

Watford Care Alliance

West Hertfordshire

Number of patients covered: **113,881**

Number of practices participating: **14**

Names of CCGs covered: **Herts Valleys CCG**

Summary of pilot's work:

- *Seven days a week extended 8-8 GP access, with hub and rotating spoke model*
- *Co-operation between 14 practices to improve patient access and care*
- *Weekend Phlebotomy service – eases blood test appointment pressure on GPs*
- *Tele-medicine Triage hub based at a weekend main Hub*
- *Integrated Health and Social Care Team providing 7 day 12 hour over-night hospice at home palliative service, to reduce pressure on hospital admissions*
- *Dermatology and Urgent Coil Services aim to provide cost-neutral co-working between practices to focus clinical expertise for all WCA patients*



Our top three innovations:

Phlebotomy Service

What it is: The Phlebotomy Service provides dedicated blood test weekend appointments with a Nurse or Health Care Assistant at a Hub.
Why we are trialling: To improve patient access to blood tests and joined up extended care.

What is the local difference: Patients from 14 practices can book in/be referred to blood test appointments. This relieves pressure on practices' GP appointments

Lessons learned: Put enough time aside at end of sessions for Phlebotomist to spin bloods
Outcomes/Patient Benefits: Good take-up of appointments, and multi-practice booking into service. Patient satisfaction and less pressure for blood tests in everyday GP sessions

Tele-medicine

What it is: Airedale software securely links laptops and tablets at our Tele-medicine Triage Hub with local care homes. This enables flexibility in Integrated Health and Social Care Doctor to conduct virtual 'home' rounds to directly assess patients. Three practices, with heavy local care home demand, will benefit from tablet-linked tele-medicine equipment to improve care service.

Why we are trialling: To give the enhanced multi-disciplinary IHSCT the equipment needed to provide a seamless proactive care service
What is the local difference: Faster response primary care service. Removing travel time expands GPs' time spent consulting

Lessons learned: Expect technological delays.
Outcomes/Benefits: Patients (and care homes) receive improved, fast response care service

Dermatology and Urgent Coil services

What it is: Dermatology Service will provide a cost-neutral minor-surgery service for benign skin lesion removals. Urgent Coil service will provide a central rota of WCA Doctors fitting urgent IUDs, and arrange patients' same-day appointment within a WCA surgery

Why we are trialling: Patient need for services.
What is the local differences: To improve local patient Dermatology access, reducing referrals to Hospitals for minor skin surgery. To improve sexual health across locality

Lessons learned: Services still being developed
Outcomes/Patient Benefits: Patients will receive local access to fast response services