

**1 HELP:** Follow the numbers, click on a cell in the header row for instructions; see 1st row example.

**2 Listing activity/ projects:** List activities or projects planned to commence during 2024-25, as well as those planned/ initiated in 2023-24 (or earlier, if ongoing).

**3 Looking back:** Brief reflections on delivering the 2023-24 cluster plan.

**4 Looking forward:** Potential challenges in delivering the 2024-25

Activity/ project title	New or existing activity	Brief activity/ project description	Results/ benefits expected by end March 2024	Strategic alignment: Ministerial priorities	Strategic alignment: SPCC key programme priorities	Activity/ project budget (enter number only)	Funding source(s)	Current status	Comments	What has gone well since April 2023?	What has gone less well since April 2023?	Are there any particular challenges or issues the cluster would flag to the LHM, SPCC or Welsh Government?
Ty Elis - Counselling services	Existing (pre-dates 2023-24 plan)	The counselling service aims to improve access to mental health and wellbeing services. To provide structured therapeutic counselling interventions to relieve persons who are emotionally distressed and to improve coping strategies and resilience in individuals.	Provision of 1,560 hours of counselling sessions. Improvement in patient Warwick Edinburgh Health and Wellbeing scores following completion of counselling. Improved mental health and well-being of patients. Reduction in GP contacts following counselling.	Mental health and emotional well-being	Mental Wellbeing	69,280	Cluster funding	Started & on track		First contact physiotherapy (FCP) has reduced GPs workload by providing assessment and diagnosis of MSK conditions without the need for an appointment with a GP. Continued provision of Point-Of-Care C-Reactive Protein Testing (CRP) in GP practices, testing has now also been rolled out in two community pharmacies. Ongoing SLA with Ty Elis providing counselling services across the cluster. Ongoing SLA with Care and Repair Healthy Homes scheme continues to deliver an alternative, proactive model of care that focuses on early intervention and prevention.	There continues to be no cluster project that has been mainstream funded by the Health Board to release new funds for new innovation elsewhere. There has been an exponential increase in funding for the cluster based to prepare for, attend and action. As a result of reduced staffing of the district nurse service, the cluster chronic condition nurses have had to fill the gaps out of necessity, which has taken them away from a more pro-active approach to housebound healthcare that they were originally assigned to do.	The lack of mainstream funding. The cluster has a number of successful projects that have been in place for a number of years. A Counselling service, Healthy Homes service and CRP testing. If these services were main stream funded by the LHM or Welsh Government this would free up cluster funding and would enable the cluster to develop new services and projects. The cluster lead needs more time devoted to the role as the demands put on them have increased significantly, mainly outside the initial role intended and into other areas of health board and hospital based. The GP lead for example have all sessions swallowed up with meeting attendance alone without the extra work of email answering/project development day to day project trouble-shooting and the continued development of the role.
Care and Repair- Healthy Homes Scheme	Existing (pre-dates 2023-24 plan)	This service provides a dedicated Caseworker and Occupational Therapist based with the GP surgeries in the North Cluster. The service delivers an alternative, proactive model of care that focuses on early intervention and prevention.	250 patient referrals per annum into scheme. All patients receive: Full Healthy Homes check. Full assessment. Trusted assessor's assessment. Occupational therapy assessment. Tubercule assessment. Benefit check. Fuel poverty/heating assessment. Fire safety check. Signposting to relevant support agencies/organisations	Population health	Community Infrastructure	55,800	Cluster funding	Started & on track				
Cluster Pharmacists	Existing (pre-dates 2023-24 plan)	The cluster funds 2 x band 8a pharmacists (1.6 wte) to support and progress the development of pharmaceutical services and the integrated medicine management agenda within the cluster. By ensuring safe, evidence based and cost-effective primary care prescribing within the cluster GP practices.	Assist cluster practices in the implementation of DDAC registers with the recommendation of DDAC as first-line anticoagulation. Continue to work with cluster practices in the reduction of stroke risk through improved management of atrial fibrillation. Work in collaboration with cluster practices in taking action to reduce the prevalence of risk factors associated with avoidable medicines related harm through the implementation of a multi-faceted intervention and leading to a reduction in medicine prescribing errors. Assisting with medicines related audits and quality assurance nurturing better links with local community pharmacists.	NHS finance and managing within resources	None	109,036	Cluster funding	Started & on track				
Primary Care Nurses	Existing (pre-dates 2023-24 plan)	The cluster funds 2 x band 6 Primary care nurses to provide services for housebound and care home patients; bringing the surgery to their homes' and helping them receive services they might not be receiving otherwise. The Nurses work with the GP and the wider cluster multi-disciplinary team, providing support for patients with chronic conditions.	Increased assessments of chronic condition patients. Support and treatment provided to housebound and care home patients resulting in early identification of conditions that could result in hospital admission. Reduction in acute problems reducing the need for GP emergency home visits. Timely incontinence assessments being provided, which also reduces pressure on carers. Provision of immunisation to housebound patients i.e. COVID, flu and pneumonia. Increased support and care for housebound patients following hospital discharge.	Population health	Community Infrastructure	94,678	Cluster funding	Started & on track				
Health Care Support Workers (HCSW)	Existing (pre-dates 2023-24 plan)	The cluster funds 1 x band 3 HCSW to provide services for housebound and care home patients. The HCSW work closely with the Primary care nurses and within the cluster multi-disciplinary team, providing support for individuals with chronic conditions.	Increased support of chronic condition patients providing support for the primary care nurses. Ensuring housebound patients receive equity of health care. Care home patients will have pre-review checks with the HCSW before full review with the cluster nurses enabling more reviews to be completed. Delivery of support and care for housebound patients following hospital discharge. The HCSW will also support immunisation campaigns.	Population health	Community Infrastructure	30,406	Cluster funding	Started & on track				
Point-Of-Care C-Reactive Protein Testing (CRP) for the diagnosis of Lower Respiratory Tract Infection in GP practices. In addition the cluster is piloting CRP testing at 2 community pharmacies within the cluster (due to commence 2023).	Existing (pre-dates 2023-24 plan)	The cluster has an SLA in place with Princess of Wales hospital to provide Quality assurance for the CRP machines based in each practice. The cluster also funds testing kits and controls for practices approximately.	Reduction in inappropriate prescribing of antibiotics and early identification of severe community acquired pneumonia. The use of point of care CRP testing is an efficient and effective way of managing patient care while also reducing inappropriate antibiotic prescribing.	Population health	Community Infrastructure	13,240	Cluster funding	Started & on track				
Mairko eSheudat	Existing (pre-dates 2023-24 plan)	Mairko will enable practices to allocate caseloads in advance to the Primary Care nurses/HCSW, and will allow them to plan their workload.	It will enable the cluster to monitor the efficiency of the service and any identify gaps in daily caseloads, allowing more effective allocation of caseloads across practices. Mairko links with Health Board travel expenses system reducing admin time. Staff check in and out of patients homes via the app and the app has lone worker alarm functionality. The cluster will have read only access to the District Nursing caseload and view versa which will reduce duplication of work.	Supporting the health and care workforce	Community Infrastructure	3,500	Cluster funding	Started & on track				
First Contact Physiotherapy (FCP)	Existing (pre-dates 2023-24 plan)	10 sessions per week of First Contact Physiotherapy per week.	Reduction in the workload of GP. Assessment and diagnosing of MSK conditions and recommending treatment or onward referral.	Population health	Community Infrastructure	21,290	Mixed sources	Started & on track				
Accelerated Cluster Development	Existing (pre-dates 2023-24 plan)	The cluster is committed to engaging in the ACD model	Clusters and cluster leads to strongly influence local priorities and decision making. Clusters to be able to deliver innovative and agile solutions that meet the needs of their communities. Targeted services to meet particular local needs - with a focus on vulnerable groups to improve health equity. Easier access to primary care services and a wider range of treatment and support options in the community. Great solutions that maintain continuity of care and an holistic, personalised approach. An expanded NHS Wales primary care universal offer (no postcode lottery). A real level of coherence between local and regional priorities. Consistency, simplicity and confidence for the public, patients and carers	A Healthier Wales	Accelerated Cluster Development		Mixed sources	Started & on track				

