

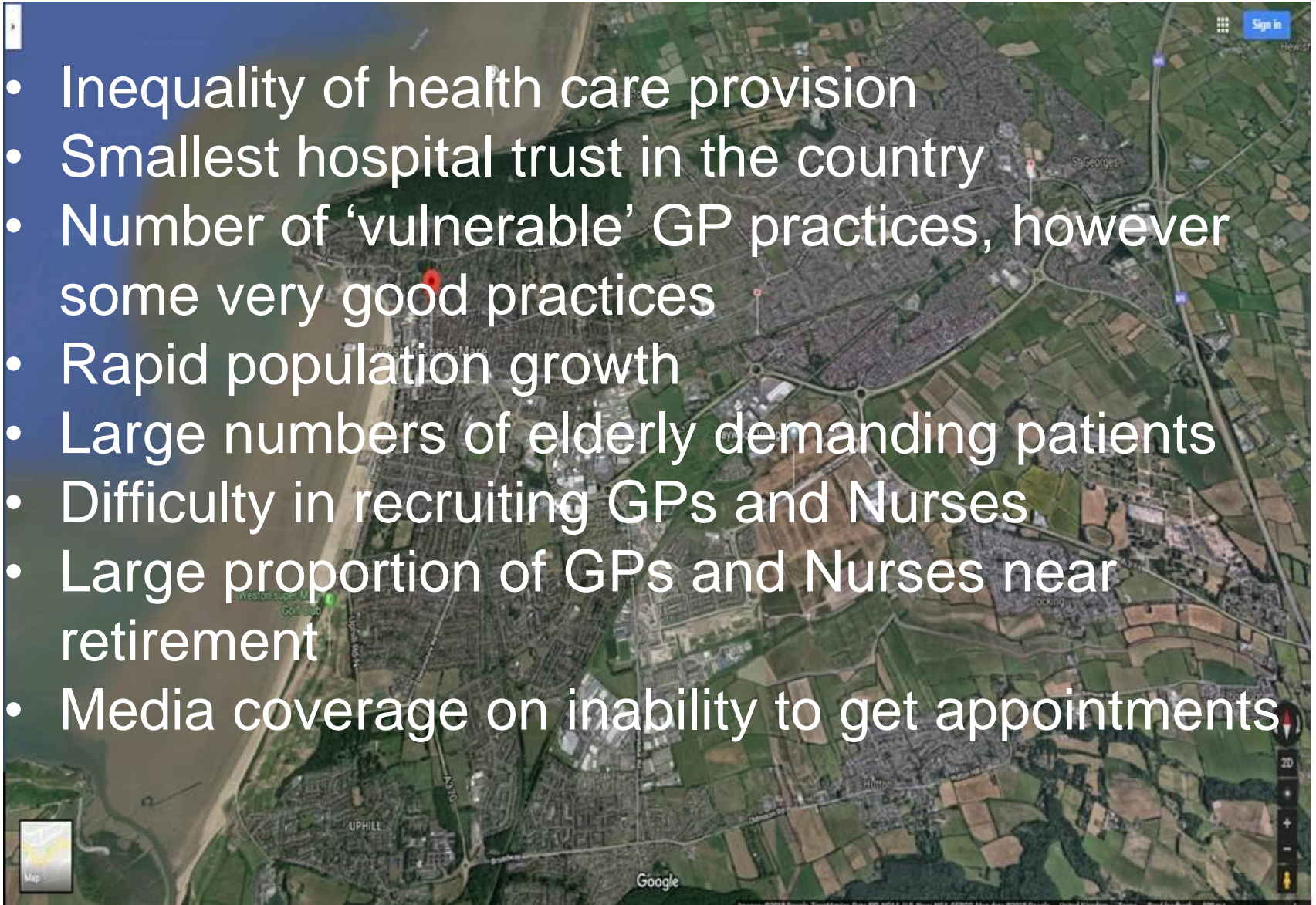
ISS and askmyGP project update

Healthwatch AGM
July 2019



Weston – Perfect Storm?

- Inequality of health care provision
- Smallest hospital trust in the country
- Number of 'vulnerable' GP practices, however some very good practices
- Rapid population growth
- Large numbers of elderly demanding patients
- Difficulty in recruiting GPs and Nurses
- Large proportion of GPs and Nurses near retirement
- Media coverage on inability to get appointments



Weston-super-Mare



Shaping better health

Locality Practices



Birth of ISS

- ETTF funding for new surgery on 'Villages' site
- Inequality of patient outcomes
- Risk of the 'domino' effect
- Creation of the 'Weston Way'
- Shared vision
- Restoration of previous good working relationships
- Building of trust
- Acceptance that change is a necessity and practices cannot survive on their own

The perfect storm?



Workload



Workforce



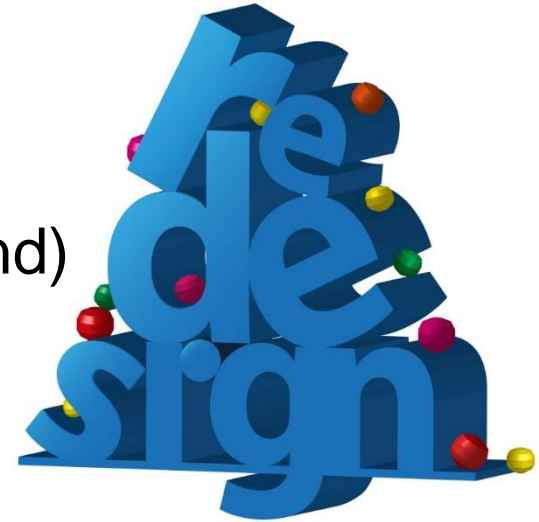
Financial

Climate Change



Front door

- Meeting need (not managing demand)
- Doing today's work today
- Digital access
- Enhanced continuity
- Access and continuity can be seen as alternative choices; this is a misunderstanding as both are essential attributes of Primary Care with each enabling the other. Good access enables continuity to be offered and high levels of continuity reduce demand and make access easier.



Turning off the tap



Clinician Led Plan

- The strength of the plan lay in the fact that this was determined by clinicians and led by them – it was not a top down CCG/NHSE solution imposed
- The drive to implement was forced by the timescale however there was a period of over 2 years pre-work with the practices
- Significant practice resilience issues
- Initially moving from a position of mistrust to recognition that collectively the practices were stronger together
- Passion and commitment by partners paramount

Programme Objectives

- Reduce the workload of practice staff, and GPs in particular, by introducing more effective workflow management
- Lay the foundations for continuing collaboration and convergence between practices as a Locality enabling improved patient care and enhanced sustainability and resilience
- Provide a consistent & improved robust technology base to all Locality practices
- Movement in 'hearts and minds' from all staff with belief that things are getting better and a willingness to continue to work and learn in primary care
- Create a 'brand' as a Locality (Pier Health) to improve external recruitment
- Improve retention and recruitment of both GPs and Nurses
- By successful delivery of the objectives of this project produce a template for change for other Localities within BNSSG

People



- Significant part of the programme is focussing on support to GPs and other clinical staff
- A series of initiatives include:
 - Training in personal effectiveness and leadership for GPs February - October
 - Coaching and mentoring for GPs commenced in March
 - Change management support for practice teams: January-March
 - Apprenticeship scheme linked to new career structure – Launch in September
 - Creation of portfolio career opportunities – Linked to Frailty Business Case
 - Development of a shared home visiting service - Q1/2 2019
 - Develop plans for trainees to encourage them to feel welcome as part of the wider Locality
 - Develop a Locality wide recruitment campaign: March - September

Process



- Major thrust of the project is to redesign the appointments process to both reduce workload on GPs and enable faster and easier access for patients
- All Locality practices committed to implement the new system over a three month period from January 2019
- The aim was to create a new approach to managing appointments which will be consistent across the Locality using the digital platform askmyGP
- Greater use of email and web based applications aim to reduce wait times for patients who have to currently phone in for information and appointments
- The new system includes revised processes to improve the efficiency of practice administration and reduce wait times
- A full patient communications programme will take place to help patients make the most of the new system

Technology

- Technology is the key to improving the performance of practices and we are implementing a raft of initiatives
- Development of a new website to support the individual Locality sites providing self care support and link to the forthcoming NHS app following the determination of the 'front door' provider – implementing in May 2019
- Improving the administration systems of all surgeries through the implementation of workflow optimisation, consistent practice intranet (Team Net) and other technologies to provide Locality wide support to practices – commenced November
- Review of telephony systems and implementation of Locality wide solution that enables improved call handling. Text solutions fully implemented amongst all practices – November - April
- The objective was to bring every practice capability to match the best and ensure that all staff are fully trained to optimise the technology





A new Super Partnership

- Pier Health has been created with a new multi-partnership of 10 practices in Weston and Worle:
 - Horizon, Graham Road & Clarence Park
 - Tudor Lodge
 - Milton
 - Longton Grove
 - New Court
 - The Cedars
 - Locking Castle (Stafford Medical Group)
 - Winscombe & Banwell
- Enables practices to work together and share systems, support, recruit and create opportunities to develop new services

Data (initial findings)

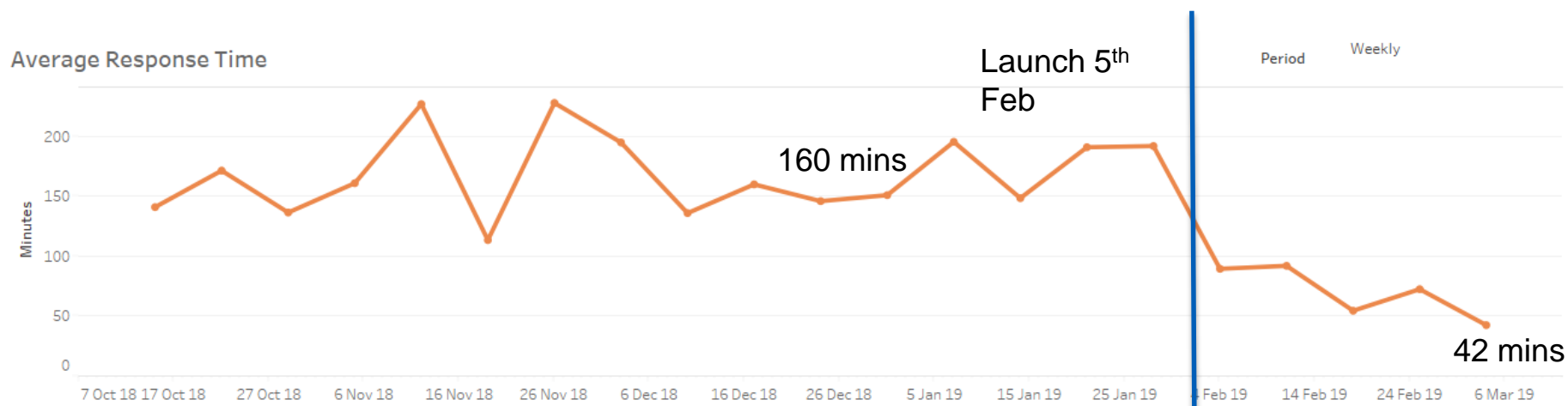


What is askmyGP ?

- askmyGP is a digital workflow tool that enables patients to communicate with GPs by email and initiates a response by email, skype, phone and personal visit
- All patients are able to access the system whether by email, phone or face to face
- Unlike other digital systems currently being piloted this is not a self care tool and all patients go through the process
- It helps continuity of care
- It seeks to ensure that anyone who is in urgent need of seeing a GP or any other appropriate clinician can do so that day

Response times improving

response times at one Weston surgery

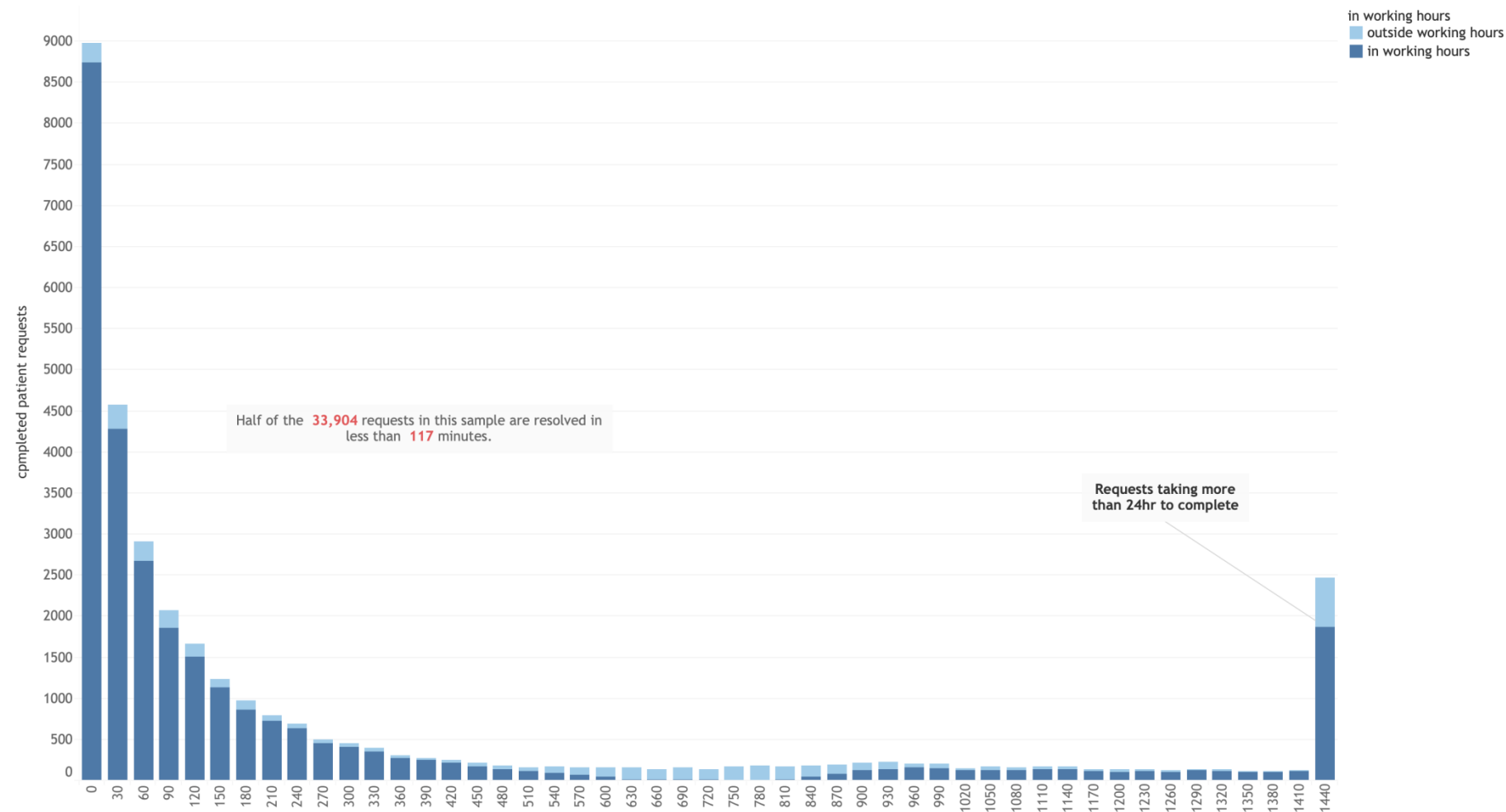


This shows EMIS data, n.b. short time since launch

Response times are quick

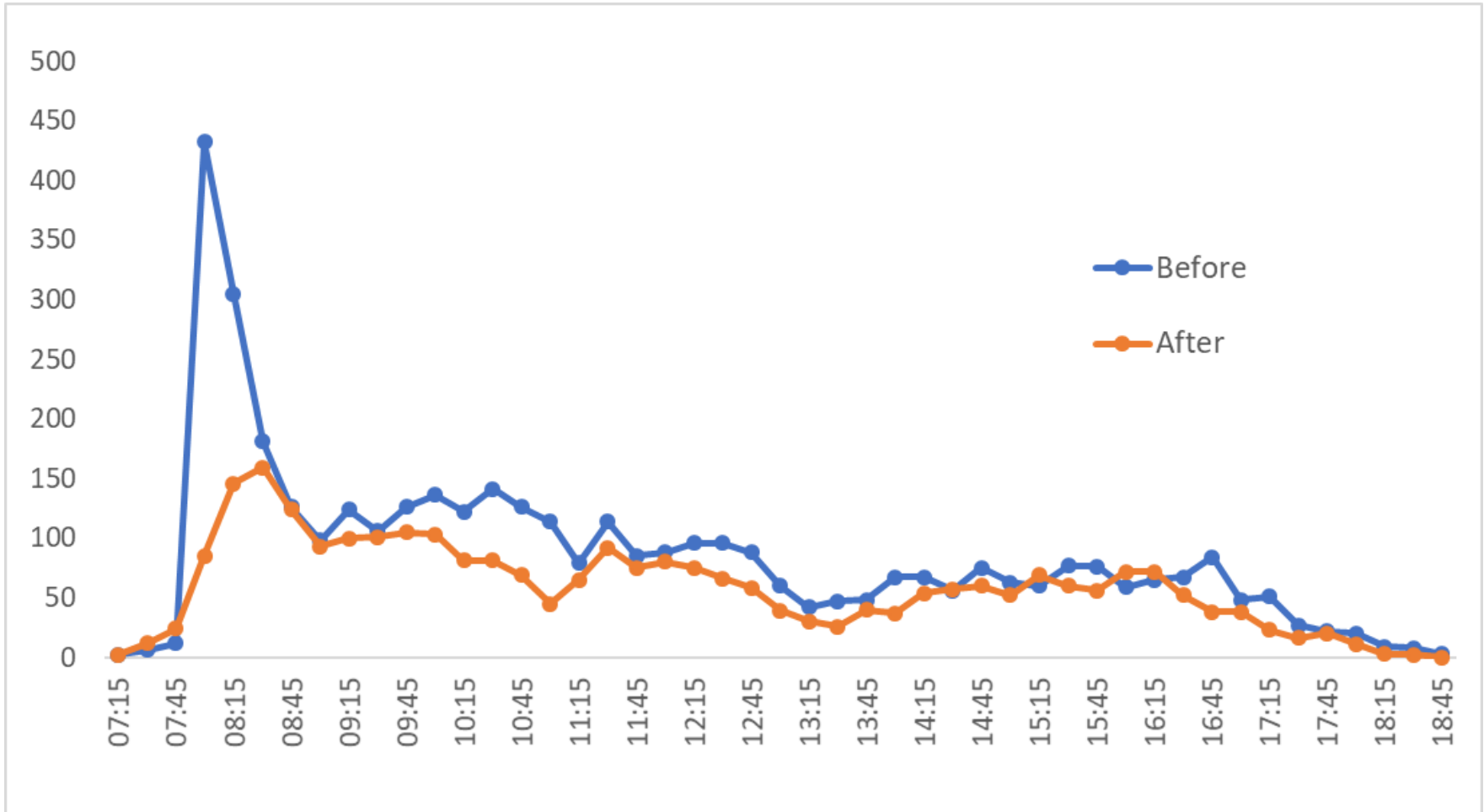


Response time to patient requests in practices using askmyGP for all demand



Requests for each mins to close 30m groups. Color shows details about in working hours. The data is filtered on practice type, all thread opened time and Name (Providers). The practice type filter keeps Online only and Total flow. The all thread opened time filter includes the last 8 weeks. The filter associated with this field ranges from 20/05/2019 to 14/07/2019. The Name (Providers) filter keeps 6 of 57 members. The view is filtered on mins to close 30m groups, which excludes Null.

Timing of demand

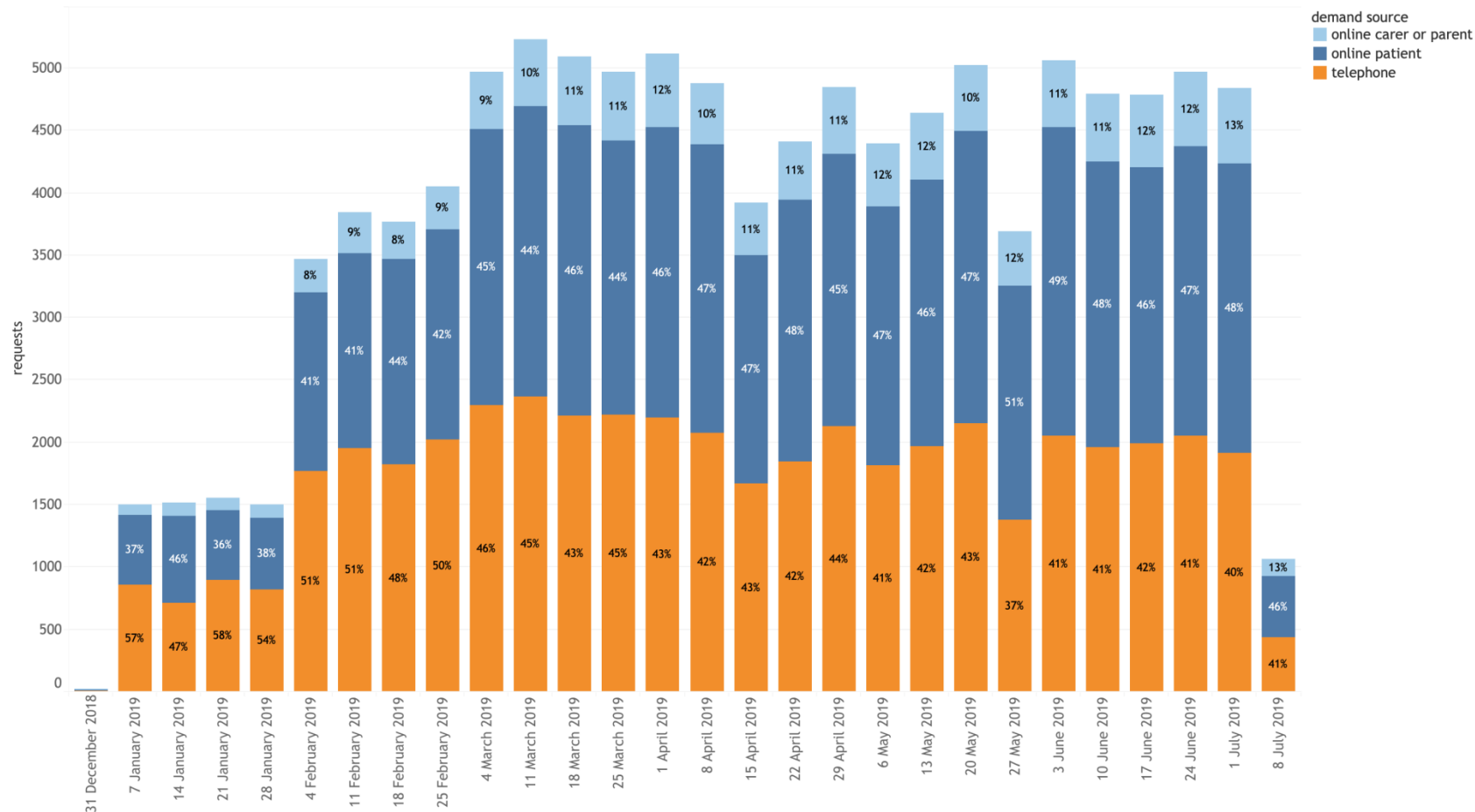


Weekly volume of requests



weekly volume (all requests)

Horizon Health Centre, Longton Grove Surgery, New Court Surgery and 3 more

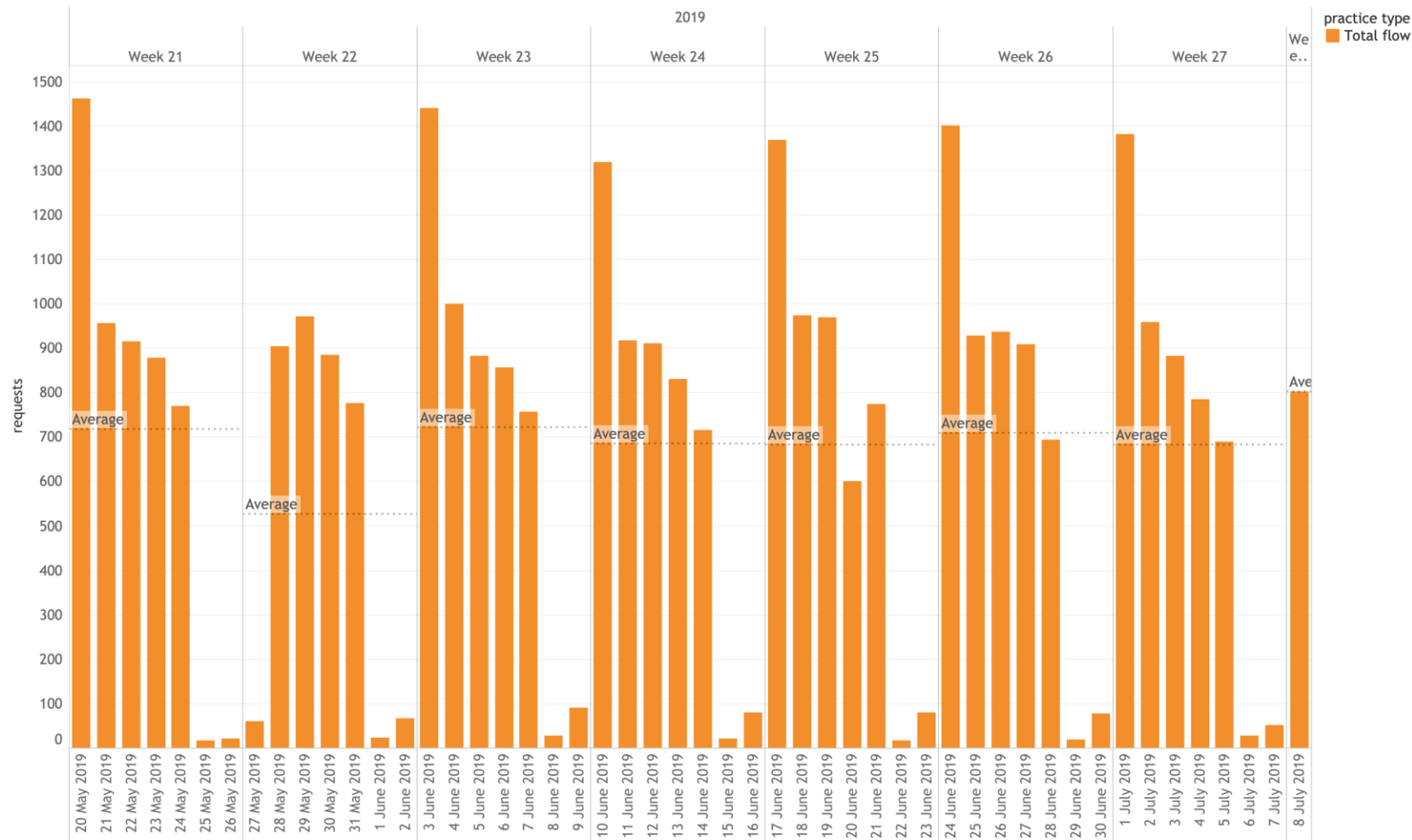


Requests for each all thread opened time Week. Color shows details about demand source. The marks are labeled by % of Total requests. The data is filtered on analytics event name, thread closed?, all thread opened time Weekday, thread QA status, Created At Day, practice type and Name (Providers). The analytics event name filter keeps THREAD_NEW. The thread closed? filter keeps unclosed threads and closed threads. The all thread opened time Weekday filter keeps 7 of 7 members. The thread QA status filter keeps QA complete but not closed and thread closed. The Created At Day filter includes dates on or after 3 September 2018. The practice type filter keeps Online only and Total flow. The Name (Providers) filter keeps 6 of 57 members. The view is filtered on demand source, which keeps online carer or parent, online patient, telephone and unknown.

Daily volumes are consistent



daily volume

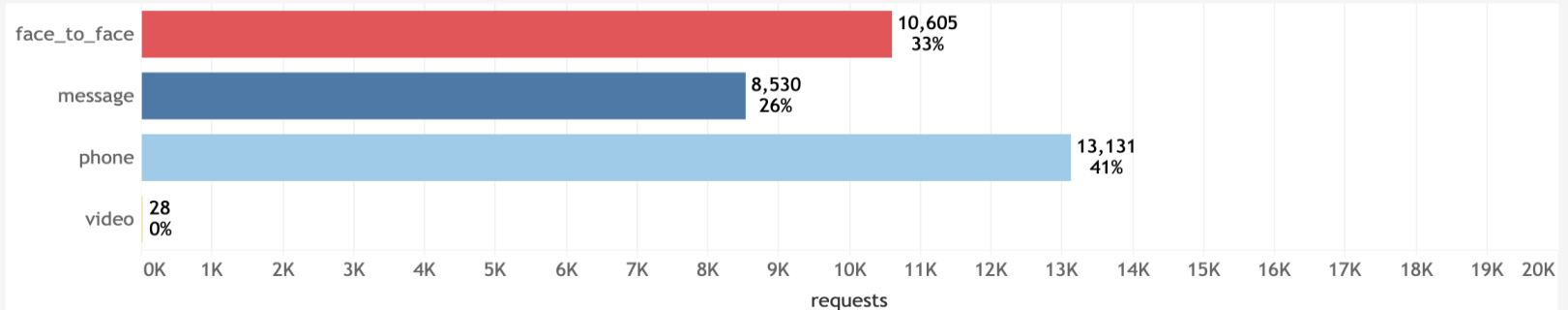


Requests for each Created At Day broken down by Created At Year and Created At Week. Color shows details about practice type. The data is filtered on analytics event name, thread closed?, all thread opened time and Name (Providers). The analytics event name filter keeps THREAD_NEW. The thread closed? filter keeps closed threads. The all thread opened time filter includes the last 8 weeks. The filter associated with this field ranges from 20/05/2019 to 14/07/2019. The Name (Providers) filter keeps 6 of 57 members. The view is filtered on practice type, which keeps Online only and Total flow.

Patient preferences and responses

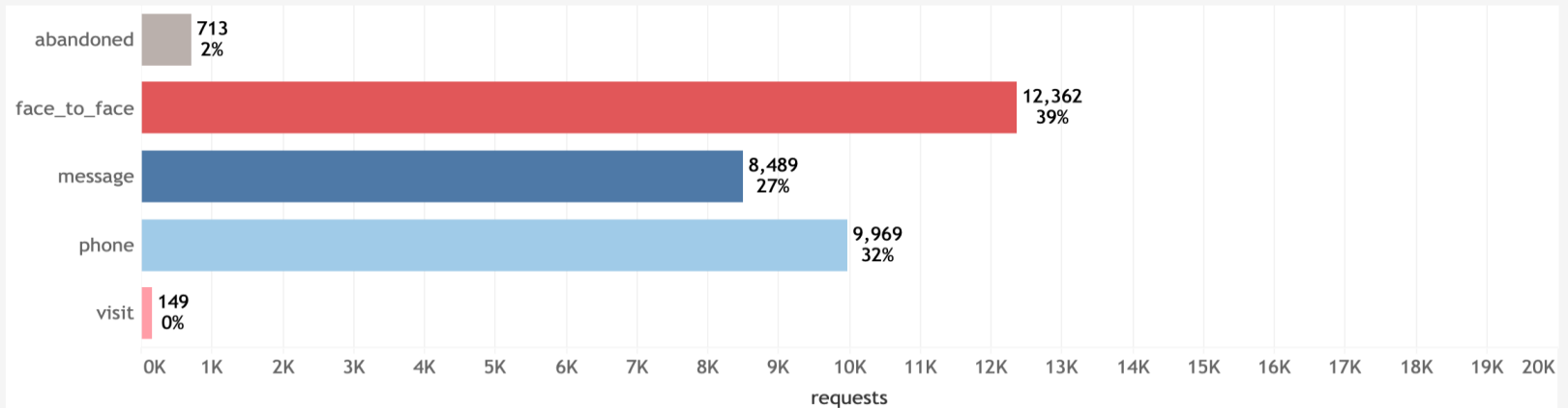
patient preferences for contact

Online only & Total flow



actual method of enquiry closure

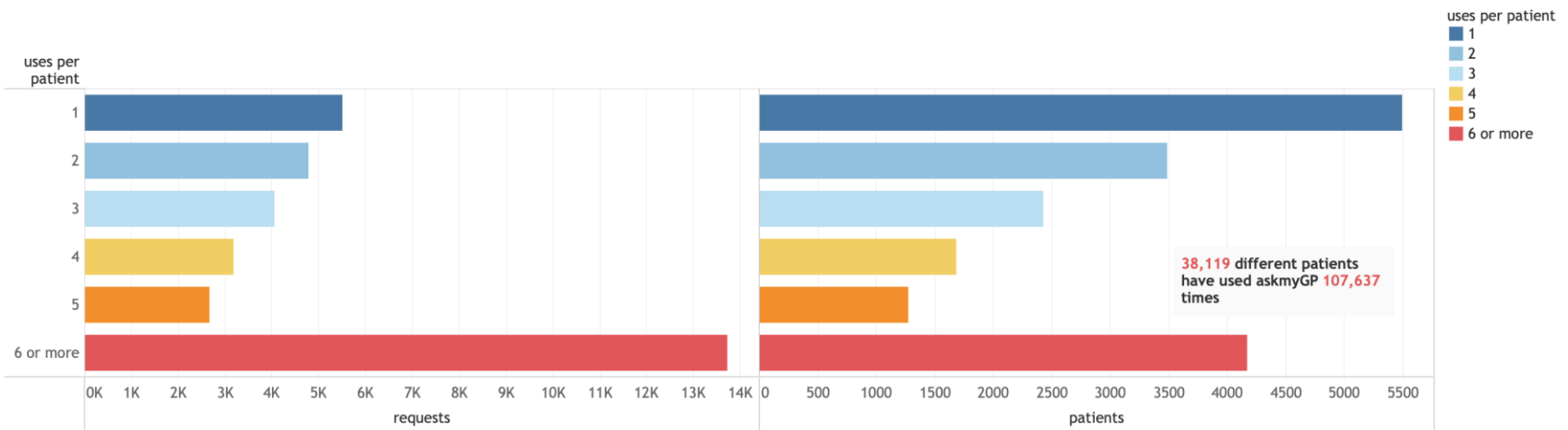
Online only & Total flow



Nearly 40,000 patients have used the system so far



repeat user analysis



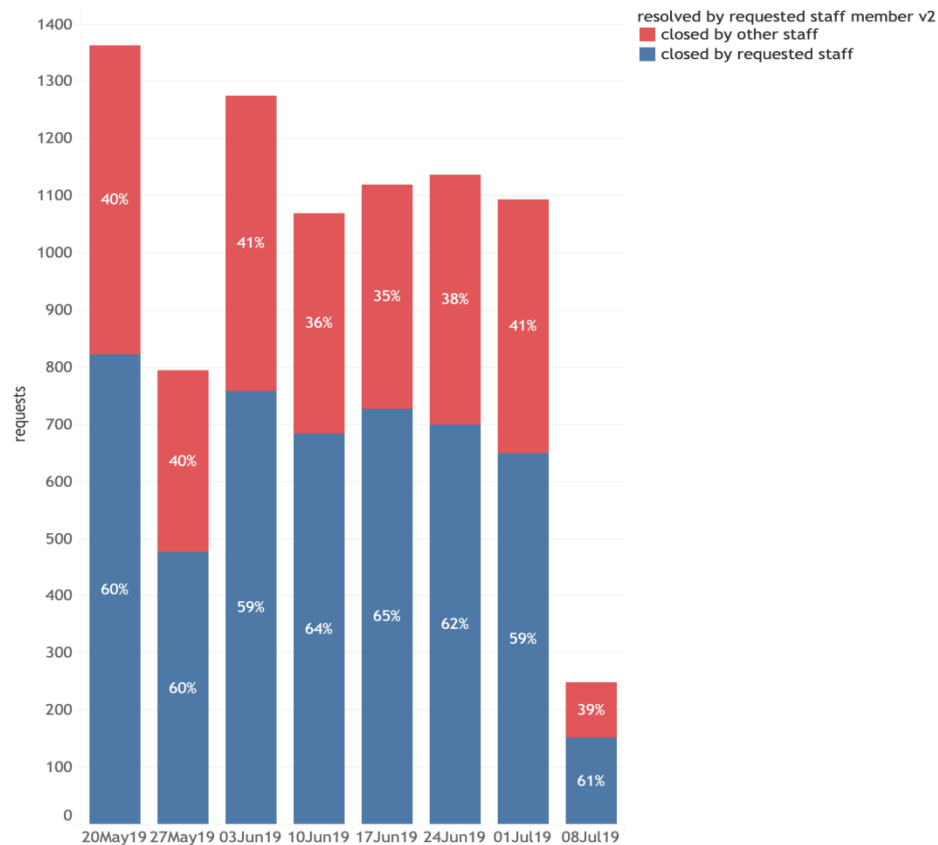
Requests and patients for each uses per patient. Color shows details about uses per patient. The data is filtered on thread closed?, analytics event name, practice type, all thread opened time and Name (Providers). The thread closed? filter keeps closed threads. The analytics event name filter keeps THREAD_NEW. The practice type filter keeps Online only and Total flow. The all thread opened time filter includes the last 8 weeks. The filter associated with this field ranges from 20/05/2019 to 14/07/2019. The Name (Providers) filter keeps 6 of 57 members.

Continuity improved



Continuity: did patients get the staff they requested?

Based on requests where patients stated a preference and chose a named member of staff (the majority of patients didn't want to request a specific member of staff)

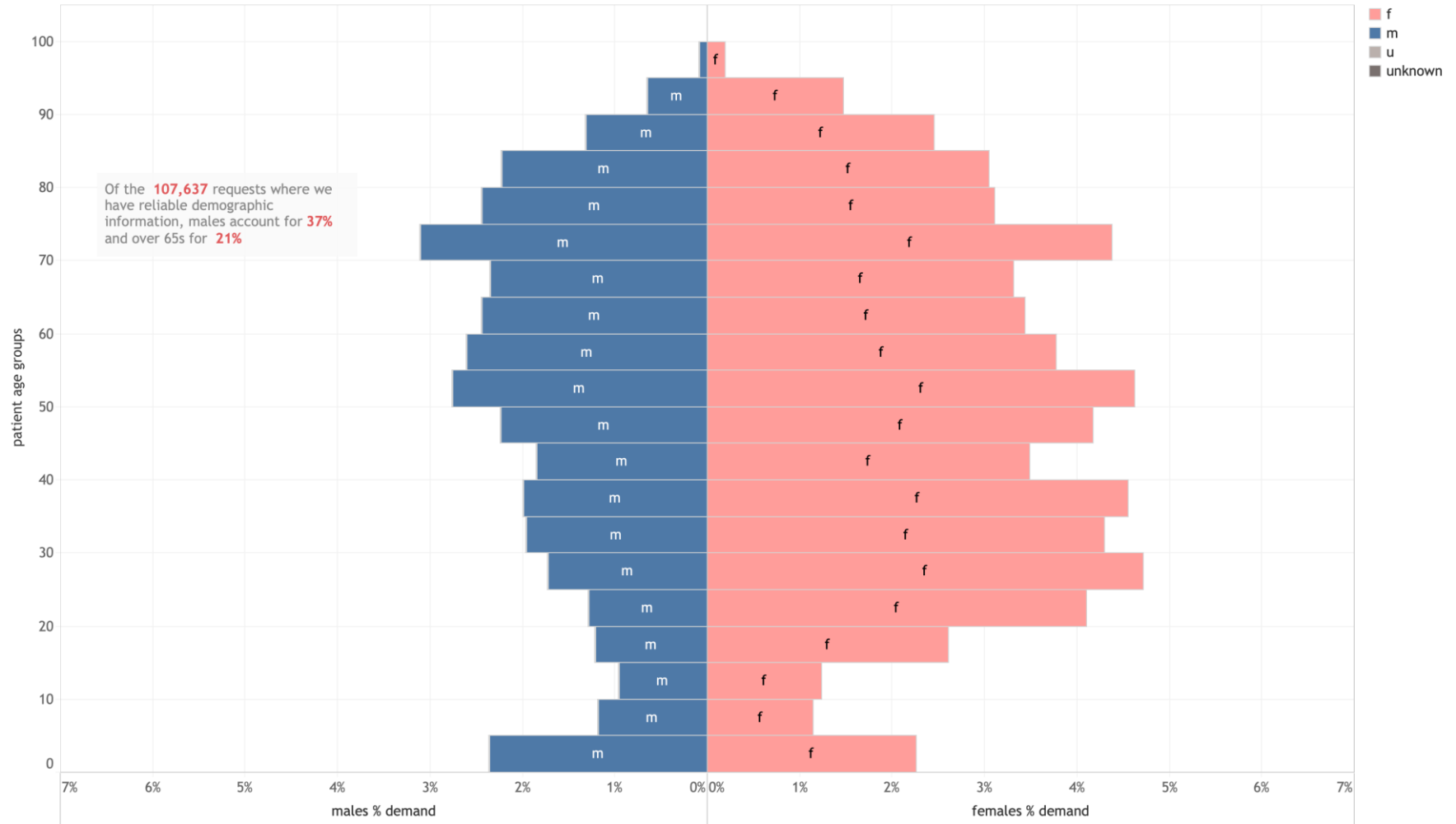


Requests for each all thread opened time Week. Color shows details about resolved by requested staff member v2. The marks are labeled by % of Total requests. The data is filtered on question content, all thread opened time, practice type and Name (Providers). The question content filter keeps chosen_clinician. The all thread opened time filter includes the last 8 weeks. The filter associated with this field ranges from 20/05/2019 to 14/07/2019. The practice type filter keeps Online only and Total flow. The Name (Providers) filter keeps 6 of 57 members. The view is filtered on resolved by requested staff member v2, which excludes chose anyone and unknown.

Demographics of use



demographics population pyramid

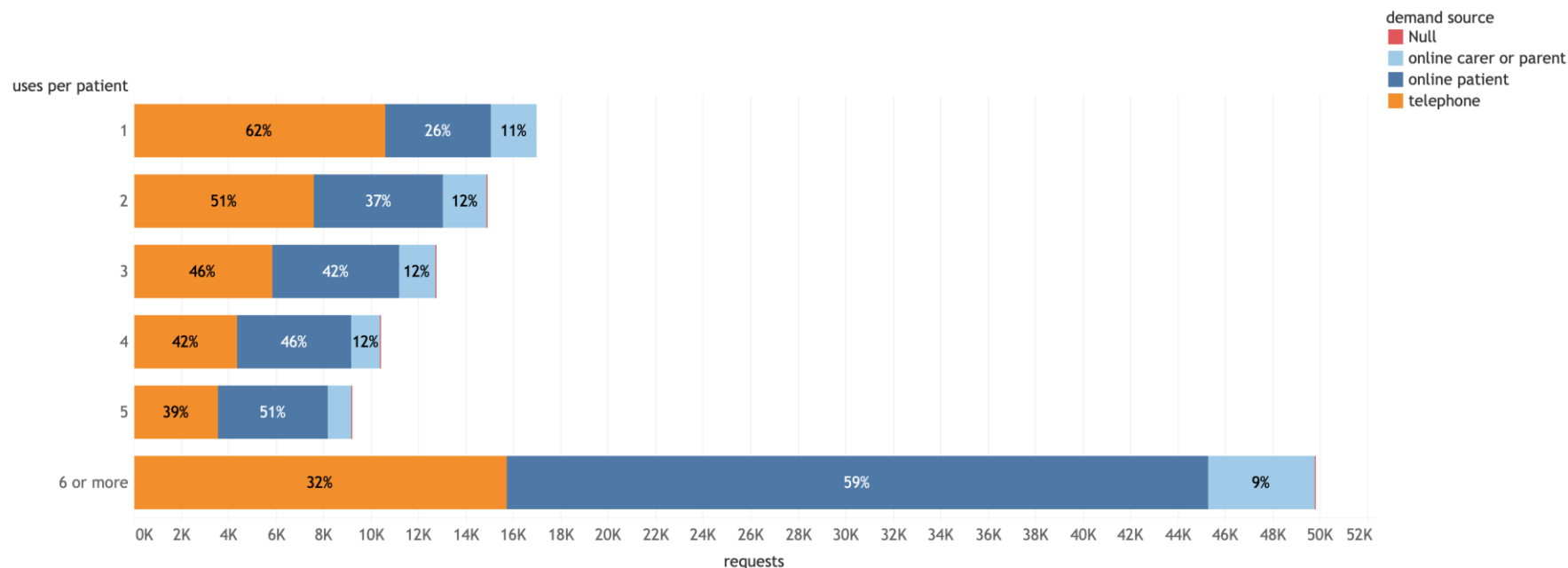


The trends of males % demand and females % demand for patient age groups. Color shows details about gender from data. The marks are labeled by gender from data. The data is filtered on Name (Providers), patient age groups, analytics event name, thread closed?, Created At Day and practice type. The Name (Providers) filter keeps 6 of 57 members. The patient age groups filter excludes Null. The analytics event name filter keeps THREAD_NEW. The thread closed? filter keeps closed threads. The Created At Day filter includes dates on or after 3 September 2018. The practice type filter keeps Online only and Total flow.

Mix of demand



mix of demand source by frequency of system use

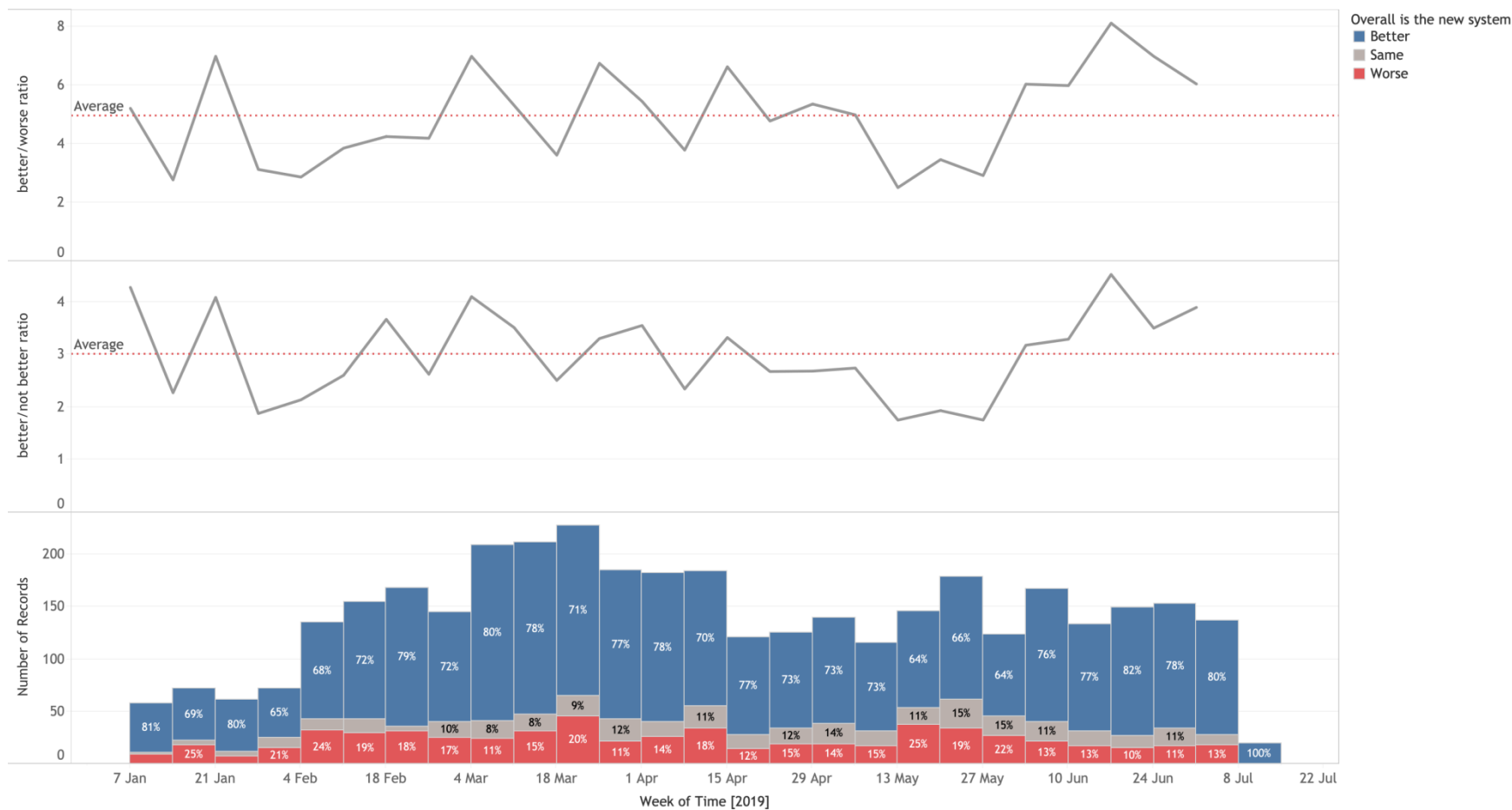


Requests for each uses per patient. Color shows details about demand source. The marks are labeled by % of Total requests. Details are shown for all thread opened time Year. The data is filtered on analytics event name, practice type, minimum of Created At, Created At Day and Name (Providers). The analytics event name filter keeps THREAD_NEW. The practice type filter keeps Online only and Total flow. The minimum of Created At filter includes dates on or after 03/09/2018 14:54:48. The Created At Day filter includes dates on or after 3 September 2018. The Name (Providers) filter keeps 6 of 57 members. The view is filtered on demand source, which keeps Null, online carer or parent, online patient, telephone and unknown.

Patient feedback



Patient feedback



The trends of better/worse ratio, better/not better ratio and sum of Number of Records for Time Week. For pane Sum of Number of Records: Color shows details about Overall is the new system. The marks are labeled by % of Total Number of Records. The data is filtered on Time and Name (Providers) (analytics v2). The Time filter includes dates on or after 03/09/2018 00:00:00. The Name (Providers) (analytics v2) filter keeps 6 of 57 members. The view is filtered on Overall is the new system, which excludes Null.

A few comments left by patients



I found this new service to be an excellent one. The problem was handled and resolved extremely quickly.

F 85

Excellent service, my own GP phoned me back within 10mins of me making an enquiry.

M 71

WOW what a service. Call made. Call responded to very quickly. Appt made and attended. Home within an hour - hopefully problem solved. Thank you.

F 65

Absolutely Amazing service, dealt with my problem very quickly, saves unnecessary Time going to see the doctor, or collecting the prescription from the surgery

F 50

Extremely satisfied, no need to queue on the phone, great system!

F 33

First time using the system and it was so easy, i needed my child to be referred and what would of been a difficult visit to the doctors for my child was completed in the comfort of my own home without any issues.

Great!!

M 4 (by proxy)

Impact of the new system



- Varying impact in each practice
- Some practices are receiving 80% of requests online whilst others are around 50%
- Most practices are able to see those who need access on the same day and very much quicker response times than by phone
- Overall levels of demand have risen as unmet requirements are now being managed
- These have however stayed stable
- The new system has highlighted when practices are short of staff as the demand has to be met
- It is now recognised that those practices who have a broad range of clinicians are able to respond much better

Evaluation – still very early days....

- Practice staff are happier but GPs have struggled with the new system although it is getting easier
- Patient response overwhelmingly positive
- There is a hope for lower ED presentations
- Practices have a new sense of direction linking into Pier Health
- Recognition that there is a long way to go, we are laying the foundations, however the extent of the opportunity is visible
- Understanding that practices being together are better off than trying to survive on their own, whilst still retaining some autonomy
- Renewed optimism and belief that things can get better – and the new ways of working together perfectly position everyone for the new Primary Care Networks