Scottish School of Primary Care 2017
**An overview of Cluster Developments in Wales**
Wednesday, 17 May 2017
The Playfair Hall, Royal College of Surgeons, Nicolson Street, Edinburgh, EH8 9DW

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The Primary Care Programme
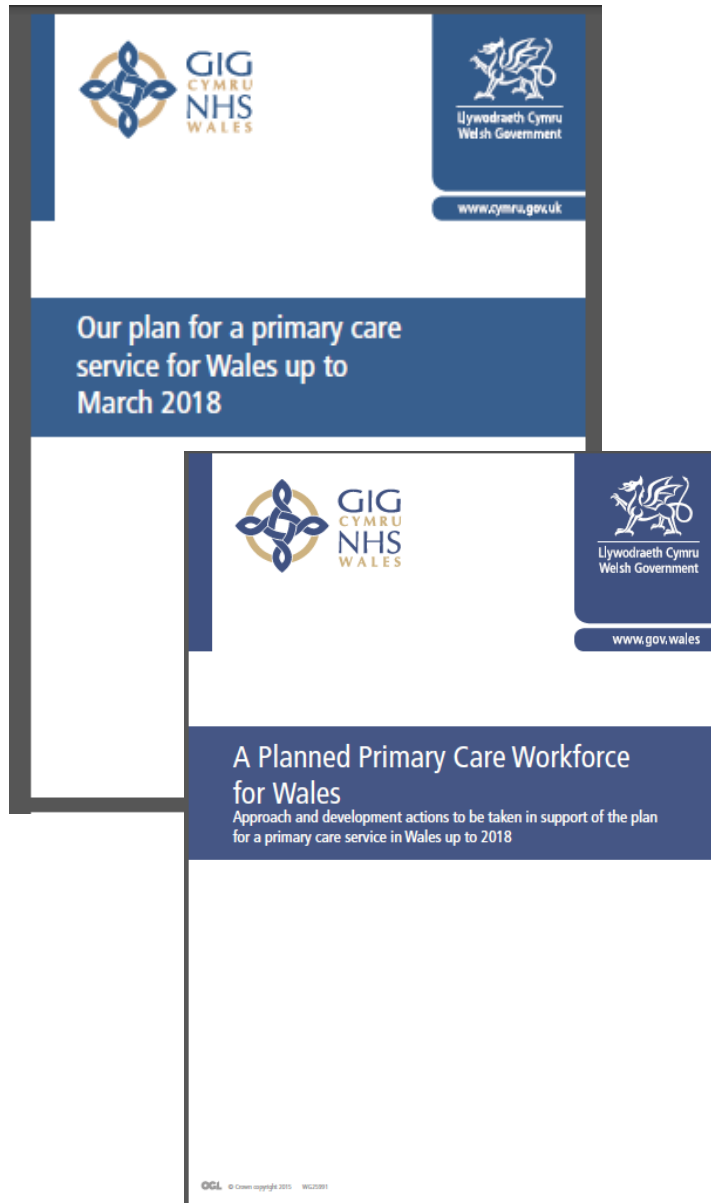
- **Primary Care Clusters (64)**
  - Planning care locally
  - Improving access and quality
  - Equitable access
  - A skilled local workforce
  - Strong leadership

- **Primary Care Workforce Plan**
  - Ministerial Taskforce
  - International Marketing
  - Recruitment Incentives £20k/£2k

- **Alma Ata Declaration WHO '78**

- **OECD 2016**

Primary Care Clusters

- Clusters – Identified as vehicle of change for primary care
- Integrated & supported by all Health Boards
- Cluster Plans Incorporated into Health Board Plans
- Aim to Improve Patient Access/Capacity/Quality of Care
- Care Closer to Home
- Expanding MDT roles
- Stronger links:
  - Social Care and Local Authorities
  - Third Sector Organisations
  - Community Care Services
  - Community Assets

Developing Primary Care Leadership

- **All Wales Confident Leaders Programme 2017/18**
  9 monthly modules - 2 cohorts, targeted cluster leads
  2/3 Cluster Leads going through programme

- **Academi Wales – North Wales Leadership Programme**

- **Regional Events**
  Various regular events supported by PHW & 1000 Lives

- **National Events**
  Cabinet Secretary "All Wales" events x 2 – 3rd October

Direct Investment

£43m in 2016/17 of which:

- £26m Health Boards
- £10m direct to Clusters
- £4.5 National Projects
- £0.4m pathfinder schemes
- £0.5 Academic Fellows

Small amount of money when shared between 64 Clusters – but tangible impact

Pathfinder & Pacesetter Initiatives

Referral & Demand

- Acute Clinical Outreach Team
- Telephone Triage in GP practices
- New workforce models - 111 integration
- 2 ODTC teams glaucoma service
- Enhanced Care @ Home
- Clinical Pathway Transformation

Primary Care Support

- MDT admin & clinical support
- Enhance recruitment package for new GPs
- PC Support Units using MD Teams
- Support Staff & Cluster deliver alternative models
- Develop an MDT to deliver locum cover

Pharmacy & MDT Roles

- Practice & Cluster based clinical pharmacists
- Community pharmacy domiciliary visits
- Specialist Palliative Care Pharmacists
- Antibiotic Prescribing
- Physios in Practice
- Pharmacists in Care Homes
- Stoma Care Service
- Pharmacist-led Insomnia + HF services
- Social Workers
- OTs
- Social Prescribers

New Models for PrimaryCare

- Telephone Triage in GP – nurse led & networked (Neath)
- Social Enterprise of GP practices pooling funds and services (Powys)
- Federation of Practices (Bridgend)
- Multidisciplinary Practice approach (Prestatyn)

Cultural & Behavioural Change

- Behavioural change on medicines taking
- Prevention through CVD assessment at cluster level
- Social Prescribing through SP coordinators (Torfaen)
- Choose Well and Minor Ailment Schemes

Funding for 24 projects on 'Once for Wales' basis

Cluster Priorities & Initiatives

MDT Working

- Work collaboratively with other PC contractors
- Development of multi-skilled approaches
- Fully integrate general practice support around GP practice teams
- Improve multi-disciplinary involvement at cluster meetings

- Support & encourage patients to manage their conditions through non-medical interventions
- Social Prescribing tool or practitioner developments; continuation of partnership with 3rd sector

Patient Responsibility

Care Closer to Home

- Development of a cluster triage/acute care/home visiting service
- Build upon existing practice based pharmacy model
- Improve take up of bowel and cervical cancer screening services

- Analyse workload in general practice to ensure effective use of resources and further develop primary care team
- Sustainability & workforce planning
- Inter-cluster working; workflow organisation

Workforce

Informatics

- Cluster clinical governance for IT interoperability and networked service provision (Vision 360)
- Further promote WebGp and fully evaluate the benefits to improved access
- Working to develop meaningful clinical outcome measures in Dashboard
- Develop Clinical Portal – Practice/Cluster/HB Peer Review and Quality

Primary Care Programme Evaluation

Cluster Evaluation

Commissioned development of bespoke assessment instrument to evaluate maturity and ongoing support needs of Primary Care Clusters: *Primary Care Clusters Assessment (PCCA)* tool

North Wales Centre for Primary Care Research, Bangor University

Effectiveness of Operation/Funding Use/Constraints

Pacesetter Evaluation

Tender specification out shortly
Effectiveness in achieving objectives
Value for Money
Assist decisions for Scaling Up/Stopping/ Modifying

Cluster Profile Snapshot – May 2017

Questions	All Health Boards in Wales x 7	
	2016	2017
No. Clusters/Networks	60	60
Status of Lead (GP/Pharmacist/Nurse etc)	53 = GP 1 = Advance Nurse Practitioner 4 = Vacant 1 = 3rd Sector 1 = Pharmacist	52 = GP 6 = Practice Manager (including 1 Ex Practice Manager) 1 = Nurse 2 = Pharmacist 1 = PH Consultant 1 = 3rd Sector 1 = Non Clinical Partner
No. clusters with a broad range of PHCT representation	39 64%	48 80%
No. clusters with Local Authority representation	38 63%	43 72%
No. clusters with third sector/lay representation	34 57%	44 73%
Cluster stage of organisational development Scale 1 - 3 (see below)	1 = 17 (29%) 2 = 28 (46%) 3 = 15 (25%)	1 = 0 (0%) 2 = 47 (78%) 3 = 13 (22%)
No. clusters that have any autonomous management control of attributed finances	9 (26 leads on decision, signed-off by LHB/Divisional Team) 15%	10 (21 within SFI rules & 'light touch' approval / determining allocations) 17%

1 = Developmental - on the starting blocks, significant support required, unstable
2 = Stable, requiring support, full potential yet to be determined
3 = Stable, supported but potential for high performance

Signs of development:

- Increase in MDT; PHCT & Local Authority representation

- 100% produce cluster plans

- Increasing Maturity

Roadmap for Primary Care in Wales

Alternative PC Models

Enhanced MDT to manage PC workload

Triage systems Enhanced HCP roles MDT working

PC Support Teams

Primary Care Sustainability

More Services delivered in Community

Stable Primary Care

Skills, Time and Resources for complex care

PC WFP

Improved Access to Quality Care

Demand Capacity Flow

New roles, pathways, services

Acute Outreach Services Effective Pxing systems

Effective Cluster working

OOH 111 Redesign SPN comms MDT Support Hub

Wales Primary Care Programme Where Next?

- Mature Clusters
- Evaluate & pursue most effective initiatives
- Consider optimal governance arrangements
- Strengthen Health Board Support to Clusters
- Improve Cluster Contribution to Health Board Strategy
- Pursue Optimum Finance & Governance Arrangements
- Progress Workforce and MDT Roles & Team Approach
- Strengthen links to Social Care through Regional & Public Service Boards
- Develop, Test & Evaluate Alternative models of Working – Federations / Social Enterprise / Working @ Scale

Thank you / Diolch

(email/e-bost primarycare@wales.nhs.uk)

REVIEWING PRIMARY CARE IN WALES

WELSH GOVERNMENT & NATIONAL ASSEMBLY
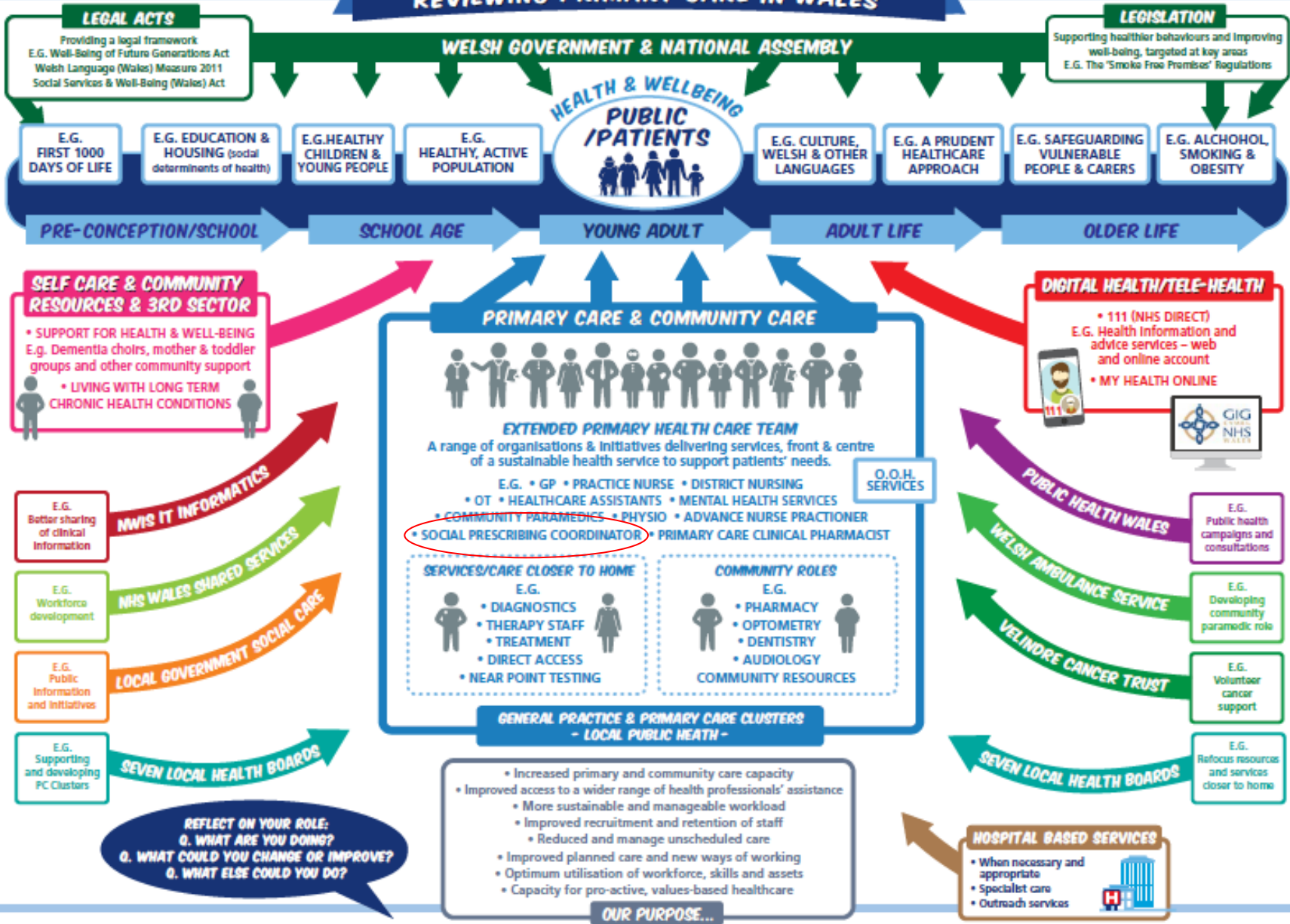
LEGAL ACTS
Providing a legal framework
E.G. Well-Being of Future Generations Act
Welsh Language (Wales) Measure 2011
Social Services & Well-Being (Wales) Act

LEGISLATION
Supporting healthier behaviours and improving well-being, targeted at key areas
E.G. The 'Smoke Free Premises' Regulations

HEALTH & WELLBEING — PUBLIC /PATIENTS

- E.G. FIRST 1000 DAYS OF LIFE
- E.G. EDUCATION & HOUSING (social determinants of health)
- E.G. HEALTHY CHILDREN & YOUNG PEOPLE
- E.G. HEALTHY, ACTIVE POPULATION
- E.G. CULTURE, WELSH & OTHER LANGUAGES
- E.G. A PRUDENT HEALTHCARE APPROACH
- E.G. SAFEGUARDING VULNERABLE PEOPLE & CARERS
- E.G. ALCOHOL, SMOKING & OBESITY

PRE-CONCEPTION/SCHOOL | **SCHOOL AGE** | **YOUNG ADULT** | **ADULT LIFE** | **OLDER LIFE**

SELF CARE & COMMUNITY RESOURCES & 3RD SECTOR
- SUPPORT FOR HEALTH & WELL-BEING
  E.g. Dementia choirs, mother & toddler groups and other community support
- LIVING WITH LONG TERM CHRONIC HEALTH CONDITIONS

DIGITAL HEALTH/TELE-HEALTH
- 111 (NHS DIRECT)
  E.G. Health information and advice services – web and online account
- MY HEALTH ONLINE

GIG NHS WALES

PRIMARY CARE & COMMUNITY CARE

EXTENDED PRIMARY HEALTH CARE TEAM
A range of organisations & initiatives delivering services, front & centre of a sustainable health service to support patients' needs.

E.G. • GP • PRACTICE NURSE • DISTRICT NURSING
• OT • HEALTHCARE ASSISTANTS • MENTAL HEALTH SERVICES
• COMMUNITY PARAMEDICS • PHYSIO • ADVANCE NURSE PRACTIONER
• SOCIAL PRESCRIBING COORDINATOR • PRIMARY CARE CLINICAL PHARMACIST

O.O.H. SERVICES

SERVICES/CARE CLOSER TO HOME
E.G.
- DIAGNOSTICS
- THERAPY STAFF
- TREATMENT
- DIRECT ACCESS
- NEAR POINT TESTING

COMMUNITY ROLES
E.G.
- PHARMACY
- OPTOMETRY
- DENTISTRY
- AUDIOLOGY
COMMUNITY RESOURCES

GENERAL PRACTICE & PRIMARY CARE CLUSTERS – LOCAL PUBLIC HEATH –

- Increased primary and community care capacity
- Improved access to a wider range of health professionals' assistance
- More sustainable and manageable workload
- Improved recruitment and retention of staff
- Reduced and manage unscheduled care
- Improved planned care and new ways of working
- Optimum utilisation of workforce, skills and assets
- Capacity for pro-active, values-based healthcare

OUR PURPOSE...

Left-side arrows/boxes
- E.G. Better sharing of clinical information — **NWIS IT INFORMATICS**
- E.G. Workforce development — **NHS WALES SHARED SERVICES**
- E.G. Public information and initiatives — **LOCAL GOVERNMENT SOCIAL CARE**
- E.G. Supporting and developing PC Clusters — **SEVEN LOCAL HEALTH BOARDS**

Right-side arrows/boxes
- **PUBLIC HEALTH WALES** — E.G. Public health campaigns and consultations
- **WELSH AMBULANCE SERVICE** — E.G. Developing community paramedic role
- **VELINDRE CANCER TRUST** — E.G. Volunteer cancer support
- **SEVEN LOCAL HEALTH BOARDS** — E.G. Refocus resources and services closer to home

REFLECT ON YOUR ROLE:
Q. WHAT ARE YOU DOING?
Q. WHAT COULD YOU CHANGE OR IMPROVE?
Q. WHAT ELSE COULD YOU DO?

HOSPITAL BASED SERVICES
- When necessary and appropriate
- Specialist care
- Outreach services

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