

# What can primary care do to halt the rise of inequalities in Wales?

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Wales



# Introduction

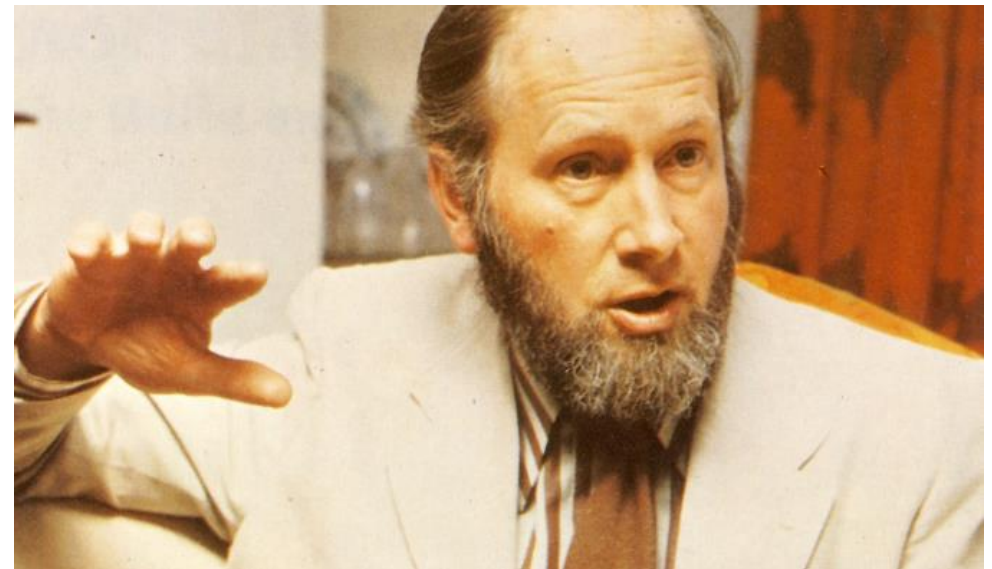
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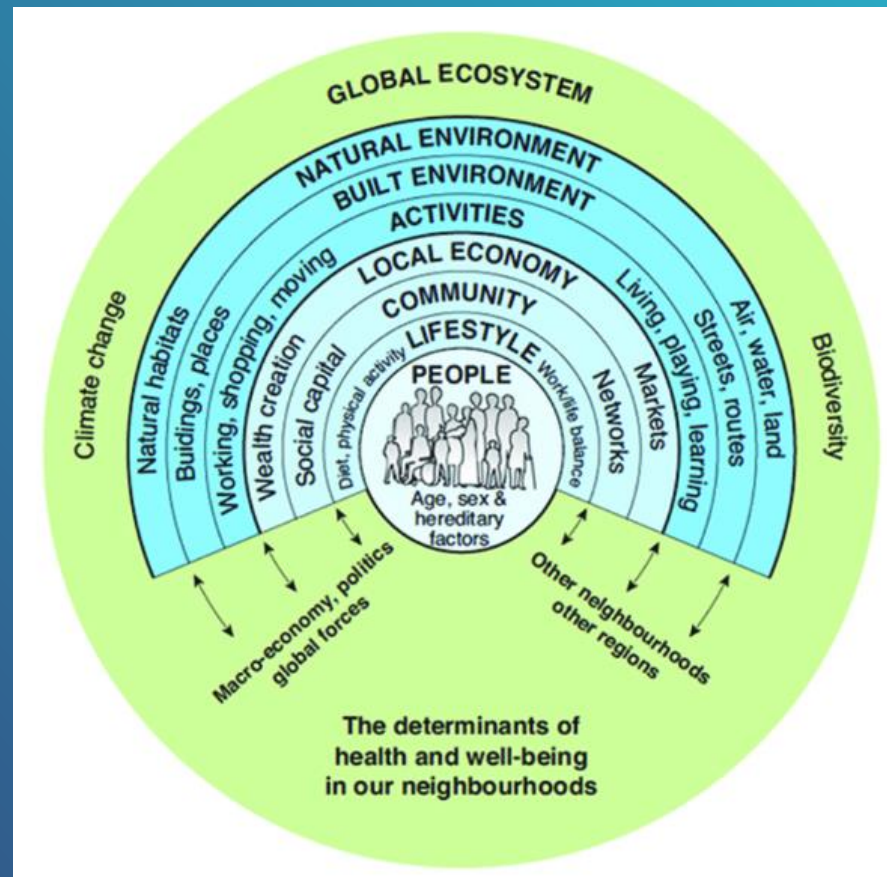
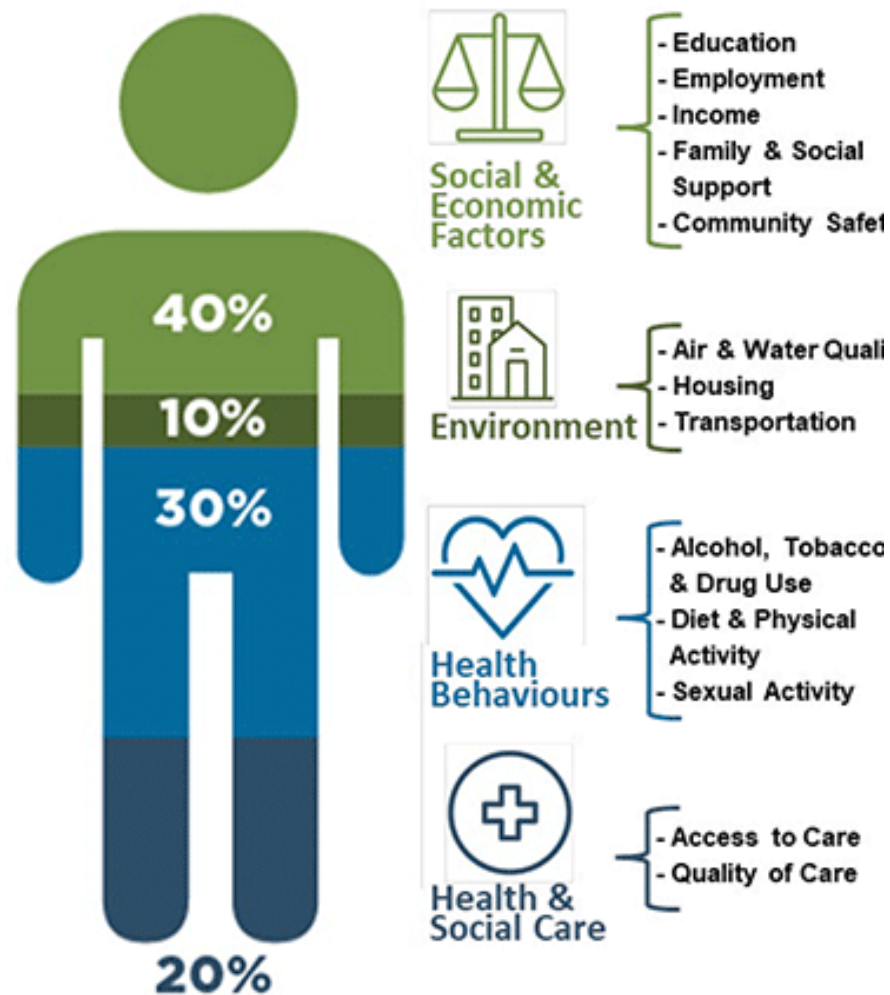
- Where does the Inverse Care Law fit within wider inequalities ?
- What is the state of inequalities in Wales?
- What is the role of primary care in addressing health inequalities?
- Overview of our work in Primary Care Division?

# Where does the Inverse Care Law fit within wider inequalities ?

Julian Tudor Hart: visionary general practitioner who introduced the concept of the “inverse care law”

*“The availability of good medical care tends to vary inversely with the need for it in the population served”*





“medical services are not the main determinant of mortality or morbidity; these depend most upon standards of nutrition, housing, working environment, and education, and the presence or absence of war.” Tudor Hart

**Source:** [Chapter 3: Health inequalities: Turning the Tide - Realistic Medicine - Doing the right thing: Chief Medical Officer annual report 2022 to 2023 - gov.scot \(www.gov.scot\)](#)



Glyncorrwg Colliery, 1953

## The Glyncorrwg years

- He was keen to get a holistic picture of his patients - Glyncorrwg became the Medical Research Council's first research practice
- He became the first GP in the UK to routinely measure blood pressure – measured it in everyone.
- He understood his community
- Local cooperation was essential- working with patients ( formed a health committee- discussed public health issues such as smoking)
- The preventive health strategy & thinking about the whole picture paid off ( Death rates- 30% lower than Blaengynfi)



INFORMED



ADVOCATED



MOBILISED



DELIVERED

# What is the state of inequalities in Wales?

## Life expectancy and healthy life expectancy

### Life expectancy

In Wales, men living in the most deprived areas **die** on average **9 years younger** than men living in the most affluent areas.

### Healthy life expectancy

Women in Wales born in the most deprived areas on average live **18.3 years** of their life in **poor health**.

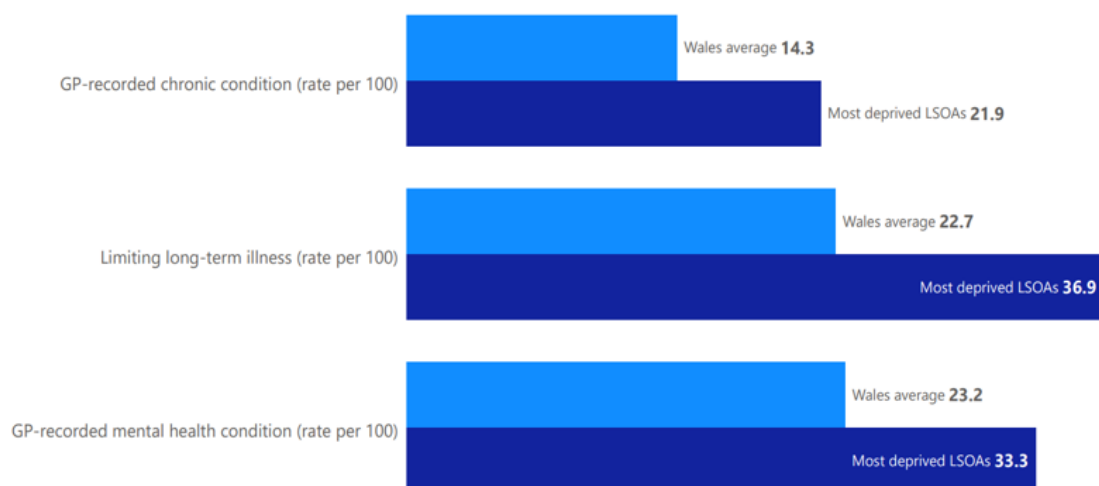
Source: [ONS Health state life expectancies by national deprivation deciles, Wales - Office for National Statistics \(ons.gov.uk\)](https://ons.gov.uk/health/life-expectancy/articles/health-state-life-expectancies-by-national-deprivation-deciles-wales)

# Disease burden in deprived areas

Variation in Prevalence of long-term conditions between the most and least deprived LSOAs (StatsWales, 2019)

Variation in Cancer Incidence and premature death between the most and least deprived LSOAs ( Stats Wales, 2019)

● Wales average ● Most deprived LSOAs

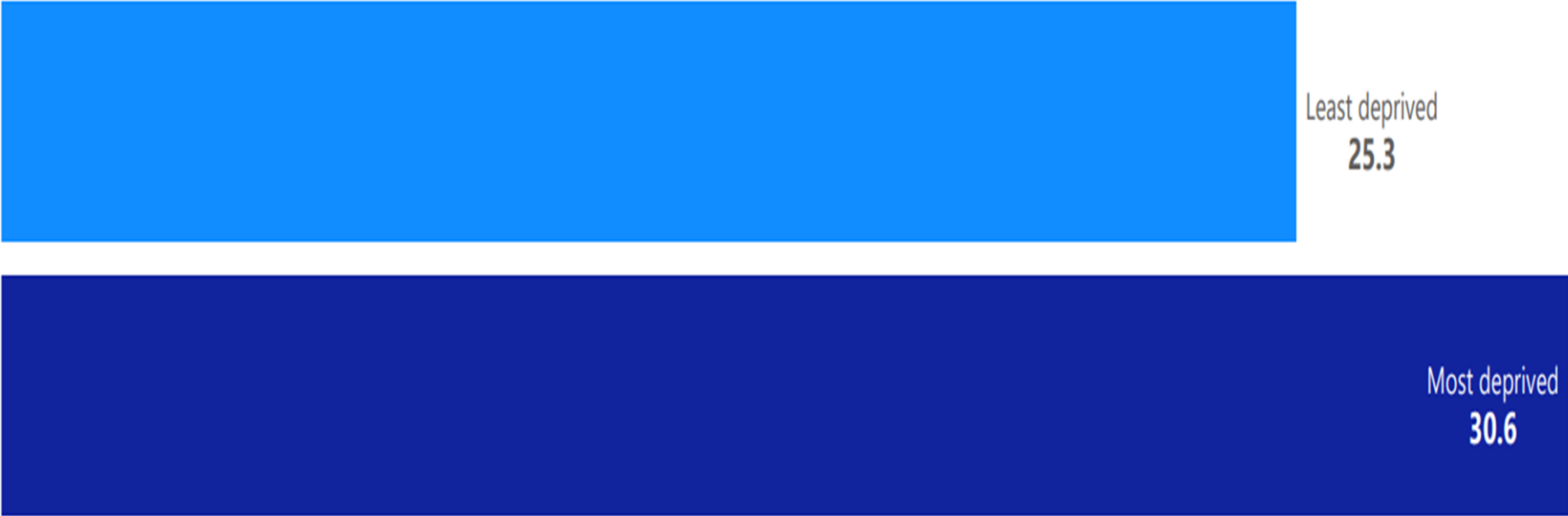




# Demand on services in deprived areas

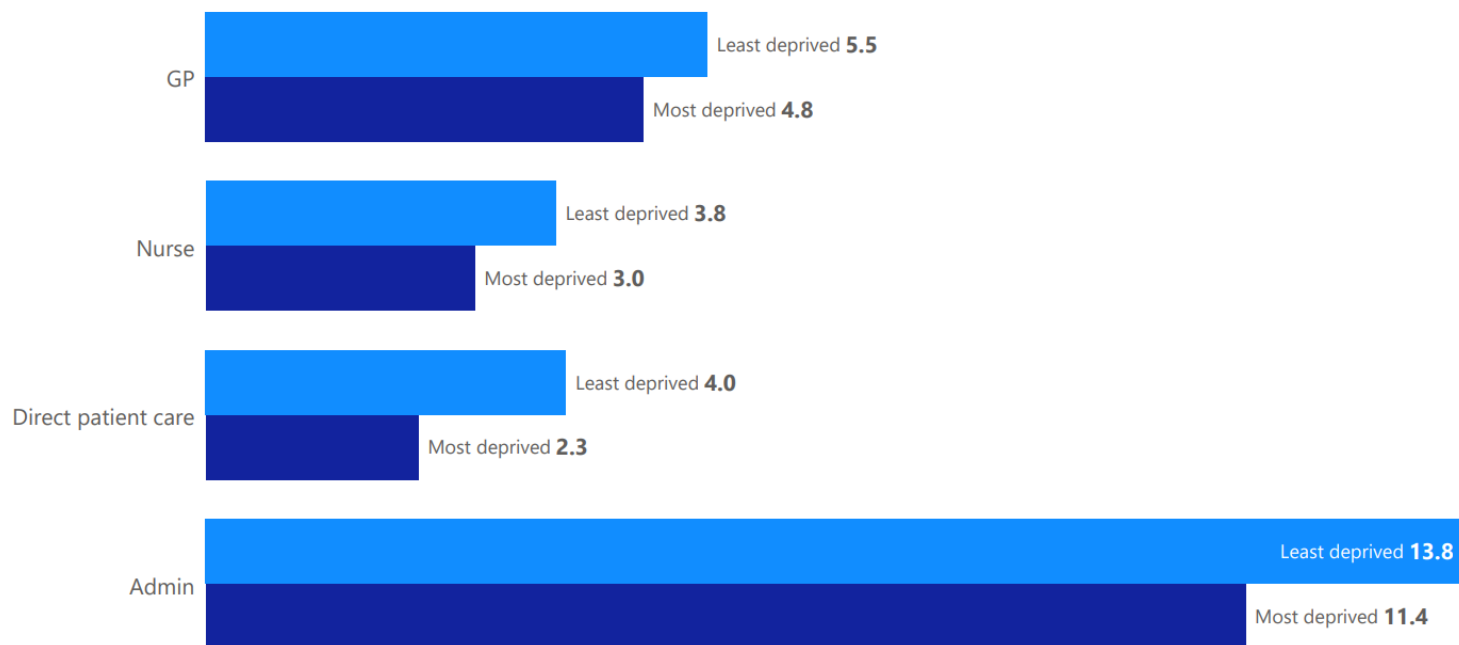
GP appointments per 100,000 population (WLGP, 2019-20)

● Least deprived ● Most deprived



# Limited supply in deprived areas

Ratio of full-time equivalents to 10,000 practice population by practice quintiles based on count of population living in the most deprived 20% of areas at 31 December 2021



# What can primary Care do?

## Focus on social determinant of health

- Assess patients for housing instability, food insecurity, unemployment to connect them to community resources and services
- Social prescribing
- Partnership with community organisations helps provide holistic approach to address non - medical needs

## Equitable access to your service

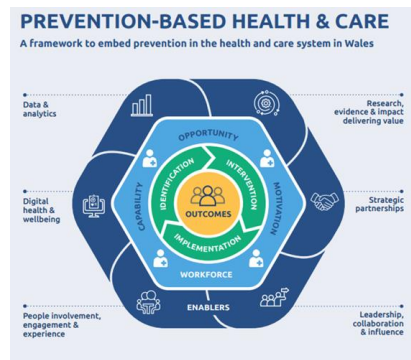
- Think of access in underserved areas
- Culture competent Care
- Trauma informed care
- Interprofessional & interdisciplinary teams

## Data Driven approaches

- Health Equity Audits to access quality of care and outcome across different patient demographics
- Use your data to stratify patients by ethnicity, income, geography, to identify health gaps and unmet needs

## Adopt a systems approach

- You are part of a wider system that is connected with each other
- You need multi-level interventions through coordination & collaboration with others
- Identify how other parts of the system such as social services, community organisations and groups can help
- Engage with communities & If you can co design your interventions with them



# Overview of the work in Primary Care Division

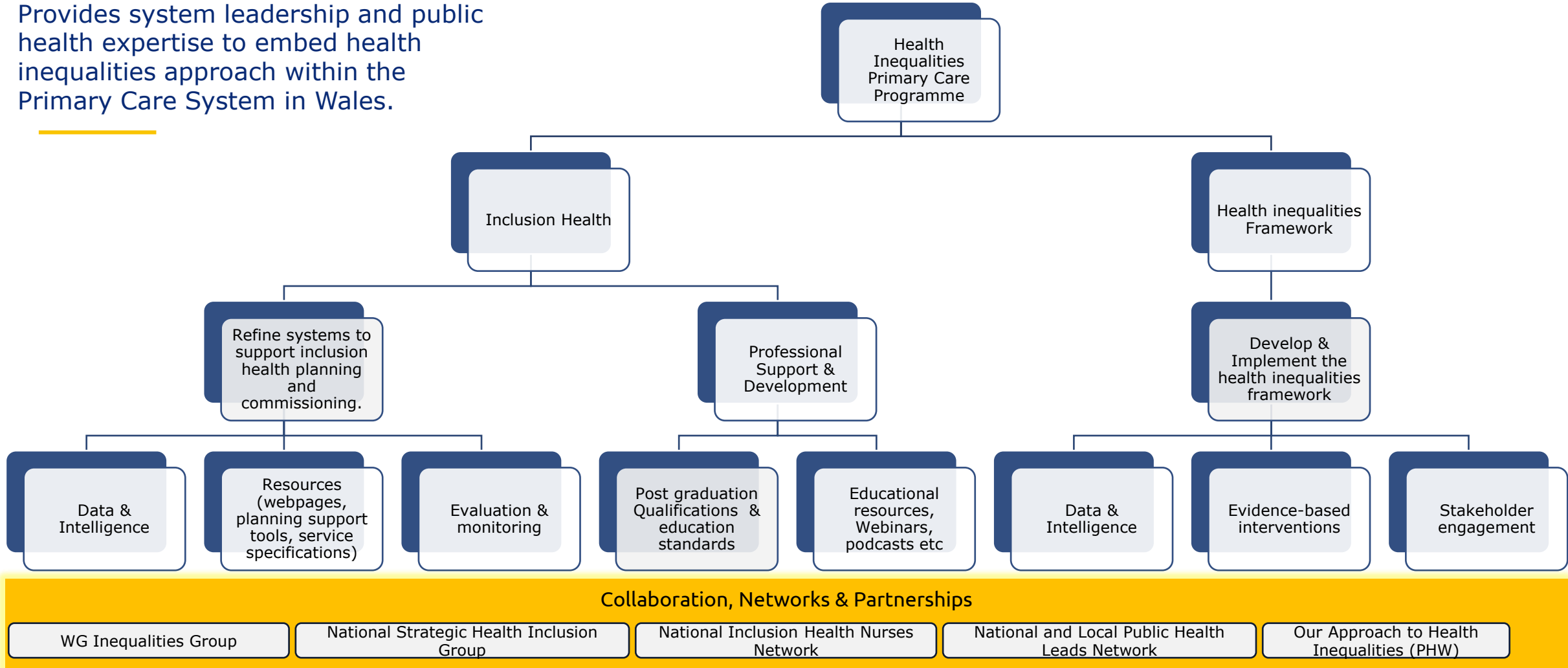


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# Health Inequalities in Primary Care programme

Provides system leadership and public health expertise to embed health inequalities approach within the Primary Care System in Wales.



## Inform

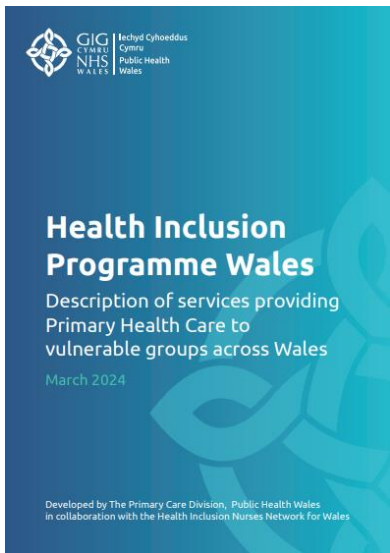
- Research & Data
- Health inequalities relevant resources and tools including equity assessment guidance for clusters and other professionals in primary care
- Webpages
- Delivery of series of health inclusions and health inequalities workshops
- Working with partners to develop standards for professional education (graduate and post graduate level)

## Advocate & Mobilise

- Provide system leadership to advocate for, and influence policy changes related to health inequalities .
- Advocate to improve data quality for inclusion health groups nationally and locally
- Established a local and national networks

## Deliver & Learn

- Develop Equality Action Framework for primary care
- Develop approaches and standards for monitoring & evaluation of inclusion health services & health inequalities framework



[primarycareone.nhs.wales/files/health-inclusion-programme-wales/](https://primarycareone.nhs.wales/files/health-inclusion-programme-wales/)



[primarycareone.nhs.wales/topics/reducing-health-inequalities-through-primary-care/wales-inclusion-health-programme-for-primary-care/planning-support-and-resources/planning-support-and-resources/phw-c-vhealthinclusion-casestudy-a3-pdf/](https://primarycareone.nhs.wales/topics/reducing-health-inequalities-through-primary-care/wales-inclusion-health-programme-for-primary-care/planning-support-and-resources/planning-support-and-resources/phw-c-vhealthinclusion-casestudy-a3-pdf/)

# Resources



[Reducing Health Inequalities through Primary Care - Primary Care One \(nhs.wales\)](https://www.nhs.uk/primary-care-one/primary-care-one-reducing-health-inequalities-through-primary-care/)

## Other Resources

### Health Board Area:

#### Aneurin Bevan University Health Board

- [Inclusion Health Data](#)

#### Betsi Cadwaladr University Health Board

- [Inclusion Health Data](#)

#### Cardiff and Vale University Health Board

- [Inclusion Health Data](#)

#### Cwm Taff Morgannwg University Health Board

- [Inclusion Health Data](#)

#### Hywel Dda University Health Board

- [Inclusion Health Data](#)

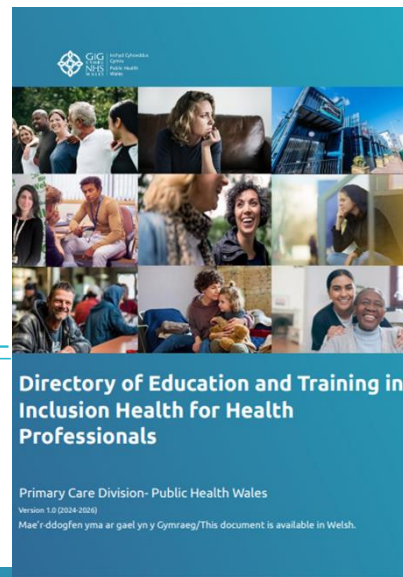
#### Powys Teaching Health Board

- [Inclusion Health Data](#)

#### Swansea Bay University Health Board

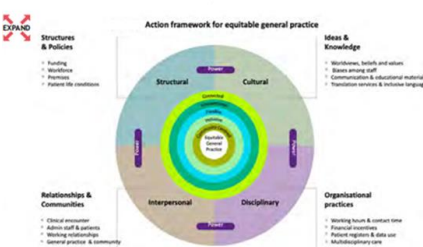
- [Inclusion Health Data](#)

[Planning Support and Resources - Primary Care One \(nhs.wales\)](https://www.nhs.uk/primary-care-one/primary-care-one-planning-support-and-resources/)

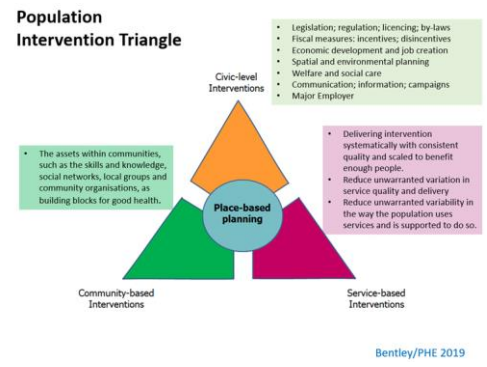


[Directory of Education and Training in Inclusion Health for Health Professionals - Primary Care One \(nhs.wales\)](https://www.nhs.uk/primary-care-one/primary-care-one-directory-of-education-and-training-in-inclusion-health-for-health-professionals/)

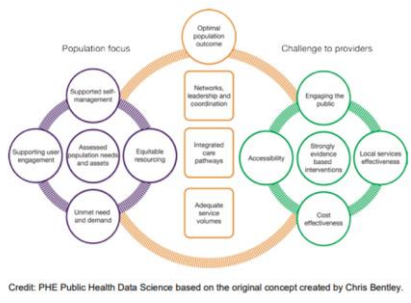
# EQUALISE: An action framework for equitable general practice



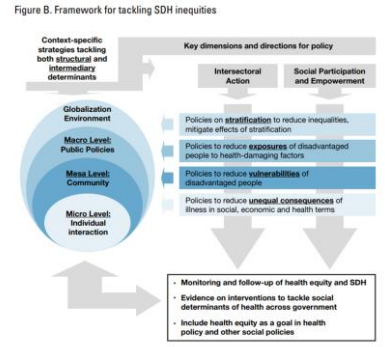
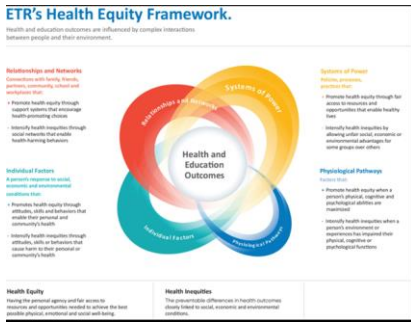
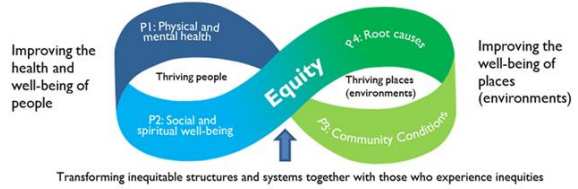
# FAIRSTEPS Framework Process



# PREVENTION-BASED HEALTH & CARE



- Numerous frameworks
- Evidence informed
- Lack of evidence on their implementation & effectiveness in practice





# An NHS Wales framework for health equity through primary care



Leadership  
and Culture



Workforce



Accessible,  
quality and  
integrated  
services



Data,  
knowledge  
and  
intelligence







Investment  
and re  
distribution  
of funding



Community  
enablement



Collaboratio  
n

<p>01</p> 	<p>Leadership and Culture</p>	<ul style="list-style-type: none"> <li>• Strengthen collaborative leadership and accountability across the primary care system</li> <li>• Embed focus on health inequalities in organisational and teams thinking and culture</li> </ul>
<p>02</p> 	<p>Workforce</p>	<ul style="list-style-type: none"> <li>• Invest time and resource in sustainable workforce planning that supports diverse composition of the workforce</li> <li>• Make health equity focused training as an integral part of graduate and postgraduate training</li> </ul>
<p>03</p> 	<p>Accessible Quality and Integrated Services</p>	<ul style="list-style-type: none"> <li>• Incorporate services within specific locations and cultural communities</li> <li>• Normalise integrated working, consistent joint training, and shared vision development</li> </ul>
<p>04</p> 	<p>Data, Knowledge &amp; Intelligence</p>	<ul style="list-style-type: none"> <li>• Commit to: <ul style="list-style-type: none"> <li>developing and publishing high-quality data and accessible information on health inequalities both locally and nationally</li> <li>investing in data development workforce.</li> <li>Identifying models and approaches that work for underserved communities though research and evaluation.</li> </ul> </li> <li>• Identify and develop models, mechanisms and approaches: <ul style="list-style-type: none"> <li>to incorporate digital access and skills into analysis of inequalities.</li> <li>to standardise analysing inequality data that work for underserved communities though research and evaluation for recording, assessing, and reporting unmet primary care needs.</li> </ul> </li> <li>• Share best practice to help services and organisations within primary care system become effective health equity entities.</li> </ul>
<p>05</p> 	<p>Investment and funding</p>	<ul style="list-style-type: none"> <li>• Invest time and commitment to review funding and resource distribution</li> <li>• Give higher patient list weighting for practices in disadvantaged areas.</li> </ul>
<p>06</p> 	<p>Community enablement</p>	<ul style="list-style-type: none"> <li>• Foster long term relationship between care teams and community such as locating services near community landmarks, offering transportation options, conducting targeted home visits and co designing services with communities and partners</li> </ul>
<p>07</p> 	<p>Collaboration</p>	<ul style="list-style-type: none"> <li>• Take ABCD approach to provide community centred care through working with local authorities, voluntary sector, community groups and social enterprise partners</li> </ul>

# How can we make a difference?

## Embed equity & equality

INFORM

ADVOCATE

MOBILISE

DELIVER



## Let us know how can we support?

### Inequalities Team:

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*if these hours be dark,  
as indeed in many ways they are,  
at least do not let us sit deedless,  
like fools and fine gentlemen,  
thinking the common toil not good enough for us,  
and beaten by the muddle;  
but rather **let us work like good fellows trying by some dim candle-  
to set our workshop ready against tomorrow's daylight...**  
William Morris*



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Wales

# Diolch / Thank you

[Lleihau Anghydraddoldebau Iechyd drwy Ofal Sylfaenol - Gofal Sylfaenol Un \(gig.cymru\)](http://gig.cymru)

[Reducing Health Inequalities through Primary Care - Primary Care One \(nhs.wales\)](http://nhs.wales)

