



**Agenda Item**

5.3.6

**Quality, Safety & Experience Committee**

**Highlight Report from the Primary Care and Communities Care Group**

<b>Dyddiad y Cyfarfod / Date of Meeting</b>	18/11/2025
<b>Statws Cyhoeddi / Publication Status</b>	Open/ Public Not Applicable
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<b>Cyflwynydd yr Adroddiad / Report Presenter</b> <i>If you do not wish for your name to be included in the public domain, please only include your job title</i>	Nurse Director, Primary Care & Communities
<b>Noddwr Gweithredol yr Adroddiad / Report Executive Sponsor</b>	Richard Hughes, Interim Executive Nurse Director

<b>Pwrpas yr Adroddiad / Report Purpose</b>	For Noting
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**Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/Group)**

<b>Committee / Group / Forum Individuals</b>	<b>Date</b>	<b>Outcome</b>
N/A	Click or tap to enter a date.	

**Acronyms / Glossary of Terms**

C&V	Cardiff and Vale Health Board
CTM	Cwm Taf Morgannwg
D2RA	Discharge to Assess
DAP	Dental Access Portal
DHCW	Digital Health Care Wales
DN	District Nursing

GA	General anaesthetic
GAA	General Anaesthetic Assessment
GMS	General Medical Services
GP	General Practitioner
HMPPS	His Majesty's Prison and Probation Service
IPC	Infection Prevention Control
LES	Locally Enhanced Service
NHS	National Health Service
OCP	Organisational Change process
OOH GP	Out of Hours General Practitioner
PBMA	Prevention and Behavioural Management Assessment
PCH	Prince Charles Hospital
POWH	Princess of Wales Hospital
RCT	Rhondda Cynon Taff
RGH	Royal Glamorgan Hospital
SBUHB	Swansea Bay University Health Board
SCD	Special Care Dentistry
SPOA	Single Point of Access
UCAF	Unified Contract Assurance Framework
WIS	Welsh Immunisation System
WG	Welsh Government
WL	Waiting List

## 1. Situation /Background

- 1.1 This report had been prepared to provide the Committee with details of the key issues considered by the Quality, Safety, Risk and Experience Primary Care and Communities Care Group at its meeting on the 13<sup>th</sup> October 2025.
- 1.2 Key highlights from the meeting are reported in section 3.

## 2. Specific Matters for Consideration

- 2.1 The purpose of the Care Group is to provide assurance to the Board on the provision of workplace health & safety and safe and high-quality care to the population we serve, including prevention through public health, primary and secondary care.
- 2.2 The Primary Care and Community Care Group QSRE Board will:
- Put the needs of patients, carers and the public at the centre of all its business.
  - Provide evidence based and timely advice to the Primary Care and Community Care Group, based on local need, to assist in discharging its functions and meeting its responsibilities.



- Provide assurance to the Primary Care and Community Care Group in relation to the arrangements for safeguarding the public and continuously improving the quality and safety of the services we provide.
- Ensure that care is delivered in accordance with the Health & Care Standards for Health Services in Wales.
- Ensure that services are delivered in compliance with regulatory legislation and accreditation bodies.

### 3. Highlight Report

<b>Alert / Escalate</b>	<p><b>Paediatric GA List</b> There are approximately 508 children on the waiting list for a GAA and a further 622 children on the waiting list for PBMA which could lead to treatment under GA. There has been a significant increase over the last month (+134 patients) due to a recent validation of Bridgend legacy waiting lists.</p> <p>There have been some positive developments in relation to the number of lists proposed for the service with 1.5 lists per week being allocated in PCH and 2 lists per week in RGH, with potential for a further 2 lists per week in RGH. The lists in PCH are now operational but the lists in RGH have still not commenced due to a delay in theatre/ward movements to accommodate refurbishments.</p>
<b>Advise</b>	<p><b>Comprehensive Dental Care for Paediatrics</b> work to repatriate this service from Cardiff &amp; Vale (C&amp;V) is currently being undertaken and representation from both Health Boards including Primary Care, Planned Care and the Paediatric Wards are being engaged.</p> <p>It is anticipated that the service will be transferred back to CTM in January 2026 and one of the existing lists within PCH (1 per month) will be used to accommodate this cohort of patients. Therefore, the trajectory for 'routine' GA patients may be slightly delayed as a result of a decrease in capacity to accommodate the comprehensive care. It is expected that C&amp;V will treat any children that have already been referred into their services and therefore, the current backlog will not transfer to CTM, however Cardiff are yet to confirm this agreement on the waiting list transfer. Once the secondary care dental service repatriation has occurred with SBUHB, it is planned that dental SCD is more appropriate for delivery on the POWH site, this is the longer-term option.</p> <p><b>Parc Prison Optometry Service:</b> the opticians service is running well within the prison the provider has introduced a new</p>



triaging process. The change has reduced the waiting list by 19 patients between June & July (in addition to 115 patients being added to the WL between June & July). Additional sessions commenced in August which are expected to have a positive impact on the waiting list.

**Dental Access:** there have been 8789 patients allocated via the DAP since 12<sup>th</sup> February 2025. Out of this number 3835 patients currently registered on DAP are waiting for an NHS Dentist in CTMUHB (313 of which have been made an offer but have declined it and re-entered WL).

Consultation for **New National Dental Contracts** across Wales. A new dental contract will be implemented and will go live on the 1<sup>st</sup> April 2026. There remains the risk that some existing NHS contract holders may choose not to engage with the new contract and hand back contracts, this could pose a significant risk to access should this happen. It is essential that WG develops a communication plan for both patients and the profession and a Multi-Disciplinary Team (MDT) implementation group established to work through the detail of the contract which is needed by HBs to be able to monitor the contract effectively

**Lymphoedema service:** Improvement work continues and have completed check phase, Plan phase commencing 1/10/25. Recent Llais enquiry completed showing long waiting lists and increase in referrals to the service that is under resourced and lack of investment and reoccurring funding over many years. Additional investment proposal to be drafted, to reduce the risk of further impact to waiting list times, which will continue to increase and will have continued delays to patient treatment.

**Wound Clinics:** meetings held with GP leads to look at a more collaborative approach. Further work required with the LES agreement with GP practices.

**Community Vaccination Centres (CVCs):** Following a recent IPC and Health and Safety assessment across the 6 vaccination centres in June, the overall conclusion is the centres are not fit for purpose. Recommendations have been made under each of the key findings. In response to this a full review of the delivery model will be undertaken and proposals will take into consideration the recommendations. This work remains ongoing.

**Vaccinations:** the updated WIS 2.0, was launched on the 1<sup>st</sup> September 2025. The new platform has had a number of issues which have been reported back to DHCW for an urgent resolution.



**Mobile Vaccination Unit:** The team are progressing with the procurement of a three-year lease bespoke vaccination vehicle to address vaccine equity and access issues across CTM. Final sign off has been given to the layout and interior fitments and a delivery date scheduled for 22<sup>nd</sup> October 2025.

The **Autumn COVID Vaccination Programme** began on 1<sup>st</sup> October for eligible individuals. Staff are no longer universally included. The eligibility criteria for this campaign is:

- Adults aged 75 years and over on 31<sup>st</sup> January 2026;
- Residents in a Care Home for older adults;
- Individuals aged 6 months and over who are immunosuppressed.

**GP Practices:** The team have now completed the annual GMS UCAF desktop reviews for the second consecutive year. **Six** practices have been identified for visits this year, including one that will receive a full-day review. All practices have been informed, and those not scheduled for a visit have been issued with action logs to complete and return. The multi-disciplinary visits are undertaken by a Clinical Director and Medicines Management representatives. They commenced from September and will assess performance against Quality Standards. Following the visits, reports will be shared with each practice to support action planning and provide further assurance.

**Navigation Hub:** there will soon be a name change, the Clinical Navigation Hub will be known as CTM SPOA in line with WG direction.

**Parc Prison:** Operational Staffing and Estate Challenges which are due to fluctuations in staffing and regime changes continue to impact healthcare resource allocation and service delivery. To mitigate this, the Directorate is working with G4S to explore wing-based medicine administration, reducing reliance on healthcare runners.

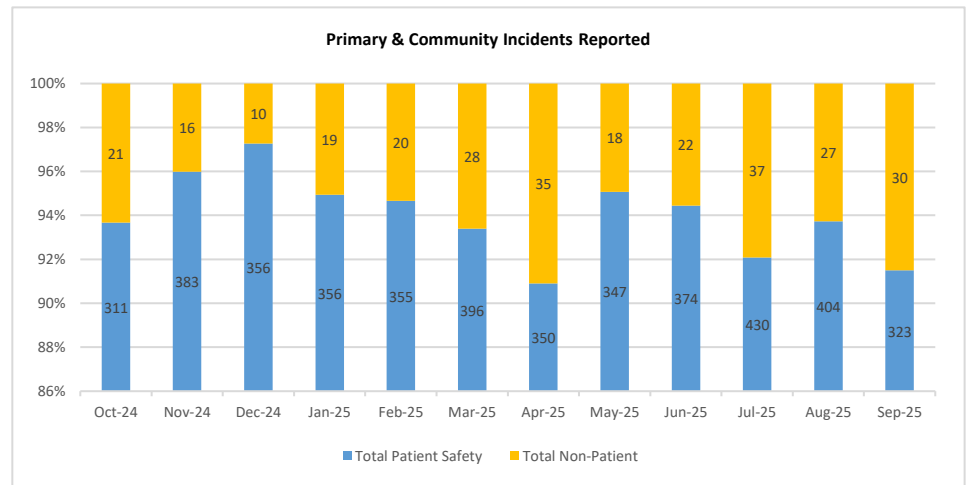
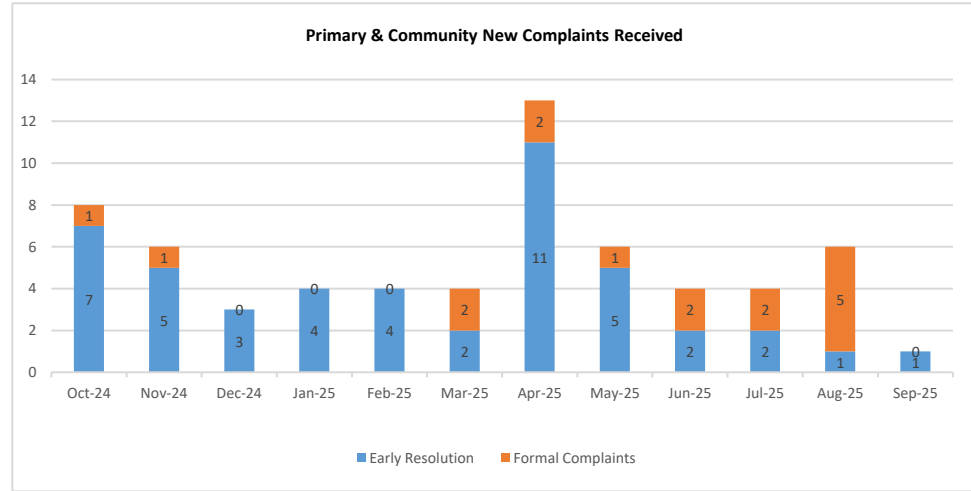
**Specialist Palliative Care Ward 6:** Challenges to the medical workforce on ward 6 Specialist Palliative Care in YCC remain. An initial discussion with Llais has taken place and we are now finalising the consultation process and a further meeting is taking place with LLais on Monday 10<sup>th</sup> November. The consultation document has been drafted and it will consider a range of options to support a sustainable service going forward. The Care Group has been advised to follow a 6-week engagement/consultation



with our public in the first instance and feedback from this will help inform the final outcome.

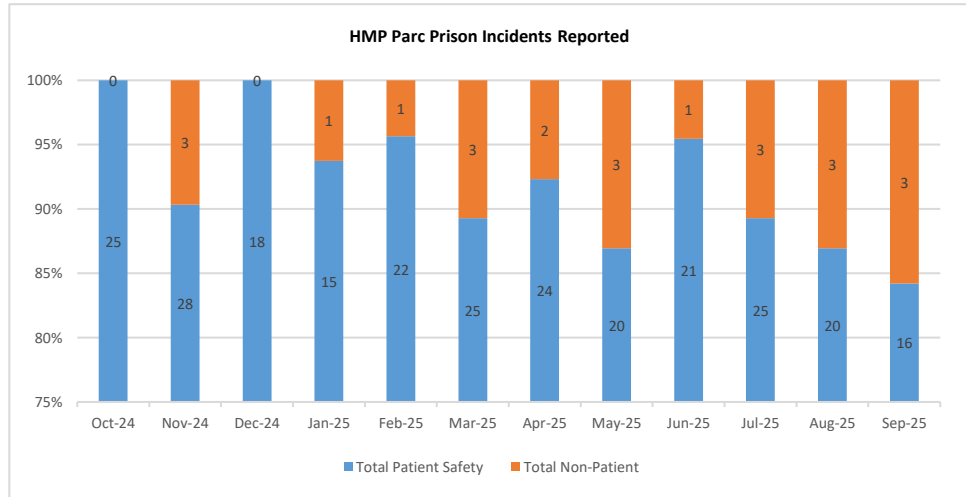
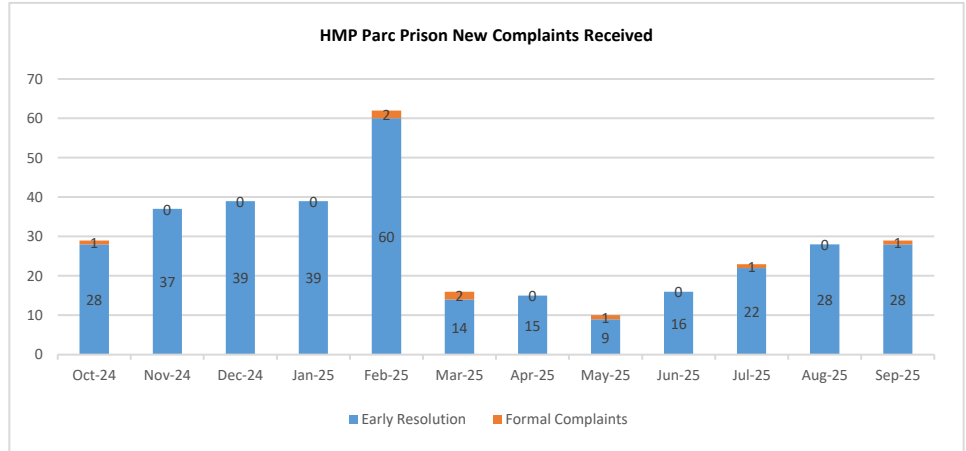
**Assure**

**Concerns and incidents (excluding Parc Prison)**





### HMP Parc Prison concerns and incidents



**Inform**

**Bladder and Bowel service:** plans for a new Continence Pilot in Bridgend Locality as an Integrated approach with the aim to have a holistic assessment with support of therapists prior to prescribing products.

**Community Hospitals:** D2RA audit to be undertaken across community hospitals within the next few months. This audit will identify any delays with discharging patients.

**YCC Ward 5:** awaiting a confirmation date of handover of the area from Capital. No funding agreed as yet to allow recruitment of nursing staff.

**Clinical Navigation Hub:** the Respiratory Virtual Ward currently has 35 patients across RCT and Merthyr. Meetings are scheduled with a respiratory physician and Doccla (monitoring equipment) to this patient cohort. Also, options are being explored for a pharmacist to support the team. This will enable the team to accept and review more patients.



	<p><b>Clinical Navigation Hub:</b> The team are in the process of developing a new Head injury pathway for patients over 65 with a frailty score of 7. This pathway is being developed in consultation with neurology and radiology colleagues in order to prevent unnecessary hospital admissions for those patients who would not be eligible to undergo any surgical intervention following a head injury. In the initial phase this pathway will be rolled out across care homes within RCT.</p> <p><b>Clinical Navigation Hub:</b> District Nurse (DN) Escalation pathway, if a patient has been identified as having an urgent healthcare need but the patient's own GP does not have availability to review the patient and the advice provided is to contact 999, the DN will contact the Hub to request a medical review from an OOH GP. The Navigation Hub clinician will respond to the DN via telephone initially within 20 minutes to triage the patient then provide a plan of care.</p> <p><b>Parc Prison:</b> expansion Plan HMPPS and G4S have secured planning permission to expand the prison's capacity by an additional 345 individuals by October 2028. The approved development includes a new kitchen and dining block, gym, multi-faith facility, education building, and a redesigned visitor/staff entrance with increased car parking and supporting infrastructure. Initial discussions between the Directorate and G4S have focused on healthcare space allocation within the expansion plans. To ensure continued oversight and coordination, the Prison Expansion Plans will remain a standing agenda item on both the Prison Assurance Board and the Healthcare Partnership Board.</p>
<b>Appendices</b>	N/A

#### 4. Assessment

Objectives / Strategy	
<b>Dolen i Nod (au) Strategol BIP CTM /Link to CTMUHB Strategic Goal(s)</b>	Improving Care
	If more than one applies, please list below:
<b>Dolen i Feysydd Strategol BIP CTM /Link to CTMUHB Strategic Areas</b>	Living Well
	If more than one applies, please list below:
<b>Dolen i Ddeddf Llesiant Cenedlaethau'r Dyfodol – Nodau Llesiant / Link to Wellbeing of Future Generations Act – Wellbeing Goals</b> <a href="#">150623-guide-to-the-fg-act-en.pdf (futuregenerations.wales)</a>	A Healthier Wales
	If more than one applies, please list below:
	Ageing well Dying Well Growing Well



<b>Dolen i Hwyluswyr Ansawdd</b> <i>(Canllawiau Statudol Dyletswydd Ansawdd (Ilyw.cymru)) /</i> <b>Link to Enablers of Quality</b> <i>(<a href="#">Duty of Quality Statutory Guidance (gov.wales)</a>)</i>	Learning, Improvement & Research
	If more than one applies, please list below: Culture and valuing people Leadership
<b>Dolen i Feysydd Ansawdd</b> <i>(Canllawiau Statudol Dyletswydd Ansawdd (Ilyw.cymru)) /</i> <b>Link to Domains of Quality</b> <i>(<a href="#">Duty of Quality Statutory Guidance (gov.wales)</a>)</i>	Effective
	If more than one applies, please list below: Efficient, Person centred, Equitable, Timely, Safe
<b>Effaith Amgylcheddol/ Cynaliadwyedd (5R) / Environmental /Sustainability Impact (5Rs)</b>	No - Not Applicable
	If more than one applies, please list below:

Impact Assessment		
<b>Ansawdd</b> <i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Ansawdd? /</i> <b>Quality</b> <i>Have you undertaken a Quality Impact Assessment Screening?</i>	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>
	Outcome:	If no, please include rationale below:
<b>Cydraddoldeb a'r Gymraeg</b> <i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Gydraddoldeb a'r Gymraeg? /</i> <b>Equality and Welsh Language</b> <i>Have you undertaken an Equality and Welsh Language Impact Assessment Screening?</i>	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>
	Outcome for Equality (delete as appropriate): Outcome for Welsh Language (delete as appropriate): POSITIVE/NEUTRAL NEGATIVE	If no, please include rationale below:
<b>Cyfreithiol / Legal</b>	There are no specific legal implications related to the activity outlined in this report.	
<b>Enw da / Reputational</b>	There is no direct impact on the reputation of the Health Board as a result of the activity outlined in this report.	
<b>Effaith Adnoddau</b> <i>(Pobl /Ariannol) /</i> <b>Resource Impact</b> <i>(People / Financial)</i>	There is no direct impact on resources as a result of the activity outlined in this report.	

## 5. Recommendation

- 5.1 The Quality, Safety and Experience Committee is asked to **NOTE** the highlights outlined in section 3 of this report.