has commened on planning a training programme with Practies. The three day training has been completed. PCSM identified as Lead to sit on the monthly steering Group with plan to commence the Operational Group in September. The Clinical Lead SLA and Franchise Agreement has yet to be agreed and signed by the Health Board.		

Name and Code	Aim	Commentary	RAG	Trend
To integrate the Community Cardiology model with Primary Care (TT0005)	Reduction in the number of patients with palpitations and AF managed in Secondary Care and corresponding increase in number of patients with palpitations managed in Primary Care. Increase in availability and provision of relevant cardiology diagnostics in Primary Care. Reduction in pathway waiting time (patient presentation, triage, assessment, diagnosis, treatment plan/discharge) for patients presenting with palpitations and AF. Reduction in number of patients with palpitations presenting/referred to A&E/Secondary Care General Medicine	Cardiology Nurse appointed and palpitation clinics have successfully commenced in each practice. Cardiology Nurse attends MDT with Secondary Care clinicians. Evaluation of this project is currently underway		
Chronic Disease Management Clinics (TT0007)	Increased number of clinics for Chronic Disease Management. Reduction in backlog of patients waiting to be seen. Improved patient care.	CDM catch-up clinics are being held in seven practices. These are for a number of chronic diseases such as Asthma and Diabetes		
Expand Multi-disciplinary team to support frail / elderly population (TT0008)	Enhance MDT team to increase capacity for the assessment and therapeutic intervention of individuals identified as being a cause for concern in regard to frailty and falls within the cluster	Frailty support worker employed who links into GP MDT's to facilitate relevant identification and management of individuals with regard to polypharmacy, medical review and oversight, social prescribing and referral onto other third sector parties. This is likely to reduce attendance at both GP practices within the cluster and reduce hospital admission due to falls and frailty. Multifactorial assessments are undertaken		
Increased training opportunities for Optometrists (TT0010)	Increase the number of optometrists in the Tywi Taf Cluster with higher qualifications. Improved sustainability and sharing the workload across practices	Three new training candidates identified and enrolled on course at Cardiff University		
To reduce the number and severity of outcome of falls within the 2T's locality (TT0016)	To reduce the number and severity of outcome of falls within the 2T's locality	Cluster to recruitment a clinical specialist band 7 Physiotherapist with specialism in falls and frailty to work alongside General Practice to enhance the MDT provision of falls and frailty assessments within the 2T's cluster. The post is currently out to advert		

Name and Code	Aim	Commentary	RAG	Trend
Healthy hearts prevention project aimed at improving whole population cardiovascular health by working in partnership in the 2Ts locality (TT0017)	Healthy hearts prevention project aimed at improving whole population cardiovascular health by working in partnership in the 2Ts locality	This project will be a collaborative project encompassing primary care, community nursing, community pharmacy, dietetics, cardiology, Carmarthenshire County council and public health. The project will be delivered county wide through the use of Band 3 level staff to identify and case find via both practices and community venues coupled with a media campaign. We will aim to improve hypertension management, weight management, alcohol reduction, improved AF management and prophylaxis of primary risk factors of cardiovascular disease to reduce MI and stroke. Post currently out to advert		
Amman Gwendraeth				
My Surgery App (AG0001)	All 8 Practices to be signed-up with My Surgery App by October 2021	All Practices are engaged with the app, all are at different stages of training and implementation.		
Phlebotomy Service (AG0003)	To ensure patients within the cluster have timely access to phlebotomy services.	Practices are able to claim 6 hrs per week from Cluster funds to carry out a Phlebotomy service in Practice. Not all Practices are able to consistently benefit from this due to capacity issues.		
Social Prescribing (AG0004)	To implement a social prescribing service across the Hywel Dda footprint. To develop a social prescribing framework for the Health Board. Produce a common set of outcomes, principles and standards that are equitable but allow for local ownership in how this project evolves. Build on the outcomes identified by ensuring an evaluation approach underpins the model.	There are two Social Prescribing posts within Amman Gwendraeth, one had been vacant since March 2022 following a resignation. The vacant post has been filled and the new post holder started 30 August 2022		
Optometric Independent Prescribing (IP) & Glaucoma Certificate (AG0005)	To increase the number of Optometrists to gain Independent Prescriber status and therefore facilitate the management of patients with acute eye problems within the primary optometric care setting. To increase the number of Optometrists within the locality with advanced training to hold the Higher Glaucoma Certificate	Cluster funding was offered to Optometrists within the Cluster to undertake the IP qualification as well asa Higher Certificate in Glaucoma. 4 Optometrists have enrolled on the the IP course and one is undertaking the Glaucoma certificate. The Optometrists have passed their IP exams. The Optometrist understaking the Higher certificate in Glaucoma is still completing his hospital placement which is taking slightly longer than planned but once complete, the qualification can be awarded.		

Name and Code	Aim	Commentary	RAG	Trend
Shadows Depression Support Group. (AG0006)	To make available low level mental health support for patients who want to self-refer, and decrease medicalisation of these concerns	Shadows Depression Support Group provides mental health support to all eight practices within the Cluster. Shadows is a voluntary organization, whose main aim is to bring people together on a regular basis in a safe and enabling environment to enhance their emotional and mental well-being. All Practices continue to be engaged with the service.		
Dermatology Non-pigmented Lesion Clinic / Diagnostic Uncertainty (AG0007)	To improve timely access to specialist diagnostic skills and minor surgery for patients presenting with dermatological disease	A GP Partner within the Cluster has a special interest in dermatology and as such, provides a dermatology service in which all Practices within the Amman Gwendraeth Cluster can refer into directly. All Practices continue to be engaged with the service. Following agreement to increase funding to increase service provision in April 2022, this has been put on hold until 2023/24 in line with other cluster financial commitments.		
Mental Health Practitioners (AG0008)	To support patients with skilled non-medical assessments with knowledge of the wider NHS and third sector mental health service landscape. To free up GP time	The project is universally very well received by Primary Care teams and patients and has improved sustainability of practices. Having a Mental Health Practitioner in Practice has automatically reduced the number of referrals to the mental health team and has also prevented GPs from having the gatekeeper role in respect if these patients. The project has a red RAG rating as the practices who currently 'host' the Practitioners are unable to continue to do so beyond the end of November which is when the current SLA expires. As such, notice has been served to the Practitioners as core funding to continue with the service has not been identified. Two of the three Practitioners have resigned, one continues to work part time for the cluster. The cluster has engaged with a locum MHP to provide some cover until the project expires at the end of November.		

Name and Code	Aim	Commentary	RAG	Trend
Jac Lewis Foundation (AG0009)	We want to provide patients and their families with a real and constructive opportunity to receive appropriate mental health help in a helpful timeframe. We wanted more help for children and their families	The Jac Lewis Foundation provides mental health support to both children and adults to all Practices within the Cluster. JLF provide and train specialist adolescent therapists and can deliver family and play therapy. They utilise the most suitable therapeutic inervention tailored to the patients needs including CBT, counselling, other psychotherapeutic approcahes, trauma focused work, group working and EMDR. All Practices continue to be engaged with the service with high numbers of referrals. Following a multi quite exercise earlier this year, JLF have now implemented a walking group within their service which isled and structured by counsellors/play therapists/family therapists as required.		
IRISi Pilot Domestic Violence and Abuse Training (AG0010)	To provide an evidence-based intervention that improves the general practice response to domestic abuse. Increase identifications and referrals of and for patients affected by DVA.	Clinical Lead and Advocate Educator appointed and work has commened on planning a training programme with Practies. The three day training has been completed. PCSM identified as Lead to sit on the monthly steering Group with plan to commence the Operational Group in September.		
Lifestyle Clinic (AG0011)	To offer practical and evidence-based access to dietary and clinical advice and support to decrease disease burden from obesity	The Lifestyle Clinic combines the expertise of an MDT led by a Cluster GP and a holistic approach to weight loss to educate and support patients to make better lifestyle choices. The project has evidenced a decreased need for diabetes medication with an emphasis on sustaining health benefits. All Practices continue to be engaged with the service, referral numbers continue to increase. Dr Frater has almost finished writing her education course in lifestyle medicine and is looking for interested clinicians who want to learn more about this work; Dr Frater has already been asked by many clinicians to observe clinics or for further information. The Health Board submitted an Obesity Bid to the Strategic Programme Fund which was subsequently approved, based on this project to enable it to be scaled up Health Board wide.		

Name and Code	Aim	Commentary	RAG	Trend
Generic Community Occupational Therapy / Physiotherapy Technician - (AG0013)	To bring basic generic tech skills into primary care to help patients to maintain independent living	The Generic Technician came into post on 30th May 2022 and has integrated into Practice MDTs and is receiving appropriate referrals		
Cluster Pharmacist (AG0014)	Rapid clinically safe reconciliation of discharge medication. Improved governance for repeat prescribing for those patients as seen under the project. Fast access to pharmaceutical advice for General Practitioners. Improved cross sector working	One of the Cluster Pharmacists resigned from the post on 13 July 2022. The post has subsequently been advertised twice, an offer was made to one candidate who declined. The post is in the process of going back out to advert and in the meantime, the effected Practices have been allocated the funding to use a locum pharmacist where available.		
Persistent Pain Service (AG0015)	Bring specialist pain services knowledge and MDT working into primary care for timely case management and clinician support and learning	Physio and Clinical Psychologist have been recruited. Physio came into post 25 April and Clinical Psychologist has a start date of 10 October 2022. Vacancy for Specialist Pain Pharmacist has gone out again. Depending on the outcome, potential to revise the MDT to include a Nurse Specialist instead. Pain Management Programmes are now up and running.		
Healthy hearts prevention project aimed at improving whole population cardiovascular health by working in partnership in the AG locality (AG0016)	Healthy hearts prevention project aimed at improving whole population cardiovascular health by working in partnership in the AG locality	The HCSW vacancies have been advertised with very little response, only 4 applications for 6 posts across Carmarthenshire. one candidate was invited to interview but later withdrew from the process. The posts are currently in the process of going back out to advert.		
Llanelli				
My Surgery App (LL0002)	All 7 Practices to be signed-up with My Surgery App by August 2021	Six out of the seven Practices signed up to My Surgery App and are using it to engage with patients. Ongoing engagement required this year to ensure this digital communication package is utilised to its full potential and linked in with Practice and Cluster websites.		

Name and Code	Aim	Commentary	RAG	Trend
IRISi Pilot Domestic Violence and Abuse Training (LL0004)	To provide an evidence-based intervention that improves the general practice response to domestic abuse. Increase identifications and referrals of and for patients affected by DVA.	Clinical Lead and Advocate Educator appointed and work has commened on planning a training programme with Practies. The three day training has been completed. PCSM identified as Lead to sit on the monthly steering Group with plan to commence the Operational Group in September. The Clinical Lead SLA and Franchise Agreement has yet to be agreed and signed by the Health Board.		
Physiotherapy MSK project (LL0005)	Work as an independent practitioner, accepting patients without prior contact or referral from their GP Offer a triage and treatment service for patients who present in the GP practice with a range of complex and common MSK conditions. Manage MSK referrals, including complex conditions that can be most appropriately managed within the surgery Work with GPs and other colleagues to develop and improve referral patters, including reducing pressures on secondary care services (including orthopaedics, rheumatology and pain	Two Physiotherapists are engaging well with all seven Practices in the Cluster. The current demand is manageable.		
Mind Llanelli (LL0006)	Continued to provide an equitable service throughout the cluster Keep access and waiting times to a minimum	Adult counselling and well-being work is ongoing and supported by all seven Practices. Demand for the service is continually monitored to prevent significant waiting times for patients or inappropriate referrals.		
Family Wellbeing Service provided by Connecting Youth, Children and Adults (CYCA) (LL0007)	Continued to provide an equitable service throughout the cluster Keep access and waiting times to a minimum	Children and Family Social Prescribing, counselling and well-being work is ongoing and supported by all seven Practices. Demand for the service is continually monitored to prevent significant waiting time for patients or inappropriate referrals.		
Community Pharmacy Mental Health and Wellbeing Project (LL0008)	The Community Pharmacy Mental Health and Wellbeing Project will be a service offered to all adults in the Llanelli Cluster who have been newly prescribed a Selective Serotonin Reuptake Inhibitor (SSRI) antidepressant by their GP. Community Pharmacy dispensers and technicians will deliver the service when patients attend the Pharmacy to collect their medication. The project will specifically offer a Mental Health check providing an opportunity for a supportive conversation, medication advice and signposting to other Cluster services.	Uptake to the service has been slow and changes made to the service spec following consultation with local Community Pharmacy representives. CPW have agreed and support the changes. Meetings have commenced with the Deputy Chief Pharmaceutical Officer for Welsh Government who are keen to discuss the project with regards to progressing to Hywel Dda Health Board wide and eventually All Wales. This project is currently in the Bevan Commission programme.		

Name and Code	Aim	Commentary	RAG	Trend
Healthy hearts prevention project aimed at improving whole population cardiovascular health by working in partnership in the Llanelli locality (LL0017)	Healthy hearts prevention project aimed at improving whole population cardiovascular health by working in partnership in the Llanelli locality	Healthy Hearts steering group meeting regularly and progressing work plan. Recruitment drive has not been successful. For the 6 posts on 4 individual applied and only 1 was shortlisted for interview. Plan to go back out to advert and increase awareness of posts.Launch date will be delayed and the communication plan has been delayed by a month to November/Dece,ber 2022.		
North Ceredigion				
To provide counselling services for children ages 13-17 & 18-30yrs (NC0001)	To provide counselling services for children and adults when they need it.	Area 43 is running the service on an extended contract until March 2023. From March 2023, the cluster is looking to procure a service for another year and combine with South Ceredigion. We are also in conversation with the mental health team around their procurement exercise which they are currently undertaking.		
My Surgery App (NC0002)	All 7 Practices to actively signpost their patients and staff to use this app	The app is now funded through the practice's with a cluster login for projects. However, no more funds are available to support the project with practice's agreeing to pick up the costs.		
To provide online registration process for new registrants via Campus Dr (NC0003)	To reduce footfall into the surgery for registrations of new patients onto the Practice list. Practices to encourage use of the electronic registration form for all patients	This is the final year of funding from the cluster for campus doctor but the project has worked well. The cluster has now been working with Aberystwyth University in streamlining the process for new students, in which there are a few thousand every autumn.		
Continue to deliver Physiotherapy in General Practice (NC0005)	To continue to provide triage and treatment service for patients who present in the GP practice with a range of complex and common MSK conditions. To understand the impact, demands and constraints of service provision	There have been some issues with the recruitment of a 1.0 WTE as it has not gathered the number of suitable applicants as we would have hoped. The physio team are exploring an agency model but in the mean time we are expanding our persistent pain service clinic.		
Set up and deliver Community Catheter Clinics (NC0006)	To set up the clinics in Aberaeron and Aberystwyth to serve the whole cluster population. To provide timely checks and intervention	The project is still running with bank staff but is more stable with a bladder scanner for trials without catheter and discussions have been ongoing with the community nursing team about them taking on the service. This will be from March 2023.		

Name and Code	Aim	Commentary	RAG	Trend
To provide one stop health checks at Gorwelion (NC0008)	To support and work with the mental teams to ensure those with severe mental health needs are able to access physical health checks regularly and with staff they know	The clinic is now running with a steady increase in patients seen month on month. Equipment for the clinics has been ordered and has been delivered. The cluster lead and PCSM have a planned visit to the centre this quarter.		
Haul Arts for wellbeing Artpacks & creative writing (NC0009)	To support those with mental health issues through a social prescribing intervention	The project is working with patients who are isolated and the cluster are in discussion with the project in opening up the service or expanding to other patient groups.		
Psychology in Primary Care – Cardio-vascular (NC0010)	To support individuals to make healthy lifestyle choices through the bio-psycho-social model	The project is ongoing with a steady stream of referrals. The cluster have submitted a bid form to the panel to look at cancer care using technology. The cluster are awaiting a decision and the project is slowly winding down with patients.		
Open Eyes initiative in Optometry (NC0013)	To support our optometrists to deliver the Open Eyes initiative	There has been some progress with the project as all training, equipment audits and policy have been completed. A rollout date hasn't been announced but the cluster Optometry lead is speaking regularly with the PCSM.		
Singing for lung health (Skylarks) (NC0014)	To support individuals with lung conditions & breathlessness	The project is running well with a core group of around 20 members attending. The PCSM attended the most recent session and was able to meet the participants. The cluster communications officer has been to the service and is preparing communications to share wider with the locality.		
Psychology in Primary Care - Chronic pain management (NC0015)	To support individuals with chronic pain to manage their pain through a bio-psycho-social model	The bid panel have agreed to extend this project to include a multi disciplinary team that will expand pain support. The roles are now out to advert with interest shown in all posts thus far. There are concerns that we may not be able to recruit a pharmacist to the cluster but we are looking at alternatives should that be the case.		
South Ceredigion				

Name and Code	Aim	Commentary	RAG	Trend
Physiotherapy in General Practice (SC0003)	Work as an independent practitioner, accepting patients without prior contact or referral from their GP. Offer a triage and treatment service for patients who present in the GP practice with a range of complex and common MSK conditions. Manage MSK referrals, including complex conditions that can be most appropriately managed within the surgery. Work with GPs and other colleagues to develop and improve referral patterns, including reducing pressures on secondary care services (including orthopaedics, rheumatology and pain clinics) and linked community services.	The physiotherapist is engaging with all practice's and work is ongoing about expanding the physio offer in South Ceredigion.		
Area 43 Online Counselling Service for 16 – 25 year olds (SC0009)	Area 43 provide an ongoing service which is supported by all five practices	The project has officially ceased as of October 2022 but the board have agreed to extend the contract until the end of March 2023. The procurement team are finalising their checks before notifying the supplier.		
Frailty Team (SC0010)	Frailty Team continue to accept referrals from all 5 practices via regular practice based MDT meetings. Both B7 Frailty Nurses now permanent staff members	The demand for the service is high but work is going on with the frailty team to recruit a HCSW to help with the demand and service requirements.		
North Pembrokeshire				
Cluster Pharmacist (NP0001)	Rapid clinically safe reconciliation of discharge medication. - Improved governance for repeat prescribing for those patients as seen under the project. Fast access to pharmaceutical advice for General Practitioners. Improved cross sector working	Project ongoing and started the Bevan Exemplar		

Name and Code	Aim	Commentary	RAG	Trend
Improved Multi Disciplinary Team working through employment of Care Co-ordinators (NP0003)	To improve lines of communication between the community hubs (Intermediate Care Team and Integrated Community Team) and General Practice and support the continued development of joint Community and Primary Care models of working. To understand ways of working in both General Practice and the Community; bringing together these, to promote a new level of understanding and share purpose in all of the multi-disciplinary roles across Primary and Community Care. Care Co-ordinators will be encouraged to form a strong relationship with their counterparts in the Intermediate Care Hub to improve and enhance the patient journey and to bring professionals together to speed up the responses to patient need.	Currently no service in place. We are currently working towards recruitment of 2WTE to work 25hrs role. We are working with the Service Delivery Manager within the County team		
Provision of a Dietetic Led IBS Service in Primary Care (NP0004)	It is proposed that the specialist Dietitian will work across the cluster to agree an alternative dietetic led pathway for the management of newly diagnosed patients with IBS. This will include the delivery of group sessions as well as specialist dietetic clinics delivered in line with evidence based guidance and practice. The Dietitian will work within a governance framework and will be supported by the Dietetic service. Outcomes will be evaluated and reported through the cluster and Healthier Pembrokeshire Operational forum. Timely access to support for patients. Improved patient outcomes and quality of life. Reduction in number of GP appointments in relation to IBS. - Reduction in demand on Gastroenterology. Reduction in cost due to changes in investigation and prescribing	Project has finish. I am awaiting an evualtion report which will be due in Dec 22 to the cluster.		
Improve access to low level mental health services (NP0006)	Continued to provide an equitable service throughout the cluster. Keep access and waiting times to a minimum. Improve access to services for the population. Extend the current project to enable access for patients with low level mental health needs or with underlying non-medical needs to deal with a range of issues such as housing, welfare benefits and debt	RIF funding has been agreed for the partners for Journey project Nov 2022 to continue this approach of working for additional 2 to 5 years.		

Name and Code	Aim	Commentary	RAG	Trend
Physiotherapy in General Practice (NP0007)	Work as an independent practitioner, accepting patients without prior contact or referral from their GP. Offer a triage and treatment service for patients who present in the GP practice with a range of complex and common MSK conditions. Manage MSK referrals, including complex conditions that can be most appropriately managed within the surgery Work with GPs and other colleagues to develop and improve referral patters, including to reduce pressures on secondary care services (including orthopaedics, rheumatology and pain clinics) and linked community services.	No service Currently . We have recruited on the 3rd attempt for a 8a Physio who is going to be on M/L until August 23 and we have recruited to a B7 post. We are going to be going back out again for additional support as a fixed term post/secondment. We are currently in conversations with Physio around the model of working.		
Bowel Screening (NP0008)	Predicted 30% uptake increase following implementation	Project is completed		
eye care services (NP0010)	To increase the number of Optometrists to gain Independent Prescriber status and therefore facilitate the management of patients with acute eye problems within the primary optometric care setting. To increase the number of Optometrists within the locality with advanced training to hold the Higher Glaucoma Certificate	Started the courses and attending university.		
Increase access to defibrillators within the Community (NP0011)	Each Primary Care Optometry Practice within the North Pembrokeshire Cluster will be equipped with an Automated External Defibrillator with up to 4 people from each practice attending hands-on basic life support / CPR training event which includes use of AED's.	The Defibs have been order.		
South Pembrokeshire				
MSK PHYSIOTHERAPY (SP0002)	Work as an independent practitioner, accepting patients without prior contact or referral from their GP. To support one IP Training with the MSK Physio Offer a triage and treatment service for patients who present in the GP practice with a range of complex and common MSK conditions. Manage MSK referrals, including complex conditions that can be most appropriately managed within the surgery Work with GPs and other colleagues to develop and improve referral patters, including to reduce pressures on secondary care services (including orthopedics and rheumatology and pain clinics) and linked community services	B7 now in post since September 22 and this gives us additional session's and more capacity to manage the demand. All 5 practices are using the service and engaged well.		

Name and Code	Aim	Commentary	RAG	Trend
Cluster Pharmacist Respiratory IP (SP0003)	Identify and safely manage according to National guidelines at risk asthma and COPD patients in the South Pembrokeshire cluster Reduce the workload on Primary and Secondary Care during the current crisis through optimal maintenance treatment and equipping the patients with the tools via asthma action or COPD management plan to manage a worsening condition themselves whenever possible. Building relationships with Secondary Care Level, Community Pharmacy/EPP	The project is due to end at the end of Nov 22. The clinical session have been reduce due to the capacity within the project. 4 out of 5 practices are engaging with this project		
Cluster Youth Resilience Project Children aged 8 to 18 years of age (SP0004)	ExamThe service would be a resilience based therapeutic service for children and young people. The service will be systemic and would support extended family members to help the child recover from emotional distress, "A Family Wellbeing Service" "Early intervention and prevention for children and young people in improving resilience and wellbeing: 85% by March 2022 The focus of the support will be the child, but the support offered will need to be mirrored in the home environment to ensure the child receives reinforced messages to improve wellbeing. The service would need to provide individualised package of support focussing on the stress triggers that impact on the child's wellbeing. Collection of data and case stories	We are out for recruitment for a third time for a Band 6 role. We have a meeting planned with the Mental Health Team to discuss options if we are unsuccessfully, as we have another option to look at for delivery of the service. We are also working with the transformation team regarding the evidence and Evalution of the project. We currently have no service in place.		

Name and Code	Aim	Commentary	RAG	Trend
Cluster South Pembrokeshire Integrated Community Team Building Capacity (SP0009)	Identify Patients with long-term conditions who attend the GP practice or engage with multiple organisations frequently to proactively develop a care plan to mitigate unwarranted access demand across the system, or those who fail to engage with the Practice entirely to proactively develop a care plan to mitigate acute/emergency access demand across the system. Diabetes, COPD, Cardiac Referral via the CRT/MDT To build on the existing integrated teams with new or additional roles to enhance multi-professional approaches to care stratification, co-ordination and delivery. To specifically support identified population health needs to increase "Time spent at home" particularly for those people not actively reviewed within the existing MDTs:	All five practices are engaged with the project. The members of this team are working with all practice CRT meetings as a allrounder provision of proactive Care and Care Planning. We are meeting as a group on 17th October 22 to have a workshop meeting as a reflection of 1 year project.		
MIND/CAB Partners for the Journey. (SP0010)	Extend the current project to enable access for patients with low level mental health needs or with underlying non-medical needs to deal with a range of issues such as housing, welfare benefits and debt	All 5 practices, all cluster stakeholders, optom, dental, pharmacy and HDUHB are engaged with this project. We are currently working with Comms to showcase this project and it has been successful in receiving funding for the next 2 years from RIF funding, which will start from Nov 22. This is a joint project with North Pembrokeshire.		
Cluster Pembrokeshire Referral Review Project: (SP0011)	Undertake a referral audit for 4 weeks to identify opportunities for primary care led referral management	Currently out to multi quote		
Championing Learning Disabilities: (SP0012)	To upskill cluster staff in learning disability (LD) awareness, and to develop meaningful engagement with the LD community in the area. LD Champions in each practice Education sessions Open day Event	Multi quote has been awarded and the project is due to start on the 25th October 22, with the 1st Training session due to take place. All 5 practices are involved with this project and the training has been offer to Optom, Pharmacy and Dental for LD champions Training		
Independent Prescribing Primary Care Optometrist (SP0013)	To increase the number of Optometrists to gain Independent Prescriber status and therefore facilitate the management of patients with acute eye problems within the primary optometric care setting. To increase the number of Optometrists within the locality with advanced training to hold the Higher Glaucoma Certificate	Optom is still trying to work with a Secondary Consultant within HDUHB to complete his course of hours worked with a consultant, which is proving to be difficult - He is looking to broaden his scope to work with a another colleague in another HB to gain the experience needed for him to complete this course.		