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Bwrdd Iechyd
Addysgu Powys
Powys Teaching
Health Board

Sesiwn HacA Cyhoeddus BIAP PTHB Public Q&A Briefing

9 Mawrth 2023 - Carol Shillabeer – 9 March 2023

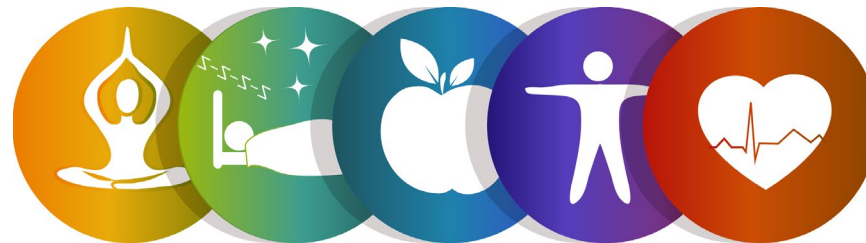
Diolch o Galon

Thank You

Bydd y sesiwn
briffio'r cyhoedd
a'r sesiwn holi ac
ateb heddiw yn
canolbwyntio ar **y
dyfodol.**



The theme for
today's public
briefing and
questions and
answers session is
the future.



Buddsoddi yn y Dyfodol Machynlleth

Investing in the Future Machynlleth

- ❖ Bydd ailddatblygiad Ysbyty Bro Ddyfi yn agor yn y gwanwyn.
- ❖ Bwriad gwaith ailddatblygu'r ysbyty, sydd gwerth £15m - wedi'i ariannu gan Lywodraeth Cymru - yw creu canolfan gymunedol arloesol i wella hygyrchedd gwasanaethau iechyd a gofal cymdeithasol, lles, atal, a hybu iechyd yn ardal Dyffryn Dyfi.
- ❖ Mae'r gwaith yn cynnwys cynnig cartref newydd ar gyfer Practis Meddygol Iechyd Dyffryn Dyfi.



- ❖ The Bro Ddyfi Hospital redevelopment will open later this spring
- ❖ The £15m redevelopment of the hospital – funded by Welsh Government – is designed to create an innovative community hub to improve access to health and social care, well-being, prevention, and health promotion services in the Dyfi Valley.
- ❖ This includes providing a new home for the Dyfi Valley Health GP Practice.

Buddsoddi yn y Dyfodol Aberhonddu

Investing in the Future Brecon

- ❖ Mae ein maes parcio newydd yn Ysbyty Aberhonddu bellach ar agor.
- ❖ Mae'r prosiect, gwerth £1.6m, wedi bod yn bosibl drwy £550k o roddion a chymorth £1.05m gan Lywodraeth Cymru.
- ❖ Mae'r maes parcio wedi creu 70 safle parcio newydd i staff, sy'n lleihau'r pwysau ar y prif faes parcio i gleifion.
- ❖ Bydd cyfleuster gwefru cerbydau trydan ar gael yn fuan.



Before

After



- ❖ Our new car park at Brecon Hospital is now fully open.
- ❖ The £1.6m project has been made possible through £550k of donations and £1.05m Welsh Government support.
- ❖ It creates 70 staff car parking places, reducing pressure on the main car park for patients.
- ❖ EV charging is due to be available soon

Buddsoddi yn y Dyfodol Llanidloes

Investing in the Future Llanidloes

- ❖ Bydd canolfan eni Ysbyty Coffa Rhyfel Llanidloes a'r Cyffiniau yn cael adnewyddiad, diolch i fuddsoddiad o £120,000.
- ❖ Mae'r gwaith arfaethedig yn cynnwys adnewyddu'r ystafell eni yn llwyr - gan ei gwneud yn fwy er mwyn gallu cynnal pwll geni mawr newydd yn ogystal â gwely dwbl.
- ❖ Mae cynlluniau hefyd i foderneiddio'r holl ystafelloedd ymolchi yn y ganolfan eni ac adnewyddu'r gosodion.
- ❖ Disgwylir bydd y gwaith adeiladu yn cael ei gwblhau yn y Gwanwyn hwn a bydd y ganolfan eni yn cau dros dro rhwng Ionawr 23ain a diwedd Mawrth.



Diolch i arian gan Gynghrair y Cyfeillion a'r Loteri Genedlaethol, bydd gan Llanidloes ardd synhwyraidd newydd hefyd.



Thanks to funding from the League of Friends and National Lottery, Llanidloes will also have a new sensory garden.

- ❖ The birth centre at Llanidloes hospital is having a £120k facelift.
- ❖ The planned works include complete refurbishment of the birth room - making it larger and able to host a large new birth pool as well as a pull-down double bed.
- ❖ There are also plans to modernise all the bathrooms within the birth centre and replace fittings and fixtures.
- ❖ The building work is scheduled to be completed this Spring and will see the birthing centre temporarily closed between January 23rd and late March.

Buddsoddi yn y Dyfodol Tref-y-clawdd

Investing in the Future Knighton

- ❖ Er gwaethaf ymdrechion parhaus, nid ydym wedi gallu recriwtio digon o staff nyrsio cleifion mewnol i ailagor Ward Panpwnton.
- ❖ Yn y cyfamser, rydym yn gwybod bod lefel o angen lleol y gallem gwrrd mewn ffordd wahanol wrth i gleifion aros mewn ysbytai cyffredinol dosbarth neu ysbytai cymunedol eraill, am becyn gofal i ddychwelyd adref.
- ❖ Felly, rydym yn bwriadu cynnig pedwar gwely ailalluogi yn Ysbyty Tref-y-clawdd. Bydd y gwelyau yma yn rhoi mwy o ofal i fwy o bobl yn lleol. Ein nod yw agor y gwelyau hyn yn ystod mis Ebrill.



- ❖ Despite ongoing efforts, we have not been able to recruit sufficient inpatient nursing staff to re-open Panpwnton Ward.
- ❖ In the meantime, we know that there is a level of local need that we could meet in a different way as patients remain in a DGH or other community hospital waiting for a package of care to return home.
- ❖ We therefore plan to provide four reablement beds at Knighton Hospital. These beds will provide more care to more people more locally. Our aim is to open these beds during April.

Diogelu eich iechyd at y dyfodol

Protecting your future health

- ❖ **Brechu yw ein hamddiffyniad gorau** yn erbyn feirysau'r gaeaf.
- ❖ Mae cynnig Brechlyn Atgyfnerthu COVID-19 yr Hydref yn dod i ben ar y 31 Mawrth. Nid yw'n rhy hwyr i amddiffyn eich hun ac eraill.
- ❖ Yn seiliedig ar ganllawiau arbenigol gan y Cyd-bwyllgor ar Imiwneiddio a Brechu, bydd cynnig brechlyn y dos cyntaf a'r ail ddos yn dod i ben ar y 30 Mehefin.
- ❖ Mae rhaglen atgyfnerthu gwanwyn 2023 newydd gael ei chyhoeddi. Byddwch yn cael cynnig brechlyn atgyfnerthu'r gwanwyn os ydych chi'n 75+ oed, os ydych chi'n byw mewn cartref gofal i oedolion hŷn, neu os ydych chi'n 5 oed neu'n hŷn ac yn imiwnoataliedig.



- ❖ **Vaccination is our best defence** against winter viruses.
- ❖ The Autumn 2022 COVID-19 booster offer ends on 31 March. It's not too late to get protected.
- ❖ Based on expert guidance from the JCVI, our first and second dose offer will also end on 30 June.
- ❖ And the 2023 spring booster programme has just been announced. You will be offered a spring booster if you are 75+, if you live in a care home for older adults, or if you are age 5 or over with immunosuppression.

Lliwio Dyfodol Gwasanaethau Iechyd

Shaping the Future of Health Services

- ❖ Diolch i bawb sydd wedi dweud eu dweud yn ddiweddar ar Feddygfa Belmont yng Ngilwern, Gwasanaethau Mewnblaniad Cochlear a Mewnblaniad Clyw Wedi'i Angori â'r Esgyrn yn Ne Cymru. Mae'r cyfnodau ymgysylltu wedi dod i ben a byddwn yn rhannu diweddariadau ar y camau nesaf yn hwyrach yn y gwanwyn.
- ❖ Mae proses ymgynghori bellach ar waith ar ysbyty newydd yn ardal Hywel Dda. Bydd yr ysbyty hwn yn cynnig rhai gwasanaethau a gynigir yng Nglangwili ar hyn o bryd. Ni fydd gwasanaethau yn ysbyty Bronglais yn cael eu heffeithio.
- ❖ Mae'r broses ymgynghori hefyd ar waith ar gyfer drafft cynllun lles Powys yn www.dweudeichdweudpowys.cymru
- ❖ Rydym yn disgwyl mwy o wybodaeth yn fuan am ddatblygiad gwasanaethau Ambiwlans Awyr Cymru a'r Gwasanaeth Adalw a Throsglwyddo Meddygol Brys (EMRTS)



A graphic with two columns of text. The left column is for Belmont Branch Surgery in Gilwern, with dates 10 January 2023 to 6 March 2023. The right column is for Bractis Group Practice in Meddygfa Belmont, with dates 10 Ionawr 2023 to 6 Mawrth 2023. The top of the graphic features colorful speech bubbles with the text 'Have Your Say' and 'Dweud Eich Dweud'. At the bottom, there are two boxes with website information: 'Find out more or visit our website: pthb.nhs.wales/gilwern' and 'Rhagor o wybodaeth neu ewch i wefan: biap.gig.cymru/gilwern'.

- ❖ Thank you to everyone who shared their views recently on the Belmont Branch Surgery in Gilwern, and on Cochlear Implant and Bone Conduction Hearing Implant Services in South Wales. The engagement periods have ended and we will provide updates on the next steps later this spring,.
- ❖ Consultation is now under way on the location of a new emergency and planned care hospital in the Hywel Dda area. This will replace some services currently provided at Glangwili. Services at Bronglais are not affected.
- ❖ Consultation is also under way on the draft well-being plan for Powys at www.haveyoursaypowys.wales
- ❖ More information is expected soon on the development of Wales Air Ambulance and EMRTS services

Cynllunio at y Dyfodol ym Mhowys

Mae gennym strategaeth uchelgeisiol ar gyfer Powys Iach a Gofalgar i gefnogi pawb i Ddechrau'n Dda, Byw'n Dda a Heneiddio'n Dda.

Mae rhan helaeth y strategaeth hon dal yn berthnasol heddiw.

Gwneir rhai newidiadau allweddol ers i ni ddatblygu'r strategaeth yn 2015-17 sy'n effeithio'r ffordd rydym yn cynllunio at y dyfodol.

- ✦ Yn syth ar ôl tonnau cynharach y pandemig, ddaeth oresgyniad Wcráin gydag argyfwng economaidd, gan gynnwys chwyddiant cynyddol a dirwasgiad disgwylidig, sydd felly wedi arwain at ddiffygion mawr yn y gyllideb.
- ✦ Mae oedi o hyd am ddiagnosis a thriniaeth miloedd o gleifion.
- ✦ Mae pobl sydd wedi oedi yn yr ysbyty mewn perygl o ddatgyflyru ac o fethu â dychwelyd i'w cartref eu hunain, yn eu tro yn effeithio ar amseroedd ymateb ambiwlans ac adrannau Damweiniau i gleifion brys.
- ✦ Mae anghydraddoldeb ac amddifadedd (gan gynnwys amddifadedd plant) yn bryderon sylweddol.
- ✦ Mae gan Bowys poblogaeth hŷn uchel iawn ac felly'n cynyddu'r anghenion o ganlyniad i gyflyrau megis canser, clefyd cardiofasgwlaidd a dementia, yn ogystal â ffactorau eraill sy'n effeithio ar wydnwch.
- ✦ Mae bylchau cynyddol yn y gweithlu ar draws y system.
- ✦ Gwnaed newidiadau dros dro i wasanaethau yn sgil trafferthion cynnal gwasanaethau.

Mae hon yn her ar y cyd gyda Chyngor Sir Powys a phartneriaid, a gallwn adeiladu ar ein cryfderau a'n cyfleoedd i sicrhau'r canlyniadau a'r profiad gofal gorau.

Planning for the Future in Powys

We have an ambitious strategy for a Healthy Caring Powys to support everyone to Start Well, Live Well and Age Well.

Much of that strategy is still fully relevant today.

But there have been some key changes since we developed that strategy in 2015-17 that affect the way we plan for the future.

- ✦ Earlier waves of the once-in-a-century pandemic were immediately followed by the invasion of Ukraine with an economic crisis, including rising inflation and a forecast recession, driving major budget deficits
- ✦ Diagnosis and treatment of thousands of patients remains delayed
- ✦ People delayed in hospital are at risk of deconditioning and of not being able to return to their own home, in turn affecting ambulance and A&E response times for emergency patients
- ✦ Inequality and deprivation (including child deprivation) are significant concerns
- ✦ Powys is at the forefront of an aging population, driving rising needs from conditions such as cancer, cardiovascular disease and dementia, overlaid with other factors affecting resilience
- ✦ There are growing gaps in the workforce across the system
- ✦ Temporary service changes due to service sustainability difficulties have been emerging

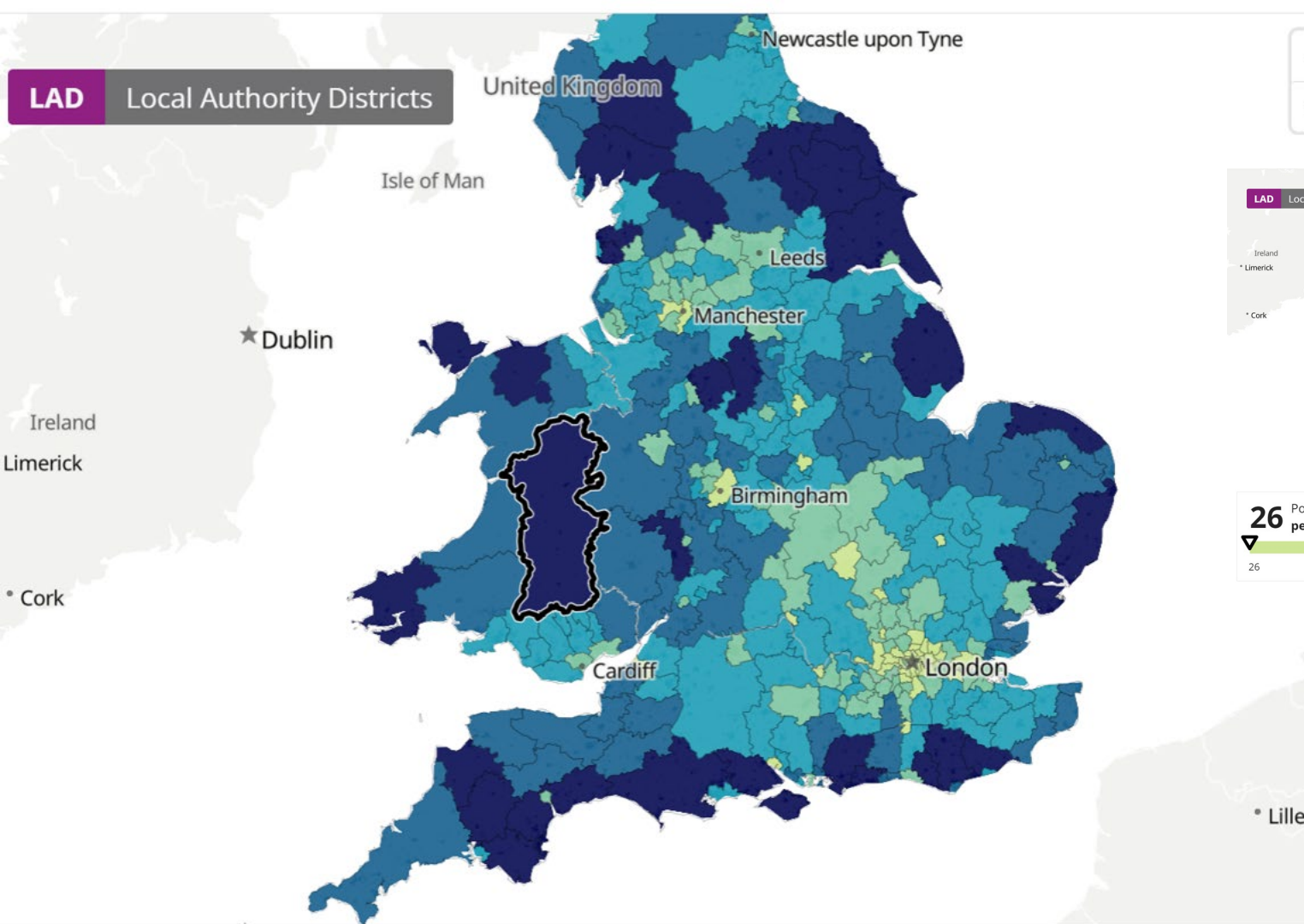
This is a shared challenge with Powys County Council and partners, and we can build on our strengths and opportunities to ensure the best outcomes and experience of care.

Accelerated Model Approach

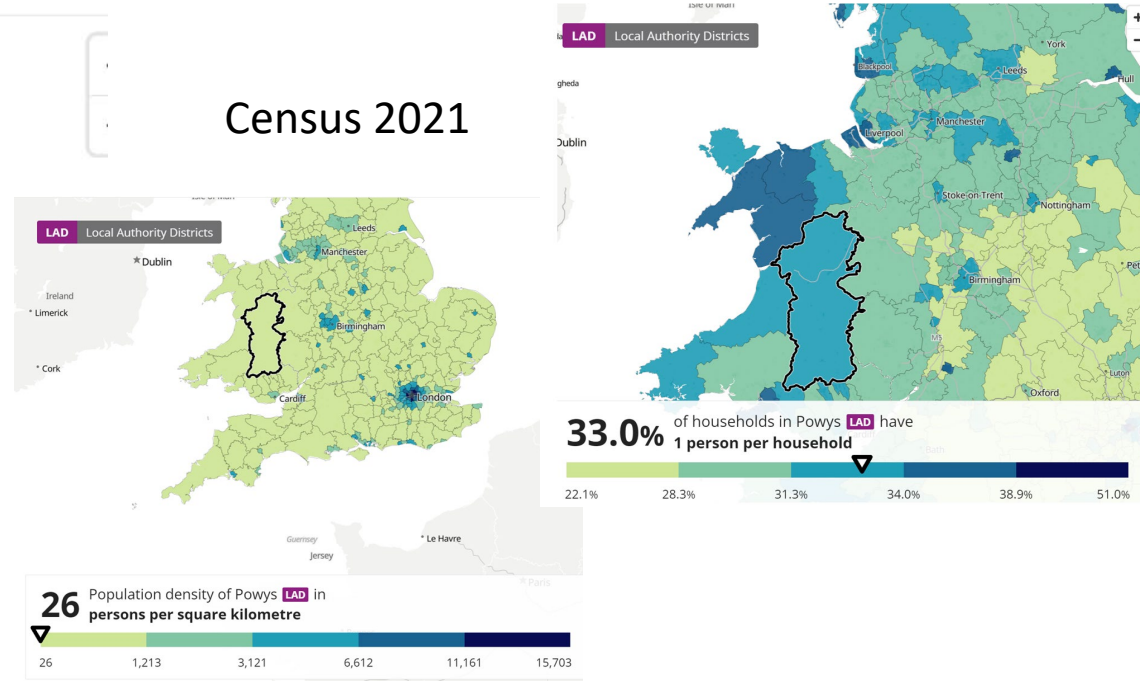
An analysis of the situation has been gathered looking at a range of factors. This report from the “Discover phase” will help inform work on “Design” – ahead of “Delivery”.

Discover	Analysis: what's expected? what's happening? what are the gaps and opportunities?
Design	Messages from analysis, engagement, pathways, options, modelling, impact assessment
Deliver	Delivery plan, change management, risk management, performance management, outcomes, experience, review, refinement

Different Lenses	Population <u>needs</u> Common conditions People in places in Powys Services Patient pathways Unscheduled and planned <u>care</u> Cross-border flows Whole system, including <u>care</u> Workforce Patient outcomes and experience Finance, Estates, Digital
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27.9% of people in Powys **LAD** are aged 65 years and over

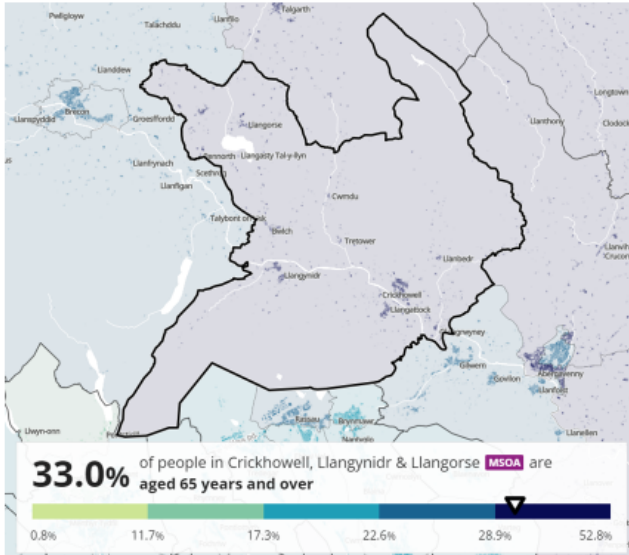


Whilst the PTHB population is only forecast to grow by 1% by 2043, the increasing age of the population will drive growing need due to cancer, dementia, cardiovascular conditions etc.

The census recorded a third of people in single person households in Powys, which is one of the most sparsely populated areas of England and Wales.

The workforce is also aging and there is a growing gap.

Crickhowell, Llangynidr & Llangorse MSOA



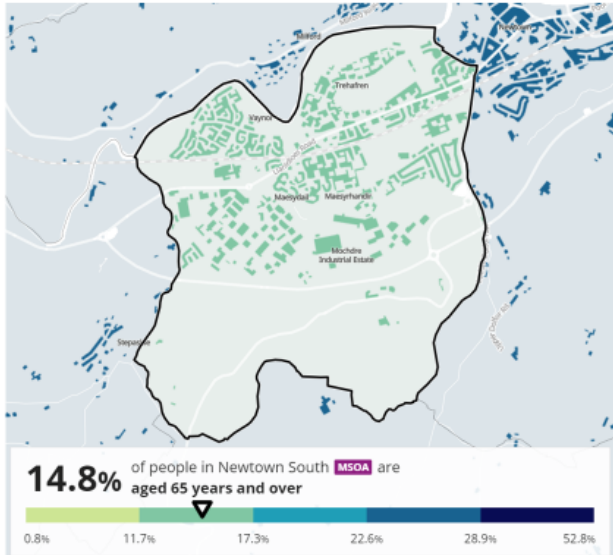
Age groups	Proportion of population
Aged 15 years & younger	14.0%
Aged 16 – 64 years	53.0%
Aged 65 years & over	33.0%

Ethnic group	Proportion of population
White	97.2%
Other Ethnic Populations	2.8%

Deprivation
34.0% of households deprived in one dimension
9.2% of households deprived in two dimensions
1.9% of households deprived in three dimensions
0.1% of households deprived in four dimensions
28.4% of households are one-person households

This MSOA has none of its 4 LSOAs within the most

Newtown South MSOA



Age groups	Proportion of population
Aged 15 years & younger	23.1%
Aged 16 – 64 years	62.0%
Aged 65 years & over	14.8%

Ethnic group	Proportion of population
White	97.7%
Other Ethnic Populations	2.3%

Deprivation
34.2% of households deprived in one dimension
21.0% of households deprived in two dimensions
5.1% of households deprived in three dimensions
0.2% of households deprived in four dimensions
32.4% of households are one-person households

This MSOA has 1 of its 3 LSOAs within the most deprived 20% of all Welsh LSOAs.

Powys is at the forefront of an aging population. For some parts of Powys a third of the population is already over 65 e.g. Crickhowell.

There are 5 Local Super Output areas which are within the most deprived 20% in Wales: Ystradgynlais, Llandrindod, Welshpool Newtown North & Newtown South.

*MSOA: Middle Super Output Area, a standard geographic unit of approximately 7,200 people

Common Conditions Prevalence

Condition	Welsh GP Registered Population Prevalence Rate	PTHB Prevalence Rate %	PTHB (Number of Cases)
Cardiovascular (Circulatory)			
Atrial Fibrillation	2.43%	2.95%	4,111
Coronary Heart Disease	3.61%	4.07%	5,676
Heart Failure	1.11%	1.32%	1,836
Hypertension	15.58%	17.43%	24,313
Stroke and Transient Ischaemic Attack	2.17%	2.67%	3,730
Diabetes Mellitus (age 17+)	7.77%	7.63%	8,825
Respiratory			
Asthma	7.43%	7.44%	10,381
Chronic Obstructive Pulmonary Disease	2.38%	2.42%	3,378
Health Improvement and Protection (Lifestyle)			
Obesity (age 16+)	10.14%	10.23%	11,989
Cancer	3.28%	3.99%	5,564
Palliative Care	0.32%	0.52%	723
Mental health and neurology			
Dementia	0.70%	0.72%	1,011
Epilepsy	0.97%	0.85%	974
Learning disabilities	0.48%	0.43%	600
Mental Health	1.02%	1.05%	1,458
Musculoskeletal			
Osteoporosis (age 50+)	0.64%	0.61%	431
Rheumatoid Arthritis (age 16+)	0.89%	1.11%	1,295

GP registers show the common conditions affecting the Powys population including cancer, cardiovascular, respiratory, mental health conditions and dementia. However, these are underestimates of prevalence. For example, in the UK research indicates that 1 in 14 people over the age of 65 have dementia and 1 in 6 people over 80. Applying these figures the forecast is set out below. Further work is needed on reporting and case-finding.

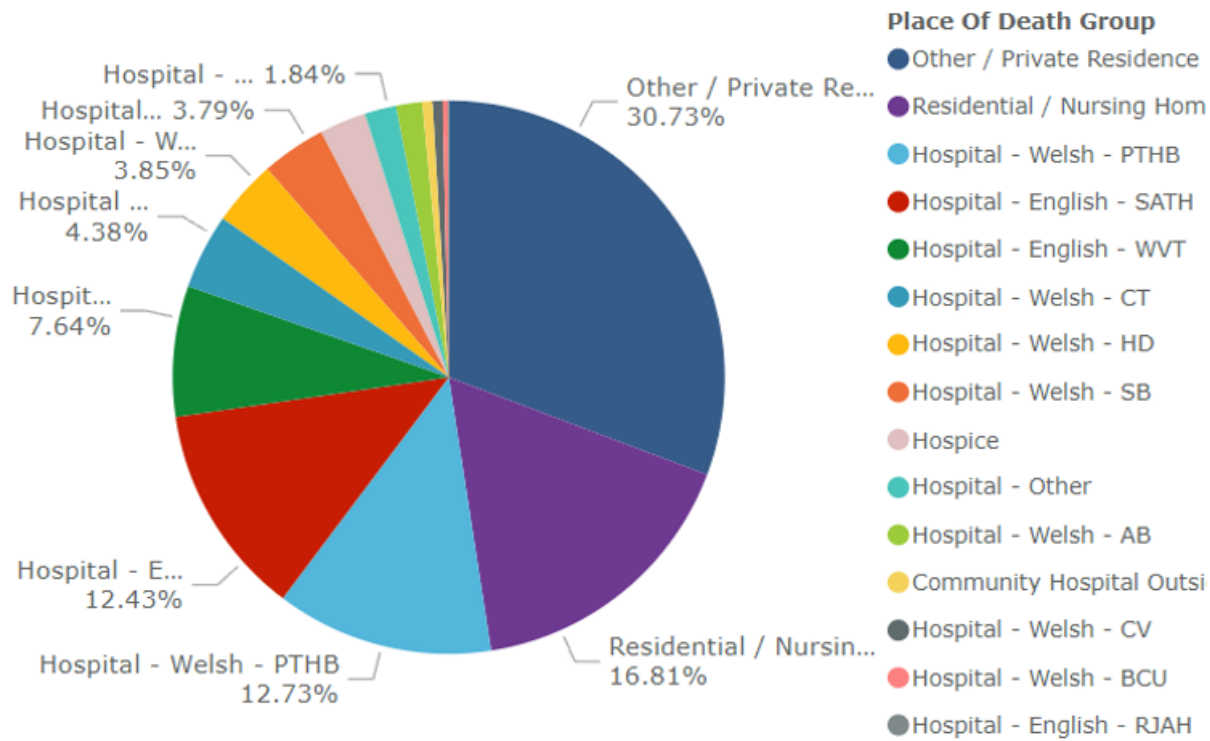
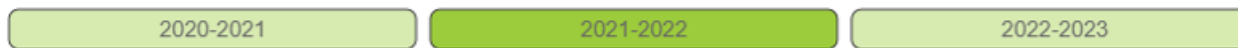
Condition	Age range	EXPECTED NOW	PTHB Expected 2027-28	PTHB Expected 2032-33
Dementia	65 -79 Years	1,740	1,744	1,749
Dementia	80+ Years	1,648	1,652	1,656
Dementia	TOTAL	3,388	3,396	3,404

There is a high prevalence of MSK conditions across the UK. 17.2% of the population over the age of 45 in Wales have knee osteoarthritis and 11.2% of the population over the age of 45 in Wales have hip osteoarthritis.

Pathway



ONS Place of Death for Powys Residents 2021-22



The main causes of death in Powys are cancer, circulatory, respiratory and mental health conditions including dementia. Powys people predominantly die in hospital and predominantly in hospitals out of county.

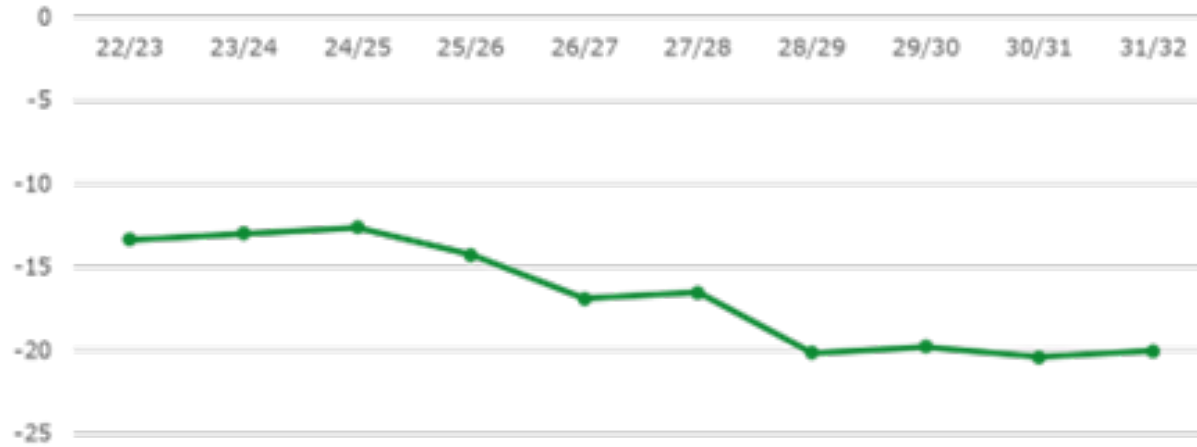
Frailty and Deconditioning

- Approximately 10% of people aged over 65 and 25–50% of those aged over 85 are living with frailty.
- 65% of people admitted to hospital “decondition” within 48 hours.
- At the beginning of December there were 32 patients in Powys community hospitals who were ready for transfer. (There were also patients delayed in District General Hospitals.) The average cost of a “bed-day” in a community hospital is around £614 (so the delays locally totalled about £20,000 per day) showing the need to improve patient outcomes, experience and use of resources.
- Over 50% of patients on Powys wards have cognitive difficulties are there needs to be a more holistic approach for patients with physical frailty and frailty of memory. 42% of people over the age of 70 who had an unplanned hospital admission have dementia.
- Working together a range of solutions is needed including more integrated support available to patients in their own home and community. This is a shared challenge with partners as, for example, there are also recruitment difficulties in domiciliary care and backlogs in social care assessments.

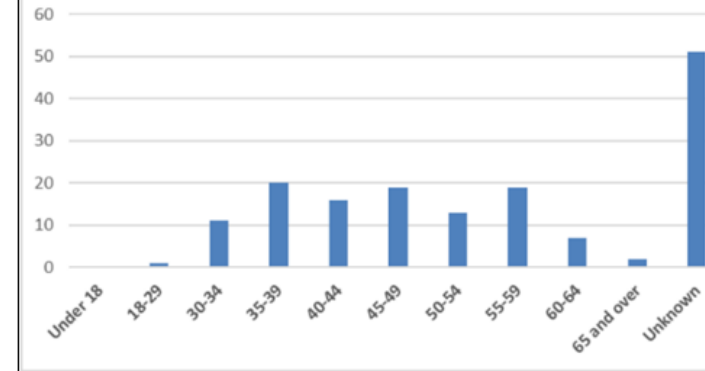
A daily loss of 1.5% leg strength means a 10% loss of strength within a week of bedrest. For an older person who is at the threshold strength for climbing the stairs, standing up from the toilet and getting out of bed, this loss of strength makes the difference between dependence and independence, and potentially going back home or not.

Workforce Projections

All Medical Staff Projections



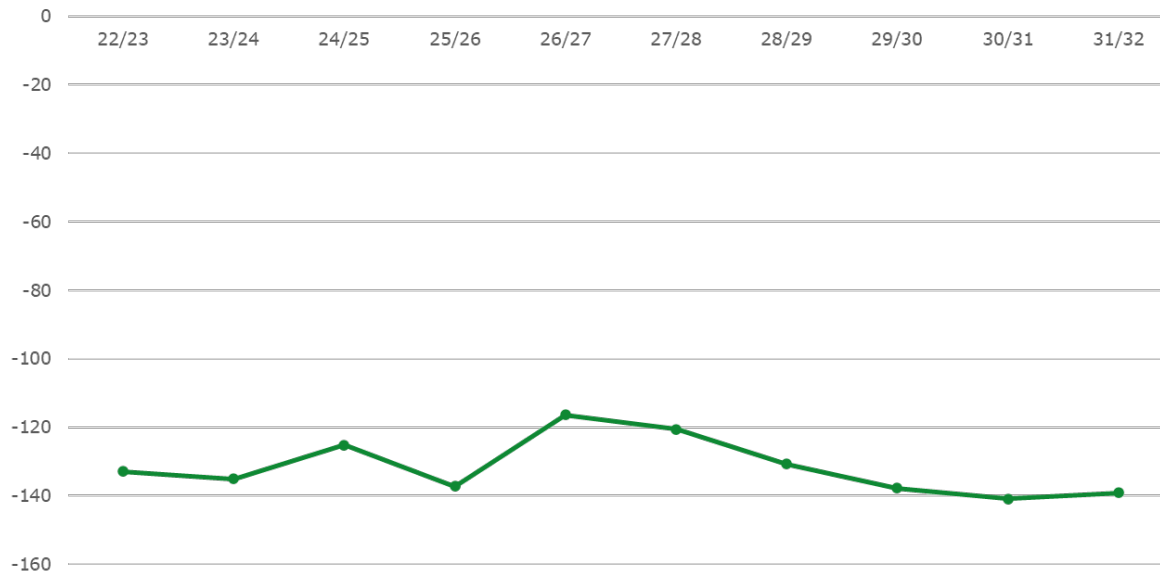
Total Powys GPs Age Profile (Nov 22)



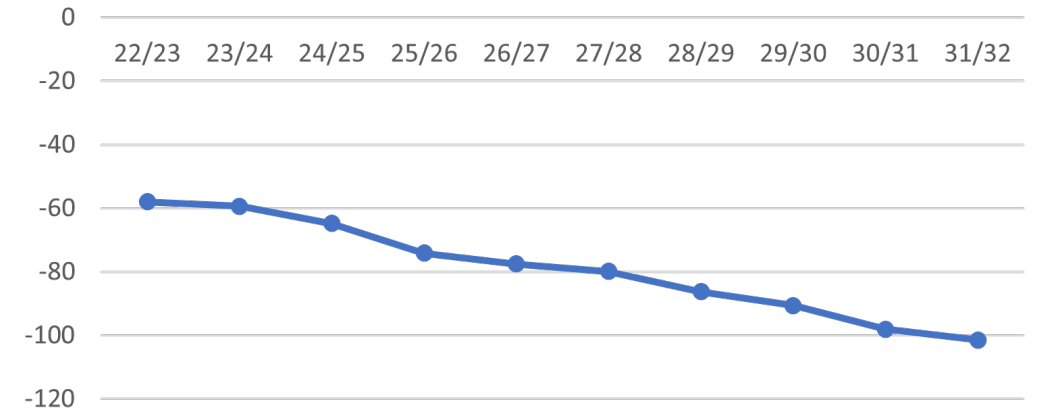
- Limited data available to allow projection data

	Headcount	WTE
North Powys GPs	74	35.4
Mid Powys GPs	34	19.8
South Powys GPs	51	29.7

Nursing & Midwifery - Overall Projections



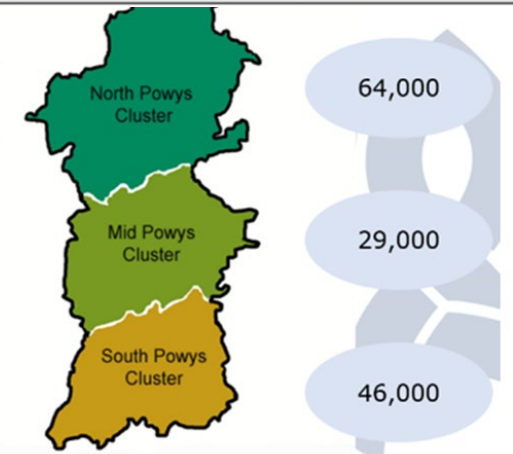
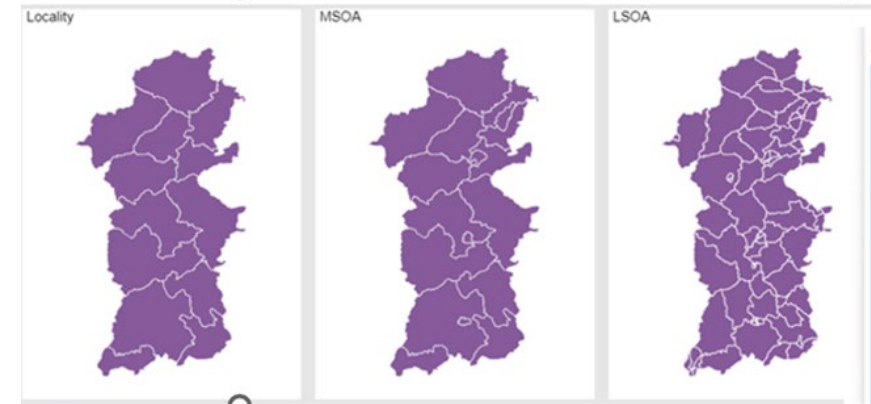
All Mental Health Nursing Projections



Primary and Community Services

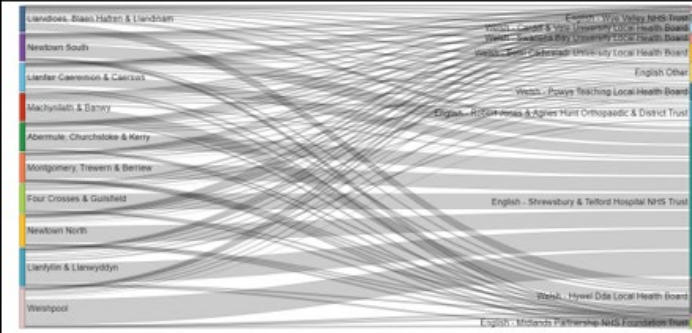
- There are key gaps in some primary and community services including dentistry and out of hours community pharmacy.
- A number of community services are small, fragile (due to vacancies), uni-professional and are not equally available across the county or week.
- There is not a uniform tiered approach to the organisation of services e.g. there are 16 virtual wards, 14 district nursing teams, and 13 local authority localities.
- There is variation across the services, costs, lengths of stay and resilience offered by PTHB community hospitals. There are service continuity difficulties for some wards due to recruitment.
- Areas of deprivation such as Ystradgynlais are some of the most significant users of third sector services accessed via Community Connectors including services for loneliness and practical support at home.
- There are opportunities to improve the resilience, mix of competencies (including new types of support workers) and join up across community teams.
- Services need the right underlying population base and throughput to be sustainable in terms of outcomes, experience and cost.

Universal	133,000
1:10	13,300
1:100	1,330
1:1000	133
1:10,000	13.3
1:100,000	1.3
1:1,000,000	0.1

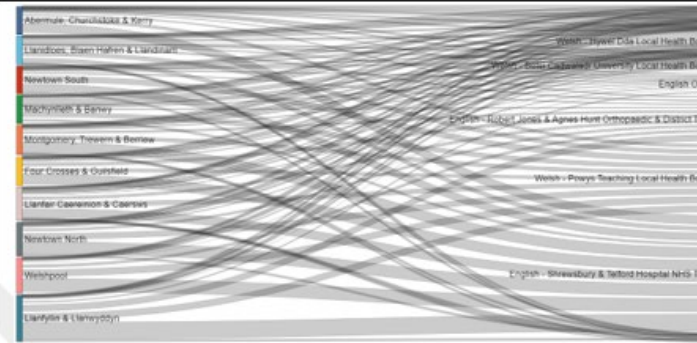


Cross Border Flows

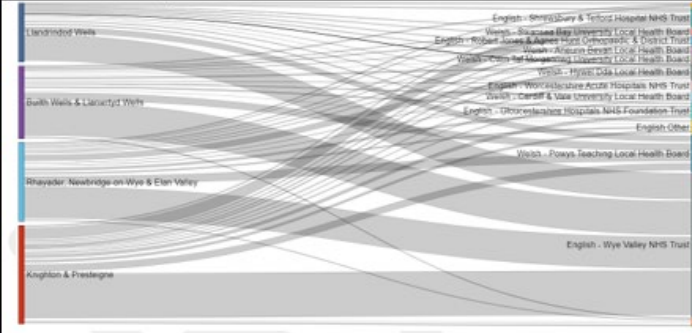
North Powys Admitted Patient Care Flows



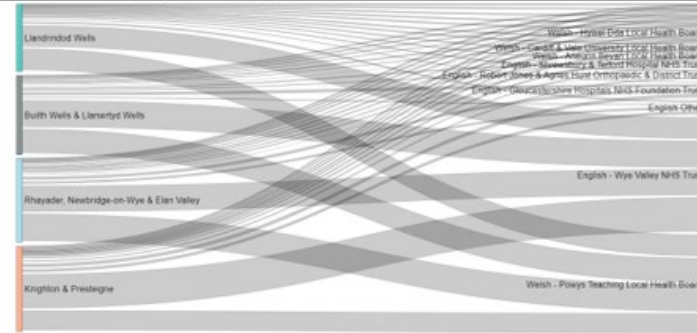
North Powys Outpatient Attendances



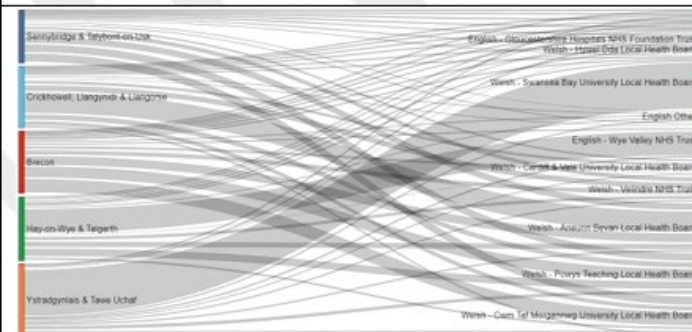
Mid Powys Admitted Patient Care Flows



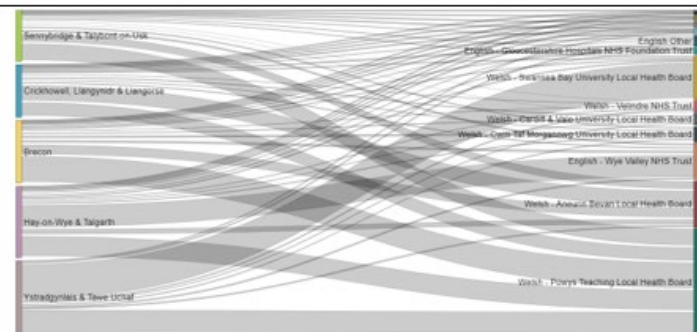
Mid Powys Outpatient Attendances



South Powys Admitted Patient Care Flows



South Powys Outpatient Attendances



- PTHB does not have sufficient population in one place for A&E, inpatient District General Hospital services – but it needs a smaller number of strategic relationships to help it improve access to sustainable services within Powys.
- It has to interface with 5 regions across England and Wales.

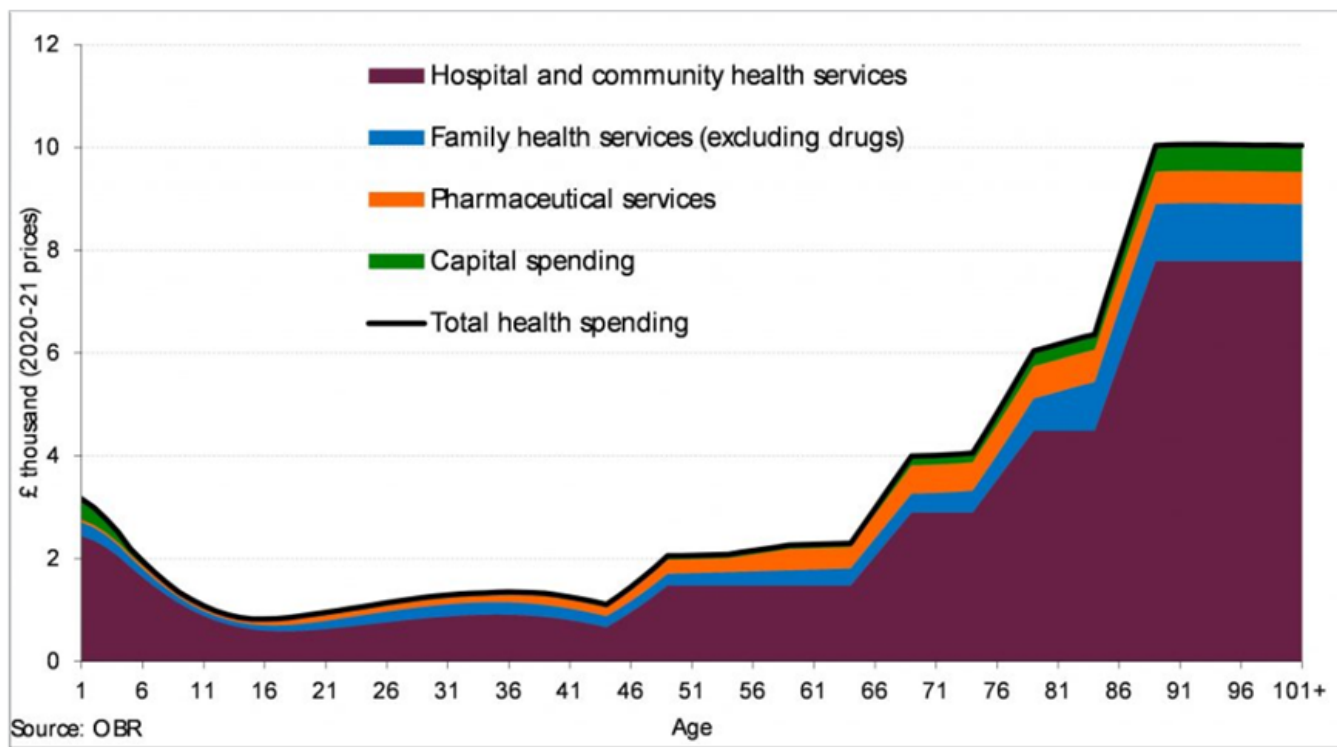


Diagnostics and Planned Care

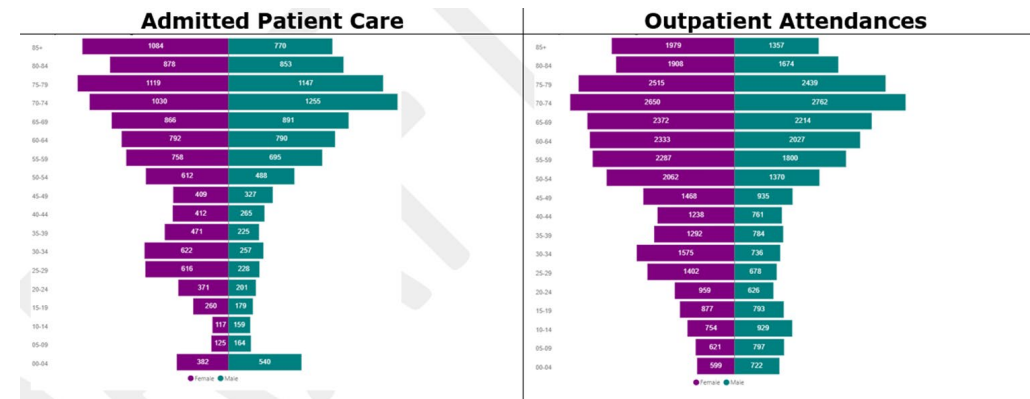
- The waiting list for elective treatment in October 2022 was over 25,000 for services needed in and out of county, equating to nearly 1 in 5 of the Powys population.
- High volume low complexity work accounts for 63% of all patients waiting nationally. 85% of 29 common pathways could be delivered as day case, presenting considerable opportunities for Powys in terms of the services delivered in Powys and those commissioned out of county.
- Improved planned care locally also helps to prevent the need for unscheduled care
- Getting it Right First Time Reviews show the low complexity day case activity which could be repatriated to Powys and the opportunities to improve efficiency including key areas such orthopaedics, general surgery, gynaecology, ophthalmology and urology.
- There are opportunities to extend the range of diagnostics within Powys including at home, within primary care clusters and in rural regional centres. New techniques such as transnasal endoscopy are more comfortable for patients and can be rolled out here.
- There is not yet the same level of access in North Powys to services such as theatres and endoscopy.

Impact on spending

Age is a driver of health spending which is partly due to the fact that the prevalence of multi-morbidity also rises with age. As shown in the graph below from the [Office for Budget Responsibility \(OBR\)](#), the cost of caring for older people - taking into account hospital and community health services, family health services and pharmaceutical services - increases with age.



Source: OBR, Health spending per person



Healthcare costs in the last year of life also depend on age, but in this case there is an inverse relationship between age and the cost of end of life care. Costs are high for people dying at comparatively younger ages (<70 years), and appear to decrease with increasing age of death, mainly due to a decrease in hospital care.

This suggests that proximity to death is a more important determinant of health expenditure than ageing alone, and that living longer is not necessarily a burden on the health system.

However, [several studies](#) have confirmed that it is not age per se, but time-to-death, particularly the final year of life, that is a stronger driver of healthcare expenditures.

Finance

PTHB

- For the first time since 2014 PTHB will not breakeven this year with a potential overspend of around £7.5M
- This part of a wider UK position due to inflation at around 10%
- Drivers include demand for and capacity of the health and care system (including DGH and specialised services) workforce gaps (e.g. bank, locum and agency staff) and social/community gaps and the higher cost of complex care

Powys County Council

- Rising inflation is increasing the pressure on the Council's budget as costs for fuel, food and energy increase
- Employee costs are set to rise significantly
- Rising costs are affecting capital schemes also due to contractor costs, the cost of materials and the rising cost of borrowing
- The cost of living challenge is impacting on local residents and businesses
- The budget the local authority set at the beginning of the year is no longer sufficient and it is taking steps to reduce expenditure and is calling on its reserves

The Gap

Together Powys County Council and Powys Teaching Health Board have a budget of around £670m with projected deficits in 2023/2024 of over £30 million

High Level Model - Powys Health and Care Strategy 2017 – 2027

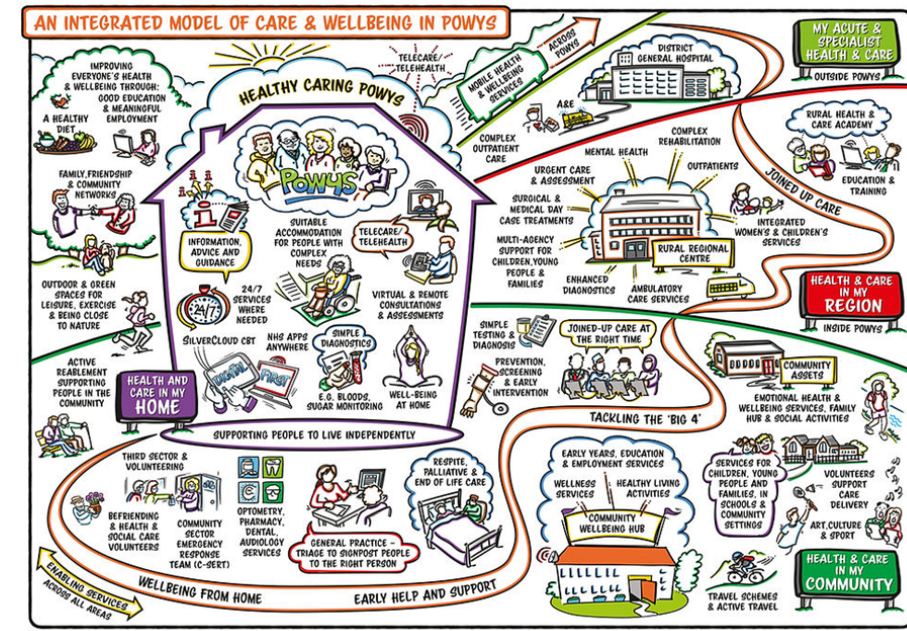
(Joint Area Plan approved March 2018)

The Powys Health and Care Strategy remains the guiderails including the focus on:

- Home
- Neighbourhood approach/Community Well-being hubs
- Regional Rural Centres

Core to the model of care:

- Integrate health and care services to meet holistic needs of individuals
- Move services (where safe and effective) from secondary care out of county hospitals into our Regional Rural Centres
- Utilise digital technology to provide virtual clinics accessing secondary care professionals
- Linkage to and provision of adequate supported living accommodation and nursing homes
- Community development and stakeholder involvement to deliver wider community benefits
- To offer one stop services and deliver as much of the care pathway as locally as possible within Powys
- Inter-generational Community Well-being Hubs provide a means for alternative approaches to service delivery
- To create an opportunity to bring communities together to enable people to address well-being issues which matter most to them.



Co-produced outcomes

What is meant by sustainable?

The Wellbeing and Future Generations (Wales) Act 2015 requires that a public body must act in a manner which seeks to ensure that the needs of the present are met without compromising the ability of future generations to meet their own needs. Public bodies must:

- Think more about the long term
- Work better with people, communities and each other
- Look to prevent problems
- And take a more joined up approach

Learning from the pandemic, balancing demand and difficulty decision need to be considered within overarching ethical principles:

- Everyone matters
- Everyone matters equally – but this does not mean that everyone is treated the same
- The interests of each person are the concern of all of us, and of society
- The harm that might be suffered by every person matters.



Sustainable

A sustainable model for health and care in Powys needs to ensure that:

- Services accessed by residents can attain and maintain the necessary quality and essential standards including workforce, skills and competencies
- Services serve an appropriate population level to enable throughput to maintain value in terms of the necessary outcomes, experience and cost
- Services are resilient and not so fragile that there is risk of the response needed failing or giving way
- The response is as environmentally sustainable as possible
- Access to services is fair for people of equal need
- Solutions work across the whole system

Cynllunio at y Dyfodol ym Mhowys

Planning for the Future in Powys

Mae hyn yn codi rhai cwestiynau allweddol i bob un ohonom sy'n byw ac yn gweithio ym Mhowys.

- Ydych chi'n gyfarwydd â'r darlun hwn? Os nac ydych, beth sydd ar goll?
- Beth ydych chi'n meddwl yw'r blaenoriaethau mwyaf i wella gofal a lles ym Mhowys?
- Oes yna faterion a heriau eraill y mae angen i ni fynd i'r afael â nhw yn ystod y deng mlynedd nesaf a thu hwnt?
- Pa gamau rydych chi'n meddwl y gallwn eu cymryd i fynd i'r afael â'r materion hyn?
- Sut allwn ni eich cefnogi chi i gydweithio gyda ni er mwyn datblygu datrysiadau sy'n gwneud y defnydd gorau o'r sgiliau sydd gennym ym Mhowys?

Eleni mae'r GIG yn dathlu ei ben-blwydd yn 75 oed. Rydyn ni awyddus i weithio gyda chi i wneud yn siŵr bod y GIG yn ffynnu ar gyfer ei ben-blwydd yn 85 oed a thu hwnt.



This raises some key questions for all of us living and working in Powys?

- Is this a picture that you recognise? If not, what is missing?
- What do you think are the biggest priorities for improving care and well-being in Powys?
- Are there other issues and challenges that we need to address in the next ten years and beyond?
- What steps do you think we can take to address these issues?
- How can we support you to work with us to develop solutions that make best uses of the skills and assets in Powys?

This year the NHS celebrates it's 75th birthday. We want to work with you to make sure that the NHS is thriving for its 85th birthday and beyond.

