Our aims are to:-

- Improve the health and wellbeing of the local population
- Improve and Support sustainability of our GP practices.
- Support people to stay well, lead healthier lifestyles and live independently
- Expand on our CRT unit support within the community. Working collaboratively.
- Specifically work with our Carers on community based projects
- Reduce health inequalities
- Deliver the Clinical Futures Strategy in primary and community care.
- Care closer to home
- Provide more easily accessible "place based" health and social care or Provide more joined up services in community settings
- Ensure that services have the flexibility to meet individual needs
- Improve access to specialist expertise
- Provide a positive experience for patients and carers
- Ensure a supportive working environment and career development opportunities for our staff

Aneurin Bevan University Health Board

Delivering Care Closer to Home

North Torfaen Borough

Neighbourhood Care Plan – 2019/20

What are we doing?

- Regularly reviewing local needs to identify priorities and develop effective solutions
- Developing primary care teams using the **Primary Care Model for Wales** built around traditional GP, District Nurse and Health Visitor roles
- Introducing new primary care roles to provide easier access to local services. Current examples include Social prescribers, practice based pharmacists, Direct Access physiotherapists, academy pharmacists/nurses.
- Raising awareness of the care and advice already available through local services using Care Navigations and QR boards, such as community pharmacies and voluntary sector teams: Care Navigation will be supporting the following services within Torfaen-
- Social Prescribers, Community Connectors, British Red Cross connectors, Minor Injuries, Emergency Eye Care, Direct Access Physiotherapy and Pharmacy.
- **Increasing access to specialist roles in the community including Diabetic Specialist Nurse, Respiratory specialist nurses, and Palliative Care services.**
- Working to increase uptake of preventative services to keep citizens well including influenza immunization / childhood immunization / smoking cessation services / weight management services / exercise schemes
- Improving effective working relationships between GP's and CRT
- Supporting community based admissions.
- Upskilling staff to support more services i.e. Respiratory
- Work with our Carers to support the community
- Collaborating with PCC to support with sustainability.

How are we delivering change?

Work with partners to establish wrap around health and wellbeing services

Making best use of health and social care building

Use of preventative, early opportunity and self-management approaches

Understanding local needs and developing effective

Use prudent healthcare pathways to improve planned care

Use Multidisciplinary Team to undertake active signposting

Recruit, train & educate our workforce to ensure needs of

"Enablers"

- Technology
- Skilled Workforce
- Partnership Working
- Financial Resource
- Fit for Purpose Estate

How will we know if we have made a difference?

We review health and wellbeing outcomes regularly and we learn from feedback from patients, carers and staff.