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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	25th July 2019		Agenda Item	3.4 (i)
Report Title	ARCH Portfolio Summary Update			
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Presented by	Siân Harrop-Griffiths, Director of Strategy			
Freedom of Information	Open			
Purpose of the Report	This paper provides an update on activity within the ARCH Portfolio since April 2019.			
Key Issues	<p>The ARCH Delivery and Leadership Group meets monthly, an update was received at each meeting on ARCH Projects.</p> <p>Key points to note in this report are:</p> <ul style="list-style-type: none"> • The inclusion of the ARCH project on Regional Neurological Conditions in the NHS Confederation “A Healthier Wales Report” • The work being done to develop a Regional Clinical Service Plan. • The progress made on the Interventional Radiology Project • The update provided on the Major Trauma Network 			
Specific Action Required <i>(please ✓ one only)</i>	Information	Discussion	Assurance	Approval
	✓			
Recommendations	<p>Members are asked to:</p> <ul style="list-style-type: none"> • NOTE the update on the ARCH Portfolio 			

ARCH PORTFOLIO UPDATE

1. INTRODUCTION

The purpose of this report is to provide the Swansea Bay University Health Board with an update on activity within the ARCH Portfolio since April 2019.

2. BACKGROUND

The ARCH Programme Board last met on 9th April 2019. Due to significant change at senior leadership level, the Programme Board due to take place in July had to be cancelled. Since then, there have been two meetings of the ARCH Delivery and Leadership Group (DLG), May and June, at which updates on projects were reported. The next Programme Board is 09 October 2019.

ASSESSMENT

3.1 DLG Chair's Update

A Healthier Wales

A recent Wales NHS Confederation briefing, summarising the progress in Wales towards implementing 'A Healthier Wales' has recognised the work of ARCH in developing a regional model for neurological services in South West Wales. This project was also referenced by the Chief Executive of NHS Wales at the recent national Health and Social Care Leadership event. The projects highlighted in the briefing are described as examples of patient-centred initiatives which have worked to overcome barriers through collaborative working. The publication can be seen in **Appendix 1**, with reference to the specific work of ARCH on page 5.

ARCH Governance Arrangements

In May 2019, the DLG were informed that the tenure of the current Chair of the DLG, Karen Miles, the Director of Planning at Hywel Dda UHB, was coming to an end. It was agreed that the next two-year term of Chair would be undertaken by Swansea University. It has since been confirmed that Professor Keith Lloyd, Head of School of Medicine, will take on the role of DLG Chair, commencing in August 2019 and Professor Ceri Phillips, Head of the College of Human and Health Sciences will take on the Chair role from August 2020.

In addition to the leadership changes at DLG level, there have been changes at Programme Board level in recent months. This includes:

- The retirement of Andrew Davies, Chair of Swansea Bay University Health Board and the ARCH Programme Board;
- The retirement of Bernie Rees, Chair of Hywel Dda University Health Board;
- Professor Iwan Davies, Pro Vice Chancellor, Swansea University has been appointed to Vice Chancellor at Bangor University; and
- The appointment of Paul Boyle as Vice Chancellor in Swansea University, who commences his post in August 2019.

As part of his handover Andrew Davies has written to the ARCH partners to highlight the need to elect a new Chairman of the ARCH Programme Board and this will be discussed at the next Programme Board meeting in October.

Regional Clinical Service Plan

In April 2019, work began to prepare a Regional Clinical Service Plan (RCSP) that will set the ambitions and clear intentions for regional working and collaboration, firmly linked to both Health Board's clinical plans and Annual Plans/Integrated Medium Term Plans (IMTPs). In addition it will provide clarity on the scope of the regional work programmes and key deliverables for next 0-3 and 3-5 years. The draft RCSP will be presented to the JRPDC for consideration in August.

ARCH Workshop

The ARCH DLG will be holding a workshop in September 2019. The purpose of the workshop is to provide an opportunity to examine the regional priorities through the ARCH lens, taking into consideration both Health Boards' Organisational Strategies and the Swansea University Strategic Plan 2020. The workshop will provide a timely opportunity to determine what can more effectively be delivered using a collaborative regional approach. It will be a precursor to the next Programme Board in October, and a joint meeting of both Health Boards, anticipated to take place in October 2019.

3.2 Service Transformation Programme

The Service Transformation Board last met in May 2019. An update on project activity is detailed below.

Hyper Acute Stroke Unit (HASU)

The NHS Delivery Unit has completed some initial modelling work based on three clinically developed service models. The data includes demand and bed numbers, based on clinically agreed assumptions on suspected stroke numbers, access to diagnostic services and length of stay. Two further service models are being explored, these are relating to flows within Hywel Dda UHB. These models will be presented at the next Service Transformation meeting in July.

ARCH has supported work internally within both Health Boards to develop an integrated stroke pathway to ensure efficient and effective flow through the HASU. Two Health Board specific workshops have taken place. The Hywel Dda workshop (May) was designed to create a clinically driven, evidence-based stroke pathway which will support the flow out from the HASU and ensure equitable access to services across the Health Boards. The Swansea Bay workshop (June) explored the existing stroke pathway and develop an improvement programme to deliver a high quality, equitable and evidence-based service across the Health Board. The SBUHB workshop also informed the development of the IMTP Whole System Plan for stroke.

Current service modelling for the HASU includes the resident population of Bridgend. Given the Bridgend Boundary Change, the Director of Strategy has written to the Director of Planning in Cwm Taf Morgannwg UHB to determine whether this should continue to be the planning assumption for patient flows.

Cardiology

The Regional Cardiology Group met on the 28th May, at which the Work Programme for the project was agreed and signed off. A new Terms of Reference was agreed for a Regional Cardiology Steering Group which will oversee the delivery of the two identified project groups. The focus for these projects came from priorities established at the Regional workshop held in February 2019:

1. Bradycardia pacing
2. CT and MRI Imaging

Both projects are clinically-led and inaugural meetings will take place in July 2019. The focus of the first meeting will be to agree deliverables, outputs and timelines for delivery which will be summarised in the Project Initiation Document (PID).

Interventional Radiology (IR)

There is agreement across Health Boards that developing regional IR roles are an essential part of stabilising this very fragile service. A job description with a regional component is being developed and advertised to begin recruitment at a regional level. This is a positive development and reflects the mature discussions that have taken place between Health Boards in South-west Wales over recent months.

Following the baseline assessment of interventional competence across the region, agreement has been given that Hywel Dda will look to develop 2 locum consultants to take on more competencies and develop their roles. Swansea Bay have agreed to support this approach by hosting sessions at Morriston Hospital. It is a recognised ambition that holding planned procedures in Hywel Dda UHB and supporting the development of existing radiologists in Hywel Dda would reduce the number of referrals in to Morriston Hospital

Dermatology

Recognised for its service fragility in Hywel Dda UHB, Dermatology was identified early in the ARCH PDP as a service requiring support and stabilisation. Operational teams have been working in recent years to provide 'in year' solutions for this service and the longer term sustainability of this service is now being considered with support from the ARCH PMO. Opportunities have arisen to work with technology providers to provide innovative solutions to the problems faced by this service.

The Regional Dermatology Group has met twice and are in the process of developing a regional work plan and as part of that work a regional workshop is being organised for October 2019 to further examine pathways and innovative longer term, sustainable solutions.

ARCH has been invited to participate in a national group facilitated by the Life Sciences Hub Wales for the use of Artificial Intelligence (AI) to reduce the patient flow into the system. The national group includes members from within the NHS, industry and research sectors and the outputs of this work may help to inform solutions for dermatology in the future.

Neurological Conditions Regional Service

The Project Group have identified three key work streams for pathway/service re-design being:

- Headache
- Epilepsy
- Function

A standardised approach to headache referrals across the region has been agreed, along with a Neurological In-reach model and these will form part of the new service model. All stakeholders agree that the service would be best served and managed by a single service approach across the region.

A meeting has been held with to advise on the best course of action to engage with Primary Care teams to support the implementation of the proposed clinical model. The headache pathway has been agreed with clinicians prior to discussion with the Local Medical Committee (LMC) which took place in June 2019. The pathway was agreed and the Chair of the LMC intends to circulate the pathway widely.

An Implementation Plan and draft costed plan have been developed to support implementation.

The proposed model has been shared with the South Wales Neuro Alliances for feedback and engagement. Opportunities have been identified for co-production in third sector within each of the project work streams.

Digitisation

A series of four workshops were held throughout 2018 where Informatics teams were brought together to discuss current progress, issues, success and to identify any specific projects where the sharing of knowledge could facilitate a quicker implementation. Since then, there has been a hiatus in progress due to the work required to support implementation of the Bridgend Boundary Change. Due to these pressures, a pragmatic approach to the project has been taken to start with a small number of project collaborations and build on this in the future. The following projects have been prioritised:

- Patient Held Records/Digital Communications via Patient Knows Best
- Values Based Healthcare digital enablement
- PROMS mapping and approach
- WCCIS - sharing of approach and knowledge
- Data Centre rationalisation - exploration
- Pathology support – Phlebotomy digital workflow

Development of a draft Digitisation Work Programme is now underway.

Major Trauma Network

The Principal Project Manager has been appointed by the ARCH team to work across the South West region supporting both University Health Boards in delivering the local Trauma Unit requirements as part of the establishment of the Major Trauma Network which is expected to be operational by April 2020. A Band 4 Project Support Officer

has also been appointed to support this work. Both these posts have been funded by WHSSC.

Both Health Boards have appointed Clinical leads for 1 session per week, Key work for the next period includes delivering on the requirements for the Major Trauma Network Programme Business Case. The business case is being prepared by the Network with input from both Health Boards into their service requirements.

Each Health Board has set up Task and Finish groups to support this fast-paced project, with the aim of delivering the core requirements (staff and capacity resources) by April 2020, when the Network is planned to go live. These groups will meet on a monthly basis. Hywel Dda UHB is undertaking an engagement process in relation to Glangwili Hospital becoming the Trauma Unit, on an interim basis, whilst plans for a new build hospital are being developed. Within the Swansea Bay UHB case for change, resources to also support the specialist spinal and orthoplastics services have been requested.

Over the coming three months, each Health Board will need to firm up their business cases to support the implementation of the Network, to support the wider Programme Business Case to be presented by the All Wales Collaborative to WHSSC in September 2019.

One identified area for focus will be the creation of robust rehabilitation pathways for patients once they leave the Major Trauma Centre at University Hospital Wales and arrive back at local Trauma Units.

Wellbeing Programme

Representatives from the Wellbeing Programme Board last met on the 7th May. At this meeting, the group determined that the Wellbeing Programme is uniquely positioned to test the rigour of using a wellbeing lens to add value to the service transformation priorities already identified, in response to the strategic emphasis on “whole system working” within NHS Wales, thereby taking a whole systems approach.

This will take the form of identifying 2 high priority clinical pathways, aligned with priorities within the existing ARCH portfolio the value based health care agenda and/or the clinical plans and strategies from both Health Boards, and outlining a process that ensures we are addressing the whole patient pathway and concentrating on prevention.

A draft Wellbeing Programme Vision was received at the last ARCH Delivery and Leadership Group meeting in June 2019 and was well received.

Research, Enterprise and Innovation Programme

The Research, Enterprise and Innovation Programme Board has identified the wide range of opportunities available to draw down funding. These programmes include national and European funds and include, but are not limited to, organisations such as Innovate UK, Horizon 2020, Transformation funding and the Health Foundation. The aim of this piece of work is to map out potential opportunities to emerging projects within the ARCH Portfolio and be better placed to apply as opportunities arise.

The Accelerate programme continues to develop and the team are establishing the skillset required to progress and support identified projects. Two new Innovation Technologists have been appointed. A full presentation on Accelerate progress is scheduled to be received by the ARCH programme Board in October 2019.

The Swansea Bay Campus Board has recently reviewed the requirements for the Campus City Deal development. The Board meetings have now been reinstated, chaired by Professor Steve Wilks, with a focus on the Morriston Campus site. The University is working closely with Swansea Bay University Health Board and monthly meetings are in place until December 2019.

The Workforce, Skills and Education Programme

A meeting was held on the 9th of April 2019 which included the Executive Directors of Workforce and Organisational Development from both Health Boards and was chaired by John Gammon, Deputy Head of College of Human and Health Sciences. The projects agreed in the last meeting were as follows:

- An Apprenticeship Career Framework;
- Schools Experience Programme (16-18yrs);
- Workplace Wellbeing;
- Regional Network of Improvers.

Draft outlines for each of the 3 agreed Workforce, Skills and Education projects are in circulation and are being considered by the relevant leads. Project sign off and launch are slightly delayed based on original timelines, due to capacity within both Health Boards to lead on the work.

A date for a workshop for the Regional Network of Improvers has been secured in August 2019. Work is underway to scope this workshop and ensure relevant stakeholders are invited.

3. GOVERNANCE AND RISK ISSUES

The ARCH Programme Board was chaired by Andrew Davies, Chair of Swansea Bay University Health Board until the end of June 2019. The next meeting of the ARCH Programme Board is scheduled for October 2019. It is expected that a new Chair will be agreed at this meeting.

The ARCH Delivery and Leadership Group is chaired by Karen Miles, Director of Strategy and Performance at Hywel Dda University Health Board. It was agreed in June 2019 that Swansea University will Chair the group for the next two years. A handover meeting has been scheduled in late July for Karen Miles and Keith Lloyd, Head of Swansea University Medical School to hand over the role.

As reported in May, the Swansea Bay University Health Board Internal Audit team conducted a review of ARCH during March and April 2019, receiving a Reasonable Assurance rating. Hywel Dda University Health Board have conducted the same review of ARCH during June 2019. An action plan addressing the recommendations in both reports will be presented to the ARCH Programme Board in October 2019.

4. ARCH Programme Management Office (PMO) Funding

The ARCH Programme Management Office operates on tripartite funding from ARCH partners and is hosted by Swansea Bay University Health Board.

5. RECOMMENDATION

Members are asked to:

- **NOTE** the update on the ARCH Portfolio

Governance and Assurance		
Link to Enabling Objectives (please choose)	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input checked="" type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input checked="" type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input checked="" type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input checked="" type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input checked="" type="checkbox"/>
Health and Care Standards		
(please choose)	Staying Healthy	<input checked="" type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input checked="" type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input checked="" type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
Quality, Safety and Patient Experience		
Implementation of the projects within the ARCH portfolio will support the Health Board in achieving clinical standards for a range of services. Patient experience will be improved as more services are developed in communities as part of the development of Health and Well Being centres.		
Financial Implications		
SBUHB has a current recurrent commitment to fund the ARCH PMO. This is matched by Hywel Dda University Health Board. A contribution is also received by Swansea University.		
Legal Implications (including equality and diversity assessment)		
No implications		
Staffing Implications		
A key component of the ARCH portfolio is to help stabilise and grow the workforce across the region, working with partners on sustainable solutions.		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
ARCH is a long term strategic programme to transform the health, wealth and wellbeing of south west wales and its unique approach was designed to be able to support health boards and its partners to deliver on the commitments outlined in the WFGA.		
Report History	The last report received by SBUHB Board was in May 2019.	
Appendices	Appendix 1 Progress on A Healthier Wales	



Progress towards implementing *A Healthier Wales*

June 2019

THE **WELSH NHS** CONFEDERATION
CONFFEDERASIWN **GIG CYMRU**



This briefing sets out some of the progress which has been made towards delivering the Welsh Government's long-term plan for health and social care, *A Healthier Wales*.

The Welsh NHS Confederation is the only national membership body which represents all the organisations that make up the NHS in Wales: the seven Local Health Boards, three NHS Trusts and Health Education and Improvement Wales (HEIW). Our role is to support our members to improve health and wellbeing by working with them to deliver high standards of care for patients and best value for taxpayers' money. We act as a driving force for positive change through strong representation and our policy, influencing and engagement work.

Introduction

A Healthier Wales is fundamentally about supporting people to live healthy, happy lives and doing all we can to help people stay well at home. NHS organisations in Wales welcomed the publication of A Healthier Wales in June 2018 and are supportive of the vision for a health and care system that is focused on wellbeing and preventing illness.

We must acknowledge however that delivering this vision is a whole-system challenge, one the NHS cannot achieve in isolation. The NHS should be considered as one contributor of many supporting people in this way.

This means having a health and care system that supports people to stay well, not just treat them when they become ill. Putting people at the heart of everything the NHS does and designing services through co-production, a key part of delivering this vision, is reflected by the ten national Design Principles in A Healthier Wales. Wales also needs to improve the way we measure what really matters to people, so it becomes clear which services are working well, and which services need to be improved. A Healthier Wales, through its emphasis on healthy communities and the 'health in all policies' approach, is a lens through which we can identify and support new models of health and social care so they can be scaled-up across Wales.

The following projects are examples of patient-centred initiatives being delivered in partnership with the public and voluntary sectors across Wales. If we are to achieve our shared vision, we'll need to learn from these projects and identify and overcome the key barriers to scaling them up at pace and scale.

How NHS Wales is delivering the vision set out in *A Healthier Wales*

Below are some initiatives currently operational in Wales where patients are benefiting from integrated, person-centred and non-medical services tailored to their needs.

Virtual Assistant Oncology, Velindre University NHS Trust

Being able to support patients in the best way possible as they live with cancer is crucial. Velindre University NHS Trust (Velindre) engaged in meaningful conversations with patients, carers and their families about how they can support their information needs and their desire to be active participants in the care they receive. Velindre were looking to improve engagement between patients and NHS staff by providing a greater number of ways they could communicate.

Through a person-centred process Velindre, in partnership with Pfizer Oncology and IBM Watson, have developed the world's first Artificial Intelligence (AI)-enabled virtual assistant which is trained in oncology. Technical work on the software is ongoing and includes training sets for 'intents' to demonstrate capability in the areas of general nursing, radiotherapy and tumour-specific procedures.

By enhancing communication between patients and staff, it is intended the virtual assistant achieves improved levels of health literacy; reduced levels of anxiety; and gains service delivery efficiencies.

Cwmtawe Cluster, West Wales Regional Partnership Board

The West Wales Regional Partnership Board (RPB) have been looking at innovative ways to improve wellbeing across the age spectrum, with a particular focus on ensuring that children have the healthiest start in life. The RPB have also been trying to reduce the number of unscheduled admissions among older people and delivering care closer to home.

The Cwmtawe Cluster has received £1.7m of funding via the Welsh Government's Transformation Fund to deliver these objectives by supporting new ways of working and supporting integration between health and social care. Some examples of these new ways of working include the setting up of the Clydach Community Hub, which is supporting people to access all Swansea Council services through a digital gateway. Integrated health and social care teams have also been established at Gorseinon Hospital and Clydach Primary Care Centre.

Community Connectors, Powys

Whilst Powys has a vibrant third sector, the geographical landscape means that residents are not always aware of the range of support services available in their local communities. The RPB recognised this lack of awareness may be one of the key drivers behind avoidable hospital admissions and referrals to higher intensity health and care services.

In response, Powys County Council, Powys Teaching Health Board and Powys Association of Voluntary Organisations (PAVO) have worked together to establish a 'Community Connectors' third sector service that works seamlessly to support service users, their carers and their families to improve their physical and mental wellbeing. Community Connectors provide patients and staff with timely information about the support services that are available in each locality and how patients can access them; ensure appropriate third sector support is provided to patients upon discharge from hospital to reduce the likelihood of readmission; and reduce demand on GP services.

Early evaluations of the Community Connectors project are showing that the service is supporting people to live independently and stay active. Most importantly however, the partnership is delivering a culture shift across the area – residents are accessing support services within their own communities, peers and circles of support rather than immediately seeking to access statutory services.

NextBike (Bike share scheme), Cardiff and Vale University Health Board

Cardiff and Vale UHB have been looking at innovative and cost-effective ways of improving the physical and mental health of their population. It is recommended that adults engage in 150 minutes of moderate to vigorous exercise per week, and cycling is a great way to get started. Doctors say that regular cycle rides can reduce the risk of death from heart disease by half.

In a UK-first, Cardiff and Vale UHB have launched NextBike – a bike-share scheme which is initially operating out of two GP surgeries across the Health Board. The scheme allows GPs to prescribe patients with a six-month membership to NextBike so that users can embed cycling in their daily routines, particularly their twice-daily commutes.

NextBike is already a resounding success, with over 10,000 journeys being made each week on NextBike cycles. The Health Board is looking to build on this success by seeking feedback from service users around how the scheme can be made easier to use and support scale-up across the area. NextBike has received both national and international acclaim, with a comment piece about the scheme recently being published in the New York Times.

‘Ffrind i mi’/ ‘Friend of mine’, Gwent

Research suggests 17% of the Welsh population, or 440,000 people, report feeling lonely and socially isolated, but the true figure is likely to be considerably higher. In response, Aneurin Bevan UHB and its partners have identified some specific population groups that are at a particularly high risk of becoming lonely and isolated. These groups include the retired population; armed service veterans; people with long-term conditions; those living with disabilities; and those who have recently lost a loved one.

‘Ffrind i mi’ is a partnership approach to support these groups. By working with befriending services and volunteers, ‘Ffrind i mi’ seeks to match the interests of vulnerable people to the interests of volunteers e.g. gardening, watching sport, dog walking etc. Volunteers then meet with local residents to share stories, build relationships and stay active.

Led by Aneurin Bevan UHB, partners include Gwent Police; Age Cymru; Coleg Gwent; the Royal Voluntary Service; the Older People’s Commissioner for Wales; and a number of Local Authorities. ‘Ffrind i mi’ won the 2018 NHS Award in the ‘Citizens at the Centre of Redesign and Delivery’ category.

Community Neurology Teams, ARCH Programme Board and the South West Joint Regional Planning and Delivery Committee

Capacity within the Neurology service across South West Wales has been challenging, resulting in a number of additional sessions required to sustain planned care pathways and frequent delays in transferring patients to their homes or community-based support services. It was recognised by clinical teams that there was a great inequity between neurological services across South West Wales.

A Regional Collaboration for Health (ARCH) and the South West Joint Regional Planning and Delivery Committee has a key role in driving forward the implementation of projects identified by Swansea Bay UHB and Hywel Dda UHB as priorities for regional working. The organisations have come together through these bodies to improve access to neurological services; reduce variation and health inequalities; and develop a shared vision of person-centred, seamless services for the people of South West Wales.

The Health Boards have worked collaboratively to propose a regional service model for neurological services across the area. The new model shifts the emphasis of the service from the traditional secondary care setting into the community through the development of Community Neurology Teams. These teams will work with Primary Care services to develop stronger links and work towards a network of primary care practitioners with a special interest in neurology. The Community Teams also have a remit to in-reach secondary to support patients to flow through the pathway more quickly and into rehabilitative support programmes in the community.

Out of Hours Interventional Radiology Service, South Central and East Wales

Aneurin Bevan UHB, Cardiff and Vale UHB and Cwm Taf Morgannwg UHB wanted to improve the quality and safety of patient care for radiology service users in South Central and East Wales. The organisations have come together through the South Central and East Wales Planning and Delivery Forum to implement an all-new service model to address the demand for services across the area.

It was agreed an Out of Hours Hub would be established at the University Hospital of Wales in Cardiff, with a rota comprising Consultant Interventional Radiologists from each of the three Health Boards. The Hub provides 24/7 access to interventional radiology, which has become an essential intervention in contemporary patient care.

Since implementation in February 2019, the clinical model and revised pathways have been defined and agreed by clinicians; transport implications have been arranged with the Welsh Ambulance Services NHS Trust; and a communications exercise has been carried out to support implementation.

Pharmacist Training Programmes, Health Education and Improvement Wales (HEIW)

Existing training programmes for pharmacists prepares them to work in hospitals or community pharmacies. However, the role of the pharmacist is changing, and pharmacists are increasingly working in GP practices across Wales to provide patients with immediate advice about medicine management; social prescribing; and treat a range of minor ailments.

To reflect the evolving role of the pharmacist in NHS Wales, HEIW is launching a new transformational training programme for pre-registration trainee pharmacists, starting in 2020. The programme has been made possible thanks to £3.6m of Welsh Government funding, rising to £4.9m by 2023, to increase the number of pharmacist training places in Wales from 120 to 200. New trainees will also receive clinical placement training in a wider range of settings under the new programme. Moreover, in a UK-first, trainee pharmacists will be employed by the NHS for the final year of their learning in practice.

Centralising employment in this way will allow trainees to move easily between sectors and gain more experience. This will also free up time within the workplace to focus entirely on providing world-leading training programmes.

‘Creating Connections for All’, West Wales Care Partnership

The West Wales Care Partnership have recognised prevention as a key strategic priority and are supporting the delivery of the vision in A Healthier Wales through the ‘Creating Connections for All’ initiative.

‘Creating Connections for All’ builds on a range of existing initiatives across Wales, particularly ‘Carmarthenshire is Kind’ – a project that aims to raise awareness of the health and wellbeing impacts that kindness and positive action can have on individuals and communities. ‘Creating Connections for All’ is about enhancing the role of Community Connectors and standardising provision of services across the region through an intergenerational ‘buddying’ project and supporting the development of IT skills, particularly among the elderly. The project also seeks to reduce loneliness and isolation; encourages active citizenship and supports Local Action Hubs, which have been set up to connect people with the services provided by Community Councils.

Programme milestones are currently in development. Partners involved in this initiative include Hywel Dda UHB; Carmarthenshire County Council; Ceredigion County Council; Pembrokeshire County Council; and the Public Service Board.

Mental health crisis care, Welsh Ambulance Services NHS Trust (WAST)

Around 1 in 4 people in Wales experience at least one mental health condition in their lifetime. WAST frequently attend challenging incidences of self-harm and suicide, which can have significant psychological impacts on NHS staff, particularly first-responders. In 2016/17, around 7% of 999 calls to WAST related to a mental health issue, though it is widely thought such cases are heavily under-reported and true demand is likely to be higher.

Part of WAST’s response has been to initiate a collaborative project to improve the management of people in crisis and experiencing moderate to severe mental health conditions. The programme aims to develop a single crisis care model for Wales, allowing for local variation, but with a strong core supported by the Quadruple Aim as set out in A Healthier Wales. WAST are also looking to implement the Mental Health Hear and Treat Network to streamline existing networks. The project will involve additional investment in 24/7 Single Points of Access via the 111 Service; and developing mental health ‘symptom checkers’ for common mental health conditions through online crisis support programmes.

The project is in the early scoping stages and involves collaboration with a range of other agencies and providers, particularly the police and Health Boards. The programme is subject to approval and associated resource requirements.

Centralising employment will allow trainees to move easily between sectors and gain more experience. This will free up time within the workplace to focus entirely on providing world-leading training programmes.

**A new strategic
framework for
adult mental
health services,
West Glamorgan
Regional
Partnership
Board**

Following the decision by the Mental Health and Learning Disability Commissioning Board to develop a strategic framework for adult mental health services, the West Glamorgan RPB identified waiting times for some service users as being the key barrier to receiving timely support.

The West Glamorgan RPB have developed a new service model that prioritises developing a single point of access for service users; strengthening transition processes; supporting patients and their carers in a way that promotes independence; and developing a range of preventative services within the community. Fundamental to this new way of working is closer alignment between the Health Board and Local Authority approaches to addressing the priorities identified by service users. The framework is wholly person-centred and informed by what works best for patients. Once implemented, staff will work jointly with service users to provide a package of support through co-production.

The project is led by Swansea Bay UHB, on behalf of the West Glamorgan RPB. Other partners include the City and Council of Swansea; Neath Port Talbot County Borough Council, alongside the third and community sectors.

**‘Stay Well in
Your
Community’,
Cwm Taf
Morgannwg
Social Services
and Wellbeing
Regional
Partnership
Board**

The Cwm Taf Morgannwg RPB Area Plan describes the steps being taken to improve outcomes for patients across the area. The Plan sets out a number of pilots which have already delivered a range of benefits through integrated community care teams. ‘Stay Well in Your Community’ is about making these projects more seamless and uniform.

The project is a whole-system health and social care model which responds to the voice of the individual through three interwoven layers: wellbeing; integrated community care, closer to home; and acute health and social care tertiary services. The first tranche of the programme aims to scale-up existing pilots that are demonstrating success and develop new services where there is evidence to suggest that the region would benefit. The model will link multi-disciplinary anticipatory care and enhanced routine monitoring services with rapid response services. Enabling this work are key workforce and digital strands, which are considering the sustainability of the local health and social care workforce.

An evaluation framework has been produced, which incorporates a number of key deliverables and intended outcomes. The framework will involve a summative component that asks, “Did we achieve the outcomes we set out to achieve?”

<p>Community Service Transformation, North Wales Social Care and Wellbeing Services Improvement Collaborative</p>	<p>Partners in North Wales are developing combined health and social care localities based on the geography of primary care clusters, building on existing projects and developing links with local Community Resource Teams. The goal is to achieve a combined health and social care ‘locality’, which will include NHS services, schools, and health and wellbeing centres to truly transform the way community services are delivered in North Wales.</p> <p>To achieve this, the Betsi Cadwaladr UHB will work with partners and citizens to understand the key barriers for individuals and carers to have effective, co-ordinated and seamless services. Using this information, the parties involved will develop a sustainable workforce agenda to deliver the transformation agenda; identify a model for digitally-enabled care that can be rolled-out across North Wales but adapted to meet local need; and develop a number of community networks to promote inclusion and participation in social prescribing initiatives.</p> <p>Delivery of this project began in April 2019, with the first evaluation exercise set to be carried out in July. Partners include Betsi Cadwaladr UHB, Local Authorities, housing associations, and the third and community sectors.</p>
<p>Understanding the prevalence of Adverse Childhood Experiences (ACEs) in a male offender population in Wales, Public Health Wales NHS Trust</p>	<p>In 2018, Public Health Wales NHS Trust and the Public Health Collaborating Unit (Bangor University) undertook the first ACE prevalence study within a male prison setting in Wales. A questionnaire was delivered through Interviews with 470 prisoners, which measured the prevalence of ACEs in the offender population and the links to criminality, health and well-being. Furthermore, it aimed to explore the generational cycle of ACEs.</p> <p>The survey found more than 80% of men in prison said they had experienced at least one ACE, compared with a Welsh average of 46%. It found that male prisoners are much more likely than men in the wider population to have suffered ACEs such as child maltreatment or living in a home with domestic violence. The findings suggests that addressing the adversity and trauma of offenders can be integral to reducing reoffending for prisoners and in future generations, and reduce costs for the criminal justice system.</p>
<p>Public Health Wales NHS Trust</p>	<p>Public Health Wales, policing, and key criminal justice organisations in Wales have made a commitment to work together using a public health approach to change the way people with ACEs are identified, understood and supported.</p>
<p>Public Health Wales NHS Trust</p>	<p>This survey will help inform this partnership working in Wales, which is being facilitated by the Early Action Together (E.A.T) programme. E.A.T. is already supporting the criminal justice sector to create an ACE aware workforce and develop trauma informed practice within prisons and probation in Wales.</p>

Conclusion There are a significant number of services being set up to deliver on the vision set out in the Welsh Government's long-term plan for health and social care, *A Healthier Wales*.

These new person-centered models of health and social care are having a positive impact on patients and members of the community, which is in line with one of the central objectives of *A Healthier Wales*.

Transformation takes time and requires agreement by partners on shared priorities if the vision is to be delivered. The NHS in Wales is committed to working across multiple sectors so that we can achieve a healthier Wales together.

**How can the
Welsh NHS
Confederation
help you?**

Please get in touch if you want further details on any of the issues raised in this briefing. For more information, please contact our Interim Director, Nesta Lloyd-Jones: **Nesta.Lloyd-Jones@welshconfed.org**

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