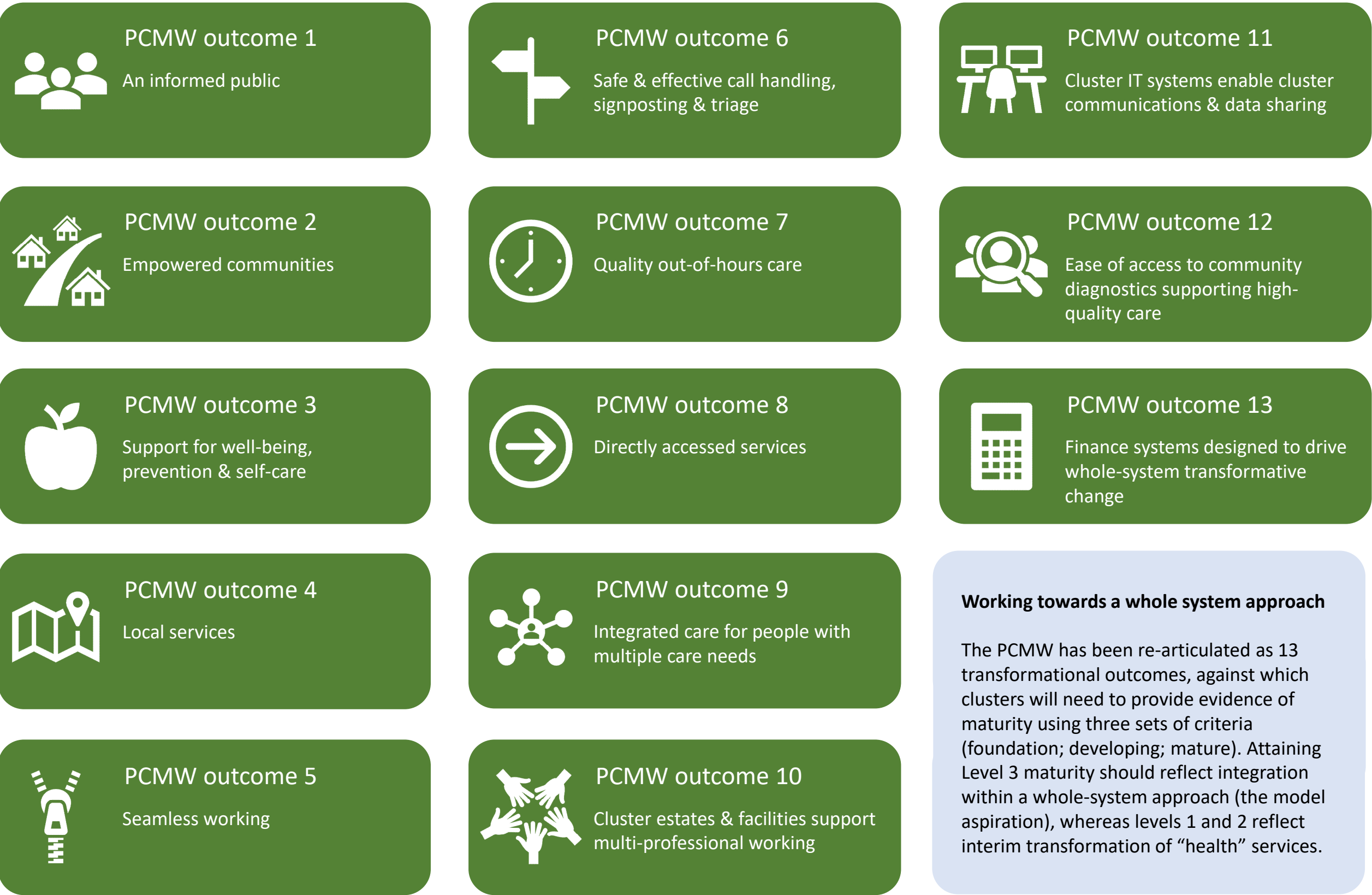



PCMW | PRIMARY CARE MODEL FOR WALES

Describes how care will be delivered locally, now & in the future, as part of a whole system approach to deliver *A Healthier Wales*




ACD | ACCELERATED CLUSTER DEVELOPMENT

ACD’s overarching aim is to meet cluster population health need through effective & robust planning & service delivery



ACD outcome 1

Enhanced integrated planning between clusters, health boards & local authorities




ACD outcome 6

Effective, efficient and long term sustainable cluster workforce and services


What are PCPGs?

Pan-Cluster Planning Groups will collaboratively plan & commission place-based services, leaving clusters free to focus on delivering high-quality care.




ACD outcome 2

Wider range of services delivered across a cluster, meeting population priorities and need, closer to home




ACD outcome 7

Empowered clusters with increased autonomy, flexibility and vision




ACD outcome 3

More effective leaders across the primary care system, collaboratives and clusters



ACD outcome 4

Improved equity of cluster care service provision based upon local need



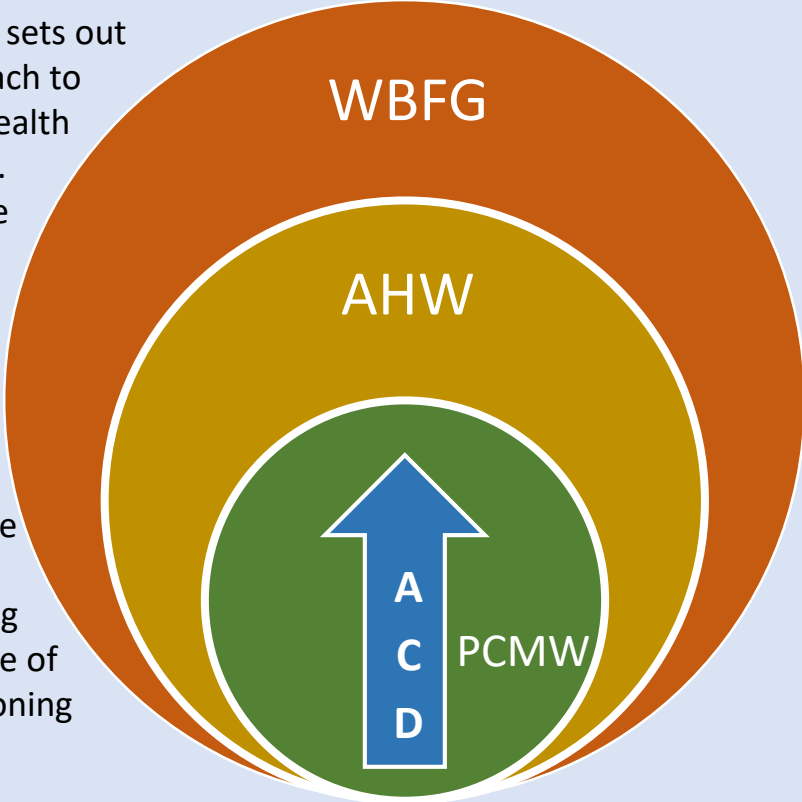
ACD outcome 5

Improved multi-professional & multi-agency services delivered

What is the strategic context linking PCMW and ACD together?

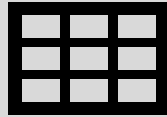
A Healthier Wales (AHW; WG 2018) sets out the vision of a whole system approach to health and social care focused on health & wellbeing & on preventing illness. It sets the direction for attaining the corresponding *Well-being of Future Generations (Wales) Act 2015* [WBFG] goal.

In keeping with *Programme for Government 2021 to 2026* (WG 2021) ACD aspires to accelerate pace of PCMW implementation towards realising AHW by separating cluster delivery functions from those of pan-cluster planning and commissioning functions.



PCMW/ACD MONITORING & EVALUATION: OUTLINE OF THE DRAFT APPROACH

A set of tools will provide both quantitative measures and qualitative narrative on implementation progress across Wales



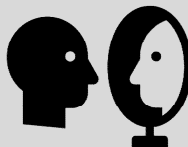
Cluster Development Framework

The CDF sets out standards & maturity criteria expected for demonstrating implementation progress; it identifies evidence requirements



Cluster 360 Peer Review

The 360 process describes how clusters & PCPGs will be involved in CDF-guided, peer-led developmental appraisal **once per IMTP cycle**



Self-Reflection Tool

The SRT is an **annual** online questionnaire asking clusters what went well, less well or could be done differently in relation to the CDF



Key Indicator Dashboard

The KID is a **live** online tile on the Primary Care Information Portal for reporting metrics around PCMW, ACD & other primary care outcomes

Other deliverables

- ● ● These comprise a monitoring & evaluation plan; a national implementation progress report (annual) & endpoint evaluation



Seeking your views on the proposed approach

Q1: We propose to release a draft monitoring & evaluation plan for stakeholder review. *What are the key considerations you would like this to take account of?*

Q2: We propose an initial focus on piloting the 360 peer review element. *Do you anticipate any challenges in participating once per IMTP cycle in a process involving external peers (cluster, health board, RPB)?*

Q3: The Cluster Development Framework will define the standard for each outcome, including any maturity criteria (foundation; developing; mature), against which clusters will submit evidence. The 360 panel will select a subset of standards/ evidence as the focus for panel discussion. *Is this a pragmatic approach?*

Q4: There are three sets of interested parties in the 360 process, one of whom is the cluster being reviewed. *Any thoughts on which role(s) could best represent the cluster?*

Q5: Panels would be constituted from peers outside of the cluster being reviewed. *What type of roles/ positions should be represented, and who should chair the panel?*

Q6: The 360 panel would provide outcome letters to receiving LHB/ RPB Execs, who would respond to both the panel and their participating clusters. *Will this close the feedback loop to help mobilise regional resources/ support for issues raised during the process?*

Please provide your feedback to SPPC@wales.nhs.uk. Thank you.

QUESTIONS

