

## **Strategic Programme for Primary Care**

## **Programme Highlight Report**

Reporting period: 1 December 2019 to 31 January 2020

**Presented: February 2020** 

An overall programme rating of GREEN has been assigned by the Strategic Programme Board.

Critical review / serious intervention required / delivery compromised.	Intervention / adjustment required to deliver on time / to specification.	On track to deliver on time / as per specification.
		Feb 20

Summary: An executive summary of this report is provided within the National Primary Care Board Strategic Programme Progress Report – February 2020.

Work Stream Updates: RAC (Previo Curren Predict	vious / ent /	Overview of issues, exceptions and risks	Priorities for Next Quarter
1. Prevention and A A Wellbeing	<ul> <li>A A Working group and project team meetings held. Outcome: progress tracking and prioritisation of work for 2020-21 complete.</li> <li>9 Dec - All-Wales Social Prescribing workshop held. Outcome: social prescribing task &amp; finish groups x 4 to be established, each reporting into this work stream.</li> <li>Improved programme alignment with <i>Help Me Quit</i> (deep-dive presentation received Jan 20).</li> <li>Continuous improvement of the <u>PCNA</u> tool - Plan developed for integration of Primary Care Needs Assessment tool and Primary Care Measures. Plan includes identifying 'Topic Curators' to develop themes and take forward quality improvement actions.</li> </ul>	<ul> <li>Exception for approval (Feb 20): As approved by NPCB in Dec 19, the publication of the framework to support prevention in clinical settings was changed from Dec to Jan 20. In view of a new lead consultant being appointed and a request for further risk topics being applied, the NPCB are asked to approve a publication date of March 20, with the understanding that a continuous improvement approach is used (e.g. any learning from applying other clinical risk areas are made).</li> <li>Exception approved (NPCB Dec 19): work stream scope has been extended to include:         <ul> <li>Inverse Care Law Programme</li> <li>Green Health.</li> </ul> </li> <li>Issue: Challenges continue in obtaining Make Every Contact Count (MECC) training completion data. This data is required to enable health boards to set informed, local targets for 2020-21. A two-phase approach in progress:         <ul> <li>A work-around to obtain a one-off, immediate data extract</li> <li>Data &amp; digital work stream to identify an appropriate, continuous sharing process.</li> </ul></li></ul>	<ul> <li>To resolve phase 1 of the MECC data sharing issue and handover phase 2 to the data and digital work stream.</li> <li>To define a suite of deliverables, provide oversight and establish a reporting mechanism for: <ul> <li>Social prescribing task &amp; finish groups x 4.</li> <li>Inverse Care Law Programme</li> <li>Green health.</li> </ul> </li> <li>(Subject to NPCB approval) To publish the framework for prevention in clinical settings in March 20, with the understanding that a continuous improvement approach is used (e.g. any learning from applying other clinical risk areas are made).</li> <li>To identify any national opportunities/gaps arising from the Cluster IMTP responses.</li> </ul>

Work Stream Updates:	RAG (Previous / Current / Predicted)	Key Activities and Achievements	Overview of issues, exceptions and risks	Priorities for Next Quarter
			<ul> <li>Issue: The following deliverables do not have any activities assigned within the 2020-21 work plan at present:         <ul> <li>Supporting the delivery of national programmes relating to healthy weight or physical inactivity.</li> <li>Defined role within Building A Healthier Wales (BAHW).</li> </ul> </li> <li>The work stream is awaiting updates from these programmes in order to assess the actions required from a primary care perspective.</li> </ul>	
2. 24/7 Model	GG	<ul> <li>Second round out of hours (OOH) peer reviews and on-site visits in progress.</li> <li>All-Wales primary care escalation levels implemented and used to support initial reporting to Welsh Government.</li> <li>'Clinical Triage' Task and Finish Group established and the first onsite GP practice visit undertaken 27 Jan 20.</li> <li>First national teleconference to support winter delivery held 20 Jan 20.</li> <li>Sub-group teleconference held to progress the mapping of direct access primary care contracted services – 31 Jan 20.</li> </ul>	<ul> <li>Issue: Initial challenges on Health Board engagement to support winter theme implementation, learning and good practice.</li> <li>Issue: OOH Mental Health tool was agreed in principle over two years ago but there were difficulties operationalising it.</li> </ul>	<ul> <li>Second round peer reviews: learning to be gathered and actions identified.</li> <li>Continuation of monthly winter teleconferences.</li> <li>Development of winter themes evaluation framework.</li> <li>Draft 'OOH' Urgent Dental and Mental Health crisis pathways to be launched.</li> <li>Production of draft All-Wales OOH Palliative Care Pathway.</li> <li>Continuous, strategic work with Welsh Government on potential national, alternative escalation system.</li> </ul>

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		<ul> <li>National Unscheduled Care Board provided with an overview of primary and community care key actions and regular progress reports provided.</li> </ul>		
3. Data and Digital Technology		<ul> <li>Welsh Government Digital Director assigned as the technology lead. First meeting date scheduled 3 Mar 20.</li> <li>A set of questions to support the reporting of pressure levels within primary care have been produced. Health Board reporting to Welsh Government commenced Jan 20.</li> <li>The survey to compile Cluster IT system requirements has been developed with stakeholder input and platform barriers overcome.</li> <li>GP contact data validation exercise being undertaken – please note <i>Issue</i>.</li> </ul>	<ul> <li>Exception approved (NPCB Dec 19): the timeline to produce recommendations on Cluster IT system requirements (and developments) to be produced by end of Mar 20.</li> <li>Issue: The agreed access standard template requires two digital solutions:         <ul> <li>online solution for practice-level input</li> <li>a tool to compile/ analyse information at Health Board level.</li> </ul> </li> <li>Issue: Digital solutions require NWIS resource. This has recently been prioritised to meet QAIF requirements.</li> <li>Issue: Developing guidance for stakeholders on work requests for the National Informatics Plan has been deprioritised. Modification to timeline may be required. Review scheduled 26 Feb.</li> <li>Issue: GP contact data validation exercise has received a limited response and data signals large variance between local and nationally gathered intelligence. Report due to work stream meeting on 4 Mar 20.</li> </ul>	<ul> <li>Continuation of work with NWIS to develop digital solutions to support:         <ul> <li>escalation reporting</li> <li>access standards</li> <li>Welsh Government Delivery Milestones</li> </ul> </li> <li>Launch Cluster survey, analyse results, use findings to inform and prioritise the work required to improve IT systems.</li> <li>Review results of the GP Contact Data validation exercise. Next steps (to support roll out of data across Wales) to be determined. Report due to work stream meeting on 4 Mar 20.</li> <li>To conclude scoping of <i>Time Spent at Home</i> and present a whole system measure for use across Wales.</li> </ul>

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			<ul> <li>Issue: Camden CCG no longer use <i>Time Spent at Home</i> (rationale unknown). An alternative measure may need to be implemented.</li> <li>Issue: Welsh Government Delivery Milestones are not developed in line with the WISB standard development processes. The work stream is working reactively to identify pragmatic and consistent measures and data sources accordingly.</li> </ul>	
4. Workforce and Organisational Development	GAA	<ul> <li>Working group and project team meetings held. Given recent developments have resulted in a refocus of deliverables proposed for 2020-21 – see exception reporting details.</li> <li>Appointment of new Director of Primary Care Co-Lead: Jamie Marchant.</li> <li>Wales National Workforce Reporting System (WNWRS) – further guidance issued to stakeholders and data challenges overcome.</li> <li>Business case to support in-house demand and capacity tool submitted to Welsh Government for initial review 24 Jan 20.</li> </ul>	<ul> <li>Exception for approval (Feb 20): NPCB asked to approve the development of a refreshed set of deliverables for 2020-21. This would support a relaunch of the workstream in April 2020.</li> <li>Exception approved (NPCB Dec 19): Exploring in-house solution to deliver a demand and capacity tool is now within scope.</li> <li>Exception approved (NPCB Dec 19): the timeline and development approach in producing a Cluster workforce planning template has changed from November 2019 to April 2020, with a view to launch at a IMTP Cluster Masterclass Event in May 20.</li> <li>Risk: Maintenance and content management of the newly launched OOH</li> </ul>	<ul> <li>Wales National Workforce Reporting System (WNWRS) – Data extraction will take place first week of Feb 20. An eight week data validation period will follow; ready for a report to be produced in May 20.</li> <li>Engage with Welsh Government to progress demand and capacity business case.</li> <li>Launch of 'Masterclass for Workforce Planning' webinar.</li> <li>Subject to NPCB approval, relaunch of work stream in April 2020.</li> </ul>

Work Stream Updates:	RAG (Previous / Current / Predicted)	Key Activities and Achievements	Overview of issues, exceptions and risks	Priorities for Next Quarter
		<ul> <li>156/211 GP practices have uploaded a profile onto the GP Wales portal.</li> <li>Heads of Primary Care are currently testing the 'Masterclass for Workforce Planning' webinar. Once testing is complete, a go-live date will be agreed.</li> </ul>	<ul> <li>website will be subject to a change of ownership in March 2020.</li> <li>Issue: Delivery of training for 'GP trainers' is being negatively impacted by lack of physical space.</li> <li>Issue: Discrepancy between relocation expenses for returning GPs in England versus Wales exists.</li> </ul>	
5. Communication and Engagement	A G G	<ul> <li>14 Jan 20 - Group meeting held. Included a presentation from Hywel Dda University Health Board, demonstrating their "<u>Teulu</u> Jones" communications concept.</li> <li>16 Jan 20 - Endorsement of new approach/concept for a national campaign by National Communications Hub (all comms leads from health boards, as well as NWIS, HEIW, Public Health Wales).</li> <li>Positive stakeholder feedback re responsiveness to, and level of engagement with Communications Leads.</li> <li>Close working with Public Health Wales to support the Primary Care Model for Wales insight work.</li> </ul>	<ul> <li>Issue: Early collaborative working with Health Boards has signalled that further investment and time to prepare local campaigns for national message inclusion is required. This will result in modification to the national campaign approach and launch date.</li> <li>Risk: Communications staff (Welsh Government and health boards) may have different priorities and resources available to support national campaign (e.g. Brexit and more recently coronavirus).</li> </ul>	Work-up of "Teulu Jones" concept with the PR Agency and continuous engagement with the Bi-Monthly Communications Hub. To progress discussions with health board comms leads and primary care leads on a refreshed visual utilising learning from existing local materials.

Updates:	(Previous / Current / Predicted)	Key Activities and Achievements	Overview of issues, exceptions and risks	Priorities for Next Quarter
6. Transformation and the Vision for Clusters.	GGGG G G G G G G G G G G G G	<ul> <li>made available online.</li> <li>Release of the Cluster Leads Handbook – <u>Cluster Working in</u> <u>Wales.</u></li> <li>The Primary Care Model for Wales Evaluation framework is subject to intervention and additional check- points. See Issues.</li> <li>Continuous monitoring and progress reporting against the Register of Cluster Challenges.</li> <li>Resource secured to support for the Directors of Primary and Community Executive Group and Heads of Primary Care group to achieve their transformative agendas has been made.</li> <li>Links made with the National Director for Mental Health to discuss alignment of programmes.</li> </ul>	<ul> <li>Issue: In Dec 19, there was non-delivery of 13 draft logic models as scheduled to inform the Primary Care Model for Wales Evaluation Framework. This prompted an additional check-point meeting and other interventions needed. This deliverable has potential to create an exception report.</li> <li>Issue: Pause and review status assigned to a refreshed 'Vision for Clusters' descriptor. This is based on a different cluster maturity level presented at the Cluster-themed National Primary Care Conference, Nov. 2019 and other feedback to be considered including: <ul> <li>Health Board Communication Leads input</li> <li>Input from the King's Fund regarding advice on simplying the vision.</li> </ul> </li> </ul>	<ul> <li>Continue with targeted intervention and additional check-points to manage the Primary Care Model for Wales Evaluation. Workshop planned 19 Feb 20.</li> <li>Working with Welsh Government colleagues to develop masterclass for integrated planning.</li> <li>To update the published Register of Cluster Challenges.</li> <li>To produce a development plan/timeline for a refreshed 'Vision for Clusters' descriptor.</li> <li>Continuous stakeholder engagement, alignment and promotion of the primary care contribution and developments.</li> </ul>

Appendix A