

Section 2.3: Summary Cluster Network Domain

Strategic background

Delivery of more care in the community and closer to home through primary care clusters is a key element of the *Plan for a Primary Care Service for Wales*.

The primary care plan is predicated on the changing role of the GP where they are providing services for the more complex patients and coordinating a wider primary care team as part of a wider more integrated multi-professional service in the local community.

Cluster Network Development Programme: 2014/15 to 2016/17

A cluster network development programme has been in place since 2014/15. The programme has been successful in developing and strengthening multi-professional team working and in the coordination to improve the quality of care through more effective collaboration with wider community services.

The programme has also been effective in improving systems of clinical governance through the Clinical Governance Self Assessment Tool, together with delivering quality improvement through work in three national priority areas covering prevention and early diagnosis of cancer ; end of life ; minimising the harms of poly pharmacy.

Cluster Network Programme 2017/18

The cluster network programme for 2017/18, which builds on the previous three year development programme, aims to:

- (a) Strengthen the sustainability of core services through completion of the sustainability assessment framework and longer term business planning for Practice Development Plans and Cluster Network Plans.
- (b) Strengthen the focus on access to services; winter preparedness and emergency planning; and improved service development.
- (c) Strengthen quality assurance in relation to clinical governance and assurance on specific indicators designated as “inactive” QOF.
- (d) Develop more effective collaboration working with community services, including nursing, local authority and third sector to improve the quality of care.
- (e) Encourage the development of new models of care, including federations, practice mergers, shared practice support.

Indicator	Points
<p>Develop a three year Practice Development Plan and complete a Practice Sustainability Assessment</p>	
<p>CND 001W</p> <p>The contractor reviews and updates the previous year's Practice Development Plan to assist practice analyses and planning and to inform discussions at cluster network meetings with consideration given to three year business planning.</p> <p>The practice completes the risk matrix element of the GP Sustainability Assessment Framework. The outcomes (minus financial information) to be shared with the cluster network to inform cluster sustainability planning. Health Board's are expected to make available to practices the pre-populated GP Sustainability Assessment Framework risk matrix by 30 April 2017.</p> <p>The three year Practice Development Plan and the completed GP Sustainability Assessment Framework (minus financial information) to be completed and shared with the Local Health Board by 31 May 2017.</p>	30
<p>Develop a three year Cluster Network Action Plan and monitor cluster network activity</p>	
<p>CND 009W</p> <p>The contractor reviews and updates the previous year's Cluster Network Action Plan giving due consideration to local population needs and service development for the population served by cluster network for the next three years. Practice Development Plans and the GP Sustainability Assessment Framework will inform the development of a three year Cluster Network Action Plans.</p> <p>The three year Cluster Network Action Plan will have a focus on:</p> <p>(a) Winter preparedness and emergency planning.</p> <p>(b) Access to services, including patient flows, models of GP access engagement with wider community stakeholders to improve capacity and patient communication.</p> <p>(c) Service development and liaising with secondary care leads as appropriate.</p> <p>(d) Review of quality assurance of Clinical Governance Practice Self Assessment Toolkit (CGSAT) and inactive QOF indicator peer review.</p> <p>The development and implementation of the three year Cluster Network</p>	50

<p>Action Plan is underpinned by attendance at four cluster network meetings.</p> <p>The cluster network meetings will be facilitated by the Local Health Board network lead or nominated person. This will ensure effective communication between the cluster network and the Local Health Board and the alignment of the Cluster Network Action Plan with the Local Health Board three year Integrated Medium Term Plan or annual plan as appropriate.</p> <p>The three year Cluster Network Action Plan to be agreed and shared with the Local Health Board by 31 July 2017.</p> <p>The three year Cluster Network Action Plan is a dynamic plan and will be updated to reflect outcomes of each cluster meeting.</p> <p>The contractor will demonstrate to the Local Health Board the work undertaken outside of cluster meetings to progress and implement the Cluster Network Action Plan.</p>	20
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Agree a Cluster Network Annual Report	
<p>CND 010W.</p> <p>The contractor participates in one cluster network meeting to develop and agree a Cluster Network Annual Report and to be shared with the Local Health Board by 31 March 2018.</p> <p>The Cluster Network Annual Report will include reference to outcomes of the review of quality assurance ; winter preparedness and emergency planning; access to services and service development</p>	5
Quality Assurance - Clinical & Information Governance and peer review of inactive QOF indicators	
<p>CND 011W.</p> <p>The contractor updates the Clinical Governance Practice Self-Assessment Toolkit, completes the Information Governance Self Assessment Toolkit and utilises learning / outcomes from same in peer review at cluster meeting</p> <p>Contractor agrees to peer review the designate inactive QOF indicators within the practice at a designated cluster meeting mid way through year and at the end of the year. The outcome of the inactive QOF peer review to be completed and shared with the Local Health Board by 31 March 2018.</p> <p>The contractor will include appropriate actions resulting from this analysis within the Practice Development Plan and will consider whether any issues need to be discussed at cluster network meetings.</p>	50

Participate in General Practice National Priority Areas	
<p>CND 012W:</p> <p>The cluster network will discuss and agree to participate in three clinical priority pathway areas.</p> <p>Two of the clinical priority pathway areas must be chosen from the following basket of five clinical pathway areas (a) cancer (b) dementia (c) improved mental health and well being (d) COPD (e) Liver disease.</p> <p>One clinical priority pathway area will be agreed locally ,in discussion with the cluster network.</p> <p>A quality improvement approach will be adopted, using data and small tests of change (PDSA cycles) where appropriate, to support clinicians and practices to enhance their care in these clinical priority pathway areas.</p> <p>The contractor will, by the 31st March 2018:</p> <ul style="list-style-type: none"> ○ Engage with the clinical priority work at a practice and cluster level, ○ Discuss any data provided to the practice or cluster ○ Agree small steps of change to test out any new ways of working in the practice or cluster ○ Share the results of small tests of change with peers in the cluster (whether positive or negative) <p>Each contractor should aim to apply three small tests of change for each pathway by 31st March 2018.</p>	45
Total points	200