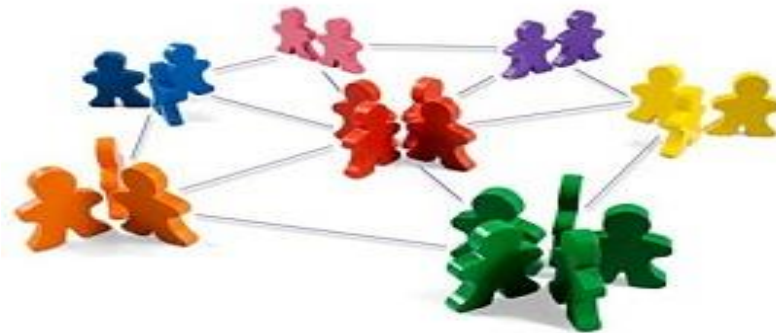# Three Year Cluster Network Action Plan 2017-2020

Bridgend East Cluster

VERSION CONTROL:

July 2017

Introduction

The Bridgend East Cluster Network includes a cluster of six GP practices, five of which are training practices. The cluster network estate includes six main surgeries and one branch. Two practices, Newcastle and Ashfield are engaged in discussions to merge. There are 13 community pharmacies, 14 dental practices, six residential homes and three nursing homes. We serve a population of 71,248 in a predominantly urban environment. The particular features of our population are in line with Welsh average. Patient numbers are rising due to our location around the M4 corridor with an increasing ageing population. There is an increasing multicultural population and deprivation is greater than the Welsh average and the cluster is experiencing increasing social needs. Overall the prevalence for chronic disease is slightly lower than other areas in Bridgend.

In 2014/15 the six GP Practices in the East Network of Bridgend became the first GP Federation. Pen y Bont Health is Wales' first not-for-profit social enterprise consortium of GPs with an NHS Wales pacesetter status which provides a platform for the individual independent contractors to legally join together to deliver services on behalf of each other for the population served with scope to also extend service delivery in the community beyond the cluster network, e.g. whole County Borough or ABM footprint. The federation will accelerate the maturity of the cluster and will allow resources to flow in a sustainable way improving access to services and better pathways for patients.

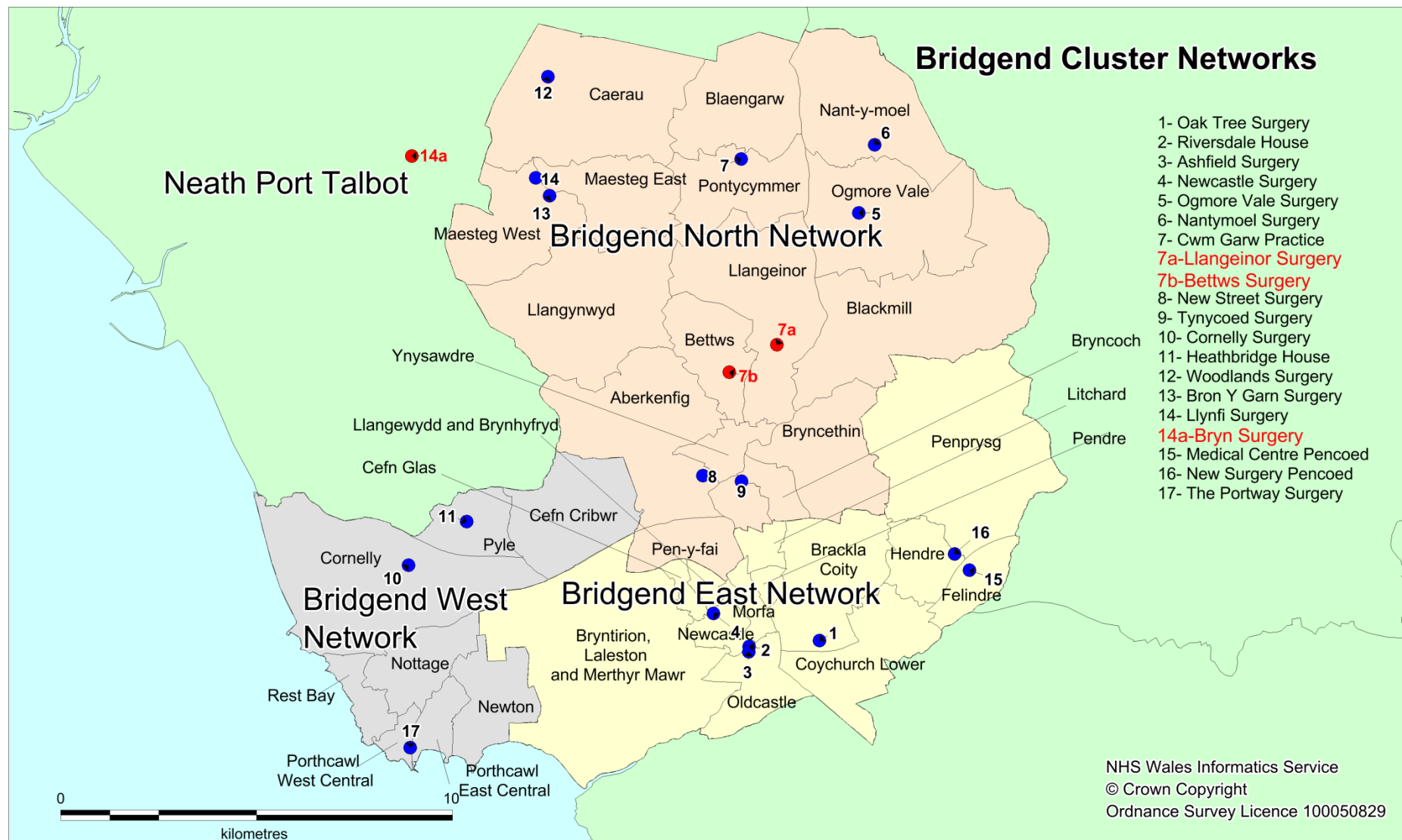The cluster network achieved a number of other objectives during 2016/17 including:

- With the provision of the Cluster Pharmacist the provision of medication reviews including those patients resident within care homes was increased resulting in significant cost savings for unused/no longer appropriate medications, in line with the principals of Prudent Healthcare.
- Improved access to mental health and wellbeing services through the provision of a local Tier 1 Mental Health counselling service.
- Increased access and signposting to support self care and independence through third sector champions and the development of a new website **www.pybhealth.com** designed to empower patients to be better informed about health issues before they see their GP.

The Bridgend East Action plan will support the cluster to work collaboratively to:

- Continue to understand local health needs and priorities.

- Develop an agreed Cluster Network Action Plan linked to elements of the individual Practice Development Plans.

- Work with partners to improve the coordination of care and the integration of health and social care.

- Work with local communities and networks to reduce health inequalities.

The Cluster Network Action Plan includes:

- Objectives that can be delivered independently by the network to improve patient care and to ensure the sustainability and modernisation of services.

- Objectives for delivery through partnership working

- Issues for discussion with the Health Board

Bridgend Cluster Networks

Neath Port Talbot

Bridgend North Network

Bridgend West Network

Bridgend East Network

Caerau
Blaengarw
Nant-y-moel
Maesteg East
Pontycymmer
Ogmore Vale
Maesteg West
Llangeinor
Llangynwyd
Blackmill
Bettws
Aberkenfig
Bryncethin
Ynysawdre
Bryncoch
Litchard
Llangewydd and Brynhyfryd
Penprysg
Pendre
Cefn Glas
Cefn Cribwr
Cornelly
Pyle
Pen-y-fai
Brackla
Coity
Hendre
Felindre
Nottage
Morfa
Newcastle
Coychurch Lower
Bryntirion, Laleston and Merthyr Mawr
Oldcastle
Rest Bay
Newton
Porthcawl West Central
Porthcawl East Central

1- Oak Tree Surgery
2- Riversdale House
3- Ashfield Surgery
4- Newcastle Surgery
5- Ogmore Vale Surgery
6- Nantymoel Surgery
7- Cwm Garw Practice
7a-Llangeinor Surgery
7b-Bettws Surgery
8- New Street Surgery
9- Tynycoed Surgery
10- Cornelly Surgery
11- Heathbridge House
12- Woodlands Surgery
13- Bron Y Garn Surgery
14- Llynfi Surgery
14a-Bryn Surgery
15- Medical Centre Pencoed
16- New Surgery Pencoed
17- The Portway Surgery

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kilometres

KEY THEMES & PRIORITIES IDENTIFIED FROM PRACTICE DEVELOPMENT PLANS

- Mental Health Counselling

- Cluster Pharmacist

- Cross border working

- Working with the Federation

- Email and Telephone advice lines

- Pen Y Bont Health Website

- Health Board interface programme

- Cluster Physiotherapy pilot

- Core funding for proven services

- GP Triage models

Services Delivered

	Newcastle	Oaktree	Riversdale	Ashfield	Medical Centre	New Surgery
Additional Clinical Services						
Cervical Screening	Y	Y	Y	Y	Y	Y
Contraceptive Services	Y	Y	Y	Y	Y	Y
Vaccinations & Immunisations (Non Childhood)	Y	Y	Y	Y	Y	Y
Childhood Vaccinations & Immunisations	Y	Y	Y	Y	Y	Y
Child Health Surveillance	Y	Y	Y	Y	Y	Y
Maternity Services	Y	Y	Y	Y	Y	Y
Minor Surgery	Y	Y	Y	Y	Y	Y
Directed Enhanced Services						
Childhood Immunisations	Y	Y	Y	Y	Y	Y
Influenza for those 65 and over and others at risk groups (2-3 year olds)	Y	Y	Y	Y	Y	Y
Extended Minor Surgery	N	Y	Y	Y	Y	Y
Care of People with Learning Disabilities	Y	Y	Y	Y	Y	Y
Care of People with Mental Illness	Y	Y	Y	Y	Y	N
National Enhanced Services						
Anti Coagulation (INR) Monitoring	Y	Y	Y	Y	Y	Y
Shingles Catch- Up Programme	Y	Y	Y	Y	Y	Y
Services to patients who are drug/alcohol misusers	N	Y	Y	N	N	N
Local Enhanced Services						
Shared Care	Y	N	Y	Y	Y	Y
Gonadorelins / Zoladex	Y	Y	Y	Y	Y	Y
Immunisations during outbreaks (MMR)	Y	Y	Y	Y	Y	Y
Care Homes	N	Y	Y	Y	Y	Y
Care of Homeless Patients	N	Y	Y	Y	Y	Y
Hep B Vaccination of At Risk Groups	Y	Y	Y	Y	Y	Y

Wound Management A	Y	Y	Y	Y	Y	Y
Wound Management Part B	N	N	N	Y	N	N
Wound Care SLA Feb 17- June 17	N	N	N	N	N	N
Men C Catch Up for University	Y	Y	Y	Y	Y	Y
Cross Border Patients	N	Y	N	Y	Y	Y
Anti Coagulation Level 4	Y	Y	Y	Y	Y	N

Strategic Aim 1: To understand and highlight actions to meet the needs of the population served by the Cluster Network

No	Objective	Outcomes	Milestones	Assigned to (key partners)	Progress to date	RAG Rating
1	**Review Public Health Data and include outcome in all PDPS and complete Practice sustainability Assessments**	**Reflection of Public Health Data in PDPs**	**Submission of each Practice PDPs**	**All Practices in Cluster**	• 2017 -18 All practices to have submitted PDPs by 30 June 2017 • 2018 -19 All practices to have submitted PDPs by 30 June 2018 • 2019-20 All practices to have submitted PDPs by 30 June 2019	**G**
2	**Targeted use of the Cluster Pharmacist resource to ensure**	**Reduced Medicines waste**	**Ongoing reviews over the 3 years, subject to continued funding**	**Cluster Pharmacists** **All Practices**		**G**
3	**Healthy Living Project – targeted at school age children**	**Increased exercise and healthy eating amongst school, age children in the Cluster area**	**November 2017 – first sessions completed. For review into years 2 & 3, subject to resource allocation**	**Pen Y Bont Federation/Public Health**		**R**
4	**To maximise uptake of national Public Health Campaigns**	**Improved take up of services**	**Winter 2017/18**	**All Practices in Cluster**		**G**

No	Objective	Outcomes	Milestones	Assigned to (key partners)	Progress to date	RAG Rating
	including Flu, Stop Smoking, Cervical Smear, Bowel Screening		**Winter 2018/19 Winter 2019/20**	**District Nurses** **Public Health Wales**		

Strategic Aim 2: To ensure the sustainability of core GP services and access arrangements that meet the reasonable needs of local patients including any agreed collaborative arrangements

No	Objective	Outcomes	Milestones	Assigned to (key partners)	Progress to date	RAG Rating
1	**Consider Alternative models of patient care and access**	**Reduced complaints regarding access**	**October 2017 review**	**Oaktree/Penc oed MC**	• PMC live telephone Triage July 2017 • Oaktree undertaking visit to Chepstow and Clydach to scope alternatives Summer 2017	**A**
2	**Promote Pen Y Bont Health Website**	**To increase self treatment options**	**Monthly monitor of website traffic. For review into years 2 and 3, subject to resource allocation**	**All Practices in Cluster** **Pen Y Bont Health Ltd**		**G**

No	Objective	Outcomes	Milestones	Assigned to (key partners)	Progress to date	RAG Rating
3	Establishment of Prescribing Hub for repeat medication requests via the telephone	More efficient management of repeat medication requests	Establishment of HUB October 2017 and final review March 2018	Medicines Management Team at ABMU HB/All Practices in Cluster	• Practice Managers on the steering group • Lead PM (PRT) to be on interview panel	G

Strategic Aim 3: Planned Care – to ensure that patient's needs are met through prudent care pathways, facilitating rapid, accurate diagnosis and management and minimising waste and harms. To highlight improvements for primary care / secondary care interface.

No	Objective	Outcomes	Milestones	Assigned to (key partners)	Progress to date	RAG Rating
1	Cluster representation at bi-monthly interface forum	Enable Cluster feedback and priorities	Bi-monthly	Lead GPs		1 A
2	The provision of Mental Health Counselling Service via Pen Y Bont Health Ltd	Improved patient access to MH counselling	Quarterly Review of activity. Following successful pilot, to be core funded to release	PM Lead (JC MCP)		2 G

No	Objective	Outcomes	Milestones	Assigned to (key partners)	Progress to date	RAG Rating
			funds for further patient focused services			
3	Sustained used of ABMU email advice lines	Decreased referrals/more targeted referrals into secondary care	Ongoing utilisation	All Practices in Cluster		A

Strategic Aim 4: To provide high quality, consistent care for patients presenting with urgent care needs and to support continuous development of services to improve patient experience, co-ordination of care and the effectiveness of risk management. To address winter preparedness and emerging planning.

No	Objective	Outcomes	Milestones	Assigned to (key partners)	Progress to date	RAG Rating
1	Promote Choose Well to all patients	Demand placed upon appropriate services	Winter 2017/18, 2018/19, 2019/20	All Practices in Cluster		G
2	Promote Pen Y Bont Health Web Site to all patients	To encourage self help alternatives before	Winter 2017/18, 2018/19, 2019/20	All Practices in Cluster		G

No	Objective	Outcomes	Milestones	Assigned to (key partners)	Progress to date	RAG Rating
		contacting GP/OOH services				

Strategic Aim 5: Improving the delivery of dementia; mental health and wellbeing; cancer; liver disease, COPD (delete as appropriate).

No	Objective	Outcomes	Milestones	Assigned to (key partners)	Progress to date	RAG Rating
1	**COPD**	**Improve capacity and patient outcomes**	**Full review March 2018**	**All Practices**	• Agree small steps of change to test out any new ways of working in the practice or cluster • Share the results of small tests of change with peers in the cluster (whether positive or negative)	1 R
2	**Liver**	**Improve capacity and patient outcomes**	**Full review March 2018**	**All Practices**	• Agree small steps of change to test out any new ways of working in the practice or cluster • Share the results of small tests of change with peers in the cluster (whether positive or negative)	2 R
3	**Dementia**	**Improve capacity and patient outcomes**	**Full review March 2018**	**All Practices**	• Agree small steps of change to test out any new ways of working in the practice or cluster • Share the results of small tests of change with peers in the cluster (whether positive or negative)	3 R

Strategic Aim 6: Improving the delivery of the locally agreed pathway priority.

No	Objective	Outcomes	Milestones	Assigned to (key partners)	Progress to date	RAG Rating
1	**Prescribing HUB – new telephone repeat ordering service**	**To improve medicine management for patients**	**Operational organisation: June – Sept 2017** **Live to patients October 2017** **Service review March 2018**	**ABMU Health Board Medicines Management** **Practice managers**		**G**

Strategic Aim 7: Deliver consistent, effective systems of Clinical Governance and Information Governance. To include actions arising out of peer review Quality and Outcome Framework (when undertaken).

No	Objective	Outcomes	Milestones	Assigned to (key partners)	Progress to date	RAG Rating
1	**Review of retired QOF domain areas**	**Ensure standard of care maintained**	**November Review**	**All Practices in Cluster**		**R**

No	Objective	Outcomes	Milestones	Assigned to (key partners)	Progress to date	RAG Rating
2	Implement the new Data Protection Act changes	Ensure new legal requirement are met	March 2018	All Practices in Cluster		R
3	CGSTAT Review	To ensure practice procedures and CG are optimised	By March 2018	All Practices in Cluster		R
4	Agree Cluster Network Annual report	CND010W refers	March 2018	All Cluster members		R

Strategic Aim 8: Other Locality issues

No	Objective	Outcomes	Milestones	Assigned to (key partners)	Progress to date	RAG Rating
1	Cross Border issues	To streamline the communications between practices and othe Health Boards		Health Boards Practices		A

No	Objective	Outcomes	Milestones	Assigned to (key partners)	Progress to date	RAG Rating
2	Premises Development – as identified by individual practices PDPs	Practices and Health Board to review and implement agreed requirements		Health Board Practices		A
3	ABMU Health Board to recognise success in cluster funded projects and move to core fund where appropriate releasing funds to re- invest in new proposals	New funding for new projects		Health Board		R

RISK REGISTER

ID Number	Date	Description of Risk and Impact	Mitigation	RAG	Lead
1	**July 2017**	Bridgend Locality of ABMU Health Board possible move to Cwm Taff (as Per WG Finance Minter announcement 17/7/17)	Open engagement with Health Board to ensure any transitional arrangements are clear and transparent.	**R**	**LHB**
2	**July 2017**	Cross Border issues – Cwm Taff and Cardiff and Vale	Ensure LHB retain issue as priority to ensure patient related risks are minimised	**A**	**LHB**
3	**July 2017**	Premises Issues will affect practices abilities to provide fit for purpose sites for services. Practices particularly affected in Cluster: Ashfield Surgery; Medical Centre Pencoed; Newcastle Surgery	Ongoing engagement with LHB and where appropriate Welsh Government to priorities premises planning	**A**	**Cluster/LHB**
4	**July 2017**	As identified by practice PDPs - GP Succession planning	Practices to consider skill mix and succession planning, via the sustainability assessments	**A**	**Practices within Cluster**
5	**July 2017**	Relationships between cluster and federation	Ensuring the responsibility organisations appreciate each other's part in providing change in community servicers	**A**	**Cluster and Federation leads**
6	**July 2017**	Lack of funding for new services, with project funding tied up in continuing projects	LHB commitment to fund successful services to release cluster funding for new projects.	**R**	**LHB**

7	July 2017	The DN service staffing levels - due to having the lowest staffing levels for any DN service in Wales (all Wales DN audit 2014, confirmed in June 2017 by all Wales DN forum to be unchanged) and having the lowest staffing in ABMUB	Health Board commitment to investigate causes and plan for resolution to avoid patient adverse incidents and low staff morale.	R	LHB