

EITEM AGENDA / AGENDA ITEM: 5.1

Cyd-bwyllgor Iechyd a Gofal y Canolbarth / Mid Wales Joint Committee for Health and Care			
Dyddiad y Cyfarfod: Date of Meeting:	1 September 2026		
Teitl yr Adroddiad: Title of Report:	Rural Health and Care Wales Work Programme update report		
Arweinydd: Lead:	Keith Jones, Programme Director for the Mid Wales Joint Committee <u>and</u> Director of Operational Planning & Performance for Hywel Dda University Health Board, and Anna Prytherch, Head of Rural Health and Care Wales		
Pwrpas yr adroddiad: Purpose of the Report:	To receive an update report on the RHCW Work Programme 2026/27	Ar gyfer cytundeb For Agreement	
		Ar gyfer trafodaeth For Discussion	
		Ar gyfer gwybodaeth For Information	✓
<u>Crynodeb / Summary</u> This report provides an update of progress made to date by Rural Health and Care Wales (RHCW) in achieving its Work Programme for 2025/26 and 2026/27.			
<u>Argymhelliad / Recommendation</u> For information - The Mid Wales Joint Committee for Health and Care is asked to note for information the progress made in achieving the RHCW Work Programme for 2025/26 and 2026/27.			



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RURAL HEALTH AND CARE WALES

Papur / Paper: 5.1

RHCW Progress Report October 2025 - August 2026

Aim 1: Health, Wellbeing and Prevention

- Improve the health and wellbeing of the Mid Wales population.

- The findings and recommendations of the **Macmillan Rural Cancer Patient Experience** research were presented at the LIRCH (Lincoln Institute for Rural and Coastal Health) Hippinghold Conference held in Lincoln on 22nd April 2026,



where the official launch of the UK-wide PLACE (Place based Action for Cancer Equity) network was conducted. A PLACE networking event was held the day prior to the Conference on the 21st April (all costs for attendance funded through the network).

The Rural Cancer Patient Experience

- an evaluation of Rural Cancer Patient Experiences in Mid Wales

Background - rural residents are as much as 5% less likely to survive cancer than their urban counterparts¹

Rural residents can:

- Incur greater travel times^{2,3} for screening, diagnosis and treatment
- Are more likely to be diagnosed through emergency presentation⁴ than screening
- Can be less likely to undergo radiotherapy⁴
- May experience more psychological unmet needs⁴

The study was designed to:

- Gain a better understanding of any perceived inequalities facing people living in rural areas in receiving care and support after they receive a cancer diagnosis
- Explore different ways in which care and support is provided to people with cancer living in rural areas and identify areas of best practice
- Consider the experience of professionals delivering cancer support services in both urban and rural areas, in order to ascertain whether any differences or difficulties exist
- Conclude with a comprehensive set of recommendations and an action plan for improving the rural cancer patient experience in Wales

Research Question:
What differences (if any) do people living in rural areas encounter before, during and after a cancer diagnosis, compared to their urban counterparts?

Project Plan
Four Key Stages:

stage 01	stage 02	stage 03	stage 04
Establish Research Network	Developing understanding of rural cancer patient experience	Primary Research: Interviews, Focus Groups, Surveys	Analysis and Reporting

The evaluation runs from July 2023 - October 2025

Wales Literature Review
Key Themes Identified from the Wales Literature:

- Urban-rural Mortality
- Prescribing and Referral variation
- Transport & Travel
- Palliative Care

Discussion Points:

- Geographical and spatial analyses may imply demographic and economic homogeneity that does not exist
- There is a paucity of existing research relative to the terms selected for the search
- Rurality as a determinant may not always translate to health disadvantage but combined with contextual and population factors (inclusive of social and structural determinants) can be resultant in negative outcomes and experiences for rural populations
- A critical research space exists in exploring qualitatively the experiences of individuals and communities in the Mid Wales area

International Literature:
The search terms generated the following conceptual diagram illustrating the breadth of themes relating to rural versus urban cancer experiences:

These themes were then simplified for review into four key areas:

- Barriers
- Supportive Care Needs
- Interventions
- Cancer Mortality / Survivorship

Case Studies / Focus Groups
Discussions held with:

- Cancer Patients from across Mid Wales
- Families / Carers of Cancer Patients
- Healthcare Professionals delivering services to cancer patients living in Mid Wales

Main issues and challenges identified:

- Accessibility
- Screening and treatment
- Transport and travel
- Cost and time
- Impact of community - support and stigma

Findings and Recommendations

- Outreach services are crucial in rural areas in terms of:
 - Education and information
 - Screening advice and access
 - Delivery of care / treatment
 - Support - all aspects
- Need to remove the stigma of cancer and encourage conversation
- Transport and access to services is crucial, with rural areas having inequitable accessibility
- Patient-centred solutions must be tailored to the individual and need to be prioritised
- There is a need for accessible Rapid Diagnostic Clinics / Centres in rural areas
- The use of Mobile clinics / treatment units should be normalised for rural populations
- More consistency is needed in terms of health pathways, particularly at a Primary Care level
- Supportive networks, such as the Powys' Improving the Cancer Journey group, should be widely adopted; identified best practice models (e.g. Farming Cancer Network) need to be emulated
- Policy change is needed at a National level, with adoption of a rural lens for cancer policy (e.g. Northern Ireland example)
- There needs to be greater inclusion of rural cancer patients in clinical trials and research
- There is a need for more research into rural cancer issues, e.g. reasons for late presentations
- More work needs to be done on prevention and holistically addressing the social determinants of health, with many cancers preventable

In addition, findings from the Rural Cancer Patient Experience research were presented in Poster format at the Macmillan Professionals Conference held in the International Convention Centre (ICC) in Birmingham on the 23rd & 24th April 2026. Attendance was again fully funded.

RCHW officially launched the **Macmillan Rural Cancer Patient Experience in Mid Wales** at the **Macmillan Rural Cancer Symposium** held in the Metropole Hotel in Llandrindod Wells on 16th June 2026. If you wish for a copy of the report, please email anna.prytherch@wales.nhs.uk.

RCHW had been commissioned by Macmillan to organize the Symposium, which was a great success, with 53 people attending the interactive day of workshops and presentations.

Recommendations from the Rural Cancer research were the focal point, with prioritization undertaken of what actions to take next. Further dialogue is being held with Macmillan and other potential funders to see what could possibly be funded to improve the rural cancer patient experience.

There was enthusiasm also for establishing a Rural Cancer network in Mid Wales and a questionnaire was sent out to attendees to gauge interest.



MACMILLAN RURAL CANCER SYMPOSIUM

Tuesday 16th June 2026
10am-4pm

Metropole Hotel, Llandrindod Wells, Powys

AGENDA:

- 10:00** Registration and Tea/Coffee
- 10:30** Welcome
- 10:40** Overview of Macmillan's work
Kate Williams, Macmillan Strategic Engagement and Improvement Manager (Wales and South West England)
- 11:00** Launch of the Macmillan Rural Cancer Patient Experience
Anna Prytherch, Head of Rural Health and Care Wales
- 11:30** Interactive exercise and feedback
- 12:00** Lunch / Networking
- 13:00** The Rural Communities Cancer Project in Wales
Rachael Aka, FCN Cymru & Macmillan
- 13:30** Q&A / Discussion
- 13:45** Improving the Cancer Journey in Powys
The ICJ Programme Team
- 14:15** Q&A / Discussion
- 14:30** Tea / Coffee
- 14:45** Workshop on "What next?"
- 15:30** Feedback and Reflection
- 16:00** Close

Attendance at the event is free, however you will need to book your place via the following link:

[Book Here for the Macmillan Rural Cancer Symposium](#)



- A review of the Pharmacy provision across Mid Wales has been undertaken and a comprehensive report produced, along with an infographic of the Pharmacy service provision across Mid Wales. If you wish for a copy of the report or the infographic, please email mari.lewis2@wales.nhs.uk.

- Three **Alzheimer's Research UK (ARUK)-funded dementia research events** were held across Mid Wales, having taken place on 3rd February (Aberystwyth University), 10th March (Coleg Meirion Dwyfor, Dolgellau) and 7th April 2026 (Theatre Hafren, Newtown). In addition to presentations on the work of RHCW and the scoping review of Dementia Services across Ceredigion, Gwynedd and Powys (specific to each location), ARUK funded researchers shared their research findings on the following topics:
 - Plasmalogen Lipids and Synapse Function: Exploring Novel Therapeutic Avenues for Alzheimer's Disease - *Dr Roberto Angelini, Swansea University*
 - Using Fruit Flies (*Drosophila Meganogaster*) to Understand Genetic Risk for Alzheimer's Disease - *Dr Owen Peters and Dr Gaymor Smith, Cardiff University*
 - From blood cells to brain cells: uncovering the earliest changes in the brain that happen during Alzheimer's Disease - *Dr Natalie Connor-Robson, Cardiff University*

In total, over the 3 events held in Aberystwyth, Dolgellau and Newtown (funded by ARUK, organised and delivered by RHCW), 94 individuals registered to attend, with 70 actual attendees from a range of organisations (third sector, private and public sector, students etc). Feedback received was overwhelming positive and the events have encouraged follow on engagement through:

- Presentation on Dragon 470 Radio in Dolgellau on the Gwynedd scoping and the ARUK funded networking events (15th April 2026)
- Invitations to extend the dementia scoping work to include case studies from people living with dementia and their carers / families
- Coleg Meirion-Dwyfor students planning a visit to the dementia fly labs at Cardiff University, with early discussions also taking place with Aberystwyth University Nursing students
- Engagement and strong links built with ARUK funded researchers based at Cardiff University who want to work more closely with people living rurally in Mid Wales, not only for dementia clinical research trials but also NMD.

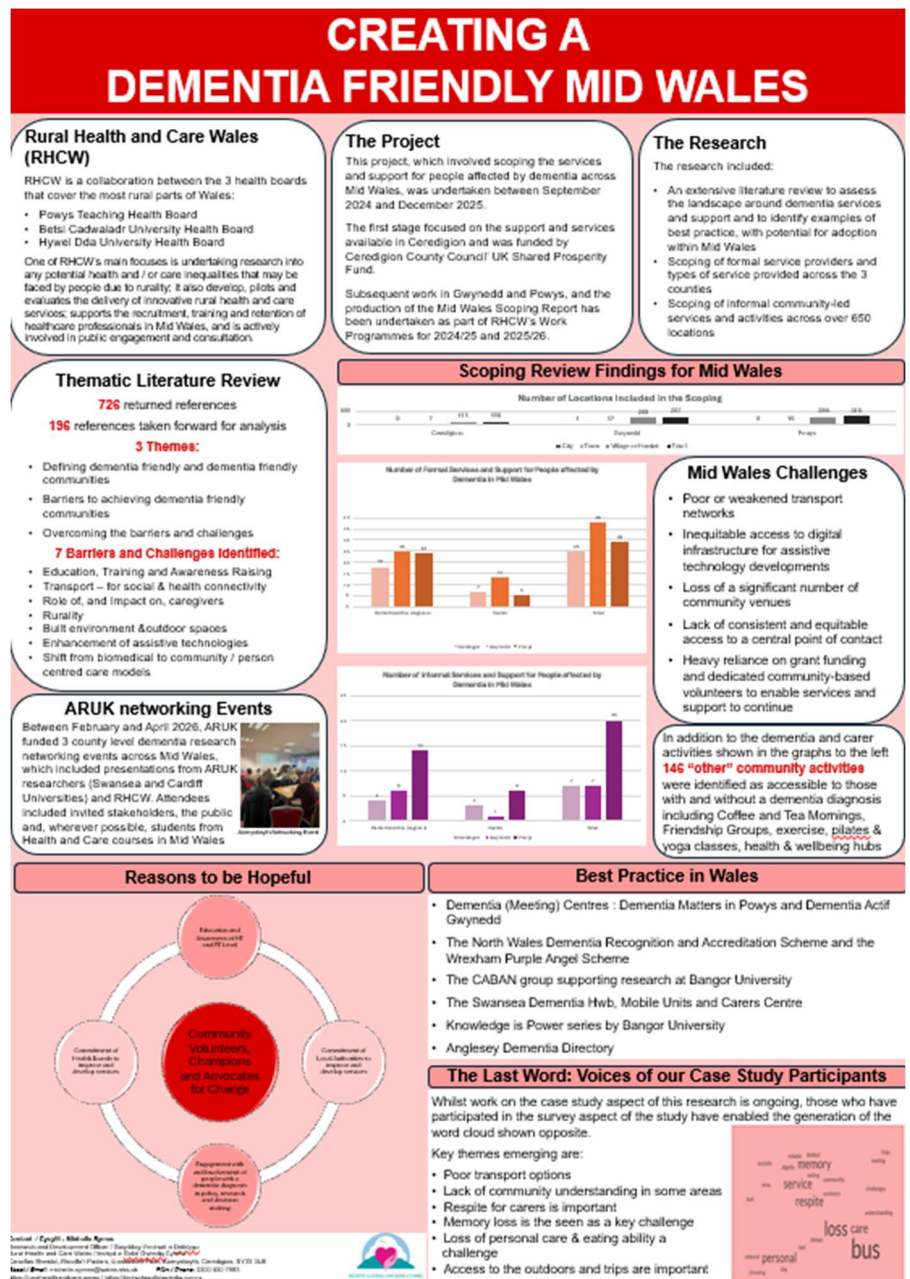


Fig.1: Word cloud feedback received for the three events

- The scoping work on **dementia services across Mid Wales** has been completed, with feedback obtained from a range of relevant organisations, including local authorities and service providers. The report is currently undergoing final editing and will be circulated to members in due course.

A Poster depicting the work was presented at the Lincoln Institute for Rural and Coastal Health (LIRCH) Hippinghold Conference on 22nd April 2026 and the final report will be presented to the RHCW Stakeholder Group at its June meeting and thereafter to the Mid Wales Planning and Delivery Executive Group (MWDEG).

Work has also been ongoing on developing case studies from across Mid Wales, with contributions now received from participants in Gwynedd and Powys. In addition to a questionnaire format enquiry, some of the case study engagement has been via adoption of a focus group approach to capture opinions and shared experience; a first draft of the case study report has been produced.



Aim 2: Care Closer to Home

- *create a sustainable health and social care system for the population of Mid Wales which has greater focus on care in the right place.*
- The **Sustainable Communities / Cymunedau Cynaliadwy** project (Regional Integrated Fund (RIF) funded) in Lampeter, Ceredigion was completed on 31st March 2026, followed by a three-month interim period whereby RHCW provided background support for the initiative to continue, with currently regular attendees taking on board the running of the social mornings.

A final report on the project has been produced; in total, 56 social mornings were held between February 2025 and March 2026, with support provided to 52 individuals in the Lampeter community (15 males, 28 females and 9 unidentified).

Additional RIF funding has been secured by RHCW for 2026/27 (£37k) to continue to emulate the model of support in other communities in Ceredigion, based on the LiCoSS toolkit that has been developed (below):

The toolkit is a model that can be used for rural communities seeking to instigate self-supportive activities for vulnerable residents and is based on the experiences and lessons learnt through this and previous community resilience projects RHCW has delivered and studied.



In taking the Sustainable Communities forward in 2026, 4 communities have been identified in Ceredigion (Tregaron, Talybont, Ffostrasol and Llanon), with consultation underway via engagement with community groups in each locale, with 2 communities to be selected for ongoing support.

- Analysis of the **GP / Primary Care provision across Mid Wales** survey has been completed, with a Poster of findings produced that was displayed at the Royal Welsh show (RHCW stand), with a presentation also made on findings at the Wales Institute of Social Economic Research and Data (WISERD) conference held in Cardiff on 8th and 9th July 2026.

Anna Prytherch
Head of Rural Health and Care Wales



- ▶ To develop a clear picture of GP and Primary Care provision across Mid Wales and to outline recommendations for improvement from a regional perspective
- ▶ To include analysis of:
 - ▶ A review of Primary Care in Wales, including key strategic documents and guiding legislation / models of delivery
 - ▶ A survey of Mid Wales GP practices
 - ▶ Accessibility of GPs in Mid Wales, focussing on distance travelled (SAIL data team)
 - ▶ Accessibility of GPs in Mid Wales, based on distances travelled and public transport options, including time
 - ▶ Analysis of models of best practice in the delivery of GP / Primary Care services in rural areas (literature review)
 - ▶ Recommendations and development of a Plan of Action for GP and Primary Care in rural Mid Wales

- ▶ In 2019, the United Nations estimated that 3.4 billion people across the world lived in rural areas
- ▶ Rural residents generally have poorer health outcomes and higher mortality rates than urban dwellers (World Health Organisation, 2010)
- ▶ Regions with stronger primary care services have improved health outcomes, lower costs and reduced inequity in health (Starfield et al., 2005)
- ▶ Mid Wales is a sparsely populated, rural area, with an elderly demographic with increasingly complex health needs
- ▶ Rural areas, including Mid Wales, have more profound GP recruitment and retention difficulties
- ▶ Mid Wales, and generally most rural areas, face additional accessibility issues in terms of geography and accessibility of hospitals / healthcare sites, road infrastructure, transport issues and digital connectivity
- ▶ Focus is needed on improving healthcare accessibility and ensuring equitable quality of care for people living in rural Mid Wales



Defined the Welsh NHS Confederation (2012) as: "the first point of contact for healthcare" (NHS at individuals' entry point).

Also referred to as an "anchor institution" (Welsh NHS Confederation, 2020).

Welsh Government strategy "A Healthier Wales: our Plan for Health and Social Care" (2018, updated 2024) calls for delivery of more community-based health and care services, that are integrated and co-productive.

National "Primary Care Model for Wales" – a place-based approach with emphasis on care closer to home, using collaborative multi-professional teams.

Strategic Programme for Primary Care – co-ordinates the implementation of the Primary Care Model for Wales, with identified workstreams, e.g. prevention, digital technology and workforce development.



- In 2023, 24 GP practices received 29 million calls and attended 18 million appointments (primary Care Information Portal, <https://pcip.nhs.uk>)
- In February 2025, there were 1.6 million GP appointments every month – equating to more than half of the population of Wales seeing a GP every month
- GP recruitment and retention a national crisis
- Victoria Kirby, CBE, President of the Royal College of General Practitioners, says: "The challenge of ageing demographics with increasingly complex health needs – leading to a real crisis in practice" – part time working
- BMA campaign in 2024 "Save our Surgeons" – calling for increased funding, investment in the workforce and improved working conditions for GP's
- July 2025, Senedd's Health and Social Care Committee launched major inquiry into the growing crisis facing GP practices in Wales
- Royal College of General Practitioners (RCGP) Cymru Wales described general practice as in "crisis" in the "Chw" (2025)
- RCGP issues even more acute

Wales has fewer GPs per 1,000 people than the OECD average

Additional GPs needed to meet OECD average of 1 GP per 1,000 people

Source: NHS

3,700

800

NHS © 2019

Additional GPs needed to meet OECD average

Region	Cluster	No. Population	% Whites	% Mid Whites	% No Whites
West		3,798,182			
Mid West		208,014	8.52%		
SE Mid		715,055	21.87%		
Midwest		18,865	0.57%	0.98%	
FW		147,865	4.30%		
	North Plains	88,156	2.77%	21.71%	
	Mid Plains	30,140	0.97%	14.65%	
SE Mid		488,796	12.16%		
Mid-Central		45,849	1.38%	22.88%	
South-Central		47,519	1.46%	22.78%	

Mid Wales region includes the following clusters:

- Remonstrypd parts included in research
- North Ceredigion
- South Ceredigion
- North Powys
- Mid Powys

[illegible]

- Survey of all Mid Wales GP practices conducted in 2023 (n = 27)
- Electronic mailings x and personal visits, where paper copies were distributed
- Phone calls and follow ups
- 33% response rate (n = 9)
 - All "partnership" models
 - Nearly 90% offer GP training placements (n=8)
 - 50% noted issues with recruitment (n=8)
 - Funding and financial pressures also noted as major challenge
 - Diabetes, Depression and Mental Health biggest challenges for patients
 - All on NHS Wales App, with different levels of functionality

- ▶ 55% had vacancies, mainly for GPs
- ▶ Retention of Receptionists noted as particularly difficult
- ▶ Between 80 - 300 telephone contacts per day per practice
- ▶ Only 2 were dispensing Practices
- ▶ Varied supplementary services offered, mainly vaccinations
- ▶ Limiting factor - national GP survey at same time
- ▶ Time constraints cited for non-completion of survey

Been trying to recruit a salaried GP for nearly 1 year - we have had several applicants but they are all from far away not willing to move to the area.

Challenging newly experienced/qualified nonplanning senior team members and into leadership roles

"GPs and Practice Managers need to be at the heart of decision making when it comes to health boards developing local services, these decisions should be clinically led, based on population need and service gaps."

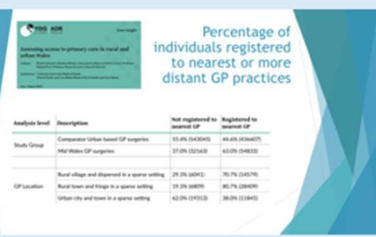
- Do individuals use their nearest GP surgeries in rural areas?
- How far do people travel to attend their GP surgeries – are they accessible?
- How does this compare to distance travelled by patients to the GPs in more urban areas?

Data

- Data from SAIL Databank, report produced by SAIL researchers (Ródrí Johnson, Rosanna Bailey, Jane Lyons *et al.*, 2023)
- Initial cohort of 21 GP practices from Mid Wales, filtered to 15
- 86,996 registered individuals in the 15 rural GP practices; urban comparison used 136 GP practices with 979,451 patients

Findings

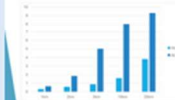
- 63% of rural patients registered at GP practices closest to their home, compared to 45% of urban patients (limited options / accessibility?)



High demand with minimal staff to meet the needs, patients more demanding with higher expectation.

Still managing to provide a high standard of care to our patients, and create an ethos of learning, sharing and development of our team despite the incredibly challenging landscape for rural, general, dispensing practice

- Additional work undertaken with Dr Angela Cull, University of Otago, Christchurch, (Dept of Population Health) via a THIRN (Transport and Health Integrated Network) secondment
- 34 GP practices (rural, Mid Wales) analysed
- Mean number of GPs within distance threshold:



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Summary

Compared to all of White, distances that need to be travelled to reach the nearest GA_0 are longer for Blacks and slightly longer for Hispanics. There are almost twice as many GA_0 s that are more available overall. Long distances and poor public transport provision lead to reliance on private car to access health facilities. This is a challenge, in particular for an ageing population who may be increasingly unable to drive. Long distances, reliance on car – poor public transport, issues with ageing population, may be unable to drive. High levels of car dependence can have negative effects on individual, population and environmental health and should be considered in efforts to promote sustainability within the health system. This report has also considered the importance of community transportation in later health, which is an important component of access to care, where the focus here was on distances, assuming they travel is necessary at some point.

Recommendations

Recommendations

1. The recruitment and retention of GPs and an adequate primary care workforce must be a key priority
 - continue with longitudinal placements of medical students in training (e.g. CARER scheme at Cardiff University; RHIME at Swansea University) to embed rural exposure
 - work with the Graduate Entry to Medicine and widening participation programmes to encourage "local" people to apply to study for medicine (rural dwellers linked to retention)
 - improve the provision of local training – could there be a medical school in Mid Wales? CPD options – regional programmes?
 - develop a Rural Specialism in Medicine that meets the specific needs of Mid Wales (akin to Australia's new Rural Generalist qualification)
 - encourage medical students and newly qualified healthcare professionals to embed in rural communities through a mentoring / befriending scheme
 - create more flexible work opportunities across the region e.g. work across health boards, job experience days etc.
 - consider shared roles for GPs across the region, building resilience into provision

Recommendations

2. Greater cross-region pollination of cases of best practice and shared learning should be encouraged
 - roll out the Multi-Agency Teams (MAT) or Multi-disciplinary Teams (MDT) models across the region, e.g. Borth Hub / Lampeter MAT cited as models of best practice
 - embed integrated community work in the rural model of delivery by creating community hubs for multi-disciplinary and multi-agency teams
 - allow for innovation and build confidence in new processes (risk / trust)
 - set up annual regional cluster meetings
 - actively build connections and integrate primary care with secondary care to improve communications and relationships
3. There is a need for further research and monitoring of GP and Primary Practice in rural Mid Wales to support the sector and build cohesion with secondary care



- The work on assessing public and community transport in Ceredigion, funded by **IMPACT (Improving Adult Care Together)** has been completed. Just under 60 people attended the engagement events held in Borth, Aberystwyth, Tregaron and Llandysul, with over 100 participating in the public and community transport surveys. In addition to engagement with individuals, the work has included close liaison with Lloyds Coaches, Richard Bros, Transport for Wales, Ceredigion County Council, Community Transport Association, Hywel Dda University Health Board (HDdUHB), PACTO and Dolen Teifi. Please contact michelle.symes@wales.nhs.uk for a copy of the final report.

Aim 3: Rural Health and Care Workforce

- *create a flexible and sustainable rural health and care workforce for the delivery of high quality health services and care services.*
- RHCW is supporting a PhD study that is being funded by the **Women's Health Research Wales Centre** at Cardiff University ("*Reducing late presentations for health issues in rural communities of women through social and community network activation*"), with ML, Research and Development Officer for RHCW, awarded the scholarship to undertake the research, to commence in October 2026.
- RHCW again hosted a **GEM (Graduate Entry to Medicine) event** with Swansea University on 1st July 2026, promoting this postgraduate route to medicine to people living across Mid Wales, where traditionally very few applications are received. The intensive course is open to graduates', people of all ages and from all disciplines. Last year's event instigated 4 applications for places on the course from Mid Wales. This year's event was hybrid, with all those registered opting to attend online, therefore it became an online only event.

In addition to promoting GEM, Swansea University's new route to study Medicine for school leavers (a pilot with Powys Teaching Health Board (PTHB) and HDdUHB), was also publicised.

Aim 4: Hospital Based Care and Treatment

- *create an effective, efficient, sustainable and accessible Hospital Based Care and Treatment service for the population of Mid Wales, with robust outreach services and clinical networks*
- Following the unsuccessful bid for a Digital Inclusion Wales Grant to develop the model of **Virtual Rural Healthcare** across Mid Wales, an Expression of Interest was submitted to “Contracts for Innovation Cymru” on 28th May 2026, following an initial exploratory meeting with Joy Browning, Innovation Partnership Manager, Contracts for Innovation, also attended by Sarah Bartlett. The Expression of Interest (EOI) was successful and an invitation was extended to present in “Dragon’s Den” format on the proposal in Cardiff on 29th July 2026. Whilst positive feedback was received, the funding was not awarded.

A presentation was also made to the **Mid Wales Clinical Advisory Group** on 22nd June 2026 on the proposed model of Virtual Rural Healthcare, with further engagement with the health boards encouraged.

Aim 5: Communications, Involvement and Engagement

- *ensure there is continuous and effective communication, involvement and engagement with the population of Mid Wales, staff and partners.*
- Plans are underway for the **RHCW Conference 2026**, which is being held on the 10th and 11th November 2026, with the venue secured (Montgomery Pavilion, Royal Welsh showground, Builth Wells, Powys, LD2 3SY) and Plenary speakers being invited. As in recent years, the Conference will be held in hybrid format, both online and in person.

Mabon ap Gwynfor MS, Cabinet Minister for Health and Care, has agreed to officially open the Conference on 10th November and the Chief Executives of the three health boards delivering services across Mid Wales (Betsi Cadwaladr University Health Board (BCUHB), PTHB and HDdUHB) will again participate in a Panel discussion on the first day of the Conference.

The “Call for Papers and Posters” for the Conference was circulated in early July, with the closing date being 25th September 2026. The Conference title and themes are listed below:

Living Well in Rural Wales

- *working to improve the health, care and wellbeing of our rural populations*
 - The delivery of Integrated Health and Care services in Rural areas, including cross-sector, multi-agency and / or multi-disciplinary working
 - The role of Rural Communities and unpaid Carers in Health and Care
 - Advances in Artificial Intelligence (AI), Virtual technology and Telehealth / Telemedicine initiatives that support remote delivery of Health and Care services in Rural areas
 - Social / Green Prescribing and the impact of Art, Crafts and other non-clinical interventions on Health and Wellbeing

- Recruitment and Retention of Health and Care professionals in Rural areas
 - Education, Training and Continuous Professional Development for Health and Care professionals working in Rural areas
 - Addressing the broader Social Determinants of Health and the Preventative Agenda in rural health, care and wellbeing
- Two webinars have been held during 2026, these being the **RHCW Winter and Summer Webinars** that were held on 27th January and 28th July 2026, posters below:

Rural Health & Care Wales Winter Webinar

Tuesday 27th January 2026
10am – 12 noon



GWEMINAR WEBINAR

Transforming Care: Acute Services in a Community Setting



Manon Clarke
Trainee Advanced Nurse Practitioner, BCUHB

Manon Clarke is a Trainee Advanced Nurse Practitioner working with the MEC team, an innovative "hospital at home" service on Ynys Môn. The MEC team is recognised by Betsi Cadwaladr University Health Board for its outstanding enhanced care pathways for respiratory patients and those with heart failure (HF). These initiatives deliver acute-level care in patients' homes, improving outcomes and patient experience, reducing pressure on hospitals.

Manon is currently developing advanced clinical skills, including complex assessments, decision-making for patients with acute and chronic conditions. She plays an active role in the team's pilot project enhancing care pathways for respiratory patients and those with heart failure (HF). These initiatives are bridging the gap between acute and community services, ensuring seamless, patient-centred care.

Her work is supported by the leadership of ANP Rhys Jones, who has brought 25 years of acute experience to the community, shaping the service and mentoring colleagues. Manon's presentation will provide insight into its impact on patient care, and the future of advanced practice in community settings.

The Rural Cancer Patient Experience



Anna L. Prytherch
Head of Rural Health and Care Wales

In December 2025, Macmillan noted that there are almost 3.5M people living in the UK, which equates to an increase of 0.5M since 2020. 420,000 people are diagnosed with cancer every year. In 2011, the National Cancer Intelligence reported distinct differences in cancer diagnosis in rural vs urban areas with cancer rates in people living in rural areas showing an increase and breast cancer incidents higher by 8% and 11% respectively, with colorectal cancer 6% higher but equitable in males. Mortality data demonstrates similar results, with mortality rates for cancer significantly lower in urban compared to rural areas.

In 2023, Macmillan commissioned RHCW to undertake work that explored the experience of people that have or have had a cancer diagnosis and that of their carers and families. This presentation of the research undertaken, the outcomes and recommendations of steps that are needed to improve patient experience. Anna is Head of Rural Health and Care Wales and led on the development of the research and final submission of findings.

Agenda

10am	Welcome & Introduction
10.15am	Transforming Care: Acute Services in a Community Setting
11am	The Rural Cancer Patient Experience
12 noon	Close

BOOK HERE for the RHCW January 2026 Webinar

<https://ruralhealthandcare.wales>
contact@ruralhealthandcare.wales

Rural Health & Care Wales Summer Webinar

Tuesday 28th July 2026
10am – 12 noon



GWEMINAR WEBINAR

Clinical Trials at Bronglais General Hospital: Delivering Research in Rural Wales



Ronda Loosley
Research Team Lead Bronglais, Hywel Dda University Health Board

Discover how Bronglais General Hospital has developed a thriving clinical research programme that brings important clinical trials to patients in rural Wales. This presentation will share the team's journey, the challenges and successes of delivering research in a rural setting, and how collaboration has enabled Bronglais to become a trusted site for national and international clinical trials.

Ronda has been a member of the Research Team at Bronglais Hospital for over ten years, playing a key role in the growth and diversification of the hospital's clinical research portfolio as it has evolved to meet the changing needs of the local population. With extensive experience in establishing and delivering both interventional and observational clinical trials across a broad range of specialties, Ronda is passionate about ensuring that patients in rural communities have equitable access to high-quality clinical research opportunities.

Skin Cancer and the opportunity of digital technology to support care closer to home



Dr Kate Wright
Executive Medical Director, Powys Teaching Health Board

Dr David Miller
National Clinical Lead for Primary Care, NHS Wales Performance & Improvement

Rates of skin cancer are rising and traditionally a person with a possible skin cancer might have to visit a hospital twice. The first attendance, for diagnostic assessment, and the second for minor surgery treatment. This can be both time consuming and inconvenient for the population, particularly rural communities, and inefficient for healthcare providers. Recognising this and the opportunity for improving patient experience, Powys Teaching Health Board, has adopted an innovation of using a special digital camera called a 'camera dermatoscope' in GP Surgeries to take magnified digital images of possible skin cancers for remote specialist review. Find out how this approach is improving patient experiences in Powys.

Kate Wright is Executive Medical Director with Powys Teaching Health Board and Chair of the Mid Wales Joint Committee's Clinical Advisory Group. David Miller qualified in Medicine from the University of Nottingham in 1998, gained an MD from Cardiff University in 2005 and is a member of the Royal College of Surgeons of Edinburgh and the Royal College of General Practitioners (UK). Based in Wales for the last 27 years, he currently holds the post of National Clinical Lead for Primary Care (Wales).

Agenda

10am	Welcome & Introduction
10.15am	Clinical Trials at Bronglais General Hospital: Delivering Research in Rural Wales
11am	Skin Cancer and the opportunity of digital technology to support care closer to home
12 noon	Close

BOOK HERE for the RHCW Summer Webinar 2026

<https://ruralhealthandcare.wales>
contact@ruralhealthandcare.wales

- RHCW had its usual stand at the **Royal Welsh Show** (July 20 – 24, 2026) at Builth Wells, Powys this year, with the Poster below noting the events that were held at the stand:

The stand exhibited latest research findings undertaken by RHCW and also held its popular children's colouring competition that focused on keeping healthy.



RHCW STAND EVENTS


IECHYD A GOFAL GWLEDIG CYMRU
RURAL HEALTH AND CARE WALES

MON 20th	10am - 12pm STUDYING MEDICINE AT SWANSEA UNIVERSITY Hear about the different routes to study medicine at Swansea University & learn how to measure your heart rate. Free blood pressure checks will also be offered! 2pm - 4pm RURAL TRANSPORT REVIEW Learn more about RHCW's Review of Ceredigion's Community Transport. 
TUE 21st	10am - 12pm WELLBEING WORKSHOP Join us for an interactive session on the importance of maintaining your wellbeing. 2pm - 4pm  DEMENTIA FRIENDLY MID WALES Learn more about our review of Dementia support across Mid Wales.
WED 22nd	10am - 12pm RHCW STAKEHOLDER GROUP An invitation to Stakeholder Group members, and beyond, to join us for a refreshment and a chat.
THU 23rd	10am - 12pm STRONG COMMUNITIES, HEALTHY FUTURES Pop in during our interactive session on the importance of building thriving rural communities and the launch of the Sustainable Communities Toolkit. 

Children's Colouring Competition!

Free refreshments!

Rural Health and Care Wales - Tel: 0300 430 7983 - Email: contact@ruralhealthandcare.wales
Website: <https://ruralhealthandcare.wales>

AP attended a number of events at the Show, representing RHCW, as below:.

- Being a **Panel member** at the **Macmillan Cancer Support and Farming Community Network** event (20/07/26) – based on the research undertaken on the rural cancer patient experience
- Launch of the **Royal Agricultural Benevolent Institution (RABI) FarmersAid App**, attended by Llyr Gruffydd MS, Cabinet Minister for Rural Resilience and Sustainability (21/07/26)
- Attended the **DPJ Foundation** 10th Anniversary Conversation (21/07/26) that considered farmers' mental health amongst other issues
- Invited by Llais to participate in a **roundtable discussion** (18ppl) with **Mabon ap Gwynfor MS, Cabinet Minister for Health and Care** on "*Beyond distance: the hidden barriers facing low-income rural communities in accessing health and social care*" (22/07/26)