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## WELSH INSTITUTE FOR HEALTH AND SOCIAL CARE (WIHSC)

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The Welsh Institute for Health and Social Care (WIHSC) is part of the University of South Wales. Since 1995, WIHSC has existed to bridge gaps between academia, policy and practice.

### STRATEGIC INTENT AND VISION

The strategic intent of WIHSC is to be a key player in informing and influencing the implementation of evidence-based health and care services across the statutory, voluntary and independent sectors. WIHSC has a national reputation for impact as a leading health and care policy research institute, which is built on a robust financial platform derived from the delivery of excellent academic research, evaluation and consultancy.

We recognise that the following are critical factors in us delivering the strategic intent and vision:

- A **reputation** for excellence in research, evaluation and impact amongst key stakeholders – whether in government, health and care services, the media or the public
- An established **credible staff resource** including the collection of experts<sup>1</sup> who can be utilised to achieved the vision
- Achieving a measure of **academic impact** in order secure the role of the institute within the relevant research frameworks of the University and beyond
- A **strong, and growing, self-financing status** based on healthy revenues

### PRIORITIES

WIHSC has five priority areas reflecting our current research strengths and aspirations for new areas of work and influence.

#### 1. Prevention of escalating need

- Understanding the nature of services and how they can offset further (more costly) interventions.

*This is best demonstrated in our recent work evaluating the impact of the Integrated Care Fund ‘**Stay Well@Home**’ programme which runs across the Cwm Taf region and is designed to reduce escalating need through the front door of A+E.*

*In addition our action research study for a third sector mental health charity has helped to ensure that there is now core funding for **Step by Step**, a service preventing the further escalation of issues for single homeless people presenting to the local authority with moderate mental health problems.*

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<sup>1</sup> WIHSC enjoys the support of three Visiting Professors and two Visiting Fellows. Professor Alka Ahuja (Consultant Psychiatrist in Child and Adolescent Mental Health Services in Aneurin Bevan University Health Board) has been a part of the WIHSC team for many years. In addition, we have recently developed and appointed a WIHSC Expert Reference Group. Its members are Tony Garthwaite (Visiting Professor), Malcolm Prowle (Visiting Professor), Heulwen Blackmore (Visiting Fellow), Jeremy Felvus (Visiting Fellow) and Margaret Provis. The purpose of the ERG is to help WIHSC to realise its strategic intent and vision, and act as a critical friend and to review progress towards achieving its objectives.

## 2. Integration of health and care

- Analysing the ways in which the public, third and independent sectors are increasingly aligning to provide health and care services.

*Evidence of this comes from our recent study on the workforce integration of health and social care across Wales, **Working for a Shared Common Purpose**. The study was commissioned by UNISON Cymru Wales, and endorsed by the Cabinet Secretary for Health and Social Services at its launch.*

*Further, we supported organisations and public bodies through the **Strengthening the Connections programme** which provided networks, events and opportunities for collaborators to share experience and learn lessons about what works, where and why.*

## 3. Co-produced care and outcomes

- Reflecting on the changes in public services brought about by user- and citizen-led services and forms of support to deliver outcomes for people.

*Over many years WIHSC has run a series of citizens' juries which have provided a forum within which key issues of public policy can be discussed, debated and to some extent resolved. Most recently this focused on the crucial issue of **Antimicrobial Resistance and Stewardship** and the role of citizens.*

*Furthermore, our Health Foundation-funded research study to understand the impact of the **Prudent Healthcare** principles in practice focused in part of the way in which co-production has become (or has not become) integrated within the delivery of healthcare services.*

## 4. New models of care

- Providing an evidence-base upon which new modes of 'delivery' – whether new pathways, new teams, new technology, or new medicines – will improve outcomes.

*Service innovation has been at the heart of our work since WIHSC's inception. Working in partnership with the Swansea Centre for Health Economics, our UK-wide study of the impact of **Eye Clinic Liaison Officers** is one such study. We identified an evidence-base which has influenced the further implementation of this role within ophthalmology outpatient clinics.*

*Our study reviewing the approach to **Horizon Scanning for New Medicines** has impacted on the way in which the quartet of key stakeholders – policymakers in government, NHS organisations, the national therapeutics authority and the industry – will work together.*

## 5. Value-based care across the whole pathway

- Detailing the impact that new models of care have for pathways and the value of those pathways, expressed in financial terms.

*Understanding the ways in which the Third Sector have provided new pathways of care in many different areas across health and social care is a key part of our portfolio of projects. The **Discussion Paper** we wrote about this provides a useful insight into what is happening within the sector.*

*New pathways in the way services have moved from hospital to community settings is in line with principles of prudent healthcare and the approach of all the devolved administrations across the UK governments. Our work on **Community Cardiology** is noteworthy in this regard.*

### Professor Mark Llewellyn

Professor of Health and Care Policy ·  
Yr Athro Polisi Iechyd a Gofal

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