

**CWM TAF UNIVERSITY HEALTH BOARD**

**'CONFIRMED' MINUTES OF THE MEETING OF THE PRIMARY AND COMMUNITY CARE COMMITTEE HELD ON 3 APRIL 2019 AT YNYSMEURIG HOUSE, ABERCYNON**

**PRESENT:**

- Maria K Thomas – Vice Chair of the Health Board (Chair)
- Robert Smith – Independent Member
- Nicola Milligan – Independent Member

**IN ATTENDANCE:**

- Alan Lawrie – Director Primary, Community & Mental Health
- Alyson Davies – Assistant Director of Therapies and Health Sciences
- Joanna Davies – Director of Workforce & OD
- Kelechi Nnoaham – Director of Public Health
- Ruth Treharne – Deputy Chief Executive/Director of Planning & Performance
- Greg Dix – Director of Nursing, Midwifery & Patient Services
- Paul Jones – Local Medical Committee
- Kevin Thomas – Community Pharmacy Wales
- Jayne Howard – Assistant Director Primary Care, Children & Community Services
- Craige Wilson – Head of Corporate Administration
- Wendy Penrhyn-Jones – Corporate Secretariat
- Emma Walters – Corporate Secretariat

**PCCC/19/017 WELCOME & INTRODUCTIONS**

Maria Thomas (Chair) welcomed everyone to the meeting. The Chair welcomed Greg Dix, Director of Nursing and Patient Services and Paul Jones, Local Dental Committee to their first meeting, and Wendy Penrhyn-Jones, Head of Corporate Administration who was observing. The Chair advised Members that Colette Bridgeman, Chief Dental Officer who was due to present an update on Dental and Oral Health was unable to attend and would be attending the July meeting. The Chair asked Members to **NOTE** that Kelechi Nnoaham would be arriving late. The Chair advised that this was the final meeting for both Jo Davies and Alyson Davies who were retiring. Members extended their best wishes and thanks to both colleagues.

**PCCC/19/018 APOLOGIES FOR ABSENCE**

Apologies for absence were received from Kamal Asaad, Sara Thomas, Nicola Lewis, Robert Williams Keiron Montague, Ian Jones, Stuart Hackwell, David Miller, Nicola Lewis, Alison Lagier, Sarah Bradley, Collette Bridgeman.

**PCCC/19/019 DECLARATIONS OF INTERESTS**

There were no additional declarations of interests.

**PCCC/19/020 MINUTES OF THE PREVIOUS MEETING**

The minutes of the meeting held on 9 January 2019 were **RECEIVED** and **APPROVED**, subject to the following amendments:

- Page 2, Line 2 – delete the wording “*and suggested that 2019 would be a challenging year.*”

**PCCC/19/021 ACTION LOG**

Members **RECEIVED** and discussed the action log and the following items were discussed:

- **PCC/18/027 – Success/Evaluation Criteria** – Alan Lawrie advised that it was proving difficult to find a common criteria that was common to all funding streams and work was underway with a view to mainstreaming each individual funding stream and reviewing against the criteria. **AGREED** to remove from the action log.
- **PCC/18/067 – Organisational Risk Register** – Members were advised that reference to this was contained in the Director’s Report confirming this piece of work was in progress. **AGREED** that the action would remain on the action log and an update on progress will be provided at the next meeting.
- **PCC/18/068 – Transformation Plan** – Members were advised that the Plan had not been approved, however a meeting with Welsh Government has been arranged for later that week to seek clarity on what further detail may be required prior to the Plan being submitted. **AGREED** that the action would remain on the action log and an update on progress will be provided at the next meeting.

**PCCC/19/022 MATTERS ARISING**

There were no matters arising.

**PCCC/19/023 UPDATE ON COMMUNITY PHARMACY AND MEDICINES MANAGEMENT**

Members **RECEIVED** the update from Alan Lawrie, Suzanne Scott-Thomas and Emma Williams.

Members were advised that there four key areas to be updated on, namely:

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**Community Pharmacy Sore Throat Test and Treat (STTT) pathfinder** - The STTT service had commenced in November 2018 in 30 community pharmacies in CTUHB, predominantly in the Rhondda locality. Between November 2018 and the start of February 2019, the community pharmacies saw 411 patients. Members **NOTED** the number of patients that were treated with antibiotics were one in four, which was a lot lower antimicrobial treatment rate than usual GP consultation which was around 50-60%. Members were advised that a full evaluation was underway, however, on the initial findings, the Choose Pharmacy Implementation Board had agreed to support the planning to scope the roll-out of the service for Wales. Scaling-up of the face-to-face training and access to consumables were amongst some of the initial challenges identified.

Members **NOTED** that it was recommended that the Health Board commence the planning to roll-out the service across the CTMUHB area, in order that universal access to the service was established in time for winter 2019/2020.

*Jo Davies joined the meeting at 9.13 am*

**Primary Care Pharmacy Education and Training Pacesetter –** Members were advised that training of pharmacy professionals within and for primary care had been recognised as a key priority to sustain primary care services. The primary care pacesetter funding included resources to support the establishment of a primary care pharmacy training, education and workforce development framework. The required staff had now all been appointed and had recently taken up their posts.

### **Antimicrobial Stewardship in Primary Care Update**

Members were advised that Antimicrobial Resistance (AMR) was one of the greatest threats to human and animal health. Antimicrobial resistance already imposed a significant burden of morbidity and mortality on the population of Wales through the failure of antibiotics to treat infections, and the spread of bacteria that were resistant to most antibiotics, or so called 'superbugs'.

Members **NOTED** that key drivers of AMR were antibiotic usage, burden of disease and transmission of resistance. The report focusses on antibiotic usage, and good antibiotic stewardship practices.

Welsh Government had included antibiotic improvement goals in their Tier One targets this year. This includes a primary care Tier one target, reducing the number of antibiotic items per 1000 STAR-PUs by 5%.

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Members **NOTED** that a primary care AMR working group had been established with a GP lead. A number of actions have been proposed by primary care practitioners on this group and were being taken forward with the antimicrobial pharmacist. Public engagement was a key element of the AMR strategy. The AMS team had been spreading the message amongst Cwm Taf Scouts. The team joined around 60 children at their 'Harry Potter' themed Scout camp, teaching about bacteria, viruses and the spread of infection using snot guns and colour changing potions. The team were now training the Scout, Beaver and Cub leaders to deliver the sessions to the remainder of the groups within the Health Board area. Members were advised that there was currently no all-Wales public campaign to raise awareness of AMR. However, the Your Medicines Your Health communication framework would be used and behaviour change methodology to maximise public-facing messages.

Members **NOTED** that a business case was being developed and was referenced in the Medicines Management IMTP. This aimed to address the pace of change required to meet the tier one targets and also incentivise key independent contractors within primary care.

Members **NOTED** that the boundary changes with Bridgend would require analysis of their position with AMS, an expansion of the current governance structure for AMS, a revised action plan and also amalgamation of data to determine the new CTMHB tier one target position.

**Your Medicine, Your Health (YMYH)** – Members were updated on the public awareness campaign promoting the appropriate use, storage and destruction of prescribed medication. Members were advised that Your Medicine, Your Health was first introduced to the public in Cwm Taf five years ago and since then it had been a Bevan Commission exemplar project, a Welsh Government pacesetter project and recommended as best practice by the Wales Audit Office (WAO). It had also recently been acknowledged by the All Wales Medicines Strategy Group (AWMSG).

YMYH has now been recognised by Welsh Government and Cwm Taf Morgannwg had been asked to coordinate a National roll-out so that all of Wales can benefit. A national coordinator has been recruited and her first job would be to support the first national campaign. The 'Spring Clean Your Medicine Cabinet' campaign aimed to encourage the public to return all out-of-date and no longer needed medication back to their community pharmacist.

Members **NOTED** that the campaign will be launched in all Health Boards across Wales during April 2019 with press releases and local events.

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Members **RESOLVED** to:

- **NOTE** the Pharmacy and Medicines Management developments in primary care.
- **ENDORSE** commencing the planning to roll out the STTT service to ensure access for patients across the Health Board in time for next Winter 2019/2020.

### PCCC/19/023 COMMITTEE CHAIR'S REPORT

The Chair provided an oral update.

Maria Thomas updated Members on the Vice Chair's meeting with the Minister. Discussions were held on:

- The draft Primary Care milestones for 2019/2020, noting that the Minister had been provided with the Health Board's performance and plans to improve upon our current measures through the Directors of Primary Care.
- Primary Care Clusters – Health Boards would need to demonstrate how these are reflected in IMTPs and how they were maturing to develop their own IMTPs. Members **AGREED** to receive a report on this at the July 2019 meeting.
- Over the next 12 months the Minister would require Health Boards to demonstrate a shift into Primary Care, and in particular workforce and finance. Members discussed the requirement for Primary Care to be more visible at Board level and the new investment that would be made for Primary Care. Members **AGREED** to receive a report at the July 2019 meeting.
- Access to GPs – 40 per cent of patients were still dissatisfied with access to their GPs. Alan Lawrie advised that additional funding would be made available to GPs.

Members **RESOLVED** to: **NOTE** the Chair's update.

### PCCC/19/023 LOCAL ORAL HEALTH DELIVERY PLAN

Members **RECEIVED** and **NOTED** the update from Craige Wilson. Members were provided with detail on progress in meeting the requirements of the National Oral health Plan and Local Oral Health Plan priorities. Members were advised that the focus of the report was to provide an update on progress with the Dental Contract Reform (DCR) and the "Baby Teeth Do Matter" Initiative.

#### **Dental Contract Reform (DCR)**

Members were advised that in line with the Welsh Government's policy, the General Dental Service (GDS) Reform Programme had commenced in September 2017. Six-monthly practice profiles have been produced for three practices in Cwm Taf UHB, Maerdy Surgery, J. Griffiths and Associates and Cefn Coed Dental Practice.

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Members **NOTED** that the practices started participating in the programme during the first six months of 2018/19. The Reform practices implemented the Assessment of Clinical Oral Risks and Need (ACORN) toolkit, delivered prevention and submitted additional 'risk and need' data. Capacity to implement these limited changes, within the reform practices across Wales, had been created by reducing their annual contracted Units of Dental Activity (UDA) target by 10%.

Members were advised that the practice profiles were based on 'risk and need' data and other data submitted by the practices during the first six months of the financial year 2018/19. There are a number of parameters that were provided in the report but two of the key indicators of success were "access" and the application of fluoride varnish. Members **NOTED** that the outcomes from Practice 1 were remarkable and exceeded those seen by any other practice in Wales. Members **NOTED** that Practice 1 was the only practice in Wales to move to the second stage of the Dental Contract Reform programme. This would result in a 20% reduction in the Units of Dental Activity (UDA) target for the practice but will require them to the standards set out in Health Boards service specification.

Members were advised that following a recent call for expressions of interest and a selection process, with effect from April 2019 there would be an additional 11 practices in Cwm Taf Morgannwg UHB (CTMUHB) participating which would bring the total to 17 practices. This represents approximately 30% of all dental practices. Members **NOTED** that the Health Board would be closely monitoring the impact of DCR through the six monthly reports and would need to consider if additional monitoring arrangement need to be put in place as the traditional reports from the Dental Services Division would not reflect the impact of DCR. Members **NOTED** that the reduction in Patient Charge Revenue had not been significant in the three Cwm practices currently in the DCR scheme but with 30% of practices in CTMUHB participating from April 2019, any adverse financial impact for the Health Board would need to be highlighted.

### **"Baby Teeth Do Matter" (BTDM)**

Members **NOTED** that current information has shown that as well as the pre-school, BTDM has had a much wider impact on raising awareness across all school ages in Cwm Taf Morgannwg with the numbers continuing to rise since the introduction of the initiative.

Members **NOTED** that only three practices in Merthyr Tydfil initially participated in BTDM and despite its success, there has been limited interest from other practices. Members were advised that from 1 April 2019 there would be one additional practice in the Cynon Valley participating with another in the Rhondda and two in Taff Ely.

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Following discussion, Members **AGREED** to receive another update in November 2019 (**Added to the Forward Look**).

Members **RESOLVED** to:

- **NOTE** the content of this report.

### PCCC/19/024 **TERMS OF REFERENCE**

Members **RECEIVED** the updated Terms of Reference that were presented by Gwenan Roberts. Members were advised that the updated changes had been identified as part of the Structured Assessment and would require Board approval at the meeting to be held on 30 May 2019.

Members discussed the impact arising from the Bridgend boundary change and how the terms of reference would need to change to reflect the new organisation.

Members **RESOLVED** to:

- **NOTE** the report
- **ENDORSE** the terms of reference, subject to the changes discussed.

### PCCC/19/025 **ORGANISATIONAL RISK REGISTER**

Members **RECEIVED** the Organisational Risk Register that was presented by Gwenan Roberts.

Members were advised that the Risk Register was previously considered by the Health Board in January 2019 and the Quality Safety and Risk Committee in March 2019. Members **NOTED** that the Primary and Community Care Committee had been allocated two extreme or high rated risk for scrutiny on the Risk Register, namely:

Risk 030 – Failure to continue to provide and sustain GP Out of Hours Services as currently configured (Risk rated at 20);

Risk 036 – primary Care workforce – Recruitment and sustainability (Risk rated at 16).

Members **AGREED** to remove Risk 029 and Risk 038 from the Risk Register and **NOTED** that the Localities Risk Register also reflected that the highest risk was GP Out of Hours services and the recruitment/retention of all staff groups.

Members **RESOLVED** to:

- **NOTE** the update and the risks assigned to the Committees;
- **APPROVE** the removal of two risks;
- **ENDORSE** the updated risk register and the assignment of risks.

**PCCC/19/026 REPORT OF THE DIRECTOR OF PRIMARY, COMMUNITY AND MENTAL HEALTH**

Alan Lawrie presented the report and provided an update to the Committee on key areas within the portfolio of the Director of Primary, Community & Mental Health and provided assurance on the progress being made.

Members **NOTED**:

- **Primary Care Internal Audit Report**

Members **NOTED** that a review of the Primary Care Directorate management arrangements had been completed in line with the 2018/19 Internal Audit plan for Cwm Taf University Health Board. Members were advised that as part of the current year's Internal Audit programme, Internal Audit had reviewed the management arrangements for a number of Directorates and planned to complete this for all Directorates over a three year period. Members **NOTED** that in addition to the review of management arrangements within Primary Care, a separate piece of audit work had been undertaken within the Directorate to establish the level of compliance within the Scheme of Delegation and a number of the most relevant/highest risk Financial Control Procedures applicable within the Primary Care Directorate.

- **Primary Care Estates Strategy**

Members **NOTED** that the draft Primary Estates Strategy had been prepared and was currently being finalised. Members **AGREED** that it would be shared with the Committee once this had been undertaken. **(Added to Forward Look)**.

- **Anticoagulation Services**

Members were advised that progress had been slow in some areas and meetings were currently being held to discuss a way forward. Members **NOTED** that work was underway to establish a task and finish group and a follow up report would be received at the July Meeting. **(Added to Forward Look)**.

- **Eye Care Update**

Members **NOTED** that the Health Board had been successful in securing funding for three optical coherence tomometer's (OCTs) and the associated software. Members were advised that the plan was to establish four Community ODTs, one in each locality, to examine glaucoma patients who were currently waiting for follow-up appointments.

It is anticipated that these would be established during April 2019 with the first patients being seen in May 2019.

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- **Mountain Ash Primary Care Development**

Members were advised that despite some of the key milestones of the project plan not being reached, the scheme was still on track for delivery within the agreed timescale. Members **NOTED** that there were some issues in relation to the land purchase and discussions were ongoing with Rhondda Cynon Taff County Borough Council (RCTCBC) with regard to a renewed value and transfer of the land. Members **NOTED** that this would require Welsh Government approval and a decision was awaited. Members **NOTED** that the pre-planning application with plans had been drafted and was due to be submitted 26 March 2019. The detailed planning application was scheduled for submission on the 3 May 2019 in readiness for the RCTCBC Planning Committee week commencing 10 June 2019.

- **Maerdy Surgery**

Members were advised that the Health Board had recently approved the temporary closure of Maerdy Surgery, a branch surgery of Ferndale, for a four week period with effect from the 8 March 2019 as a consequence of the discovery of an infestation of rats within the grounds and also within the actual premises. Pest control services have since confirmed that there is no further rodent activity. The facilities team had also visited the surgery and cleared the garden area. It was anticipated that all of the remedial work would be completed by 5 April 2019.

- **Old School Surgery**

Members were advised that the Health Board recently supported an application from the Old School Surgery, Pontyclun, to remove 180 patients, living outside their defined practice boundary in the Cardiff & Vale UHB catchment area. The decision was made by the Contract Variation Group which was constituted by the Community Health Council (CHC), Local Medical Committee (LMC) with representation from primary care services. Members **NOTED** that the reason for the request was that the practice felt that this cohort of patients did not receive the same co-ordinated service provided to patients who lived within the Cwm Taf Morgannwg boundary. Whilst health care was provided by the practice in Cwm Taf all other support services such as social care, community and third sector services were provided by Cardiff and Vale University Health Board.

Members **RESOLVED** to:**NOTE** the report.

PCCC/19/027 **ANNUAL REPORT OF THE DIRECTOR OF PUBLIC HEALTH – STROKE**

Members **RECEIVED** the report which was presented by Kelechi Nnoaham.

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Members were advised that the Annual Report had been received and approved by the Board at its January 2019 meeting. Members **NOTED** that the aim of the Annual Report was to raise awareness for primary and community care services and this year the focus was on stroke services. Members **NOTED** the recommendations contained on page 7 of the report and were advised that the Local Public Health Team would be working in collaboration with the Stroke Implementation Group and wider partners to develop a clear action plan for taking the recommendations forward including exploration of the opportunities to secure additional resource.

Members discussed the benefits of raising public awareness and **NOTED** that whilst there were still ambulance delays resulting in stroke patients not being seen as quickly as possible, this would still continue to happen. Members **AGREED** to receive an update on the work being undertaken in six months' time. **(Added to Forward Look)**

Members **RESOLVED** to:

- **NOTE** the report

### PCCC/19/028 CLUSTER UPDATE

Members **RECEIVED** the report which was presented by Craig Wilson.

Members were provided with a brief overview of the current work of the Merthyr Tydfil Primary Care Cluster.

Members **NOTED** that the Cluster was supporting the following range of schemes:

- **General Practice Support Officer (GPSO)**

The aim of the project was to focus on service users who frequently visit their GPs and who do not necessarily need medical intervention. Merthyr Tydfil Primary Care Cluster have commissioned a service level agreement with Merthyr Tydfil County Borough Council (MTCBC). Members were advised that the GPSOs support and sign post patients to social and third sector service and at the same time enact behavioural change and support service users to take responsibility for their own health and wellbeing. Members **NOTED** that overall the project had been well received despite some challenges in the system.

- **Cluster Physiotherapy Service**

Members were advised that the Cluster Physiotherapy Service provides 25 weekly sessions across Merthyr Tydfil at GP Practices. Members were advised that the service was delivered by two local providers, the objectives of the service was to:

- Release GPs time to manage more complex presentation

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- Early assessment, diagnosis, advice and management of MSK conditions
- To improve longer term outcomes
- Reduce referrals to primary/secondary care MSK services;
- Continuity of care.

Members **NOTED** that patients were routinely seen quickly, often on the same day, resulting in shorter waiting times. The Cluster Physiotherapy service have directly influenced an 83% reduction of onward referrals (1,460).

Members **NOTED** that the cluster have invested in the service for a further 12 months from 1 April 2019 and that evaluation would continue during this time. Members **NOTED** that further work would need to be undertaken on the MSK pathway.

- **Establishment of Clinical Stakeholder Reference Group**

Members **NOTED** that the cluster had successfully engaged with third sector organisations and established a Clinical Stakeholder Reference Group. The group would meet 5 times annually from May 2019 and collaborate to introduce new local initiatives.

Members **RESOLVED** to

- **NOTE** the report.

PCCC/19/029 **PRIMARY CARE INVESTMENTS: DELIVERY AGREEMENT 6 MONTH PROGRESS UPDATES**

Members **RECEIVED** and **NOTED** the report which was presented by Alan Lawrie. Members were updated on progress against each of the Primary Care Delivery Agreements, and the forecast year end spend. Members were advised that some of the figures were incorrect and would need to be amended. Members **AGREED** to receive a further update in six months' time. **(Added to Forward Look)**.

Members **RESOLVED** to

- **NOTE** the report;
- **AGREED** to receive a further update in six months' time.

PCCC/19/030 **INVERSE CARE LAW PROGRAMME**

Members **RECEIVED** and **NOTED** the report which was presented by Kelechi Nnoaham. Members were advised that the Primary and Community Care Committee (PCCC) received a report in September 2017 which provided the background, logic model and early outcomes of this high profile Welsh Government funded programme which commenced in January 2015 and uses Cwm Taf Morgannwg University Health Board and Swansea Bay University Health board as its pilot sites.

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Members **NOTED** that the Health Board continued to deliver the programme that focuses on primary prevention of cardiovascular disease (and cancer) and by March 2019 would have been made available to all practices across Cwm Taf, with particular emphasis on offering a health check to eligible patients resident in the more deprived communities.

Members were advised that a quarterly report was provided to Welsh Government as part of a delivery agreement and **NOTED** that this was attached at **Appendix 1** and was also reported as agenda item 5.4.1.

Members were advised of the ongoing progress of the Inverse Care Law programme within Cwm Taf Morgannwg, locally reported outcomes and plans to revise the service delivery moving forward. Members **NOTED** the National Inverse Care Law Programme report and lessons learned and outcomes.

Members **AGREED** to receive a further update on the programme in 12 months' time. **(Added to Forward Look).**

Members **RESOLVED** to

- **NOTE** the report;
- **AGREED** to receive a further update in 12 months' time.

PCCC/19/031

### WALES AUDIT OFFICE DISCHARGE PLANNING REPORT

Members **RECEIVED** and **NOTED** the oral update on progress made against the recommendations outlined in the review.

PCCC/19/032

### ITEMS RECEIVED FOR INFORMATION

Members **RECEIVED** and **NOTED** the following items:

- National Primary Care Board communique;
- Primary Care Newsletter Winter 2018/19;
- IMTP Monitoring Report;
- Post-Payment Verification Report;
- Action Plan: Delivering Population Health Management in Cwm Taf Morgannwg – Members **NOTED** that there had been a high level of interest. Members were advised that a targeted piece of work with the Rhondda Cluster was being undertaken and a report would be submitted to the next meeting. **(Added to Forward Look.)**

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### TO REVIEW THE FORWARD LOOK

The forward look was received and would be amended in line with the agreed actions.

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**PCCC/19/034 ANY OTHER URGENT BUSINESS**

There was no further business and the meeting was closed.

**PCCC/19/035 DATE OF NEXT MEETING**

The next Primary and Community Care Committee meeting will be held on Wednesday 24 July 2019, 9am to 12pm, Classroom 4, Post Graduate Centre, Prince Charles Hospital.

**SIGNED .....**  
**MARIA THOMAS, CHAIR**

**DATE .....**