Working in Partnership to Improve Health and Deliver Excellent Care across North Wales
Betsi Cadwaladr University (BCU) Health Board works across North Wales. **Living Healthier, Staying Well** is our three year plan for a healthier North Wales.

We want to become more of a ‘wellness’ service than an ‘illness’ service.

We’re responsible for:
- GP practices
- dentists
- pharmacists
- health centres
- optometrists (eye care)
- community health teams
- mental health services.

Most people we care for are treated by these services in their communities. We also have a network of community hospitals which offer a range of services from diabetes clinics to audiology (hearing).

For people who need more specialist hospital care, we have three main hospitals, which are:

- **Ysbyty Gwynedd**
  Bangor
- **Glan Clwyd Hospital**
  Bodelwyddan
- **Wrexham Maelor Hospital**
Why do we need a new approach?

The NHS is facing challenges:

- the ways in which some of our services are currently arranged are not meeting the changing needs of our population. They are not achieving the best results for patients;
- some of our services are spread too thinly across our hospital sites and are simply not sustainable or affordable for the future;
- we have difficulty recruiting staff. If we don’t plan now for the future we won’t be able to meet people’s needs; and
- we have one of the largest estates in Wales with 137 properties – a number of which are old, not fit-for-purpose and expensive to run.

To find out more about what we are doing to improve, take a look at this news piece:

[bbc.co.uk/news/uk-wales-47280912](bbc.co.uk/news/uk-wales-47280912)

To make the improvements needed, we must transform the way we do things.
We want to improve health and reduce health inequalities

We want to support the communities that need it the most.

2019-2022 | Our priorities are:

- setting up lifestyle services that help people make the right choices and keep well – investing to help people quit smoking, manage their alcohol intake and be a healthy weight;

- tackling health inequalities and promoting equality – supporting the communities that need it the most;

- making the most of our partnership working to promote wellbeing – to design and build better community-based solutions to address issues like loneliness and isolation;

- strengthening our protection and prevention services – investing in children’s immunisation teams and dental health, for example; and

- concentrating on health in the early years – improving the outcomes in the first 1000 days of life, supporting families, and reducing damaging Adverse Childhood Experiences that can cause problems in later life.
We want people to have care closer to home

We will provide care and support to people as close to home as possible.

2019-2022 | Our priorities are:

- giving people the right information, when they need it, how they want it;
- letting people know what care and support are available, including self-care;
- improving access to primary care services like GPs, which we know can be difficult for people living in some areas;
- diagnosing and treating early, so people have better results;
- using good quality research and best practice to improve services; and
- keeping people safe from avoidable harm while in our care.
Community Resource Teams

Healthcare services are only one part of keeping people healthy. Housing, social care and other services impact people’s health too. We want to work with these services to support people.

Each will have a Community Resource Team (CRT)

Community Resource Teams are made up of a range of health professionals like physiotherapists, occupational therapists and dieticians to provide specialist support to people in the community.

We have 14 localities where GPs dentists, pharmacists, optometrists and healthcare teams work together.
We want everyone to have excellent hospital care

Sometimes, people need hospital care. We want to provide timely, safe, good quality care.

2019-2022 | Our priorities are:

● supporting people to make the right choices and providing high quality information;

● making sure care happens in the right place, at the right time, by the right person;

● providing a cohesive healthcare system that meets people’s needs and ensures people have high quality care and support;

● reducing waiting times and diagnosing and treating people quickly;

● having the right staffing and resources in our hospitals;

● supporting staff so they take the time to understand what matters to people and working together, ensuring patients have the best possible outcomes; and

● innovating and learning from best practice to continually improve our services.

This will mean developing new and innovative ways of working for example:

● together with our partners, looking at the resources we have and how we use them;

● looking at how we deploy our workforce and using modern approaches including integrated teams of different professionals like therapists, advanced nurse practitioners and doctors; and

● finding new ways to deliver services.
Planned Care

When patients need to see an expert for treatment – also known as planned care – we want it to be as timely, seamless and effective as possible.

There is good evidence that specialist teams of different health professionals working together at one centre of excellence achieve better results for patients.

By developing specialist services in North Wales, we are able to treat patients here rather than them having to travel to England for specialist care. Specialist services also make us more attractive to new recruits.

2019-2022 | Our priorities are:

- bringing inpatient urology services together on two hospital sites (instead of three) and developing a specialist pelvic cancer centre and robotic assisted surgery;
- bringing together orthopaedic operations onto three sites, instead of five; and
- moving our hyper acute stroke service (urgent care for patients within six hours of a stroke) onto a single site, instead of three.

Unscheduled care

When people need urgent attention or care, we have services that can help. We call it unscheduled care and it means any healthcare that is unplanned. Urgent GP visits, ambulance services and visits to a hospital Emergency Department are examples of unscheduled care.

We know that some people wait too long for unscheduled care and we are working very hard to improve. For example, we are working with colleagues across the health and social care system to streamline the patient journey.

We are also developing and promoting alternative services like pharmacies, Minor Injury Units and GP out of hours.
To support this plan we will also:

- **improve how we work** – using evidence and focusing on continuous quality improvement;
- **develop our workforce** – making sure we employ the right people and develop our leadership and systems;
- **improve our hospital estate** – working to ensure that all of our buildings are fit for purpose, safe and meet people’s needs;
- **modernise our technology systems** – using modern solutions to work smarter and support patient care;
- **make the best use of our finances** – working efficiently and getting best value;
- **increase our research and development** – finding innovative ways of working to get the best results;
- **keep delivering high standards in Welsh language** – patients have information and support in the language they choose; and
- **continue to reduce risks** – making sure all our systems are fit for purpose and keep people safe.

**Next steps**

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