

Scale, integration and innovation

Case studies showing the value of GP federations in delivering system change



GP Federations have a huge role to play in the development of health and care systems.

GP federations like Primary Care Sheffield are a vital 'missing link' in the current draft of the national primary care strategy. We play a crucial role; making change possible 'at scale' and providing the link between individual practices, PCNs, and the Integrated Care Partnerships.

In many places across the country GP federations are already integral parts of Integrated Care Partnerships, not only as providers but also bringing scale, influence, and connection across a diverse primary care landscape.

This document highlights some concrete examples of where Primary Care Sheffield is actively involved in the development and delivery of new models of primary care, contributing our insight and experience to the improvement of health and care systems as a whole.

This track record of success suggests that the role of federations needs to be strengthened in those areas where they already exist and national policies introduced to encourage their evolution where they do not.

Dr Andy Hilton Chief Executive, Primary Care Sheffield





We are improving integration between different parts of the health and care system

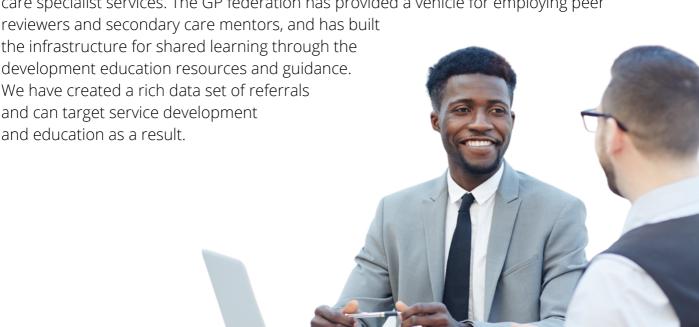
Case study: Clinical Assessment, Support and Education Service (CASES) in Sheffield

What does it do? CASES is an elective care re-design programme that aims to reduce the pressure on elective services and makes sure that patients in Sheffield receive their care in the most appropriate setting from the most appropriate clinician.

How does it work? The programme covers 10 specialties including dermatology, general surgery, and gynaecology. A team of Sheffield GPs, who have additional training and mentoring from hospital consultants, provide support and guidance to primary care colleagues who think a patient needs to be referred into secondary care. Sometimes the patients may not need to go on to hospital and can be treated by their GP with appropriate advice and guidance, or additional tests or information may be suggested. Alternatively community based services can be recommended as an alternative to a hospital outpatient appointment. This helps to ensure that patients receive the help they need closer to home without needing to go to hospital. It also improves the quality of referrals and enhances the knowledge of GP's.

What has been achieved? The last year saw more than 27,500 patient referrals being GP peer reviewed with advice and guidance offered to referring GPs and learning shared through briefing documents and learning events. Overall CASES has resulted in an average 23.7% reduction in referrals across all specialties.

What role did the GP federation play? Only the GP federation could provide the place-level response from primary care which matches the footprint of the secondary care specialist services. The GP federation has provided a vehicle for employing peer reviewers and secondary care mentors, and has built





We are improving the quality of care

Case study: Primary and Community Mental Health Transformation Programme

What does it do? The programme is designed to transform adult mental health services by breaking down traditional barriers between primary and secondary care. It also addresses gaps in existing service provision by meeting the needs of patients with a higher level of need than IAPT but who do not meet CMHT thresholds.

How does it work? The new service achieves this by working directly within practices. Rather than being constrained by traditional referral criteria, a flexible approach is used which places emphasis on what support the patient needs and how best to facilitate this for them. The new offer broadly consists of mental health nursing, clinical psychology, community connectors, physical health check roles and funding to build capacity and services within voluntary, community and social enterprise (VCSE) providers.

What has been achieved? Between 17 June and 31 August 2020, a total of 407 patients were seen within the new service, all of whom had previously unmet mental health needs. 21% of patients are from BAME communities which is significant growth from previous models.

What role did the GP federation play? The service has been a brilliant example of joint working and co-design by primary care networks, the GP federation, SHSC, NHS Sheffield CCG, and service users. The GP federation has played the essential role of bringing together the variety of views across general practice into a unified voice to deliver this innovative model. At the same time Primary Care Sheffield has allowed the programme to take advantage of all the benefits of scale providing governance structures, delivery and workforce employment models that work across the whole City not just within individual practices.







We are making healthcare more accessible and reducing health inequalities

Case study: HSJ award for primary care innovation of the year; The 'Vulnerable Person Visiting Service'

What does it do? During a time of crisis a group of nine GP practices came together at exceptional speed to design and implement a service that has had a significant impact on the health and lives of some of our most vulnerable patients.

How does it work? A home visiting service was set up in response to the Covid-19 pandemic. The vision was to reduce inequalities by developing a pro-active, tailored approach to patient care. The service identified vulnerable, frail, patients who may not otherwise self-identify, and undertook patient care reviews.

What has been achieved? The visits reached over 1300 people and resulted in an action affecting the patient's management plan in 50% of cases. Changes ranged from referrals for suspected cancers, to medication changes, emergency admissions and referrals for social support. The service won the 2020 HSJ Award for 'primary care innovation of the year'.

What role did the GP federation play? As part of its approach to making the primary care sector in Sheffield more resilient the GP federation took over the running of seven practices in the City and put in place a package of measures to address their needs and improve quality.

By working together these practices are able to provide more personalised and coordinated health and social care, supporting people to gain control of their health and wellbeing, helping them to live well and independently as well as reducing ill health and unnecessary hospital admissions.





Dr Andy Hilton, Chief Executive andy.hilton@nhs.net

Emma Norton, Head of Communications pcs.enquiries@nhs.net



PCS website
PCS business plan
PCS Annual Report