

**CYFARFOD BWRDD PRIFYSGOL IECHYD
UNIVERSITY HEALTH BOARD MEETING**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	30 May 2024
TEITL YR ADRODDIAD: TITLE OF REPORT:	Update on the Development of a Strategic Plan for Primary Care and Community Services
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Jill Paterson, Director Primary Care, Community and Long-term Care
SWYDDOG ADRODD: REPORTING OFFICER:	Rhian Bond, Assistant Director Primary Care

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Penderfyniad/For Decision

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

In March 2024, the Clinical Services Plan (CSP) completed its first phase, with the publication of a comprehensive Issues Paper [CSP Issues Paper](#), focussing on 10 pathways, including Primary Care and Community Services. The CSP was instigated in recognition of the services in Hywel Dda facing sustainability issues. Primary Care and Community Services was included as part of the CSP due to the fragile nature of Contractor services. The Issues Paper primarily focussed on the four Contractor Services (GP Practices, Community Pharmacy, Dental and Optometry), as well as Out of Hours and Community Dental Services. The remaining nine pathways are progressing to phase two due to their shared outcome; namely options development to implement new models of services for the medium term. The medium term is described as between two to four years.

Unlike the other pathways within the CSP that have a focus on a single clinical pathway, Phase 2 for Primary Care and Community Services is focussed on delivering a different, but no less challenging outcome. The main objective is the development of a Primary Care and Community Strategic Plan for west Wales, aligned with the philosophy and direction set out within the Health Board's strategy 'A Healthier Mid and West Wales'. The size of the scope and the remit of this plan cannot be underestimated when seeking to deliver a Health Board wide strategic plan that needs to take into account national strategic direction, policy and contract negotiations across four contractor services as well as through directly employed services such as the Community Dental Services and Community teams.

Cefndir / Background

Phase 2 of the development of the strategic plan is building on a body of information secured from undertaking the development of the Primary Care Issues paper. In taking forward the development of Phase 2, there are two key components that will be running in tandem over the summer months: a review of the Primary Care issues (five key themes) across Community Services to identify any differences and/or gaps; and a period of engagement.

Our long-term strategy, 'A Healthier Mid and West Wales', sets out the Health Board's long-term ambition to shift the model of care towards prevention, primary care and services closer to

home, emphasising a 'social model' of health. The overarching aim for the development of the Strategic plan is, therefore, to identify the 'how' (how we will deliver services, how we will meet the challenges we as an organisation are facing) by using the 'what' and the 'why' that are already set out in 'A Healthier Mid and West Wales' and national and regional strategies. Given the breadth of primary and community services, the development of plans will need to consider all related programmes of work, for example the 6 Goals Strategic programme for urgent and emergency care.

The strategic plan to be developed will need to articulate what the future model of Primary and Community Services could look like and how it will be delivered, whilst ensuring we have a safe and effective system for our population. The Health Board's Annual Plan 2024/25 identifies the following areas of focus, many of which were identified in the development of the issues paper (below):

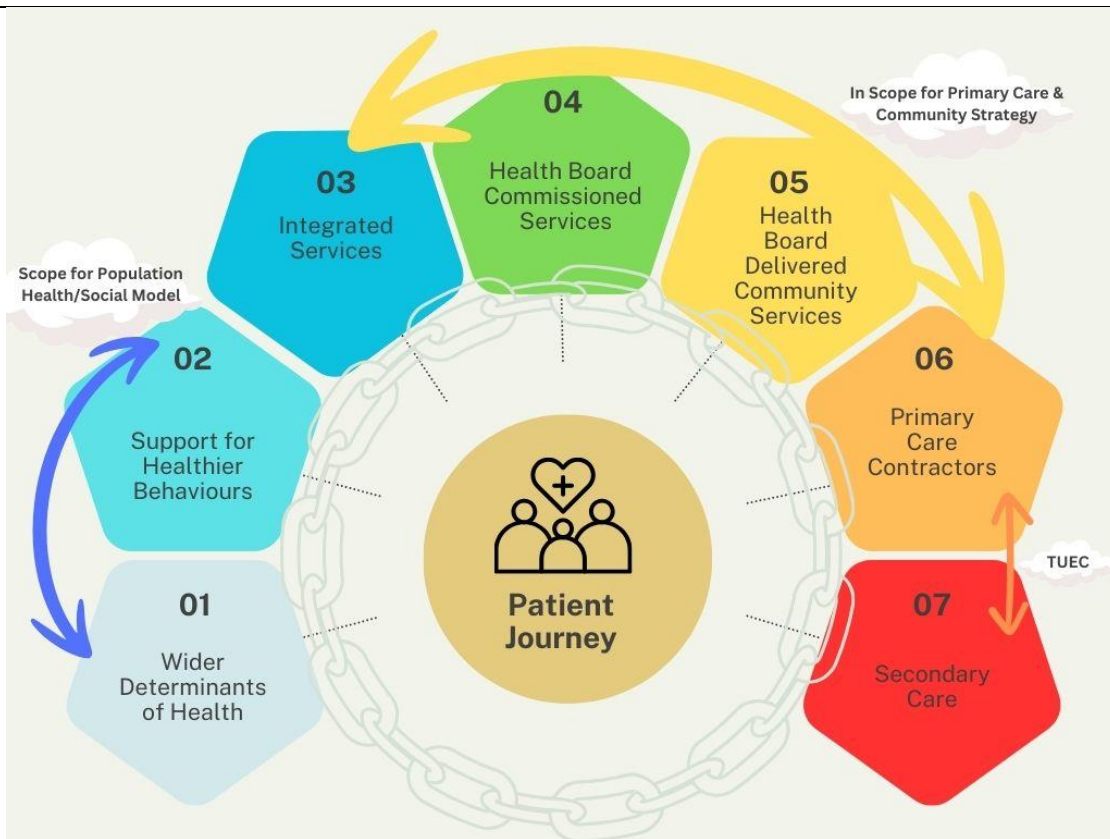
- The enhancement of primary care services
- The adoption and integration of technological solutions
- Workforce development
- Infrastructure and estate development
- Alignment with community services
- The development of cluster-based 'how-to' plans to determine themes/areas to be addressed within a strategic document
- Appraisal of strategic plan to determine viability for implementation
- Preparation for engagement or consultation as required

Themes from the Issues paper

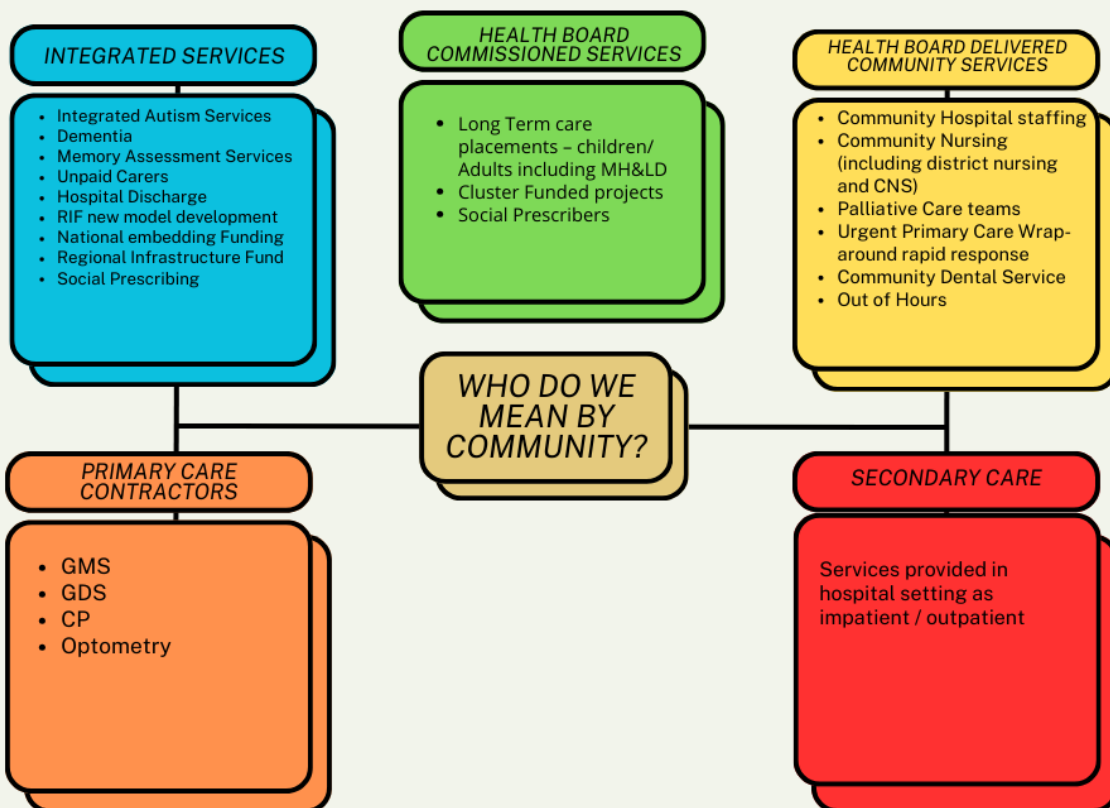
1. The structure of Primary Care within the wider health service
2. Funding: the framework, constraints and drivers for the four contractor services and the impact they have on wider service delivery
3. Workforce: the lack of consistent and reliable data on the Primary Care workforce, and the challenges inherent in understanding, and addressing the current and future requirements for our population
4. Outcomes and experience measures: the scarce amount of patient level outcomes and experience data sets to help inform an assessment of quality over and above what is contractually required
5. Estate: the poor condition of accommodation for Primary Care services, both contracted and delivered by the Health Board

It is important to note that the scope of the Primary and Community Services Strategic Plan is not itself a definition of "Community" and that the work of other planning objectives (e.g. PO 10: population health) is integral to the successful delivery of the Strategic Plan.

The services in scope for the Strategic Plan are illustrated below.



Furthermore, the illustration below outlines some of the services that will inform the development of the Strategic Plan. This is by no means an exhaustive list; however, is a starting point for discussion and engagement at both Cluster and Health Board level.



The development of the Strategic Plan will adhere to the following overarching principles:

- Independent contractor status is recognised as the preferred vehicle for the commissioning and delivery of Primary Care services where possible
- The Strategic Plan will define the level and range of service provision that can and should be provided within Primary Care and Community services, and will inform workforce planning, training and development
- The Strategic Plan will define “the offer” to Contractors that is outside of the contractual scope to support sustainable service provision
- Future estates developments (integrated hubs etc) are developed to support the delivery of the Strategic Plan and in support of sustainable Primary Care and Community provision
- Determinations on minimum/maximum GP Practice size, future of branch surgeries, Practice mergers when more than one Practice moves into new premises etc
- The Strategic Plan will align with the national strategic direction via the Strategic Programme for Primary Care and Health Education and Improvement Wales (HEIW) for key pieces of work e.g. Community Infrastructure Programme and the national Primary Care workforce strategy

Key Benefits identified include:

- Measurable patient outcomes for Primary Care and Community Services
- Sustainable workforce
- Financial sustainability
- Better estate that is fit for purpose now and fit for purpose in the future

Key Deliverables identified include:

A suite of strategic action plans that inform the delivery of:

- Accelerated Cluster Development through the development of County level plans
- A workforce plan for Primary Care and Community Services
- An estates plan for Primary Care and Community Services
- A quality and safety plan for Primary Care and Community Services
- A Patient Outcomes Plan for Primary and Community
- A Finance and funding plan for Primary Care and Community Services

Alignment to the Six Goals programme for Urgent and Emergency Care is key in understanding the impact of new roles and ways of working, alongside the Urgent Primary Care programme that has been in place across the majority of GP Practices for a number of years, whilst supporting the aspiration for reduced admissions through providing patients with care closer to home.

Asesiad / Assessment

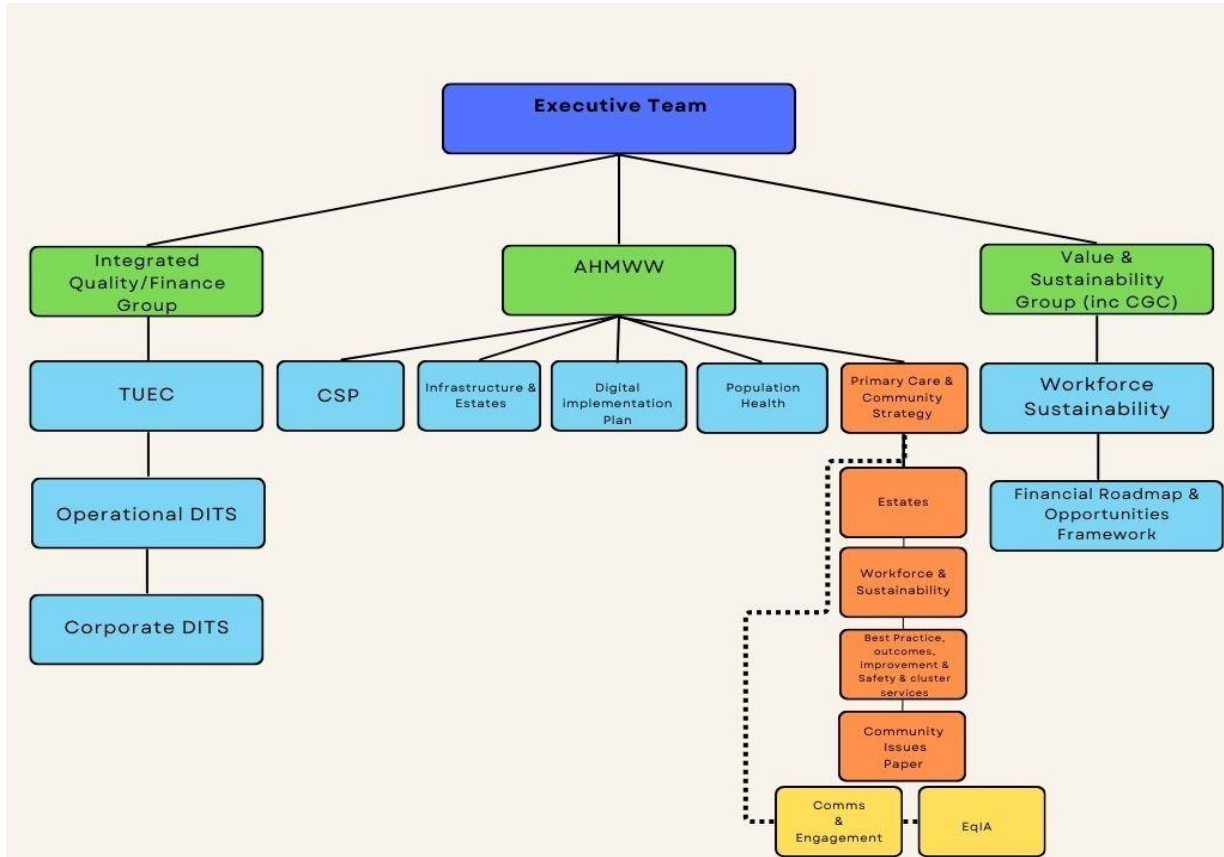
The development of a Primary Care and Community Strategic Plan is key to bringing resilience to our Primary Care and Community Services and our commitment to preventative care and community-based service delivery (Annual Plan 24/25). In developing the strategic plan, it is important to identify what services Primary Care contractors identify as being key to delivering care closer to home for their patients, articulating the shift of services from Secondary to Primary and Community Care.

The Phase 2 methodology describes:

- The project governance structure
- The approach to Communication and Engagement
- Timelines

Governance

The image below describes the proposed governance structure required in order to create and deliver a Primary Care and Community Strategic Plan.



Four Task and Finish Groups will be established, reporting to the Primary Care and Community Strategy Group supported by two additional groups to oversee the communication and engagement and creation of EqlA. The Primary and Community Strategy Group will have responsibility and oversight for:

- Reviewing the key actions identified in the Issues Paper and setting the challenge for the working groups to seek solutions to the problems that are posed
- Ensuring that the work undertaken continues to align to the strategy project scope and that key strategic priorities are agreed
- Consider roles and responsibilities of working group and Task and Finish Groups required to support each stage of the strategic plan development
- Finalise an engagement plan and agree what we need to engage on e.g. what does the future model look like for Primary Care and Community, what services could be delivered through the contracting model that brings care closer to home, etc

The first meeting of the Primary Care and Community Strategy Group was held on 2 May 2024 and monthly meetings have been arranged going forward.

Phase 2

Phase 2 of the Strategic Plan is focussed on consolidating the data collated in the Primary Care Issues paper, expanding the data to include Community services and developing a suite of Cluster level 'strategic opportunities'. These options will form the foundations of Phase 3, public engagement, leading to the delivery of a Primary Care and Community Strategic Plan.

There are three key components that will be running in tandem over May 2024 to August 2024:

1. A review by Community Services of key themes garnered from Phase 1. The objective is to understand the key issues in Community Services and identify any differences and/or gaps between the issues facing Primary Care and Community. For the purposes of clarity, the definition of Community Services is:
 - HDdUHB workforce-led services in non-acute settings.
 - HDdUHB commissioned services including Long Term Care.
 - HDdUHB contracted services (excluding Primary Care services covered in Phase 1)

The outcome will be a dataset of the issues, challenges and points of focus that will be used to inform the workforce workshop engagement exercise that develops the Strategic opportunity options throughout September and October 2024.

2. Through the Task and Finish groups (see governance structure), deliver data sets that frame a programme of workforce workshops that deliver 'strategic opportunities' at Cluster level.

The data sets will deliver information on the following areas of focus:

- Community Services in relation to PC Phase 1 themes check and challenge - resonance/ points of difference/ budget and funding.
- Primary Care and Community workforce plan.
- Finance and funding plan for Primary Care and Community Services
- Quality and Safety plan for Primary Care and Community Services
- Patient Outcomes Plan for Primary and Community Services
- Strategic framework plan aligning national, regional and Cluster based services
- Outputs and outcomes of other HDdUHB Planning objectives, most notably:

PO 1	Workforce Stabilisation
PO 3	Transforming Urgent and Emergency care (TUEC),
PO 5	Mental health and CAMHS
PO 6	Clinical Services Plan
PO 9	Digital Health
PO 10	Population Health.

The seven cluster-based options must provide the following key benefits:

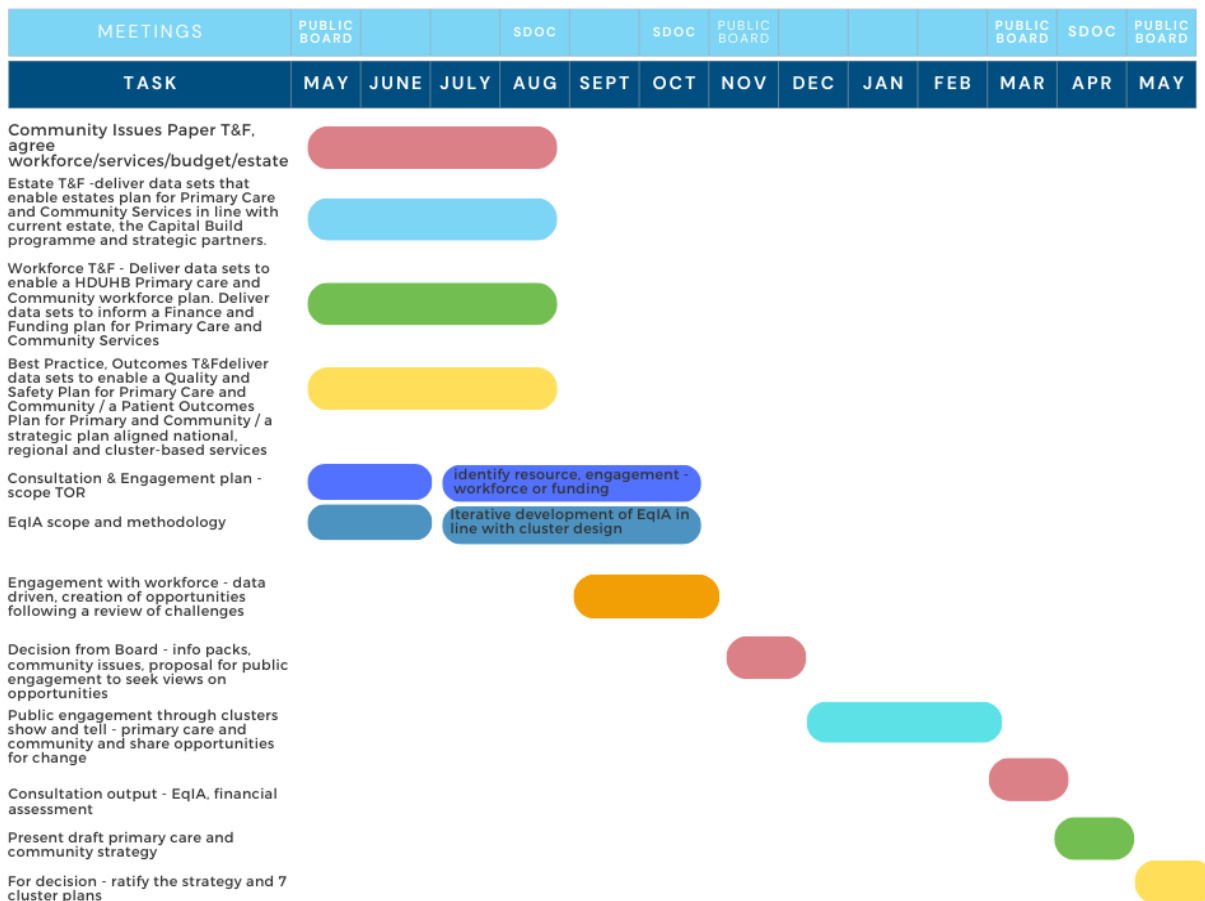
- Measurable patient outcomes for Primary Care and Community Services
- Sustainable workforce
- Financial sustainability
- Better estate that is fit for purpose now and fit for purpose in the future.

- Communication and Engagement plan and Equality Impact Assessment(s) that will underpin the development of the options (EqIA) and provide comprehensive, targeted, and iterative communication channels for all stakeholders, during the development of the Strategic Plan and during its implementation.

It is proposed that the process described above will be progressed on a cluster basis, with the Clusters and County teams playing a central role in the option developments and engagement, supported by the Health Board wide team. From December 2024 through to February 2025, it is anticipated the focus of attention will be on engaging with the population and key partners on the ideas and opportunities that have been identified on a Cluster basis. The shape and scope of the 'show and tell' engagement will be predicated on the specific requirements of and communication channels and/or events taking place in each Cluster. It is expected that there will be variation in the manner of engagement that reflects local needs and demands.

Timeline

The proposed programme timeline is set out below, with the intention of delivering the final Strategic Plan to the Public Board meeting in May 2025.



*EqIA and Comms Plan run throughout the timeframe

Communication and Engagement

A clear and effective engagement and communication plan is required, to discuss and determine options for transforming Primary Care and Community Services to meet the needs of our communities, whilst encouraging and enabling our patients to be proactive in their own management of their health and wellbeing, recognising the range and breadth of services that are commissioned at Cluster level that support a patient led approach.

To date, there have been numerous engagement activities which have captured the views of our patients on a variety of issues. The proposed programme for engagement, led at Cluster level, will include the ability to share information on current service provision (both at Health Board and Cluster level) as well as finding out what matters most to patients, key stakeholders (such as professional representative bodies, Llais etc) and Primary Care contractors, when accessing and delivering Primary Care and Community Services. There is an expectation this will involve different engagement approaches such as:

- Face to face events
- Virtual sessions
- Electronic questionnaires

Resource

It is noted that the Annual Plan and the Audit Risk and Assurance Committee [Minutes of the Meeting held on 20 February 2024](#) originally set out completion of the Strategic Plan by 31 March 2025. The timeline proposed in this paper commits to the completion of Phase 2 by November 2024 Board, followed by Phase 3 (public engagement) and the finalisation of the Strategic Plan by May 2025 after scrutiny by the Strategic Development and Operational Delivery Committee (SDODC) in April 2025. The timeline recognises the challenging scope, and potential scale of the engagement required to deliver on the Health Board's commitment to continuous engagement. This is a challenging timeline and will require appropriate support from a range of teams, such as Clusters/Counties and corporate functions, in particular to support the engagement phase.

Additionally, the progress of Phase 2 will be dependent on operational service capacity. Whilst there is some dedicated resource in place for the programme, in the main it will need to be resourced from existing team members.

Delivering the programme within the timescale is contingent on the prioritisation of this planning objective by the organisation and effective planning across interdependent planning objectives. In line with other similar programmes, it may also be necessary to secure additional, external support, in particular as part of the engagement phase. This will be assessed by the programme group as part of the design of Phase 3 and included within future updates to Board.

Argymhelliad / Recommendation

The Board is requested to:

- **APPROVE** the proposed framework and timeline for Phase 2 of the development of the Strategic Plan
- **NOTE** the requirements to complete the development of the Strategic Plan for Board approval by May 2025, including the support required from clinical, operational and corporate teams

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	
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	1 Workforce Stabilisation 3 Transforming Urgent and Emergency Care programme 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:	
Rhestr Termiau: Glossary of Terms:	
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board:	

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	N/A
Ansawdd / Gofal Claf: Quality / Patient Care:	N/A
Gweithlu: Workforce:	N/A

Risg: Risk:	N/A
Cyfreithiol: Legal:	N/A
Enw Da: Reputational:	N/A
Gyfrinachedd: Privacy:	N/A
Cydraddoldeb: Equality:	N/A