A Public Health Approach to Primary and Community Care by 2035

Summary Report for Phase One
Version 1.1
June 2025

Executive Summary

Purpose

This report outlines a vision for transforming primary and community care (PCC) in Wales by 2035 through a public health approach. It builds on existing strengths and aims to address systemic challenges by embedding prevention, equity, and sustainability into care delivery.

Key Challenges

- **Reactive System:** Current NHS focus is on treatment over prevention.
- **Resource Imbalance:** Majority of funding goes to hospitals, not PCC.
- **Workforce Pressures:** Staff shortages, burnout, and recruitment issues.
- **Digital Gaps:** Inconsistent access and integration of digital tools.
- **Health Inequalities:** Persistent disparities in access and outcomes.

Public Health Principles

- Prevent ill health and promote wellbeing
- Reduce health inequalities
- Meet current & future population needs

- Ensure sustainability (environmental, workforce, financial)
- Use data and evidence to inform decisions

Core Elements for Transformation

1. **Continuity of Care**
   - Builds trust, improves outcomes, reduces hospital use.
   - Needs balance between access and ongoing provider relationships.

2. **Connected Digital and Data Systems**
   - Enables coordinated care and proactive support.
   - Must address digital exclusion and ensure equitable access.

3. **Shift Upstream to Prevention**
   - Invest early to reduce long-term costs and improve health.
   - Requires systemic change in funding and delivery models.

4. **Right Workforce and Skill Mix**
   - Multidisciplinary teams, social prescribing, and inclusive roles.
   - Focus on wellbeing, retention, and training.
5. **Care Closer to Home**
   - Localised, accessible services reduce hospital pressure.
   - Needs leadership, funding, and community engagement.
6. **Enabling Financial Models**
   - Align funding with need and support innovation.
   - Move from short-term to sustainable, equitable investment.

Next Steps for Phase Two

- **Collaborative Action:** Engage partners and remove barriers.

- **Workforce Planning:** Innovate staffing models and support frontline teams.

- **Test Local Models:** Pilot and evaluate community-based care.

- **Team Integration:** Strengthen cross-sector collaboration.

- **Digital Reform:** Address infrastructure and access issues.

Introduction

Primary and community care focuses on delivering healthcare close to where people live, through local services like GP practices, pharmacies, and community health teams. It includes everyday health services that help prevent illness, manage long-term conditions, and treat common problems. These services are the first point of contact for most people needing care and play a key role in promoting healthy living and supporting well-being in the community. They aim to provide accessible, patient-centred care while reducing the need for hospital visits.

The Primary Care Model for Wales (PCMW) is an important part of the long-term vision to improve health and care, as set out in A Healthier Wales. However, this vision is not yet fully achieved. Currently, the NHS in Wales often reacts to immediate pressures, both in primary care (such as GP services) and in hospitals, rather than focusing on long-term improvements.

Feedback from healthcare teams shows that the Primary Care Model for Wales (PCMW) is not being implemented consistently across the country. By strengthening its implementation, it will help to address key challenges—such as an ageing population, emerging technologies, and changes in service funding. Wales has a real opportunity to build a stronger, fairer, and more modern primary care system for everyone.

What is a Public Health Approach to Primary and Community Care by 2035?

The vision is to build on what's already working well in Wales and support the population and government priorities by showing how a stronger focus on public health, within primary and community care, can help create a fairer, greener, and healthier country.

What are public health principles?

The underpinning public health principles are:

- To Prevent ill health and support health and wellbeing
- To Reduce inequalities in health & outcomes
- To Meet current & future population need
- A Sustainable service (environmental, human resource and value)
- Data and evidence informed

Understanding the Challenges

Wales is facing tough financial challenges in health and care. Nearly half the 2022/2023 budget was spent on health. However, most of it goes to hospitals, while less is spent on primary and community care, raising concerns about whether this approach can last.

The NHS has mainly focused on treating health problems rather than preventing them. Primary and community care services are under pressure due to growing demand from an ageing population and people with multiple health problems. They also face other challenges like rising costs, limits on funding, new technologies, staff shortages, changing needs, inequalities, and the effects of climate change on health.

Work is already happening to improve primary and community care by focusing more on prevention and public health. These services are close to the communities they serve and are in a strong position to lead this work. But limited resources and competing demands make this shift more difficult.

What we did

This report combines feedback, expert views, and evidence to identify key themes. It shows how public health principles can shape these themes to improve care.

The core elements identified are:

- Continuity of care
- Connected digital and data systems
- Shift upstream in investment of resources to deliver prevention at scale

- Care delivered closer to home
- The right workforce / skill mix
- Enabling financial models

The Core Elements

Continuity of Care

Continuity of care means patients receive consistent, coordinated healthcare over time, often with the same provider, individual/s or team, ensuring better relationships and improved care.

Continuity of care in general practice has many benefits for patients. Regularly seeing the same GP builds trust, reduces worry, and makes people feel more comfortable talking about their health. This can lead to earlier diagnosis and better care. A stronger relationship with their GP also means people are more likely to follow treatment plans and get important checks like cancer screenings or vaccinations, helping people stay healthier in the long run.

Staying with the same GP over time is linked to people living longer. It helps GPs identify health risks early, give better care in emergencies, and manage long-term conditions like diabetes or dementia. It also makes the job more rewarding for GPs and can reduce their workload, as patients who get regular, continuous care often need fewer appointments.

Continuity of care helps reduce emergency visits and hospital stays for conditions that can be treated earlier. This saves money and improves fairness, especially in poorer areas. While other countries have kept strong continuity of care, it has declined in the UK—but with the right steps, Wales can turn this around.

Getting fast GP appointments is important, but always seeing the same doctor / nurse also has big benefits. Focusing only on speed can make it harder to keep that continuity. Plans are being developed to improve this over the next few years in Wales.

Connected digital and data systems

Connected digital and data systems are tools that help health and care services share information safely and work better together. This includes things like electronic health records, apps, and secure data sharing between services. These systems make it easier for professionals to coordinate care, and for people to access their health information and support when they need it.

Digital technology can improve healthcare by making services more joined-up and personalised. But not everyone benefits equally. Younger and wealthier people often adapt more easily, while others face barriers like digital exclusion, privacy concerns, or lack of support. To be fair, systems must be inclusive and offer both digital and non-digital options.

Health data can help improve planning, teamwork, and early support. Linked data means securely joining up information from different places—such as GP records, hospital visits, and test results—to give a more complete view of a person's health. This helps identify health needs sooner and makes care more proactive. However, delays in access, trust concerns, and system issues need to be addressed through clear rules and careful planning.

Remote care and digital tools like the NHS App can make it quicker and easier to get support, but care must still be fair and high quality. These tools work best when staff are well trained, and systems are designed to meet real needs. Any savings made through technology should help those who need extra support.

Artificial Intelligence (AI) is being used more in healthcare. It can help spot health problems early, ease admin tasks, and focus care on people most at risk. But it also comes with risks, such as biased results or high costs, so it must be used with care and clear checks in place. There is also the high carbon footprint of AI to consider.

Technology can help improve care and prevention, but success relies on teamwork, trust, and services being built around what people need—not just the technology itself. Following the Digital Service Standards for Wales can ensure consistent, efficient, and user-focused improvements. New technology should only be used when there's strong evidence it works. It's also important to keep checking that it brings the improvements expected, and to identify any unintended consequences such as exacerbating health inequalities.

Shift upstream in investment of resources to deliver prevention at scale

Shifting investment upstream to scale prevention means redirecting resources earlier to focus on preventive measures and reduce future healthcare costs.

There is strong support for shifting care closer to home, reducing hospital visits, and focusing on prevention. This approach eases pressure on hospitals, costs less, and strengthens health systems to be better prepared for future challenges. This change means doing more to stop people from getting ill and offering more care in local places, like GP surgeries or community clinics. Although this idea is widely supported and included in Welsh policies, making it happen in practice is still difficult—especially when it comes to moving money and resources to where they have the biggest impact on keeping people well.

Stakeholders have stressed the need for a funding system to shift resources from hospitals to primary and community care. However, this has proven difficult, with funding and staffing pressures creating a growing crisis in delivering care at this level.

Many long-term health conditions like heart disease, musculoskeletal and mental health can be prevented if risks are tackled early. Taking action sooner improves people's health, reduces the need for emergency care, and saves money. Although prevention is supported in policy, it's still hard to put into practice because of changing population needs and a system that often focuses more on treating illness than stopping it in the first place.

Prevention needs to be built into everyday care and all health policies. It's a cost-effective way to help people stay healthy and avoid illness. Programmes like screening and vaccinations work well because they take a joined-up, system-wide approach.

The Prevention-Based Health and Care: A framework to embed prevention in the health and care system in Wales report outlines four steps: build momentum, define measurable goals, show evidence of impact, and make prevention central to healthcare. It turns policy into action, supporting better care and funding solutions in Wales.

The Right Workforce and Skill Mix

"A Healthier Wales: Our Workforce Strategy for Health and Social Care" is a 10-year plan to build a skilled, valued workforce for Wales. It focuses on wellbeing, inclusion, retention, and the Welsh language, addressing challenges like funding and COVID-19. Phase two (2024–2027) aligns with key plans to tackle workforce issues and improve sustainability. The 2024 Strategic Workforce Plan for Primary Care sets out actions to support training, leadership, teamwork, and technology for a healthy, motivated workforce.

The NHS is facing major staff shortages, especially in general practice. These problems started before COVID-19 but have worsened with rising demand. Many staff are leaving due to burnout, high workloads, and limited chances to grow their careers. It's also hard to recruit new staff, especially from abroad, because of visa and training challenges.

Some newly qualified GPs can't find jobs, which means they leave the NHS or go overseas. This affects patient care, leading to longer waits, lower service quality, and worse outcomes—especially in poorer areas. Involving other health professionals in new roles has helped improve access, but further evidence is required to assess the overall costs, quality and impact of this approach.

Fixing staff shortages needs long-term planning, proper funding, and support for training in the areas that need it most. Working better as a team across different professions and having enough trained staff to meet the needs of the population, will lead to better quality care that's delivered more quickly.

A strong primary and community care workforce depends on different health professionals working together and making sure patients see the right person for their needs. To focus more on prevention, we also need to support a wider range of staff, including those who don't have clinical qualifications and those working in roles that connect people with local activities and support in their community; this is called 'social prescribing'.

Examples from NHS dentistry and pharmacy show that giving staff the right training helps everyone contribute more effectively, making better use of skills across the team without increasing pressure on others. The All Wales Diabetes Prevention Programme is a good example of how prevention can be built into care by using the whole team, supported by strong leadership and regular checks to see what works. When professionals understand each other's roles and work together care becomes more joined-up and effective.

Staff wellbeing needs to be a top priority to ease current pressure. New roles should support, not replace, existing ones. When services work together in an integrated way, professionals can focus on what they do best, reducing delays and repeated work. A strong team approach means patients are seen by the right person at the right time, making care quicker and more effective.

There are many ways to deliver this joined-up, local care. In Wales, any new models should be designed around what local communities need, and carefully checked to make sure they improve outcomes for both patients and staff, especially in tackling health inequalities.

Care delivered closer to home

Care closer to home refers to shifting healthcare services from hospitals into local or community settings. This approach makes care more accessible and convenient, helps people stay healthier, reduces the need for hospital visits, and supports a more efficient use of resources. To make it work, staffing and system challenges must be addressed, ensuring that care remains coordinated and patient-focused. Supporting prevention and local services is key to reducing pressure on hospitals.

To support care closer to home digital tools like the NHS app may help and support proactive care. Joined-up care and local solutions should focus on what communities need, helping to take pressure off hospitals.

To make care closer to home work long-term, there needs to be strong leadership, the right funding, and support for staff. Resources should match the needs of local communities and reward prevention-based care. Working together, planning with communities, and keeping a clear long-term goal will help build a fairer and more effective health and care system.

Joining up health and care services helps people get better support and reduces pressure on hospitals. It works best when staff from different services including the third sector, share information, work together, and focus on local needs.

In the future, people want clearer access to local care, more group appointments for support, and services that treat them as a whole person—not just their illness. Strong leadership, good planning, and fair funding will be key to making this happen.

Enabling Financial Models

Enabling financial models are ways of funding health and care services that support teamwork, new ideas, and long-term improvements.

Investing in local health and care services helps reduce hospital demand and improves health, especially when care is focused on prevention. But current funding doesn't always support areas that need it most, particularly those with higher levels of deprivation. Short-term funding and rigid systems also make it harder for services to work together.

To fix this, funding should match the needs of each community, helping to reduce health inequalities. Future financial models must support fair pay, long-term planning, and high-quality care across all services. New approaches—like co-funding—must also be carefully managed to avoid unintended problems.

Next steps for the start of Phase two

Making Change Happen Together
Wales has strong health policies, but we now need to focus on turning ideas into action. This means working closely with partners and removing barriers, with support and leadership from decision-makers.

Planning the Right Workforce
Exploring new ways of working is essential to ensuring the right staffing for the future. This includes listening to frontline teams and using expert support from organisations like Public Health Wales.

Bringing Care Closer to Home
Moving care into communities is a key goal, but we need to test what really works. That means involving both senior leaders and staff who deliver care every day.

Working as One Team
While GPs are vital, other professionals like nurses, pharmacists, dentists, social care and third sector staff also play a big role. A deeper understanding is needed of how the whole team can effectively work together, and overcome gaps in training, funding, and communication.

Fixing Digital and Data Barriers
Good digital systems help join up care, but Wales still faces challenges in this area. These need urgent action to avoid slowing down progress toward better, more proactive care.

By 2035, through collaborative efforts and a commitment to public health principles, we move closer to our vision of local, accessible, equitable services provided by happy and valued staff.

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Gweithio gyda'n gilydd i greu Cymru iachach

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