

South Monmouthshire - Health Care Exploratory Group (HCEG) - Terms of Reference
Primary Healthcare Cluster, South Monmouthshire
16th Nov 2021

Objectives: To provide Aneurin Bevan University Health Board (ABUHB) potential cost effective practical ideas, progressively to building on existing community health services. The objective is to increase the local footprint of services e.g from Chepstow Community Hospital (CCH), available to Monmouthshire residents whilst reducing environmental impact. Overall creating additional capacity to address the Monmouthshire population needs, at the right place and time.

Rational: Primary and community care providing 'care closer to home' is the bedrock of the Welsh Government vision for NHS Wales. NHS Local Health Boards (LHB) should be demonstrating how they will achieve improved access locally in its NHS Wales national integrated medium-term plan (IMTP). Monmouth County Council (MCC) and Chepstow Town Council (CTC) wish to support our LHB - ABUHB and provide ideas for the IMTP to service local residents (including parents of young children and older population who are finding the burden of travelling to Royal Gwent (RG), even for the smallest ailment, a challenge).

Suggested participants of Group: Stakeholders drawn from at least: Primary Care, South Monmouthshire, Chepstow GPs, ABUHB, Age and Disability Community Groups, Young Mothers Group, Chepstow Town and County Councillors.

Considerations:

1. Types of health services taking into account needs and risk limitation. Health services might include more specialised services undertaken by GPs or nurses with special interests and allied health professional and other services at the primary-secondary care interface. They may also include services addressing specific local health needs or requirements, and innovative services that are being piloted and evaluated.
2. Enhanced services by GP Practices commissioned and funded by ABUHB.
3. Formation of Community Interest Company including local GP Practices, and Pharmacies to provide a potential for local primary care to collaborate to provide health services.
4. Use of eHealth to support front line staff.
5. Sources of finance e.g. ABUHB, Insurance Companies

Issues to consider

1. **Staffing** to cover opening hours for services with implications for other services if they are involved with minor injuries. Availability of experienced Emergency Nurse Practitioners and supporting Doctors/Consultants either remotely or physically.
2. **Services:** a realistic scope of what service could be covered needs to be established, starting with a narrow clearly defined service. Initially covering something quite high level by examining the different treatments that a MIU could cover and then picking out a narrow low risk field and looking to work this up as a starting point.
3. **Training:** Training could be focused to a specific issue if services start with a relatively narrow remit and then build on that remit following proven success of the intervention.
4. **Sustainability:** ensuring a method or services delivery which balances demand with staff availability so as to ensure value for money. Ensuring staff maintain skills and competencies. The number of people using minor injury services from NP 15/16/25/26 in Lydney, Southmead and Gwent, in the full years of 2017/8/9 appears to be somewhere between 13 and 19 per day. Subsequently the population and demographics have changed such as to suggest a higher demand will need to be served in future. Financial figures to provide services tackling a specific problem may be required. Funding is likely to be short term in

pilot form with further progression depending on outcomes. This can often impact sustainability and recruitment.

5. **Risks:** Ensuring patients with serious and potentially life threatening conditions do not present themselves at a minor injury facility. There will be a need to review a Minor Injury Unit (MIU) specification and focus on the lowest risk presentations;
6. **Security:** Ensuring the security of staff.
7. **Facilities:** the availability of Chepstow Community Hospital after expiry in 2025 of the current contract.
8. **Environment:** To meet Government environmental targets journey distances should be reduced. e.g. in providing a local based services rather than having residents travel to Newport RG what is the reduction in emissions. In the evaluation process if a new service is set up, how we monitor the impact it is having and how is it an improvement to the status quo must be reviewed. How we gauge feedback, in an evidenced based way, that the new service is preferable to patient groups.

Next Steps

1. Agree TOR with ABUHB and their participation.
2. Invite key community representative of the young and elderly to a meeting in late Jan 2022
3. Set programme of meetings (commencing early 2022) and target deliverables.
4. Commence meetings with view to the group being dissolved when satisfactory roadmap is agreed with stakeholders

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<https://primarycareone.nhs.wales/cluster-area/aneurin-bevan-uhb/monmouthshire-south/>