

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

DYDDIAD Y CYFARFOD: DATE OF MEETING:	27 February 2025
TEITL YR ADRODDIAD: TITLE OF REPORT:	Primary Care and Community Strategic Plan
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Jill Paterson – Director of Primary Care, Community and Long-Term Care
SWYDDOG ADRODD: REPORTING OFFICER:	Rhian Bond – Assistant Director of Primary Care

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Gwybodaeth/For Information

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

Hywel Dda University Health Board (HDdUHB) is committed to developing a Primary and Community Services Strategic Plan that supports the shift left of services and resources, bringing care closer to home for our residents.

Following a presentation to the Executive Team on 11 December 2024 it was agreed that a further iteration of the model for Primary Care and Community Services should be considered at a Board Seminar on 20 February 2025.

Cefndir / Background

Since May 2024 work on developing a Primary and Community Services Strategic Plan has included the development of both a Primary Care and a separate Community Services Issues report, as well as both public and workforce engagement.

Themes from the Primary Care issues paper included:

- The structure of Primary Care within the wider health service e.g. recognising the independent contractor status and the contractual Regulations that need to be adhered to.
- Funding: the framework, constraints, and drivers for the four contractor services and the impact they can have on wider service delivery and commissioning.
- Workforce: the lack of consistent and reliable data on the Primary Care workforce, and the challenges inherent in understanding, and addressing the current and future requirements for our population.
- Outcomes and experience measures: the scarce amount of patient level outcomes and experience data sets to help inform an assessment of quality is not included in the contractual Regulations.
- Estate: the poor condition of accommodation for Primary Care services, both for independent contractor GP Practices as well as Health Board Managed Practices. Estates information on contractors other than GP Practices is limited.

Themes from the Community issues paper included:

Finance: *understanding the Community Services funding over time, including the main external funding available to Community Services:*

- The overall financial picture for Community Service in scope for this issued paper shows a clear split in spend between pay related and non-pay related costs.
- Overall cumulative underspend against allocated budgets is wholly a result of pay related budgets being under-utilised. The shift from variable pay and the increase in spend in relative terms to pay-related posts does suggest that there is an increase in recruitment overall, but there remains a challenge to recruit sufficient staff to the service
- Non-pay related spend has been consistently over budget. The areas in question are most impacted by inflationary pressures and market force.
- Continuing Healthcare Care is a large proportion of the total budget and as a statutory duty is challenging in terms of meeting service demand whilst operating in a market driven sector.
- Drugs, clinical supplies and service-related expenses – including community staff travel mileage expenses – are directly correlated to the acuity of the patients in need of care and the length of time people are cared for in their own home or in a placement. The shift left – to care closer to home and instead of care within an acute setting will challenge the budgets accordingly.

Workforce: *who works to deliver Community Services:*

- There is a challenge for the Health Board to ensure that long term sustainable funding is identified to support the development and modernisation of the Community Services workforce. The Regional Integrated Fund (RIF) funding (due to end in 2027) currently supports 146 posts within the Community Services workforce, however plans are in place through the County teams to ensure that the budgetary position takes these posts into account.
- There is a challenge in recruiting to vacant posts with the Community Services workforce and has the potential to impact further progress towards moving away from acute service provision, to providing more services within the community setting.
- Over a quarter of the Community workforce is projected to retire within the next decade. Most potential retirees work within the nursing and midwifery services; both of which form the main staffing cohort of Community Services.

Estate: *where Community Services are delivered in Health Board premises:*

- The desire to work with Primary Care services – GMS in particular – is negatively impacted by the poor conditions noted in the Primary Care Issues Paper.
- There is varying reliance on acute and community hospital sites depending on the current Health Board stock. Any changes to acute settings will have an impact on Community Services that are provided from the acute settings and should be factored into any developments on site use.
- The Health Board services a relatively small population, spread across a large and rural landmass. The desire to provide care closer to home and or in the home must factor in the travel costs and travel time for the workforce and the accessibility challenges of a deeply rural population.

The Primary Care and Community Services Strategy Development Group has been meeting on a monthly basis and has received the reports of the working groups that supported in developing the information packs prior to the engagement events. As the work to develop the Strategic Plan is now moving into a new phase of development, the meeting structure has been

redrafted to support the direction of travel; this will be reviewed and agreed by the Group when it meets in February 2025.

The Primary Care and Community Services Strategy Development Group reports into A Mid and West Wales Working Group and provides assurance reports into Strategic Development and Operational Delivery Committee (SDODC) as required. The work being undertaken aligns to the national focus on a refresh of the Primary Care Model for Wales which is being led by the Strategic Programme for Primary Care. It is however important to note that contract negotiations across the four professional groups continue to be undertaken on a rolling basis and as such there remains a requirement for the Health Board to commission and deliver services in line with Directions and Regulations.

Asesiad / Assessment

Following a discussion with the Executive Team in December 2024, a further report will be presented to a Board Seminar on 20 February 2025 setting out the vision for the future development of Primary and Community Services which has been developed and refined through a series of discussions and meetings as well as taking into account the feedback from the public and workforce engagement.

To support this vision a Clinical Reference Group (CRG) will be established. The CRG will be tasked with a series of questions to test out the potential scope and scale of services that could be commissioned or delivered differently in a Primary Care or Community setting.

The areas for **public and workforce engagement** will focus on:

- The provision of sustainable General Medical Services, supporting the further development and implementation of the Primary Care Model for Wales and following the principles of delivering Care Closer to Home
- Expanding the provision of services available at Community Pharmacies
- Investment of the General Dental Services budget to improve access to routine care and the oral health preventative agenda
- Support the transformation of eye care services making the most of the opportunities to shift care into Optometric Practices
- Working in a cohesive way across traditional “in hours” care, Community Services and the Out of Hours service to streamline working systems to move to a 24/7 model

The **Primary and Community Services Clinical Reference Group** will be asked to:

- Consider which clinical areas where care has traditionally been provided in Secondary Care can be pulled into Primary and/or Community Service delivery
- Consider the services traditionally delivered in GMS that can be moved out to other contractors with their agreement to expand the range of services delivered across professional groups
- Consider the chronic disease management pathways and how best GP Practices and Community Pharmacies can deliver planned and cohesive care to patients that improves clinical outcomes
- The specialist services that could be commissioned and delivered at Cluster level (remembering that Cluster services span health and social care) evidencing the impact that this would have on population health
- The scope and range of services that could be commissioned through Personal Dental Services Agreements with the Community Dental Service to improve accessibility to routine and preventative dental care

The scope and extent of clinical pathways that can be developed in Optometric practices or through the establishment of outreach clinics

Argymhelliad / Recommendation

Members are asked to:

- **NOTE** the report for information as work progresses to develop a Primary and Community Services Strategic Plan

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.6 Seek assurances on the development and implementation of a comprehensive approach to performance delivery and quality management, to incorporate all performance requirements set by the Board, WG, regulators and inspectors, that enables all staff with managerial responsibility to strive for excellence whilst effectively delivering the basics.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	6. All Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable
Amcanion Cynllunio Planning Objectives	7 Primary and community strategic plan
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	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

Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Datblygu Strategol a Chyflenwi Gweithredol: Parties / Committees consulted prior to Strategic Development and Operational Delivery Committee:	Executive Team Board Seminar AMWWG

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Not applicable
Ansawdd / Gofal Claf: Quality / Patient Care:	Not applicable
Gweithlu: Workforce:	Not applicable
Risg: Risk:	Not applicable
Cyfreithiol: Legal:	Not applicable
Enw Da: Reputational:	Not applicable
Gyfrinachedd: Privacy:	Not applicable

**Cydraddoldeb:
Equality:**

Not applicable