

PRIMARY CARE, COMMUNITY AND THERAPIES- R&S PLAN 22/23

YEAR 1 STATUS KEY:
FUNDED – priorities identified and funding agreed, (e.g. investment approved by Health Board in 21/22, WG)
Cost Neutral – to be delivered from within existing resource
Tier 1 Priorities: Schemes that have been identified for priority investment in year 1, subject to business case approval.
Tier 2 Priorities: Schemes where no funding has been allocated but will be considered for initial investment allocation subject to business case.
Tier 3 Priorities (T3): Schemes where no funding has been allocated but will be considered for investment subject to business case approval if

1 - 4 LOW
5 - 8 MODERATE
9 - 15 Amber SIGNIFICANT
16 - 25 HIGH

Risk Trends:
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Delivery timeline Key	
	Planning task/ action
	Implementation or Delivery task/ action
	Consultation task/ action (staff or public)

PLEASE ADD / REVISE DETAIL AND NARRATIVE FOR QUARTELY MILESTONES AS REQUIRED

GOAL	METHOD	STATUS	METHOD DELIVERY STATUS AT Q4 1st Jan- 31st Mar 23	Q4 DELIVERY COMMENTS / MITIGATING ACTIONS/ REVISED DELIVERY DATES	RISKS TO DELIVERY - DESCRIPTION	RISKS TO DELIVERY - MITIGATION	RISKS TO DELIVERY - CURRENT RISK SCORE	RISKS TO DELIVERY - TREND	MILESTONES/ DELIVERY TIMELINES			
									Q1	Q2	Q3	Q4
To maximise opportunities to roll out prevention and wellbeing initiatives in primary care clinical and non-clinical settings as a key component towards the transformation of the SBUHB health and care system.	Delivering programmes of patient activation and coproduction within Podiatry and Orthotics for sustainable change and to improve population skills and confidence to self manage their health	COST NEUTRAL	On track						Review data from 21/22 and review plan and product	Review data from 21/22 and review plan and product	Implement any amendments from original plan	Implement any amendments from original plan
	Subject to successful Business Case, delivery of pre-diabetes programme within all clusters.	FUNDED	Off Track	Additional practices engaged in established clusters. Planning and implementation of programme in additional 3 clusters commenced in Q4 with expected start April 2023	Additional staff absence (Registrant or Healthcare support worker). Delayed recruitment to current vacant posts	Redeployment of available staff to maintain delivery in existing clusters	12	→	Implementation of phase 1 of service commenced. Outcomes and evaluation towards further development of service	Implementation of phase 2 of service commenced. Outcomes and evaluation towards further development of service	Implementation of phase 3 of service commenced. Outcomes and evaluation towards further development of service	Complete implementation of stage 1 of programme and begin implementation of stage 2. 2023-24 (1) full service delivery
To ensure that as far as possible primary care is consistent on a 24/7 and geographic basis as there is a recognition that primary and community care services across Wales vary depending on the time of day and location.	Review and implement new urgent care pathways and single point of access model within Dental Services	FUNDED	Completed						Single Point of Access model implemented. Evaluating outcomes of new urgent care pathways (2 pathways currently being piloted)	Implementation of new urgent care pathways (depending on outcome of pilot)	On-going review of pathway	On-going review of pathway
	Improve Oral Health for older people living in care as part of Frailty reduction measures by establishing GAB as core service and use its principles to establish rolling programme for similar services at hospital sites; Review domiciliary contracts & Transformation Funded Therapist Programme model	FUNDED	Completed						Develop and agree model	roll out of model	evaluation	evaluation
	Large scale change to support and manage the implementation of National Contract Reform across ALL x4 Contractor elements. Significant impact on PCT.	FUNDED	Completed						First phase implementation in line with national regulatory framework.	Second phase implementation in line with national regulatory framework including Quality and Outcomes framework	Preparation and understanding of further contract changes for 2023/2024	Preparation and understanding of further contract changes for 2023/2024
	Develop and strengthen the Primary Care and Sustainability Team; continued use of the GMS Merger Framework	FUNDED TBC	Completed						Recruitment of workforce	Commence programme of sustainability visits	Support continued transformation of services and training development	
To accelerate the implementation of the full primary care model at cluster level key links will be made with transformation programmes, both at national and local level so that any learning is shared quickly across primary care and further informs the vision for clusters.	Implementation of the National 'Accelerated Cluster Development' (ACD) Programme. This will be a significant piece of work be completed and coordinated on a National and HB basis which will see change to how Cluster based planning and delivery is undertaken in line with commissioning frameworks.	FUNDED TBC	On track						Vision for SBUHB signed off. Initial ACD implementation plan in place. Identify legacy issues. Implementing communications plan.	Commenced shadow running Planning/Commissioning Group's met. Identified and established four contract collaborations in line with contract reform.	Embedding Planning/ Commissioning Group/s and four sets of collaboratives. Development of 2022/23 plan.	Agreement of 2022/2023 plan
	Service group to support the delivery of Cluster IMTPs	COST NEUTRAL	On track						Implement monitoring system of cluster IMTP delivery – completing an exception report for each cluster meeting / Support for project delivery including HR and procurement advice and support.	Implement monitoring system of cluster IMTP delivery – completing an exception report for each cluster meeting / Support for project delivery including HR and procurement advice and support.	Commence planning for 23/24 cluster IMTP taking into account new ACD structure.	Finalise preparation of 23/24 Cluster IMTP

