Primary Care
Integrated Medium Term Plan
North Powys Cluster
2020 – 2023
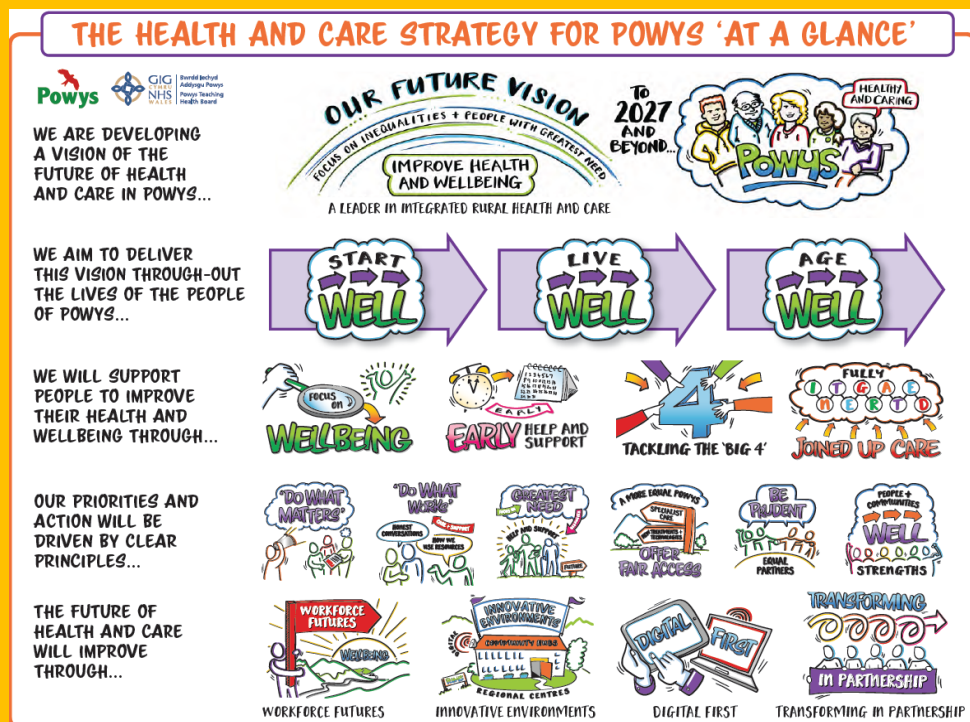
1. Executive Cluster Chair

The Integrated Medium Term plan for the North Powys Cluster offers the opportunity to align the Cluster plans with a common format and common goals with Powys Teaching Health Board. The 8 IMTP objectives provide a structure through which Clusters can develop the priorities for their own populations whilst seeking means to provide outcomes that will improve the health of the population and provide the most appropriate and deliverable interventions when necessary with the focus on providing these closer to, or indeed in, the patient's home.

To ensure that these interventions are deliverable, then we need to identify the pathways and the workforce needed. There are ongoing sustainability issues in several practices within the Cluster and these practices have already looked at ways of addressing these with assistance from PTHB. The use of a different clinician mix, such as Unscheduled Care Practitioners and Physicians Associates and the development of triage has been integral in allowing practices to deliver services. There is an issue with recruiting General Practitioners into some areas of Powys and this is mirrored with other clinicians and this is a priority for the North Powys Cluster. Year One priorities include the establishment of stronger links with surrounding universities to encourage nursing students to come to North Powys at undergraduate level to experience rural Primary Care and also to develop a programme where the North Powys practices working in conjunction with PTHB and universities can provide "in-house" development and mentorship of existing and new staff with shared resources. The recruitment of General Practitioners has also been prioritised with work needing to be done to identify the reasons behind the reluctance of doctors to work in certain areas of the county. There is also a desire to provide placements for Foundation Grade Doctors so that they can experience the diversity of rural General Practice and the many benefits that it brings.

The development of both general and condition specific pathways has its base in identifying population need and developing resources to best meet this need. Some of this work can be done at Cluster level in conjunction with PTHB whilst other work needs to be part of the engagement of Cluster with the North Powys Health and Wellbeing Programme. The work of the latter requires not only local "buy in" but also that of our Secondary Care providers and this can be facilitated through the Mid Wales Joint Committee. The intention is to provide as much care as possible closer to the patient and there have been workshops to explore the "art of the possible". The use of digital technologies will be integral in providing this care both with remote consultations with clinicians but also with self-care and monitoring through apps such as Florence.

The Cluster has identified two local pathways needs that need to be a Year One Priority. These are the delivery of an in-county Sexual Health service and the development of an early recognition and intervention service for young people with Mental Health symptoms.

The objectives encapsulated within the IMTP of the four streams of both Core Well-being and Enabling Well-being are at the centre of the objectives of the North Powys Cluster. The cluster plan will also deliver against the milestones in the national primary care model. There is a recognition that needs differ across the Cluster, there are areas of significant deprivation and other areas where disease prevalence is higher than the Powys average. It is only through working collaboratively as an individual Cluster, with the other two Cluster in Powys, with Powys Teaching Health Board and with external providers that we can achieve the best outcomes for the Cluster population.

The 8 IMTP objectives are shown below:

Core Well-being Objective 1	FOCUS ON WELLBEING
	• Wider Determinants of Health • Health improvement & Disease Prevention and Population Screening • Information, Advice and Assistance

Core Well-being Objective 2	EARY HELP AND SUPPORT
	• Primary and Community Care • Cluster Working • Connecting Communities

Core Well-being Objective 3	TACKLING THE BIG FOUR
	• Mental Health • Cancer • Respiratory Conditions • Circulatory Conditions

Core Well-being Objective 4	JOINED UP CARE
	• Care Coordination and Urgent Care • Planned Care • Specialised Care • Quality and Citizen Experience

Enabling Well-being Objective 1	WORKFORCE FUTURES
	• Well-being and Engagement • Recruitment and Retention • Workforce Design, Efficiency and Excellence • Skills and Development

Enabling Well-being Objective 2	INNOVATIVE ENVIRONMENTS
	• Capital, Estates and Facilities • Research, Development and Innovation • Rural Health & Care Alliance

Enabling Well-being Objective 3	DIGITAL FIRST
	• Digital Care – Telehealth/ care • Digital Access – National ICT Programme • Digital Infrastructure & Intelligence

Enabling Well-being Objective 4	TRANSFORMING IN PARTNERSHIP
	• Good Governance • Financial Management • Planning, Performance and Commissioning • Partnership Working

Dr Andy Raynsford
North Powys Cluster chair
October 2019
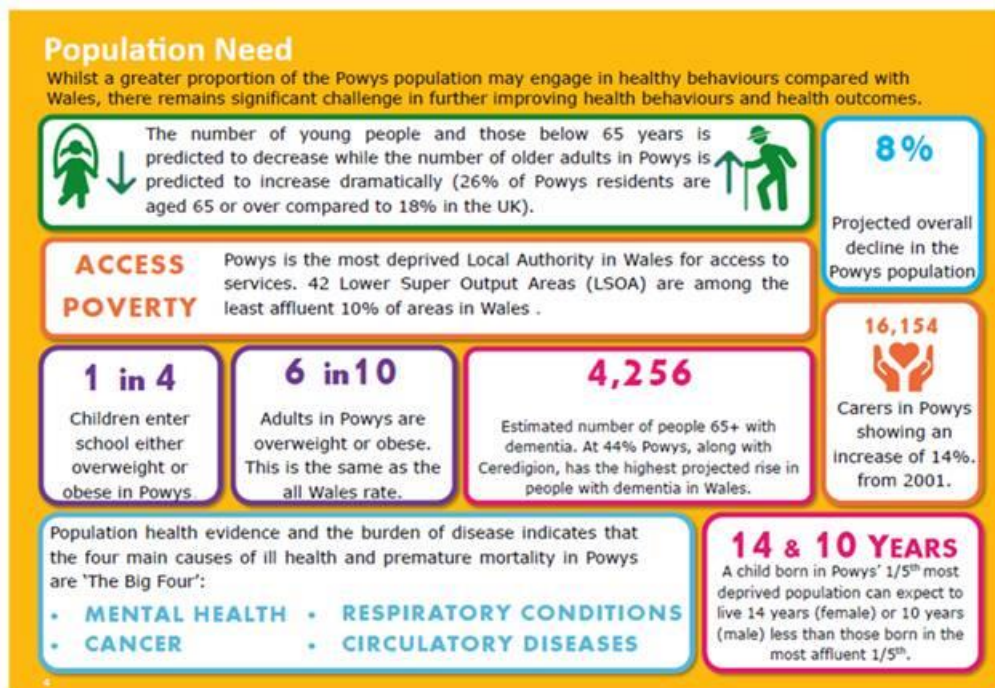
All 3 Powys clusters have or aspire to multi-disciplinary and multi organisational membership including Health Board, County Council, Third Sector, Dentistry and Optometry. The North Cluster meets on a bi monthly basis.

Powys has made a distinction between clusters, as planning mechanisms that span organisations, services and professions, and GP networks as groups of general medical practitioners. This allows GP Practice issues and wider planning issues to be discussed separately, but with one informed by the other.

The other key component to the Powys model is delivery of services based around individual GP practices through an integrated Community Resource Team that includes practice, Health Board, County Council and Third Sector representatives.

North Powys Primary Care Cluster is made up of 7 GP Practices - Llanidloes, Newtown, Dyfi Valley, Montgomery, Welshpool, Llanfair Caereinion and Llanfyllin, with a combined list size of approximately 64,000 patients.
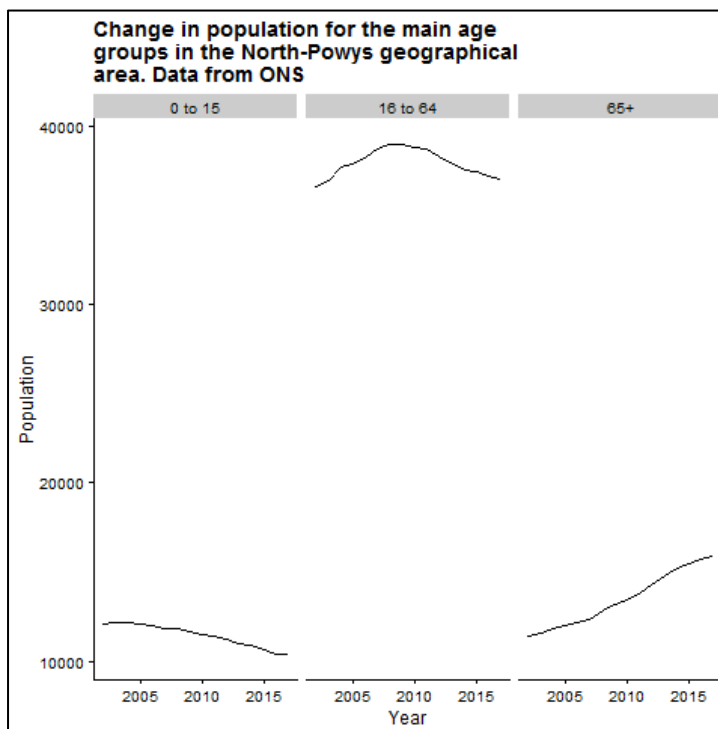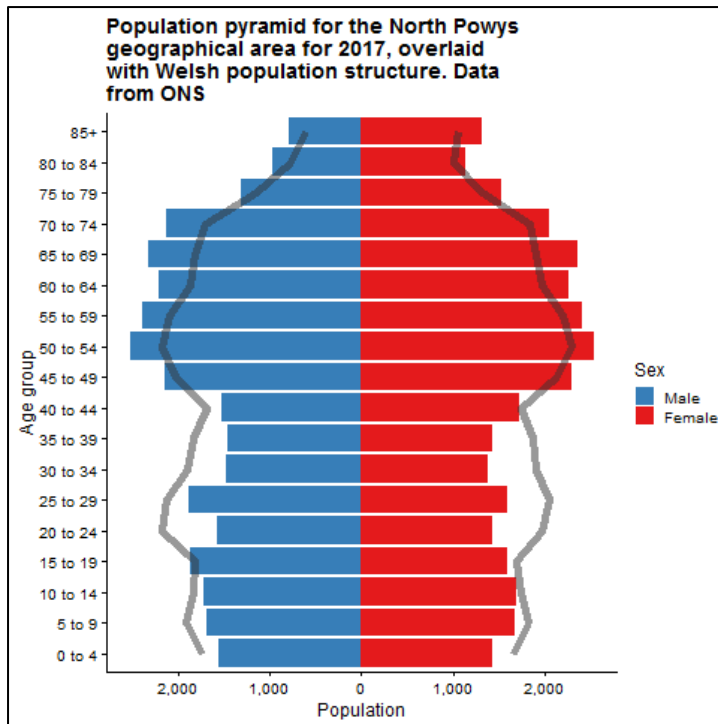There are also 8 Pharmacists, 7 Optometry Practices, 9 Dental Practices and 3 Community Dental Services in the north Cluster.

The cluster group formed in 2012. Initial collaborative working was good and the Cluster worked well with the Health Board to develop solutions and pathways for challenges facing the health economy.

The local difficulties with practice sustainability has impacted heavily on the ability of practices to devote sufficient impetus to take collaborative projects forward but have had to concentrate on maintaining their own viability.

The North Powys Cluster area has many challenges with rural communities, some areas of high deprivation and an ageing population. There are transport challenges with long distances to the nearest District General Hospitals of Bronglais and Shrewsbury & Telford Hospital. Recruitment continues to be a challenge across the cluster with Locum availability remaining very limited.

The population of the cluster is displayed below:

4

Population pyramid for the North Powys geographical area for 2017, overlaid with Welsh population structure. Data from ONS

Change in population for the main age groups in the North-Powys geographical area. Data from ONS

There are four community hospitals within the North Powys Cluster:

|	Llanidloes War Memorial Hospital	Bro Ddyfi Community Hospital	Montgomery County Infirmary (Newtown Hospital)	Victoria Memorial Hospital, Welshpool
Address	Eastgate Street, Llanidloes, Powys, SY18 6HF	Heol Maengwyn, Machynlleth, Powys, SY20 8AD	Llanfair Road, Newtown, Powys, SY16 2DW	Victoria Memorial Hospital, Salop Road, Welshpool, Powys, SY21 7DU
A&E / MIU	No	No	No	Yes
Wards	**Graham Davies Ward** (Medical & Rehabilitation ward) **Palliative Suite** **Maternity Unit**	**Twymyn Ward** (Medical & Rehabilitation ward including bariatric beds)	**Brynheulog Ward** (Medical & Rehabilitation ward) **Stroke Rehabilitation Ward** **Maternity Unit**	**Maldwyn Ward** (Medical & Rehabilitation ward) **Palliative Suite** **Maternity Unit**
Therapies	Dietetics Occupational Therapy Orthoptics Orthotics Physiotherapy Podiatry Psychology Speech & Language	Dietetics Occupational Therapy Physiotherapy Podiatry Psychology Speech & Language	Dietetics Occupational Therapy Orthoptics Orthotics Physiotherapy Podiatry Psychology Speech & Language	Dietetics Occupational Therapy Orthoptics Physiotherapy Podiatry Psychology Speech & Language
Consultant Outpatient Clinics	General Medicine General Surgery Gynaecology Oncology Ophthalmology Orthopaedic Orthoptics Paediatrics	Cardiology Diabetes General Medicine General Surgery Gynaecology Oncology Ophthalmology Orthopaedic Paediatrics	ADHD Cardiology Colorectal Colposcopy Diabetes Diagnostic ENT Gastroenterology General Medicine General Surgery Gynaecology Orthopaedic Paediatrics Parkinson's Rheumatology	ENT General Medicine Gynaecology Orthopaedic Paediatrics
Specialist Nurse Clinics	Diabetes Continence Parkinson's Respiratory	Diabetes Continence Parkinson's Respiratory	Diabetes Continence Parkinson's Respiratory	Diabetes Continence Parkinson's Respiratory
Other Outpatient Services	Diabetes Eye Screening Wales	Diabetes Eye Screening Wales X ray Dept.	Diabetes Eye Screening Wales X ray Dept.	Diabetes Eye Screening Wales British Pregnancy Advisory Service X ray Dept. Renal Unit

- Introduction of Physician Associates to support GPs
- Introduction of local Dermatology Outpatient Services
- Looking at alternative disciplines i.e. Urgent Care Practitioners (UCPs)
- Introduction of local British Pregnancy Advisory Services
- Introduction of telephone triage in some practices
- Introduction of Health Board Silver Cloud online CBT system to support GP Practices and Community Mental Health services.
- Introduction of 3rd sector community connectors, attached to each practice to support statutory service providers.
- Strong body looking at bringing patient services back into the locality i.e. repatriation of mental health service.

The population of North Powys is currently 63271, the main centres of population include Newtown (11319), Welshpool (6668), Llanidloes (2804) and Machynlleth (2213). The rest of the population are widely dispersed in smaller centres, hamlets and across many rural properties.

The age bandings spread is reasonably even across the North Powys area:
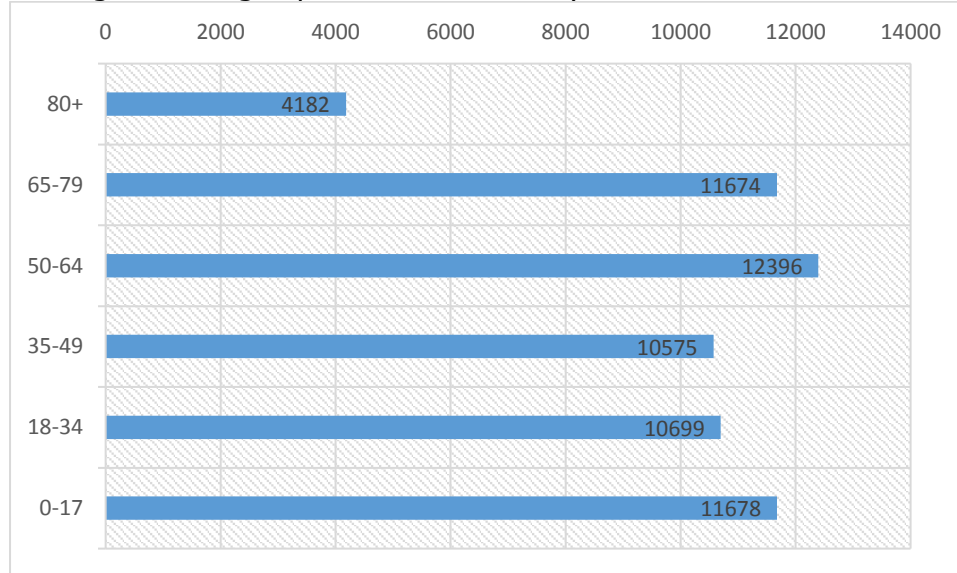
The tables below compare the prevalemce rates of the north Powys cluster as compared to the all Wales averge in the following areas:
- Prevalence of key behavoural risk factors
- Incidence of bowel and breast cancer
- Prevalence of key behavoural clinical factors
- Prevalence of key long term conditions
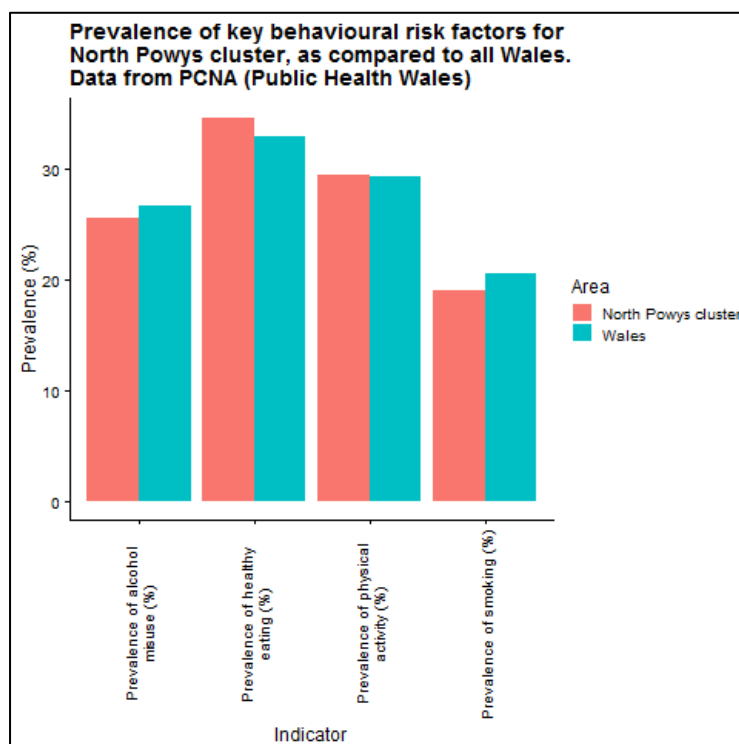
Prevalence of alcohol misuse and smoking in north Powys is below the all Wales average. Physical activity is comparable to the all Wales average and healthy eating is above average.

Incidence of bowel and breast-cancer by stage for North Powys cluster, as compared to all Wales. Data from PCNA (Public Health Wales)
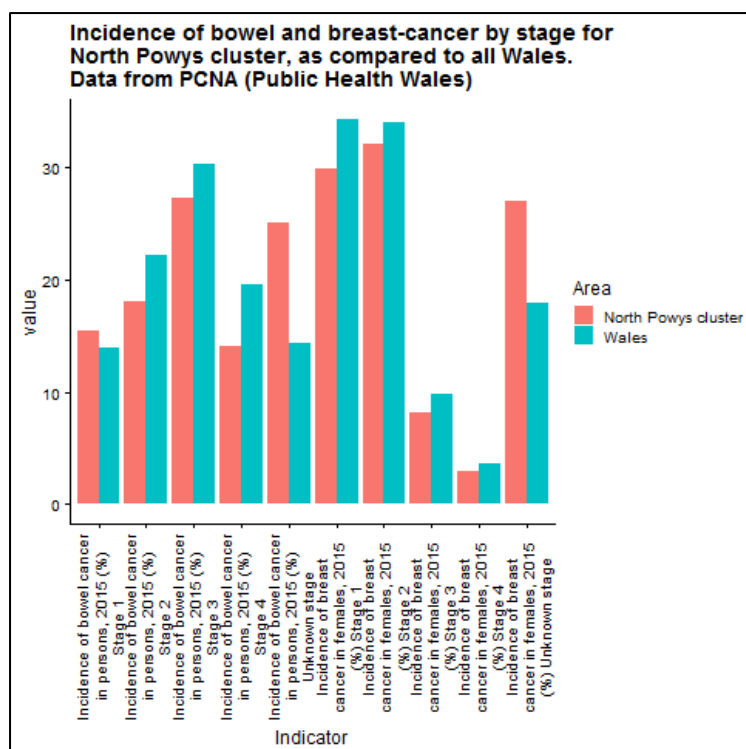
Incidence of stage 1 and unknown stage of bowel cancer are above the all Wales average. Incidence of stages 2, 3 and 4 are below. Incidence of stage 1,2,3,4 breast cancer are below average, unknown stage is above the Welsh average.


Prevalence of key behavioural clinical factors for North Powys cluster, as compared to all Wales. Data from PCNA (Public Health Wales)
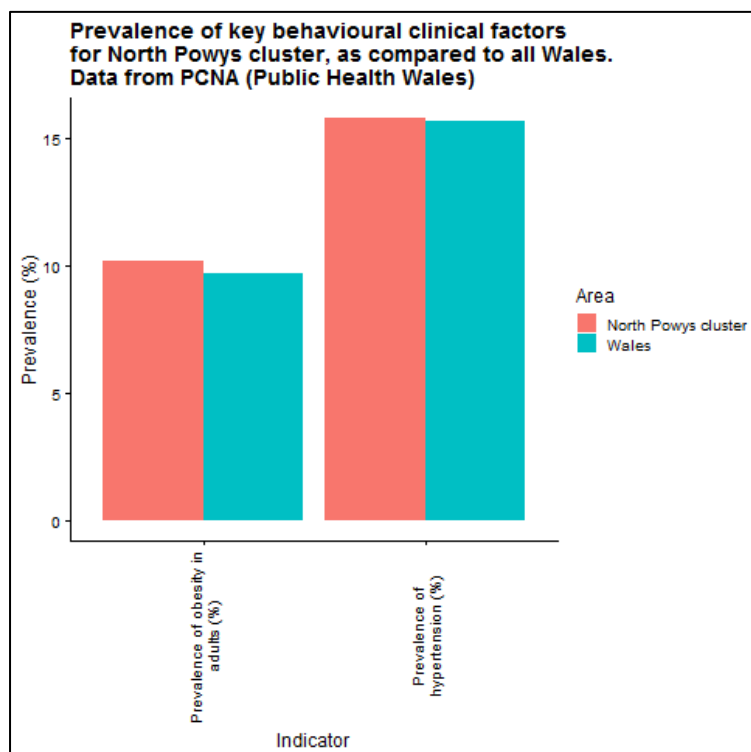
Prevalence of obesity and hypertension in North Powys are both slightly above the all Wales average.

Prevalence of key long-term conditions for North Powys cluster, as compared to all Wales. Data from PCNA (Public Health Wales)
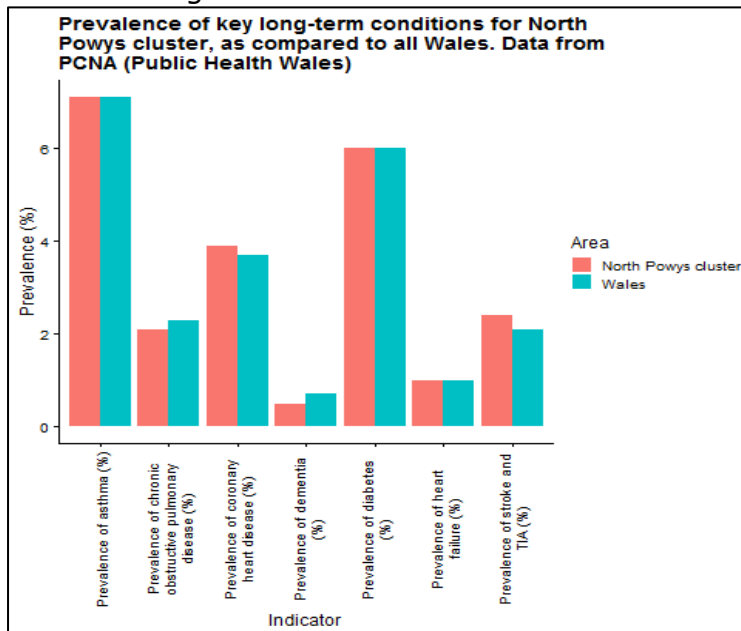
Prevalence of coronary heart disease and stroke / TIA are above the Welsh average. Asthma, diabetes and heart failure equate to the all Wales average. Prevalence of COPD and dementia are below average

North Powys can be broken down into ten 'localities' (Middle Layer Super Output Areas as defined by the Office of National Statistics) as shown in the map below:

Powys Middle Layer Super Output Areas
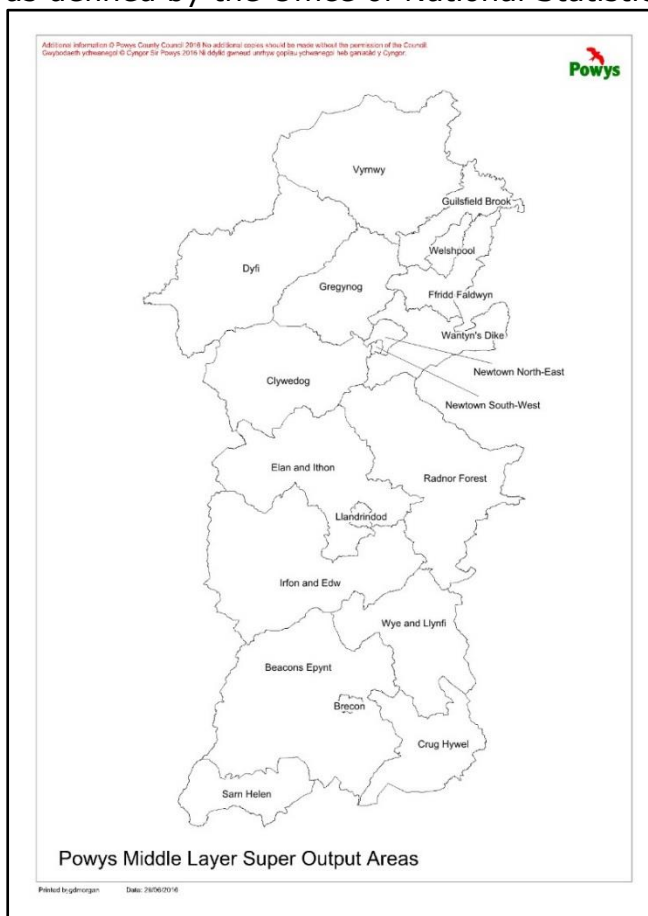
The key findings from the North Powys needs assessments carried out by Powys County Council in 2019 are that:

Tackling the Big 4:
- Hospital admissions for respiratory diseases is highest in Welshpool
- Respiratory inpatient admissions are highest in Welshpool and Newtown
- Respiratory mortality for under 75's is above average in Newtown North East
- Hospital admissions for cardio-vascular disease is above average for Welshpool, Dyfi and Newtown North East
- Circulatory disease inpatient admissions is high in 5 out of 10 North Powys localities
- Circulatory disease outpatient admissions are above average in 6 of the 10 North Powys localities
- Cancer mortality is above average in Newtown South West, Dyfi, Welshpool and surrounding area of Fridd Faldwyn
- Percentage of patients with hypertension is above average in Machynlleth and Llanfair Caereinon GP practices
- Percentage of patients with coronary heart disease is above average in Montgomery GP practice area
- Patients with above average COPD rates are found in the Dyfi Valley Practice area
- Above average number of patients with Diabetes are found in the Dyfi Valley practice area.

Focus on Well-being

- Newtown South West has the most indicators of below average rates for well-being focused measures
- General fertility rate is mostly lower in more rural areas of North Powys
- A higher average of children are living in poverty in Newtown South West and Welshpool
- The estimated number of people living with dementia has a higher average in the very north of Powys, Vrynwy locality
- The lowest levels of home ownership for North Powys are in Newtown and Welshpool
- People in Newtown South West have a higher average for those struggling to keep up with bills
- Newtown South West has the highest average unemployment and in general unemployment is rising steeply in Powys
- The lowest level of satisfaction with the local area is Newtown South West
- Lowest average levels of two parent households are in Newtown South West
- Children on the child protection register average rates are high in Newtown and Welshpool
- Vaccination rates at age 4 are lowest in the Wantyns Dike ward
- Premature births have a higher average rate in Newtown South West and Welshpool
- Low birth weights are higher in Newtown and Guilsfield Brook, north of Welshpool
- There are more pressure points for older people's accommodation in the Llanfair Caereinion area

Joined up care

- There are more indicators below average for joined up care in Newtown South West and the Dyfi areas

- The number of unpaid carers on average is higher in Welshpool and Newtown South West
- Hip fractures and more prevalent in Newtown South West and Clywedog localities
- Satisfaction with GP's is lower in Newtown, Welshpool and Dyfi localities
- The rate of people receiving domiciliary care is higher in Newtown South West and Dyfi localities
- The rate of time spent on domiciliary care clients is on average higher in Wantyns Dyke and Dyfi localities
- There is a greater need for sheltered housing in the very North of Powys, Vrynwy locality.

5. Cluster Workforce Profile

6. Financial Profile

14

Full technical detail and analysis has been completed and will be submitted to WG separately in line with the IMTP.

- Involvement in the planning of the Health & Wellbeing Hub in Newtown; a project, which will hopefully allow for the provision of services for patients closer to home. This will also help patients seek advice and help from the 3rd sector and Powys County Council to attempt to decrease unnecessary GP appointments.
- Appropriate level representation from all partner organisations is a priority going forward and will be in line with the PTHB across all three Clusters.
- Expansion of the Pharmacy Team to support sustainability in line with Transformation bid.
- Expansion of the Triage system
- Develop a system for the development and mentoring of members of the multi-disciplinary teams both within Cluster practices and in conjunction with Glyndwr University.

Communication and engagement mechanism

- Health Focus groups
- Patient condition group

8. Planned Cluster Actions and Intended Measurable Outputs and Outcomes 2020-23

The Cluster milestones and actions aligned to the PTHB IMTP objectives are shown below. The priorities for 2020-21 also include the outputs and outcomes that are to be achieved. It is important to note that work will progress on a number of the actions in 2020-21 not just the priorities.

Core Well-being Objective 1	Focus On Well-being	
	Priorities	• Analyse population profile to understand prevalence and ensure service provision meets demand
		• All communities to become Dementia Friendly through conjunction with 'Dementia Matters' development officers, Powys Dementia Network and PAVO.
		• Increase public awareness through public health campaigns coordinated by PTHB, PHW
		• Increase capacity of community home support / reablement.
		• Further integration of community connectors attached to each practice
		• Analysis of frailty register to identify all patients aged 65 and over who may be living with moderate or severe frailty
		• Review Dementia registers to understand prevalence

Core Well-being Objective 2	Provide Early Help And Support	
	Priorities	• Increase direct access to community pharmacists to deliver common ailments service.
		• Provide further opportunities for independent prescribers by offering DMP (Designated Medical Practitioner) role in each practice
		• Improve access to diagnostics as part of the north Powys Regional Rural Centre developments
		• Promotion Of Healthy Living And De Medicalisation Of Wellbeing
		• Develop and implement local sexual health services / pathway

Core Well-being Objective 3	Tackle The Big Four	
	Priorities	• Review mental health pathway for young people and improve access to early help and support
		• Feasibility study to develop a Crisis House / Sanctuary Provision in North Powys
		• Increase use of Florence to support self management of chronic conditions
		• Develop a system of putting Care Plans in place for all high risk individuals
		• Implement the use of MacMillan Primary Care Cancer toolkit

Core Well-being Objective 4	Enable Joined Up Care	
	Priorities	• Clinical led practice triage in place in all practices
		• Pilot Mental Health Practitioner triage in Newtown and Llanfyllin areas
		• Further develop integrated community resource teams and Virtual Wards to reduce admissions
		• Repatriation of secondary care services that can be delivered locally
		• Clarify discharge lines between district general hospitals and practices

Enabling Well-Objective 1	Develop Workforce Futures	
	Priorities	• Develop cluster level designated training programme for clinical staff including rotations
		• Improve primary care & PTHB links with University of Glyndwr
		• Provide mentorship for newly qualified independent prescribers
		• Identify factors that make recruiting GPs into some areas of Powys challenging and develop strategies to increase recruitment

Enabling Well-being Objective 2	Promote Innovative Environments		
	Priorities		• Develop Community Wellbeing Hubs across cluster to provide services closer to home
			• Develop North Powys Rural Regional Centre including provision of healthcare normally provided out of county

Enabling Well-being Objective 3	Put Digital First		
	Priorities		• Work towards providing digital acute discharge records from all secondary care providers to all practices
			• Promote the use of apps to support patient access to information advice and self care
			• Develop telehealth and telecare
			• Establish Point of Care Testing across cluster

Enabling Well-being Objective 4	Transforming In Partnership		
	Priorities		• Work closely with Mid Wales Joint Committee for Health and Care to develop local services across cluster
			• Contribute and respond to the Future Fit Programme of services provided at the Royal Shrewsbury Hospital, Shrewsbury and the Princess Royal Hospital, Telford
			• Continue to develop cluster relationship with extended community care and voluntary sector

Priorities 2020 - 2021		
Milestone / Action	**Output**	**Outcome**
Further integration of community connectors attached to each practice	• Presentation at Cluster • Promote community connector role in General Practices and to the wider public / communities	• Development of robust service
Review Dementia registers to understand prevalence	• Dementia registers up to date and accurate • Liaison with Mental Health services to ensure prompt assessments	• Care & support meets patient needs
Develop and implement local sexual health services / pathway	• Cluster and PTHB to review existing services and develop pathway	• Implementation of pathway / services which are accessible to patients & delivered closer to home
Review mental health pathway for young people and improve access to early help and support	• Project plan developed and new model tested	• Early help service established
Increase use of Florence to support self management of chronic conditions	• Identify which conditions to support • Identify patients in each practice • PLT delivered for practice nurses	• Plan in place to roll out use of Florence across cluster
Clinical led practice triage in place in all practices	• Ensure all practices are developing same day and routine triage • Explore options for cluster wide remote triage from single source (for those practices interested)	• Same day triage in all practices
Improve primary care & PTHB links with University of Glyndwr	• Develop quality placements • Offer placement opportunities for student nurses in all practices • Explore options for post qualified placements	• Increase number of nurses recruited
Identify factors that make recruiting GPs into some areas of Powys challenging & develop strategies to increase recruitment	• Develop placement programme for FY1 and FY2 doctors & medical students • Develop links with deaneries & universities	• Initiate a number of placements / opportunities • Have an understanding why recruitment has not previously been successful and develop strategies accordingly

9. Strategic Alignment and Interdependencies with the Health Board, IMTP, Area Plan and Transformation Plan/Bids and the National Strategic Programme for Primary Care

The ambition for the people of Powys remains high. It is the second year of the shared Health and Care Strategy launched back in 2017 which set out the vision for a 'Healthy, Caring Powys'. This long term strategy for health and care forms the Local Area Plan and is itself a component of the very long term, inter-generational Powys Wellbeing Plan.

The Health and Care Strategy is based on extensive local engagement as well as taking into account national well-being goals, five ways of working and the sustainable development principle. The quadruple aim and design principles have been applied in the supporting priorities and actions.

PTHB are determined to be leaders in Wales in primary and community care and to continue to strengthen their role as an effective commissioner on behalf of the population of Powys. There is a very complex system of pathways across multiple health and care providers in England and Wales, as well as PTHB being a direct provider of healthcare. PTHB are a key partner with the local authority and third sector.

PTHB have submitted a bid to the Welsh Government Transformation Fund seeking funding to be able to implement the Powys Primary Care Transformation Programme. This will be delivered through clusters in line with the principles and components of the Primary Care Model for Wales. This model aims to deliver the following objectives:

- Improved access to urgent and unplanned care
- Improved proactive care for those with more complex needs
- Improved routine and preventative care
- Improved business efficiency and sustainability within practices
- Delivery of safe effective care as close to home as possible

The scope of this proposal aims to transform primary and community care provision in Powys. Through an accelerated programme, a whole system Cluster based health and care service planning and delivery model will be created. This will:

- Improve the health and wellbeing outcomes for the Powys population, by designing services that specifically meet the needs of that population
- Improve access to care by providing more primary and community services, delivered locally, in order to prevent avoidable acute care demand
- Improve general practice sustainability by creating additional clinical capacity within Practices and additional potential income streams
- Improve efficiency by ensuring that all resources available within the health and care system are deployed in a coordinated manner, across professions and sectors in order to deliver agreed outcomes

Partners across primary, community health, and social care will work together to further develop Clusters and the planning of health and well-being services to respond to local need. Clusters bring together services around a local community, to improve health and wellbeing, quality and efficiency of care and integration. Innovative care pathways will be designed and trialled, reviewing and refreshing approaches to interventions such as Virtual Wards and Care Co-ordination. This will link this to the design of planned and urgent care, working with partners in secondary, specialist and ambulance services, so that services can be more easily accessed and appropriately utilised. Rural Regional Centres and Community Hubs will be at the heart of a joined up approach to primary, community, unscheduled and social care.

This will be achieved as part of a service transformation where the focus will be on health, wellbeing and prevention using home based care and self-management, local health and social care services to reduce the need for hospital based care and treatment.

The aim is to make it as easy as possible for patients, clients, stakeholders and staff to interact with the Health Board, Council and its partners through innovative service delivery and better use of technological and information assets.

The Cluster will work to further rollout and upscale existing telehealth/ telecare and assistive technology solutions as well as seeking funding over the next three years to develop new solutions. Specifically this will include My Health on Line, the Florence texting service, the SilverCloud online CBT programme and the My COPD and neurological apps that enable people to increase their involvement in the management of their treatment, conditions. The wider use of Skype and remote consultations within the Cluster will enable further development of handheld apps for self-management of health conditions.

Strategic Context

'A Healthier Wales: Our Plan for Health and Social Care' was published by Welsh Government in 2018, setting out a shared ambition to bring health and care services together into a seamless whole system approach, designed and delivered around the needs and preferences of individuals, with a much greater emphasis on health and well-being. It describes a community based model of health and social care, with a stronger public health approach and transformation of key areas including primary, planned and urgent care.

There is a focus on transformation and innovation to meet the needs of the Welsh population. A Healthier Wales describes a shift from large general hospitals to regional and local centres.

Well-being of Future Generations Act

Five Ways of Working: Long Term Vision

A Healthy Caring Powys sets out our long term vision. Key to this is the evidence of the well-being assessment which, in addition to setting out the current picture of well-being in Powys, explores the long term impact if the current focus and approach remains the same.

The health board has made a commitment to fully align organisational delivery and performance improvement to the long term vision. The overleaf diagram outlines the planning context and the way in which plans and planning requirements fit together to support the delivery of the national well-being goals.

The Planning Context in Powys
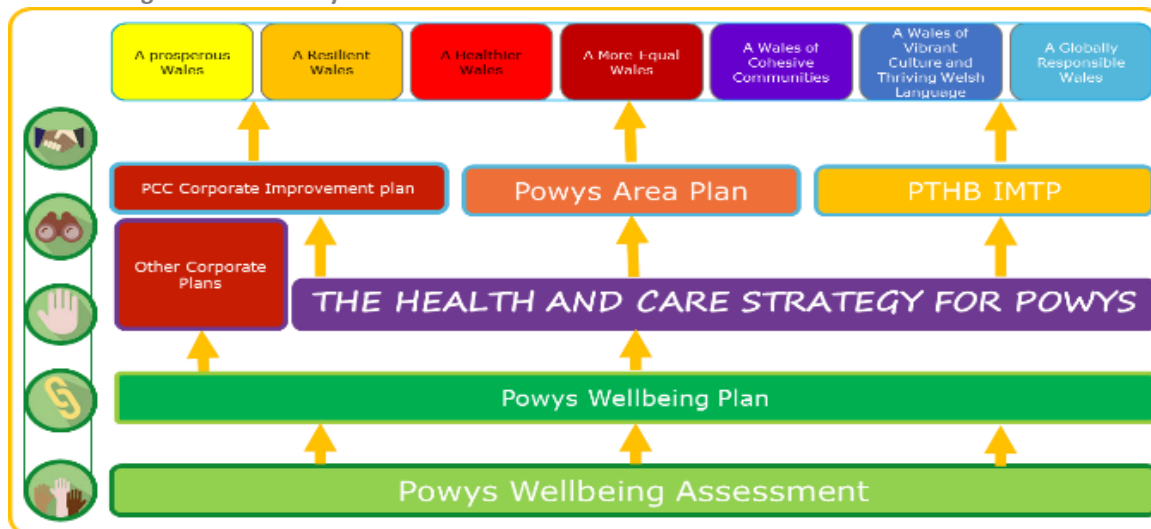
Five Ways of Working: Prevention

The Health and Care Strategy and the Powys Teaching Health Board IMTP encompass primary, secondary and tertiary prevention. Core objectives of the Health and Care Strategy include a focus on well-being and the provision of early help and support. The IMTP outlines specific actions which encompass reducing tobacco use, promoting a healthy diet and access to physical activity, empowering staff to have the confidence and competence to discuss healthy lifestyles with service users, and ensuring the population is protected from the threat of infectious diseases through immunisation programmes. It also includes a focus on early years and ensuring children are protected from adverse experiences from a young age, ensuring every child enters school ready to learn. Road traffic accidents are also highlighted, recognising the impact that this issue has in a rural area like Powys. More broadly, the Powys Well-being Plan sets out a vision for a Powys in 2040 in which there is a stable and thriving economy, a sustainable and productive environment; a population which is healthy, socially motivated and responsible, and people are connected to resilient communities and a vibrant culture. The steps to achieve the 2040 vision are published in the Well-being Plan.

Five Ways of Working: Integration

Powys County Council and PTHB are key partners in the Regional Partnership Board and the delivery of the Area Plan and 'A Healthy Caring Powys'.
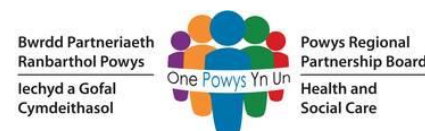
Key to this is the triple integration approach of health and social care, mental and physical health and primary and community care.

Five Ways of Working: Collaboration

When launched in 2017 'A Healthy Caring Powys' was the first joint strategy between health and social care in Wales. It is reliant on collaboration between the health board, Powys County Council, the Third Sector, Universities, the public, patients and carers. The strategy ensures that efforts and resources are aligned to deliver improved outcomes for the Powys population.

Five Ways of Working: Involvement

The well-being objectives were developed from what the people of Powys said about their health and care – in service user surveys, complaints, compliments, engagement events, service user forums, conferences and specific health and care events.

There are clear links and interdependencies between the PTHB IMTP and priorities, other cluster partners and the aims and milestones in this plan.

PTHB transformational programmes, notably the North Powys Well-being Programme, the Workforce Futures programme, the Primary and Community Care work, the plans for Digital First and the Breathe well programme, form the PTHB response to a complex environment of change around the borders of Powys and across commissioned services.

The North Powys Well-being Programme is the first of the major programmes to secure investment in the form of Welsh Government Transformation funding. This includes the development of a model of care that is based on prevention and well-being first, with care closer to home, wrapped around the person and their community, not the services and organisations. It is an opportunity to work across traditional boundaries, including education, housing and the independent, community and voluntary sector.

The Primary and Community Care element is building on a strong track record in Powys, with many of the elements of the National Primary Care Programme already in place and some significant innovations which are being rolled out in other areas of Wales after a successful starting point in Powys.

Tackling the Big Four is concerned with the clinical strategies in place for those conditions that have the most impact on the population of Powys. The Breathe Well programme is being taken forward as a key priority and significant progress has been made in 2019/2020 with robust plans to accelerate the work in this area for 2020/21.

Each of these in turn depends on the development of strategic frameworks for Digital First and Workforce Futures, to underpin the transformation ambitions. These enablers are key to ensuring that the transformation programmes are based on robust assumptions, forming a resilient and sustainable approach across both health and care.
In order to achieve the outcomes of 'digital first', Powys Teaching Health Board has three interconnected priorities:
- Digital Care: Telehealth and Telecare
- Digital Access: Implementation of the ICT National Programme
- Digital Infrastrucutre and Intelligence

It would almost be impossible to develop or rollout digital applications that address service needs unless the digital infrastructure is fit for purpose, secure and robust. It is the inter-dependency and balance between these components that have been considered when planning a holistic work programme.

Workforce Futures is a key enabler in the Health and Care Strategy and creating a 'Healthy, Caring Powys' between now and 2027. The successful delivery will include co-operation with PTHB partners including the commissioned services workforce. This will be more important as more services are repatriate to Powys. This will help establish joint posts not only across sectors, but also across health organisations. The Health Boards OD framework therefore focuses on structure, process, people and culture. The framework will support organisational alignment to meet the need of the Health & Care Strategy and the transformational change programme required. There are significant opportunities, but also challenges, including recruitment, retention, an ageing workforce and workforce fragility.

The Mid Wales Joint Committee for Health & Care was established to ensure there is a joined up approach to the planning and delivery of health and care services across Mid Wales. The Joint Committee's partner organisations will work together to address the current health and care needs of the Mid Wales population as well as the challenges for the future. There are 5 overarching aims:

Aim 1: Health, Wellbeing and Prevention

Improve the health and wellbeing of the Mid Wales population.

Aim 2: Care Closer to Home

Create a sustainable health and social care system for the population of Mid Wales which has greater focus on care closer to home.

Aim 3: Rural Health and Care Workforce

Create a flexible and sustainable rural health and care workforce for the delivery of high quality services which support the healthcare needs of rural communities across Mid Wales.

Aim 4: Hospital Based Care and Treatment

Create a sustainable and accessible Hospital Based Care and Treatment service for the population of Mid Wales with robust outreach services and clinical networks.

Aim 5: Communications, Involvement and Engagement

Ensure there is continuous and effective communication, involvement and engagement with the population of Mid Wales, staff and partners.

The Mid Wales Joint Committee has four subgroups to ensure that the work programme is achieved:

- Mid Wales Clinical Advisory Group
- Mid Wales Public and Patient Engagement and Involvement Forum
- Mid Wales Planning and Delivery Executive Group
- Rural Health and Care Wales Management Group