Innovative ways of delivering General Practice

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Prof Helen Stokes-Lampard PhD FRCGP

@HelenRCGP
Conflicts of interest

• I am Chair of RCGP & a Trustee
• I am Vice Chair of the Academy of Medical Royal Colleges
• I am GP Partner (GMS)
• I am a Prof at University of Birmingham & visiting Prof St George’s HMS London
Plan…

- RCGP, who we are, what we believe
- State of the nation
- Innovation in troubled times
- Vision for the future General Practice
- Sparkle…
Cum Scientia Caritas
RCGP Vision and Values

- **Vision:** *Excellence in general practice for patients worldwide*

- **Values:** We are the heart and voice of general practice, we promote the principles of holistic generalist care in partnership with other HCPs and our patients. Committed to equitable access to and delivery of high-quality and effective primary healthcare for all. Committed to the academic and practical development of high quality general practice.
RCGP Policy Priorities 2018

- **Workload**: of GPs, including their wellbeing
- **Workforce**: Expanding it by recruit, retain, return GPs and & build resilience
- **Campaign**: Shaping the future of General Practice…
Definition including focus on improving the experience of patients/carers/families, demonstrate clinical competence, assume responsibility for own and peers standards. Assume responsibility for wider environment…

Quality Improvement (QI) is a commitment to continuously improving the quality of healthcare by focusing on the preferences and needs of the people who use it... an evidence-based approach that helps... free up time to deliver initiatives and embed new approaches more effectively and efficiently... helps make the most of systems, organisations, talents and expertise to deliver better outcomes for patients.
Where are we going? NHSE view

Empowered to Stay Well and make well-informed choices

Voluntary sector: The 3rd workforce

Social Prescribing
Minor ailment scheme
Open Access Services e.g. physio
Care navigation

Redirection

Consider Self Care

NHS.UK
Patient Activation for LTCS
Community pharmacy

Apps and wearables
111 Online and 111 Hubs
Access to records via Patient Online

New Consult Models

Phone triage and care
Advanced Nurse Practitioner
Physician Associate

Online triage and care
Clinical Pharmacist
Mental Health Therapist

Attend A&E

Specialist support
Enhanced Advice and Guidance / Consult

Fewer patients see the GP

Community services

Access hub

• Additional GP / nurse capacity
• Locality MDTs
• Specialist Clinics
What’s in GPFV?

- Recruit/train 5,000 additional wte GPs
- 2,000 additional practice nurses & 3,000 AHPs
- Increase funding to GP by 14% in 17-18 and another 15% in 18-19 = £2.4bn pa
- QOF review / Indemnity fix / Support for GP wellbeing / Practice resilience / IT investment
- Will need to work differently – new models
- GPs need to work more collaboratively
2yrs in… What’s the GPFV?

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What will the future look like?

- Working ‘at scale’ the norm
- Acute vs chronic care more differentiated
- Massive increase in use of tech – a tsunami
- More flexible working (govt, pt and clinician led)
- More care based in the community
- More & varied HCPs in the GP team
- More time with patients who really need it - Enid
- Partnerships only one of several models of delivery of general practice services
Working at scale?

The majority: Nice idea, intuitive, but it's hard to change - need help / exemplars / pump priming / support & encouragement

Visionaries: Vanguards shining lights early adopters just doing it...

Ostriches: Not interested
Bright Ideas

- Innovations created on the frontline
- Tried and tested by healthcare professionals
- Demonstrated to have an impact on improving efficiency and/or care
New initiatives

- **Bright Ideas Awards**
  - Submissions open to identify innovations from the frontline
  - Tried and tested by healthcare professionals
  - Pioneering or high impact awards
  - RCGP facilitated small workshops for practices interested implementing a small number of ideas that alleviate the pressures on general practice

- **Innovators Mentorship Programme**
  - Submissions open for entrepreneurial GPs
  - 24 months of mentoring
  - 12 months of training in non-clinical skills
  - Accelerate clinician led products and services which address unmet needs in primary care
Innovation in action

Grass roots innovation:
• Tower Hamlets…3 decades but wow!

Vanguards programme (2015 – 50 sites)
• South Somerset Symphony - Yeovil
• Connected Care / Modality – Sandwell/Birmingham
• Lakeside Healthcare Superpartnership - Northamptonshire
• Nottingham – Better Together / Principia
• Better Care Together – Morcome Bay
What unites them?

• Vision of clinical leaders – bottom up
• Trusted by commissioners - empowered
• Ability to generate shared purpose – values driven teams
• Communication throughout the organisation
• Technology enabled / supported
• Pump primed
• Pragmatic targets
HSL Speech – Enid shaped care

• Narrative
• Loneliness & Social isolation
• Overmedicalisation
• Over regulation and de-professionalising GPs

‘Give us enough time, enough resource, enough people and enough professional support and I, we… We will give you great General Practice…’
Enid is 84, she has hypertension, diet controlled diabetes and arthritis in both hips.

Enid & Brian always visit together. They chime in on each others consultations and have shared their fair share of ups & downs.

Brian was Enid’s Rock. After Brian passed away, Enid started to visit more often.

It can be difficult when the computer is flashing with many different check boxes.

Weight & medications.

Listening to Enid it became clear not all of her problems were medical, she was also lonely.

Enid has connected with a community group and is doing well.

50% of premature death worse than obesity.

LONELINESS

Risk of premature death worse than obesity.

Akin to living with a chronic illness.

What can we do?

Helping patients make new social connections is invaluable.

(And the evidence shows it can improve health and well being.)

@EndLonelinessUK @RCGPAC @RCGP #nothinggeneral
I had a dream…

- Where patients are safe, secure and get the care and support they need
- Where clinicians and primary care staff felt fulfilled to reach their potential
- Where we cracked the access / continuity / quality dilemma
- Where medical records were fully integrated and communication seamless
- Where IT and innovation were introduced seamlessly
- All free at the point of delivery and need…
Tackling Loneliness:
A Community Action Plan