

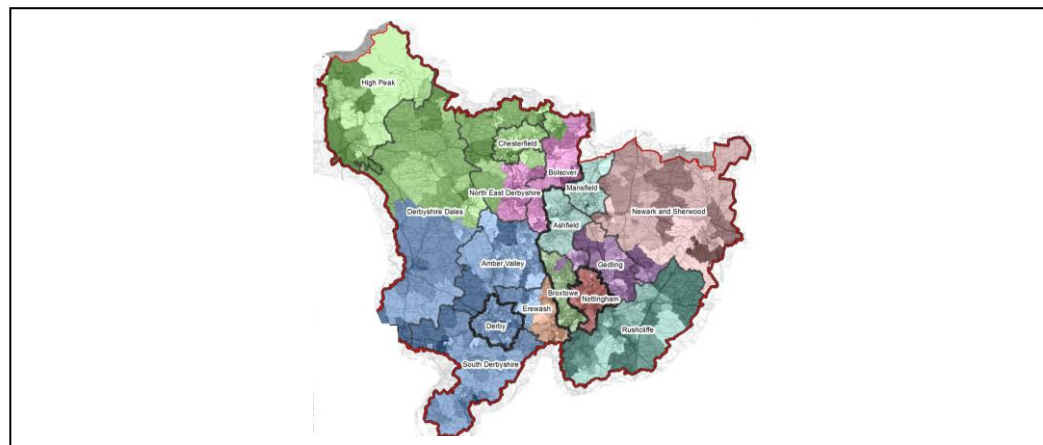
Transforming Primary Care

Derbyshire & Nottinghamshire

Number of patients covered: **1.2 million**

Number of practices participating: **152**

Names of CCGs covered: **9 across Derby/Notts**



Services we are testing:

We aim to engage with patients and providers to provide right care in the right place at the right time

Our Vision is improve the health of our population

New Stuff:

- Extended GP access through locality hubs
- Used technology more to provide flexible access through video, online, and telephone appointments, order prescriptions, access records
- Provide joined up and integrated urgent care
- Provide more care at home and in community settings, including care homes
- Build social capital to support self-care

What's going well:

Success factors improve patient experience, reduce need for secondary care with better outcomes, improve communications and evaluation

Key achievements:

- 50% reduction in face to face appointments using telephone consultation
- Quicker same day response
- Increased self-care
- Reduced DNAs from 11% to 4%
- 100% of patients interviewed satisfied with new service

Unexpected benefits:

- Practice team satisfaction in redesign of processes
- Involvement with PPGs
- Involvement GPs in design of technology solutions
- Collaborative working across CCGs and providers e.g. ambulance staff

What's better for patients:

"...improving on-day demand frees up GP time to concentrate on more chronic ill health, improve patient care, and reduce admissions, everyone benefits" (GP, Nottingham)

What patients are saying:

"A lot faster, no waiting at the end of the day"

"I rang at 8.10 am concerned about my daughter, was called back by a GP and seen in surgery before 9.00am, fantastic!"

"I think nurse practitioners are a great idea"

"Very good idea, prefer it to normal appointments. It has been a long time coming. There are lots of things that you do not need to see your Dr for"

Lessons learned:

Our challenges have centred around recruitment, IT systems, communication and shared patient records

What could have been done differently...

Quicker approval processes for pilots to start e.g. finance, IT, IG, and CQC

Advice to wave two pilots:

- Ensure plans/proposals align with CCG strategy, primary care, IT and estates plans
- Stakeholder mapping to engage & inform key bodies e.g. LMC, CQC, other providers
- Ensure engagement with patients, and GPs is robust
- Assess time for recruitment
- Impact assessment e.g. on Pharmacy opening hours