

REPORT TO THE HEALTH AND WELLBEING BOARD

31st March 2015

Prime Ministers Challenge Fund Improving Access to General Practice

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1. Purpose of Report

To provide an overview of the successful bid made by Barnsley CCG to the Prime Ministers Challenge Fund "*Improving Access to General Practice*".

2. Recommendations

Health and Wellbeing Board members are asked to:

- Read and note the proposed outline model designed to improve patient access to General Practice in Barnsley.

3. Introduction/ Background

3.1 Local Picture

- Barnsley is the only area in South Yorkshire to be below target in terms of primary care expenditure (-5%) compared to the national target allocation figure which equates to over £3m below target.
- Barnsley has a patient population of 248,787, the population has an extremely low number of GPs per 100,000 population compared with other parts of England. The average GP per 100k population in England is 65+ in comparison with 57 per 100K in Barnsley (Source: NHS England).
- A local Patient Experience Survey was carried out on Access to Primary Care. 72% of patients would like to be able to access Primary Care after 6.30pm on weekdays, 73% of patients would like access to a Saturday morning clinic and 41% patients would like to access to a Sunday clinic (January – March 2014).
- Continuous public engagement undertaken when initiating each project has provided the overall opinion that there is a struggle to obtain timely GP appointments and people like to receive care at their practice in familiar surroundings in a convenient location.

3.2 Barnsley CCG's Primary Care Strategy

NHS Barnsley Clinical Commissioning Group in conjunction with its member practices has an ambitious strategy for the further development of primary care in

Barnsley over the next five years. The goal is to realise a wider model of out of hospital primary care in which patients and the public in Barnsley receive fast, responsive access to primary care services, support to manage long term conditions, proactive and coordinated care, holistic and person centred care and consistently high quality care resulting in improved health outcomes.

The vision is a future in which primary care is allowed to deliver its full potential. It is for an integrated wider primary and community care offer, which is comprehensive and serving the full range of need found in the community, while doing more to reduce inequalities faced by Barnsley people and ensure parity of esteem for mental health care and support. It goes beyond medicine, reaching into communities and supporting people to live well long before they need healthcare.

This successful bid to the Prime Ministers Challenge Fund has provided the opportunity to support and achieve some of this ambition at pace and puts GP practices at the heart of shaping and delivering an improved primary care offer.

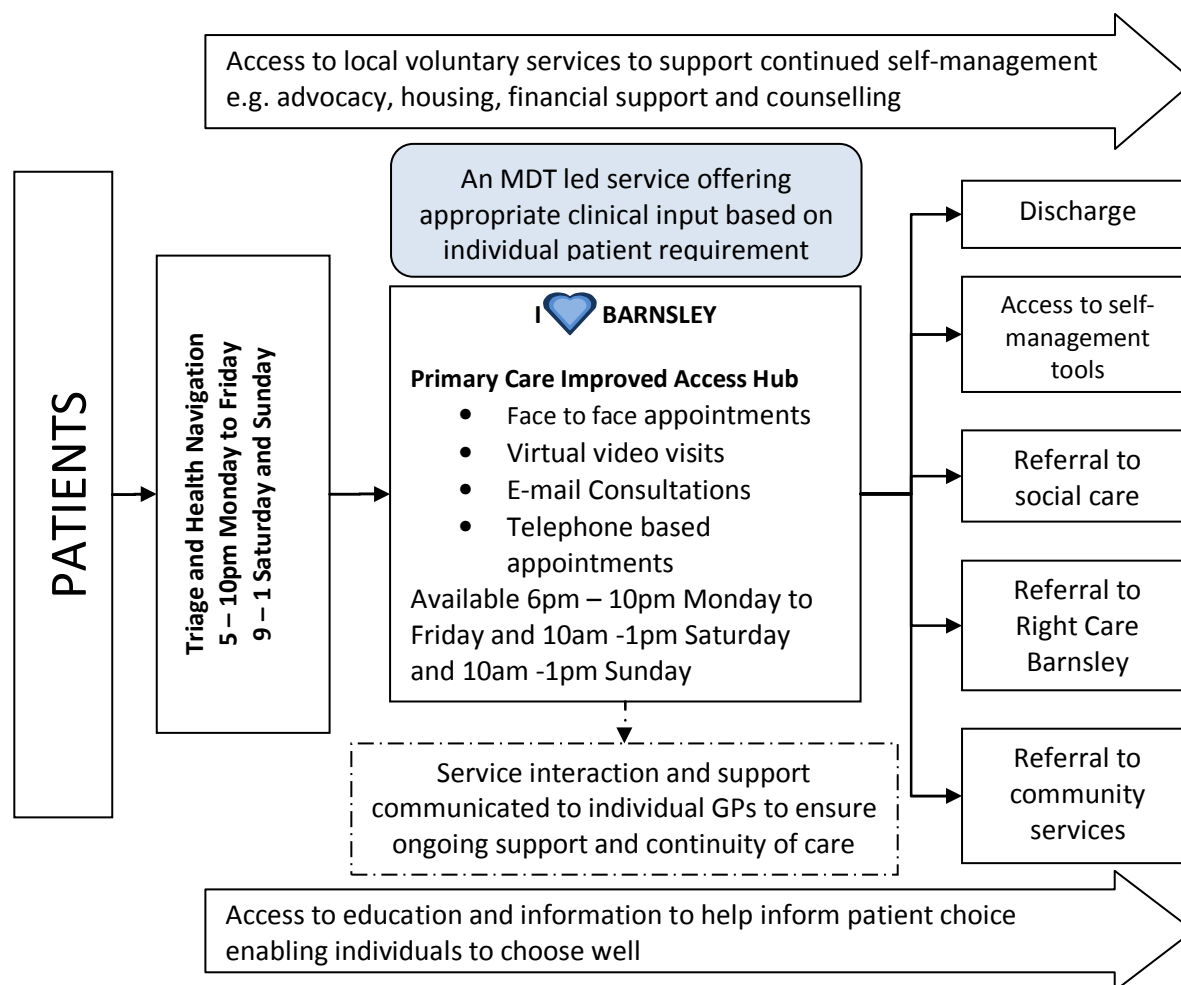
It is envisaged that the I HEART Barnsley model developed in partnership with key stakeholders creating physical and virtual Primary Care Improved Access Hubs providing improved out of hours care that are fully integrated with existing services will provide further capacity and support to Barnsley's system-wide resilience plans.

4. The proposed model

It is proposed to offer all Barnsley patients additional access to General Practice through two Primary Care Improved Access Hubs available between 5pm and 10pm Monday to Friday and 9am to 1pm Saturday (evolving to 9am to 1pm on a Sunday) offering an additional range of access opportunities for patients over and above what is already provided. There will be a mix of nurse triage and consultations which will include virtual video visits, telephone consultations, e-mail consultations, education for patients and carers and support for care homes.

Outside of core hours and from 6pm weekdays the Hub will also offer patients access to face to face appointments on a more routine basis at times additional to those currently provided at individual practice level. For ease of access, patients will be able to call a direct dial telephone number, call 111 or their own GP Practice. It is recognised however that an increasing number of patients are using the internet to access healthcare services; therefore the plan is to develop a service specific website allowing access to appointments and clinical information.

Access to the service will be managed through effective nurse led triage and care navigation. Patients will be directed to the most appropriate health care professional in the most appropriate way e.g. face to face or virtual appointment. It is anticipated that the triage element of the service will be aligned to a new Barnsley service, RightCare Barnsley, whose aim is to ensure the patient is seen in the right place and at the right time.



I HEART Barnsley will enhance the overall quality of service provision for the community. Patients will benefit from greater choice in relation to how they access care, thus improving patient experience. In some cases patients will be able to access care remotely, allowing them to receive care closer to home.

The pilot will create an additional 67,596 GP and nurse appointments each year for the 250,000 residents of Barnsley.

I HEART Barnsley will enhance productivity by reducing unnecessary face to face appointments. This will support work to ensure GP time is focused on patients most in need. Furthermore, if patients access support through their choice of medium they are less likely to fail to attend, thus reducing waste. The provision of an out of hour's hub should reduce presentations at A&E.

4. Development and Implementation

The rapid implementation of the service will be supported by Barnsley CCG's Service Development Team and overseen by the I HEART Barnsley Development Group. The team have offered support during the initial phase of the pilot until the full I HEART Barnsley operational team can be recruited. Using the CCG's Service

Development Team for support in the creation of I HEART Barnsley will ensure seamless integration into existing services and projects being created by the CCG.

Following the recruitment of the operational team a robust hand over will be made and the CCG's Service Development Team will move into a role of support and critical friendship. The team will be supported by I HEART Barnsley clinical leads including local GPs and community clinicians.

Plans for implementation have already commenced and will increase at pace once the funds have been awarded.

5. Conclusion/ Next Steps

To ensure that the I HEART Barnsley project has clear leadership, direction and engagement across the health and social care community an Operational Development Board will be established.

The Board will consist of key stakeholders derived from health and social care services across Barnsley and if possible will have public representation.

A project plan for the development and implementation of the model has been developed and will ensure that the project stays on track and delivers the outcomes specified in the bid.

The model has been developed using patient feedback, local health needs analysis combined with Barnsley Health and Wellbeing Board and CCG priorities. The model developed in partnership with key stakeholders will create physical and virtual Primary Care Improved Access Hubs providing improved out of hour's care which is fully integrated with existing services and will aim to deliver the following:

- Improved education for patients
- Support for Care Homes
- Better access seven days a week
- Widening access through multiple channels
- Ensuring people feel supported to manage their condition

Outcome Measures

- % of patients with an urgent query able to see a healthcare professional within 24 hours
- % of patients with an non-urgent query to see an healthcare professional within 48 hours
- % of patients using virtual visits and e-mail consultations
- Number of referrals by the service to alternative support services (non NHS)
- % information reconciliation within 24 hours of discharge from the service
- Ongoing measurement of A&E 4 hour wait target to identify potential impact
- % Reduction in routine appointment waiting time in primary care
- Patient satisfaction and feedback from surveys, e.g. Friends and Family Test