

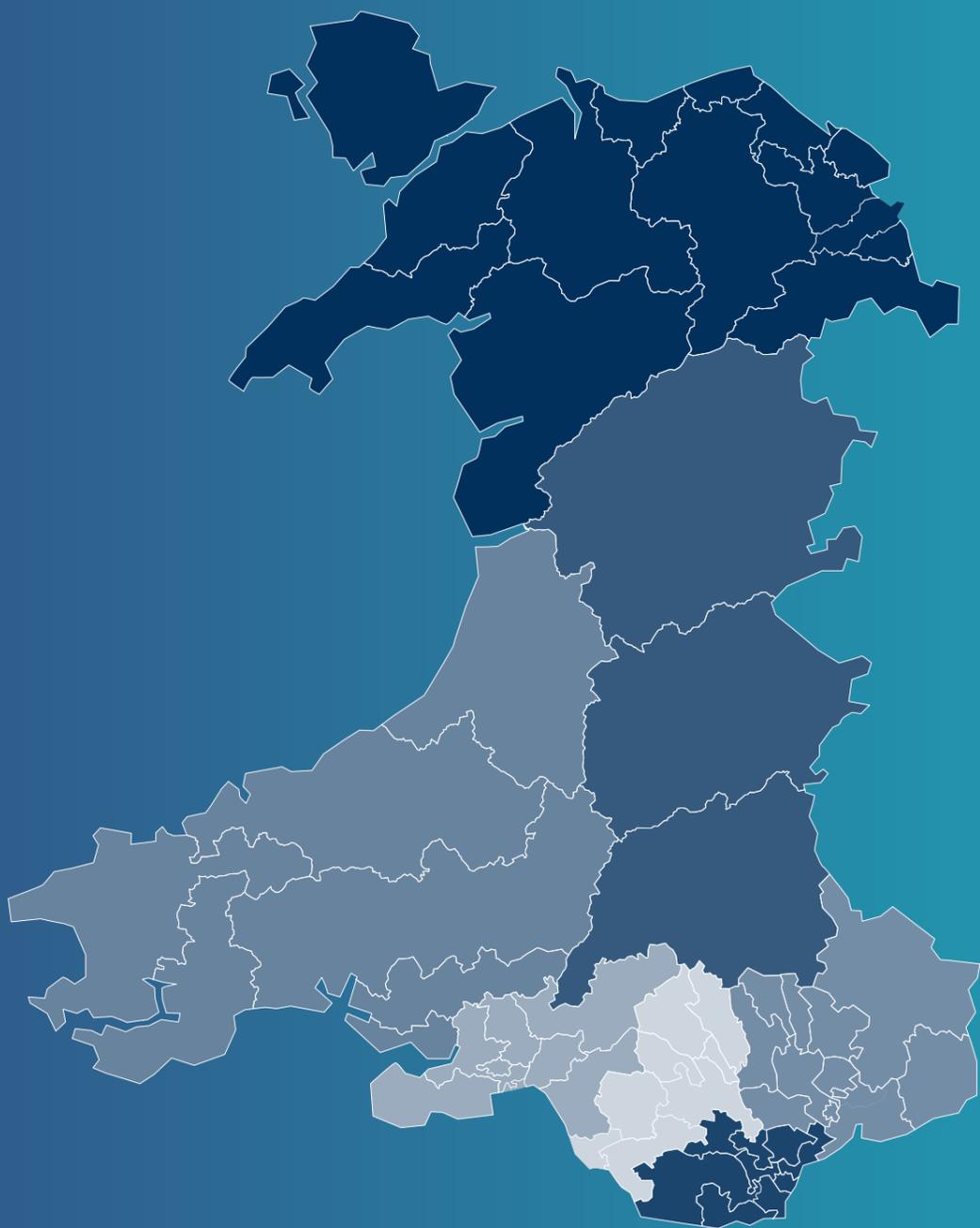


# Powys Teaching Health Board (PTHB)





# Powys Teaching Health Board (PTHB)



## Interactive elements explained



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**Elaine Lorton**  
 Executive Director of Primary Care  
 Community and Mental Health

**Powys has an amazing ability and further opportunity to bring our teams of people together, working across organisational and professional boundaries, to wrap around our population to provide excellent health and wellbeing outcomes.**

Whether within the Pan Cluster, Clusters or Collaboratives, this focus enables the identification of gaps and the solutions to deliver differently and better. We have reflected this throughout our strategies and development plans and are optimistic about the ways we can continue to grow.

The Health Board's overarching Health and Care Strategy aligns with national focus and legislation, addressing significant challenges at all levels and placing Primary Care at the core of services for and with the community. Our vision for A Healthy Caring Powys sets out our approach and priorities for transformation enabling people to start well, live well and age well. This sets us on the path to deliver the long term, sustainable and inter-generational approach in the Powys Wellbeing Plan.

The large geography of Powys borders England and all but one of the other health boards in Wales and our population also receive secondary and specialist care outside our border. The economic, social and healthcare links across these areas form part of the distinct characters of North Powys, Mid Powys and South Powys Clusters.



We continue to build a whole system approach to the delivery of health, care and wellbeing that reflects rural Powys, its populations and providers. This includes development of models of care that are based on prevention and well-being first, with care closer to home, wrapped around the person and their community, rather than an organisational focus.

Working across traditional boundaries, our strong multi-agency and multi-professional care teams include education, housing and the independent, community and voluntary sectors.

Our Clusters uphold the principle of a community-oriented, needs-based strategy, utilising local services and resources to maximize benefits for the Powys population. Adopting a dynamic approach to problem-solving, where professionals, from primary and community care, third sector and local authority come together to collaborate, understand local needs, and develop solutions that are effective within the local context.

We are dedicated to fostering clinical leadership within primary care, engaging the broader community in health and wellbeing planning and delivery, and designing innovative care models.

Our Cluster plans have focussed on:

- Improving local population health and wellbeing
- Enhancing the quality of care services (timely, safe, effective, individual, dignified)
- Increasing the efficiency of care service delivery

We know that there is always the opportunity for further development to enable greater delivery and commissioning through Clusters and Collaboratives.

We will strive to work with all partners to ensure that we continue to do this together for the benefit of the whole Powys population.

# Powys Pan Cluster Planning Group (PCPG)



Recognising the established partnership working arrangements across Powys, to deliver the aims of the Social Services and Wellbeing Act 2014, The Wellbeing of Future Generations Act 2015 and A Healthier Wales. The Pan Cluster Planning Group (PCPG) for Powys was established within the existing structures of the Regional Partnership Board (RPB), as the Regional Partnership Board Executive.

Chair: Nina Davies, Director of Social Services and Wellbeing  
nina.davies@powys.gov.uk

Bringing together senior leaders from the NHS, Local Authority, Clusters and key partners in the Third Sector, the RPB Executive provides integrated system leadership which enables collaboration between partners, to lead the development of integrated county level plans, making prudent use of available funding, workforce, and other resources which address the health, care and wellbeing needs of the local population.

The introduction of the Accelerated Cluster Development programme, which began in April 2022, was designed to increase the speed of implementation of the Primary Care Model for Wales (PCMW) and improve collaboration across all partners to improve the quality of health and social care for the public.

A rural county with an estimated 134,000 population, an increasing population average age, higher than both the population of Wales and the population of the UK overall (ONS 2020), and with 75% of the Lower Super Output Areas (LSOAs) in Powys being amongst the top 30% most deprived in Wales (WG 2019), the planning and delivery of services through the strong established Powys partnership approach is central to the RPB Executive for Powys.

The Powys Clusters are made up of 16 GP Practices, 7 in the North, 5 in the Mid, and 4 in the South of the County. With 28 Dental practices, 23 Community Pharmacies and 15 Optometry practices, providing services to our rural population.

There are 8 Community hospitals, located across the County, providing a range of differing services, such as Outpatients facilities, Minor Injury Units, X-ray Facilities, Therapy services, Midwife led Birth Centres, Inpatient general medical wards, Dialysis, specialist Stroke services, rehabilitation and palliative care services.

There are also a number of Children's Centres, providing a range of Community clinics for children and young people, and dedicated Mental Health facilities, providing a range of community mental health services.

Powys Association of Voluntary Organisations working in partnership with Powys County Council and Powys Teaching Health Board, provide a Community Connectors Service, a Cancer Community Connector, Health and Wellbeing engagement services, and a Mental Health Information service.

## What are we working on?

The priorities for us as the RPB Executive, are reflective of the wider health and care strategy for Powys which clearly sets out the priorities for transforming health and care until 2027. With the aim to help people 'Start Well,' 'Live Well' and 'Age Well' through a focus on:



Ensuring people experience good health, happiness, and prosperity. It includes having good mental health, high life satisfaction, and a sense of purpose.



Providing early help and support in an integrated way to improve well-being, prevent people from disease, enable people to lead fulfilled lives and manage ill health effectively.



Cancer, cardiovascular diseases, respiratory diseases, and mental health disorders are all big contributors to ill health, these are a priority.



With growing expectations and a complex health system, being flexible when responding to people, supports us working together and joining up care services.

Supporting the delivery and underpinning these priorities are:



Development of future integrated workforce plan, mapped data requirements across all partners to help identify key themes and priority activities.



Development of innovative environments as part of new models of care for health and social care in Powys.



Making better use of digital technology to provide better services to people.



Working together to provide coordinated and seamless services.

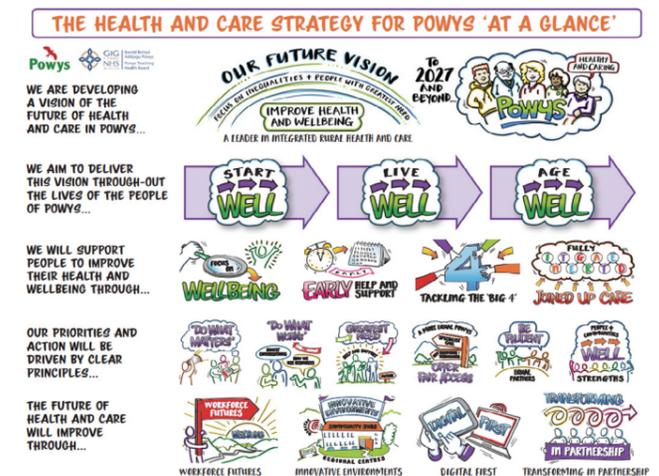
At the centre of the strategic priorities are the following ways of working:

**Collective System Leadership and collaboration** – providing collective leadership between partner organisations across health, social care, third sector, clusters, and other partners, supporting the development of longer-term sustainable Cluster service solutions.

**Integrated Planning** - coordinating and aligning national, regional, and organisational planning frameworks across partners for integrated service delivery, service developments and opportunities in the delivery of integrated health and care for all population groups identified in the Powys Population Needs Assessment.

**Performance, Evaluation and Continuous Learning** - overseeing the delivery of services/ innovative approaches, and realising the objectives outlined in the Area Plan. This includes the development of an integrated quality and evaluation framework, measuring the performance across different funding streams, including Cluster funds and RPB direct funds, e.g. RIF. Employing a continuous learning approach which seeks to learn from testing new and innovative ways of working, areas for improvement, and identifying what works well to help shape new ways of working in line with its strategic intent.

**Continuous Engagement** - developing, implementing and monitoring plans for a consistent and targeted approach to citizen, user, and carer engagement, through a co-productive approach to shaping and informing planning and commissioning arrangements.



## What are the key achievements?

The RPB Executive remains an evolving partnership arrangement and through its collective system leadership and collaboration, has helped to oversee a number of key projects that have contributed to delivering against its strategic priorities.

We work to demonstrate the continuous learning approach utilised by the Cluster projects to understand what is working well, and identify areas for improvement and change. This approach has led to evolving and improving interventions, helping to shape how the region shift towards a more preventative and early intervention approach, as new models of care are developed and implemented across Powys.

## What have we learnt?

- Establishing the RPB Executive within the current Powys Regional Partnership Board has helped to strengthen planning and delivery across the system, ensuring clusters play a role in shaping system change.
- Sharing and learning across Regional Partnership Board and Clusters has been helpful due to number of similarities, e.g. shared challenges around project management of grant funding, strategically utilising funds to help deliver system change; performance management and demonstrating impact; and mainstreaming / sustaining grant funded activity to name a few.
- Having the voice of Cluster Leads and Primary Care representation directly engaged within the Regional Partnership Board structures at a strategic level has been beneficial; hearing directly from professionals who work directly with people has helped highlight areas of focus.
- Having representation from Clusters and Primary Care at strategic partnerships – Start, Live and Age Well – has provided further opportunities for Cluster engagement around specific population groups – Children, Adults with mental health / learning disabilities, and Older People.
- Performance and evaluation frameworks have remained separate across different funding streams and there are opportunities to align these to help demonstrate system impact as well as what is working well. Reporting of impact across funding streams e.g. RIF, cluster funds, etc, is fed into the RPB Executive and so is starting to help mature discussions around impact of collective resource, and highlight what innovative practice is making a difference.
- An Evaluation, Prioritisation and Assurance Framework has been completed on the RIF programme, led by the RPB Executive – this has helped demonstrate good levels of compliance against key principles of the funding programme, highlighting where areas of the programme could be strengthened. Learning from the process has been shared with partners which is helping to strengthen other funding programmes.



Powys

## What is next?

PtHB Integrated Plan 2024-29: [pthb.nhs.wales/about-us/key-documents/strategies-and-plans/11/](https://pthb.nhs.wales/about-us/key-documents/strategies-and-plans/11/)

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Powys Population Needs Assessment: [Population Needs Assessment](#)

# Mid Powys

## Who are we?

The Mid Powys Cluster is made up of **5 GP Practices**, located in Builth Wells; Knighton; Llandrindod Wells, Presteigne and Rhayader, **6 Dental practices**, **7 Community Pharmacies** and **3 opticians**, providing services to a rural population of approximately 29,500 patients.

There is a **Community hospital**, located in Llandrindod Wells providing a range of differing services including Outpatients services, Minor Injury Unit, X-ray Facilities, Therapy services, Minor Surgery and Endoscopy, Mid-wife led Birth Centre, inpatient general medical ward, Dialysis, Midwife-led birth centre, Inpatient General / Medical Ward, and elderly Mental Health Ward. There is also a **Community Mental Health facility**, located in Llandrindod Wells, and an Intergrated Health and Care Centre, providing short stay reablement services.

There are a range of **Third Sector services** provided across the Mid Powys Cluster, including mental health, home support and befriending services.

**Powys Association of Voluntary Organisations** working in partnership with Powys county Council and Powys Teaching Health Board, provide a Community Connectors Service, a Cancer Community Connector, and Health and Well being engagement service, and a Mental Health Information service.

## What are we working on?

The strategic priorities for Powys are clearly defined in the 2024-29 Intergrated plan, which sets out the immediate, short, medium and long term actions of the health board to deliver 'A Healthy Caring Powys' and the national goal of 'A Healthier Wales'.

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**Powys Population Needs Assessment:** [Population Needs Assessment](#)

[Mid Powys Summary Population Demographics](#)

As one of 3 Clusters in Powys, our key priorities are reflective of the Health and Care strategy for Powys, priorities for the Cluster continue to be:

**Mental Health** – 'Exploring the provision of Mental Health services in young people. Continued Cluster adoption and promotion of the National '111 press 2 service'.

**Frailty** – 'improving care across the cluster to those with most vulnerable needs'.

**Urgent Care** – 'modelling for Winter to meet increasing system demand across all Primary & Community services. Improving awareness of services and pathways of care across Cluster members, through education and communication campaigns.'

Embracing and supporting innovation continues to be a priority for the Mid Cluster, examples of this can be seen through some of the pilot projects currently being delivered across the cluster including:

- **Pharmacy Professionals within GP Practices** – supporting the delivery of frailty priorities, to reduce medicines related harm and admissions to hospitals.
- **Pan Powys targeted childhood obesity intervention programme** - supporting children and young people, providing a series of practical nutrition and healthy eating education sessions, including cooking skills and overcoming obesogenic barriers, supporting health and wellbeing.
- **Embracing digital** has seen the introduction of a new digital technology platform within GP Practices to support the day-to-day delivery of services for patients, providing more timely access and signposting to services, whilst bringing new ways of working and providing efficiencies to practice 'back office' functions.
- **Community Connectors** – supporting patients and communities with care or support needs to achieve 'what matters' to them by accessing third sector services and community activities. The service is run by PAVO, delivering 'what matters' to clients in need of support, but also to the health and care professionals who refer clients to the service.
- **Skills development & New recruitment models** – delivering strong links with the 'Primary and Community Care Academy', to facilitate student and Pre-Reg Pharmacist rural placements, strengthening links with the local Universities, to develop Student Nurse education modules and placements, delivering focused skills development sessions to all professionals, investing in education and skills development of our workforce.

## What are the key achievements?

Embracing and supporting innovation is a priority for the Cluster, key achievements have included:

**Musculoskeletal (MSK) Primary Care Practitioner within GP practices** – developed and implemented across the Cluster in May 2022. Supporting improved health and wellbeing outcomes for patients, through the provision of improved timely access to Physiotherapy professionals, whilst creating increased capacity and access to other services, including specialist diagnostics and imaging services, CMATs and general Physiotherapy services. After successfully being piloted for a 2 year period, the Mid Cluster was the first Cluster across Powys, to have this service adopted as a fully funded long-term service solution.

**Health and Wellbeing facilitator** - increasing awareness of health, wellbeing and social care services within Communities, and how to access these, sharing health and wellbeing information across communities, and promoting early help and support.

**Dedicated digital Patient App** – providing alternative 24/7 access to Primary and Community Care health & wellbeing information, prior to the introduction of the NHS Wales app.

## What have we learnt?

As a Cluster, working collaboratively with all partners continues to be central, recognising to meet the needs of the population and strengthen the delivery of services, to affect and influence real change for the development and planning of services, a Pan Powys approach working collaboratively with the North and South Clusters to share priorities, ideas and learnings is central to delivering long term sustainable Cluster services, which meet the needs of our population.

## What is next?

Early help and prevention models of care – improving access to Primary Care, though, First Contact Practitioner services, Frailty service provision, Diabetes Prevention, GP Dermatology services.

Integrated Joined up Care – provision of care closer to home, the development of Frailty services across the Cluster teams, a community approach to the coordination and delivery of care for severely frail patients.

Workforce Futures - collaborating with the Primary and Community Care Academy for the provision of education, training, and development of the workforce, enabling alternative recruitment models and portfolio careers, and expanding opportunities for greater rural placements.

Continued Transforming in partnership – collaborating across Cluster and collaborative boundaries, to support innovation and improvement to models of care, through a multi professional and organisational approach to the provision of services.

## Mid Powys

### Cluster Lead

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# North Powys

## Who are we?

The North Powys Cluster is made up of **7 GP Practices** which are dispensing practices, located in Llandiloos, Machynlleth, Newtown, Montgomery, Welshpool, Llanfair Caearinion and Llanfyllin, **10 Dental practices, 8 Community Pharmacies and 6 Optometry practices**, providing services to a rural population of approximately 64,000 patients.

There are 4 **Community hospitals**, located in Machynlleth, Newtown, Llanidloes and Welshpool, providing a range of differing services across the 4 sites such as Outpatients facilities, Minor Injury Unit, X-ray Facilities, Therapy services, Midwife led Birth Centre, Inpatient general medical ward, Dialysis, specialist Stroke services, rehabilitation and palliative care services.

There is also a **Children's Centre**, providing a range of Community clinics for children and young people, and dedicated Mental Health facility, located in Newtown, providing a range of community mental health services.

There are a range of **Third sector services** provided across the North Powys Cluster, including mental health, home support and befriending services.

**Powys Association of Voluntary Organisations** working in partnership with Powys County Council and Powys Teaching Health Board, provide a Community Connectors Service, a Cancer Community Connector, and Health and Wellbeing engagement service, and a Mental Health Information service.

## What are we working on?

The strategic priorities for Powys are clearly defined in the 2024-29 Intergrated plan, which sets out the immediate, short, medium and long term actions of the health board to deliver 'A Healthy Caring Powys' and the national goal of 'A Healthier Wales'.

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**Powys Population Needs Assessment:** [Population Needs Assessment](#)

**North Powys Summary Population Demographics**

As one of 3 Clusters in Powys, our key priorities are reflective of the Health and Care strategy for Powys, priorities for the Cluster continue to be:

**Mental Health** – 'Exploring the provision of Mental Health services in young people. Continued Cluster adoption and promotion of the National '111 press 2 service'.

**Frailty** – 'improving care across the cluster to those with most vulnerable needs'.

**Urgent Care** – 'modelling for Winter to meet increasing system demand across all Primary & Community services. Improving awareness of services and pathways of care across Cluster members, through education and communication campaigns.'

Embracing and supporting innovation continues to be a priority for the North Cluster, examples of this can be seen through some of the pilot projects currently being delivered across the cluster including:

- **Frailty Service Pilots** - supporting the coordination and delivery of care to those patients identified as severely frail, through dedicated Frailty specialist practitioners and the development of a single point of access for patients, their families and health professionals. Whilst working collaboratively with wider Allied Health Professionals, and Health & Social care organisations to develop sustainable frailty services for the future, based on local population needs.
- **Digital Technology** – embracing the use of digital apps and software to support the development of alternative access to services, communication and signposting, providing innovation in the day-to-day delivery of services.
- **Childhood obesity** – supporting a Pan Powys targeted childhood obesity intervention program providing a series of practical nutrition and healthy eating education sessions, including cooking skills and overcoming obesogenic barriers, supporting health and wellbeing.
- **Community Connectors** – supporting patients and communities with care or support needs to achieve 'what matters' to them by accessing third sector services and community activities. The service is run by PAVO, delivering 'what matters' to clients in need of support, but also to the health and care professionals who refer clients to the service.
- **Skills development & New recruitment models** - developing strong links with the 'Primary and Community Care Academy', to facilitate student and Pre-Reg Pharmacist rural placements, strengthening links with the local Universities, to develop Student Nurse education modules and placements, delivering focused skills development sessions to all professionals, investing in education and skills development of our workforce.
- **Virtual Ward Reporting** – developing improved digital methods for the capturing and reporting of activity data, supporting evaluation and the wider development of Frailty and Community services.
- **Winter Appointment Surge Capacity within GP Practices** – piloting a pool of additional clinical resources (surge capacity), to support the GP Practices in providing a flexible response to peaks in unplanned demands during a 3 month winter period.

## What are the key achievements?

Embracing and supporting innovation is a priority for the Cluster, key achievements have included:

**Musculoskeletal (MSK) Primary Care Practitioner within GP practices** – developed and implemented across the Cluster in Dec 2022. Supporting improved health and wellbeing outcomes for patients, through the provision of improved timely access to Physiotherapy professionals, whilst creating increased capacity and access to other services, including specialist diagnostics and imaging services, CMATs and general Physiotherapy services.

After successfully being piloted in one practice in the North, this service has been adopted as a fully funded long-term service solution, and is currently being rolled out across the other 6 practices within the Cluster.

**Dedicated digital Patient App** – providing alternative 24/7 access to Primary and Community Care health & wellbeing information, prior to the introduction of the NHS Wales app.

**Health and Wellbeing Facilitator** – increasing awareness of health, wellbeing and social care services within Communities, and how to access these, sharing health and wellbeing information across communities, and promoting early help and support.

The learnings from this project are helping to inform, other project Communication work within the Regional Partnership Boards, Start Well, Live Well and Age Well Partnership groups.

**Multi Disciplinary Team work** - embracing MDT working, clinical pharmacists were piloted to work as part of the GP practice teams, in a patient facing roles to clinically assess and treat patients, using their expert knowledge of medicines to add value to, and to improve patient care and patient outcomes.

The learnings from this project are helping inform future models of working in general practice.

## North Powys

### Cluster Lead

Dr Waseem Aslam  
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## What have we learnt?

As a Cluster, working collaboratively with all partners continues to be central, recognising to meet the needs of the population and strengthen the delivery of services, to affect and influence real change for the development and planning of services, a Pan Powys approach working collaboratively to share priorities, ideas and learnings is central to delivering long term sustainable Cluster services, which meet the needs of our population.

Partnership working has continued to strengthen, with increasing solutions to service challenges being developed as across multiple Collaboratives.

We are continuing to work on strengthening and capturing the outcomes and evaluation of pilot service projects, to help inform the long term sustainable provision of Cluster based services for the North Powys population.

## What is next?

**Early help and prevention models of care** – improving access to Primary Care, though, First Contact Practitioner services, Frailty service provision, Diabetes Prevention, GP Dermatology services, Mental Health and Urgent care services.

**Integrated Joined up Care** – provision of care closer to home, the development of Frailty services across the Cluster teams, a community approach to the coordination and delivery of care for severely frail patients.

**Workforce Futures** - collaborating with the Primary and Community Care Academy for the provision of education, training, and development of the workforce, enabling alternative recruitment models and portfolio careers, and expanding opportunities for greater rural placements.

**Continued Transforming in partnership** – collaborating across Cluster and collaborative boundaries, to support innovation and improvement to models of care, through a multi professional and organisational approach to the provision of services.



## North Powys

### Cluster Lead

Dr Waseem Aslam  
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# South Powys

## Who are we?

The South Powys Cluster is made up of **4 GP Practices**, located in Brecon, Haygarth, Crickhowell and Ystradgynlais, **6 Dental practices**, **8 Community Pharmacies** and **6 Optometry Practices**, providing services to a rural population of approximately 36,000 patients.

There are **3 Community hospitals**, located in Brecon, Bronllys and Ystradgynlais providing a range of differing services including Outpatients services, Minor Injury Unit, X-ray Facilities, Therapy services, Minor Surgery and Endoscopy, Midwife led Birth Centre, Therapy Services, inpatient general medical ward, Dialysis, Midwife-led birth centre, Inpatient General / Medical Ward, and elderly Mental Health Ward, and day hospital services.

There is also a **Children's Centre**, providing a range of community clinics for children and young people, along with dedicated **Mental Health Resource centres**, located in Brecon and Ystradgynlais, providing a range of community mental health services.

There are a range of **Third sector services** provided across the South Powys Cluster, including mental health, home support and befriending services.

**Powys Association of Voluntary Organisations** working in partnership with Powys County Council and Powys Teaching Health Board, provide a Community Connectors Service, a Cancer Community Connector, a Health and Wellbeing engagement service, and a Mental Health Information service.

## What are we working on?

The strategic priorities for Powys are clearly defined in the 2024-29 Intergrated plan, which sets out the immediate, short, medium and long term actions of the health board to deliver 'A Healthy Caring Powys' and the national goal of 'A Healthier Wales'.

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**Powys Population Needs Assessment:** [Population Needs Assessment](#)

**South Powys Summary Population Demographics**

As one of 3 Clusters in Powys, our key priorities are reflective of the Health and Care strategy for Powys, priorities for the Cluster continue to be:

**Mental Health** – 'Exploring the provision of Mental Health services in young people. Continued Cluster adoption and promotion of the National '111 press 2 service.'

**Frailty** – 'improving care across the cluster to those with most vulnerable needs'.

**Urgent Care** – 'modelling for Winter to meet increasing system demand. across all Primary & Community services. Improving awareness of services and pathways of care across Cluster members, through education and communication campaigns.'

Embracing and supporting innovation continues to be a priority for the pilot projects currently being delivered across the cluster include:

- **Frailty Coordination Service Pilot** - supporting the coordination and delivery of care to those patients identified as moderately and severely frail, through dedicated frailty practitioners and the development of a single point of access for the most severely frail patients to prevent unexpected deterioration in health and reduce unnecessary hospital admissions. Working collaboratively with wider Health & Social care organisations to develop sustainable frailty services based on local population needs.
- **Digital Technology** - embracing the use of digital apps and software to support the development of alternative access to services, communication and signposting to services, providing innovation in day-to-day delivery of services.
- **Pre-diabetes Care** - delivery of a targeted project that offers support to people at an increased risk of developing type 2 diabetes. The project sees dedicated, trained healthcare support workers, with oversight from dietitians, deliver a brief intervention to people who have had a blood test that shows that they are at an increased risk of type 2 diabetes.
- **Childhood obesity** - supporting a Pan Powys targeted childhood obesity intervention program providing a series of practical nutrition and healthy eating education sessions, including cooking skills and overcoming obesogenic barriers, supporting health and wellbeing.
- **Community Connectors** - supporting patients and communities with care or support needs to achieve 'what matters' to them by accessing third sector services and community activities. The service is run by PAVO, delivering 'what matters' to clients in need of support, but also to the health and care professionals who refer clients to the service.
- **Skills development & New recruitment models** - developing strong links with the 'Primary and Community Care Academy', to facilitate student and Pre-Reg Pharmacist rural placements, strengthening links with the local Universities, to develop Student Nurse education modules and placements, delivering focused skills development sessions to all professionals, investing in education and skills development of our workforce.
- **Virtual Ward Reporting** - developing improved digital methods for the capturing and reporting of activity data, supporting evaluation and the wider development of Frailty and Community services.

## What are the key achievements?

Supporting innovation has been a key success for our south Cluster, key achievements have included:

**Bevan Exemplar Project** – Implementing Evidence-Based Practices for Persistent Pain in Primary Care into 2 South Powys GP practices.

The project saw the introduction of a persistent pain practitioner role, with the key aims of improving the health and wellbeing for individuals suffering with persistent pain, to influence opioid/gabapentin prescribing cultures and providing education and support for patients and clinicians. The learnings from this project are helping to inform the wider Living Well Service developments in this area across the health board.

Further information on the project is available via the following link: [Implementing Evidence-Based Practices for Persistent Pain in Primary Care - Bevan Commission](#)

**Musculoskeletal (MSK) Primary Care Practitioner within GP practices** - implemented across the cluster GP Practices, providing patients with increased timely access to Physiotherapy Professionals, rehabilitation programmes, specialist diagnostic and investigation services. This has become an invaluable service to the south Powys population, supporting improved health and wellbeing outcomes for patients.

**Point of Care Testing Pilot** - C-reactive Protein (CRP) in diagnosis of acute Respiratory Infections - The GP practices have piloted the use of the POCT supporting them in the differential diagnosis of acute respiratory infection, to increase quality of patient care, and antibiotic stewardship. With the learnings from this project helping to informing the wider POCT development work taking place.

## What have we learnt?

The success of our cluster has been recognizing the different experiences and maturity of collaboratives and creating an environment where all can present ideas and innovate to deliver services that meet the needs of our population. Encouraging members to explore and consider solutions from frailty and urgent care, through to screening for long term conditions, such as hypertension when visiting their Opticians.

As a Cluster, we recognise the true value in collaboration, not just directly between the collaboratives, but with the wider health board, and other Clusters, regularly meeting as one Cluster, Pan Powys, to utilise all the experience available to us, to help facilitate change and deliver sustainability to services.

## South Powys

### Cluster Lead

Dr Anthony Morgan  
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## What is next?

**Continued Transforming in partnership** - collaborating across Cluster and collaborative boundaries, to support innovation and improvement to models of care, through a multi professional and organisational approach to the provision of services.

**Early help and prevention models of care** - improving access to Primary Care, through, First Contact Practitioner services, Frailty service provision, Diabetes Prevention, GP Dermatology services.

**Integrated Joined up Care** - provision of care closer to home, the development of Frailty services across the Cluster teams, a community approach to the coordination and delivery of care for severely frail patients.

**Workforce Futures** - collaborating with the Primary and Community Care Academy for the provision of education, training, and development of the workforce, enabling alternative recruitment models and portfolio careers, and expanding opportunities for greater rural placements.



## South Powys

### Cluster Lead

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