

COMMUNITY LIAISON COMMITTEE**REQUEST FOR CONSIDERATION OF A MATTER BY THE COMMITTEE**
(*TO BE MADE BY THE TOWN / COMMUNITY COUNCIL VIA THEIR CLERK*)

Date: 23rd January 2025

Name of Town/Community Council: Penarth

It is requested that the Community Liaison Committee consider the following matter. (N.B. Items that are site specific should be referred to the appropriate Council department):

Penarth Town Council requests that the future arrangements for primary health care provision across the Vale of Glamorgan area be reviewed, outlined, and reported back to the Vale of Glamorgan Community Liaison Committee.

Reason(s) for request:

Primary health care in Penarth has been declining for several years, adversely affecting its residents, and the Town Council is aware that the issue is also reflected across the Vale of Glamorgan area as a whole. Therefore, Penarth Town Council seeks to support both the local and wider community by requesting the Health Board to outline its plans for primary health care provision from 2025 onwards.

PLEASE RETURN TO: Room 26
Democratic and Scrutiny Services
Directorate of Resources
The Vale of Glamorgan Council
Civic Offices
Barry
CF63 4RU

FOR COUNCIL USE ONLY:

Date Received: 23rd January 2025 at 16:21

Subject Matter: Primary Health Care Provision across the Vale of Glamorgan.

Copy of request passed to Executive/Director(s)/Officer(s):

Passed to Chief Executive and Directors of the Council for information only.
28/01/25 10:00

Primary Health Care Provision within the Vale of Glamorgan is outside the jurisdiction of the Vale of Glamorgan Council. Therefore, the request will be forwarded to the Cardiff & Vale Health Board directly for a response.

Invitation to respond sent to Health Board via email: 04/02/25 at 11:35am.

Copy to Chair/Vice Chair: YES – 28/01/25 at 9:15am

FOR COMMITTEE AGENDA: ****PENDING EXTERNAL RESPONSE****

Written Report Required.

Meeting/arrangements reminder shared with Health Board: 24 September 2025
17:08

Confirmation of attendees received from Health Board: 25 July 2025 13:11

Confirmation of attendance agreed received from Health Board: 01 July 2025
17:37

Acknowledgement of request shared received from Health Board: 06 February
2025 at 13:02.

Chief Executive's comments: Not Applicable

Date of written response(s) to Town/Community Council:

Acknowledgement of receipt: 28 January 2025 at 10:17 to Emma Boylan at
eboylan@penarthtowncouncil.gov.uk from Amy Rudman.

Confirmation of scheduling: 07 October 2025 at 12:09 to Emma Boylan at
eboylan@penarthtowncouncil.gov.uk from Amy Rudman.



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Health Board Plans: Vale of Glamorgan





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Outline

- Overview of Integrated Community Care System Ambition and Plans
- Overview of plans specifically for communities living in the Vale of Glamorgan





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Health Board Strategy Overview





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Our Strategy



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| Strategic Shift | How will deliver this |
|---|--|
| From an organisation shaped around illness and injury to one purposefully designed to enable equitable health and wellbeing | <ul style="list-style-type: none">• We will establish ourselves as an Integrated Community Care System, placing more emphasis on neighbourhood community care and keeping people well• We will create a culture and mindset that supports these shifts - including evidencing the value for our population• Our financial strategy will create resource to invest in prevention and community care, increasing the share of resource for preventative and community services year on year• We will introduce a currency that measures this shift in resource (people and money)• Our organisational redesign will focus on releasing resource and creating incentives to deliver these shifts |
| From variable quality of care and experience to utterly consistent quality and outcomes for all | <ul style="list-style-type: none">• We must develop the culture, processes, capacity and capability to embed our Quality Management System across the organisation. This needs to fully engage our frontline teams in quality improvement, research and innovation, equity, assurance and continuous learning. |
| From analogue buildings to digitally connected people and places | <ul style="list-style-type: none">• We must deliver our digital roadmap; ensuring engagement and ownership, securing investment, securing our basic digital foundations and developing our team to use data to drive decision making and empowering citizens and patients |
| From firefighting today to planning for a sustainable tomorrow | <ul style="list-style-type: none">• We will deliver Brilliant Basics, minimising harm, duplication, waste and variation, creating space to design and develop our organisation so that it supports and delivers our strategy and key strategic shifts |

Our ambition is to become an **Integrated Community Care System**, placing more emphasis on neighbourhood community care and keeping people well.

We are committed to transforming our models of care and recognise this is not just a primary care issue but a **whole system opportunity** to realign services towards a **community by design** approach.



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Partnership working is essential

ICCS must be designed and delivered by the Health Board, Local Authorities, Third Sector and Our Communities
RPB will be a key vehicle for design and delivery.

We are not starting from scratch:

- **Safe @home- launched in January 2024-** multi-agency, multi-disciplinary team that responds to people in crisis to support them at home—preventing avoidable hospital admissions and supporting earlier discharge
- **Connected Community Care model-** developed in Cardiff South West in 2019, brings together health, social care, and voluntary partners to proactively support patients and reduce hospital admissions through integrated, community-based care. The aim is for this approach to be adopted across all clusters to improve local, personalised healthcare and continuity for patients.

These are just some examples of models that are already delivering a measurable impact: reducing unnecessary hospital admissions, supporting timely discharge, and demonstrating the value of integrated, person-centred care. These initiatives provide a strong foundation for delivering our integrated community care approach.



Phase 1 ICCS- 25/26 implementation

The Health Board and RPB, working closely with regional partners, has an established steering group which has set out the below deliverables for Phase 1 25/26:

- Proceed with transfer of **Community Hospitals** and **Community Beds** – planned for transition between Q3/Q4 2025/26.
- Develop an **Urgent Care Centre (UCC)** in Barry Hospital – planned to be established by Q4 2025/26.
- Develop a **Single Point of Access (SPOA)** which simplifies access for health and social care professionals, to remote assessment, advice and treatment line with the National Single Point of Access framework for Wales – This will be delivered from September 2025 to March 2026.



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ICCS Long Term Design

12 month programme of work from August 25

Engagement and consensus building

Stakeholder involvement to identify opportunities for strengthening the strategic shift towards community-based, population driven models of care

Development of a Clinical Model

Working with stakeholders to refine model

Establishing integrated cluster/neighbourhood teams with a clear mandate to manage population health

Implementation planning

Developing a phased roadmap to transition to model

Defining priorities and financial sustainability strategies

Clarifying roles and responsibilities with partners



Refreshing our Community Estates Strategy

In parallel, we plan to:

- Baseline/map all of our health board assets (service provision, utilisation, condition) – by end of Q3
- Identify gaps and opportunities
- Align with the emerging ICCS model and understanding of population and community needs

| Premise Management/Ownership Summary | | | |
|--|--|---|------------------|
| Locality Managed (2) | Jointly Managed (1) | UHB Owned/Shared (3) | LA Owned (2) |
| Broad Street Barry Hospital | Cowbridge Health Centre | Avon House Dinas Medical Centre Llantwit Major | C1V Ty Jenner |
| Community Capacity Assessment | | | |
| RED | AMBER | GREEN | |
| C1V Ty Jenner Broad Street Barry Hospital Avon House Dinas Medical Centre | Cowbridge Health Centre Llantwit Major | | |





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Vale of Glamorgan Specific Plans





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Strategic Plan for the Vale

The Vale of Glamorgan supports the development of three primary care clusters—Central, Eastern, and Western Vale—each uniquely positioned to deliver and shape the **Primary Care Model for Wales**. These clusters bring together local GP practices, community services, and partners to provide integrated, preventative, and person-centred care tailored to their communities.

| Cluster | GP Practices | GDS | Optometry | Community Pharmacies |
|---------|--------------|-----|-----------|----------------------|
| Central | 6 | 9 | 9 | 14 |
| Eastern | 3 | 3 | 4 | 9 |
| Western | 3 | 6 | 5 | 6 |

A range of Community and Specialist services are provided, including ;

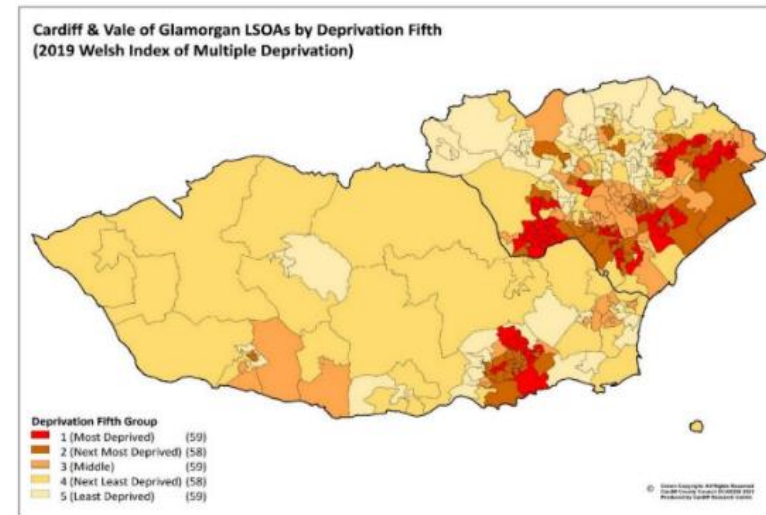
- Vale Community Resource Service (VCRS)
- District Nursing and specialist community nursing teams
- Cardiff and Vale Health Inclusion Service (CAVHIS)
- Community Sexual Health Clinics
- Community Dental Services
- Community Spirometry
- First Point of Contact Physiotherapy Services

These services are either located/co-located across a number of premises, in a mix of health board, local authority and other locations across the Vale (including GMS premises).

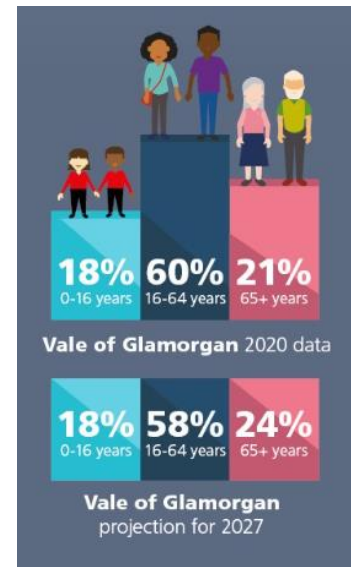


Strategic Plan for the Vale – Population data

- Census data (2021) indicates that for the Vale of Glamorgan the population size has increased by 4.3%, from around 126,300 in 2011 to 131,800 in 2021.
- As at May 2025, our registered population across the Vale is recorded as **136,357**.
- 65% of the Vale of Glamorgan's population lives in the 50% least deprived areas (28 LSOAs).
- The Vale of Glamorgan is projected to see an increase in the number of people aged 65years+ by 2027 and this trend is currently projected to continue



LSOA= Lower Layer Super Output Area
Geographic Area in the UK for statistical reporting particularly around deprivation analysis and service delivery planning
Each LSOA typically contains 1,000 to 3,000 people or 400 to 1,200 households





Strategic Plan for the Vale – Cluster view on population needs/demands

- Responding to an aging population - multi-morbidities & frailty
- Increase in chronic conditions (Diabetes)
- Adult mental health – improved access to services
- Long waiting lists for access to secondary care services
- General lifestyle & Wellbeing (adults and children) –Healthy weight, Exercise
- Children's mental health and neurodiversity
- Increased crisis facing our communities 'Cost of Living' pressures
- Social isolation
- Disproportionate levels of deprivation
- Immunisation and screening uptake
- Dental access (long waits)



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Strategic Plan for the Vale

As part of the ICCS ambition, our immediate plans centre around;

- Use of Barry Community Hospital
- Barry Gateway Regeneration (reprovision of services from Broad Street Clinic)
- Supporting delivery of resettlement programmes and asylum/homeless populations through our Health Inclusion Programme

We have identified the need to optimise clinic space at Barry Community Hospital to allow for a better balance between administrative functions and clinical service delivery to provide;

- An Integrated Community Care response, through co-locating teams within the footprint of an Urgent Care Centre (Urgent Primary Care, Minor Injuries, Safe at Home and Community beds)
- Planned Care Pathways (traditionally provided in acute hospitals), which may include;
 - Gynaecology - Building upon Cluster based ring pessary clinics
 - Cardiology – Heart failure Clinics in the Community to reduce acute deterioration of the patient and hospital management
 - Dermatology – Build upon recent pilots for Basal Cell Carcinoma
 - Gastroenterology
 - Rheumatology
 - Community Diabetes Clinics (All Wales Diabetes programme)





Eastern Vale

- The proposed **Wellbeing Hub site at Penarth Leisure Centre** is paused due to the flood risk per updated NRW data, no alternative site or funding identified to progress the Outline Business Case.
- The position is **relatively stable** following the UHB's acquisition of Redlands Surgery. While some capacity exists, future growth depends on developing integrated facilities in partnership.
- The UHB is exploring a potential integrated services development at Cosmeston Farm, in collaboration with the Council and aligned with Section 106 opportunities.



Central Vale

- We are working closely with colleagues in the Vale of Glamorgan Council as part of its Barry Gateway regeneration and to relocate services from the Broad Street Clinic across the road and into the new premises.
- The development of Barry Community Hospital, building upon the recent move from Cluster to Locality based Urgent Primary Care for the Vale, to further evolve the services provided as an Urgent Care Centre, through co-location of teams and functions as part of our ICCS.



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Western Vale

- A recent improvement grant investment at Llantwit Major & Coastal Vale Practice has created additional capacity
- Considering LDP growth within the cluster, there are currently no predicted capacity constraints





Summary Position

- **Vision:** We are committed to becoming an Integrated Community Care System, working in partnership to deliver more care closer to home through strong partnerships and population-driven planning.
- **Current position:**
 - No immediate plans to increase the number of commissioned providers/services
 - Whilst we anticipate there may be some capacity within the existing GMS resource, the ability to absorb future growth within this area will be reliant on the development of integrated wellbeing solutions and the adoption of new ways of working.
- **Opportunities & Challenges:**
 - Preparatory work is needed to progress plans for integrated services, using a place-based planning approach
 - We need to work with our communities to develop our ICCS and explore how we could provide services together better in the medium term
 - To achieve our ambitions, there will be a need to explore all infrastructure opportunities and optimise existing assets across the system through re-design and/or upgrading of facilities
 - There are opportunities to align with existing initiatives such as Total Place and Placemaking in Barry