General Practice Improvement and Crisis Response Team-GPICRT

GPNI-MAY 22

Background

- Formation federations - 2018
- Federation support units
- Crisis in GP workforce
- Response – to set up services to support practices

Crisis in GP

- Increased workload
- Declining workforce
- Inadequate premises
- Practice collapses and closures

Response

Federation-led General Practice Improvement and Crisis Response AKA -Rescue Team that incorporates:

-Expert General Practice managerial support at short notice for practices at high risk or in a crisis.

-Improved access to clinical GP cover at short notice for practices at high risk or in a crisis.

-An organisational structure to facilitate managed support to GP Practices

Why ?

The Federation-led General Practice Improvement and Crisis Response Team Initiative (GPICRT) was set up in 2018

Aim of supporting GP practices in Northern Ireland identified as ‘at risk’.

The objectives of the initiative are to develop and implement an effective practice recovery plan

To provide practical help in recruiting clinical and staff and to enable practices to avail of expert clinical and managerial support.

Number of practices GPICRT have been involved with 2018-2022

- Number of action plans agreed - 68 (7 re-referrals)

- Number of salaried GP sessions provided to practices at risk-

1. 01/04/18-31/03/2019 - 18
2. 01/04/19-31/03/2020 - 533
3. 01/04/20-31/03/2021 - 996
4. 01/04/21-31/03/2022 - 1140

Referral process

- Practices experiencing difficulties have an obligation to contact their local SPPG office to explain the issues they are having that could result in not being able to deliver a service to their registered patients. These are assessed by medical advisors and if deemed necessary a referral is generated to this service. These practices can also be identified by SPPG whilst carrying out annual visits to practices or if red flags are raised when practices ask to suspend their contractual responsibilities such as asking for a temporary list closure.

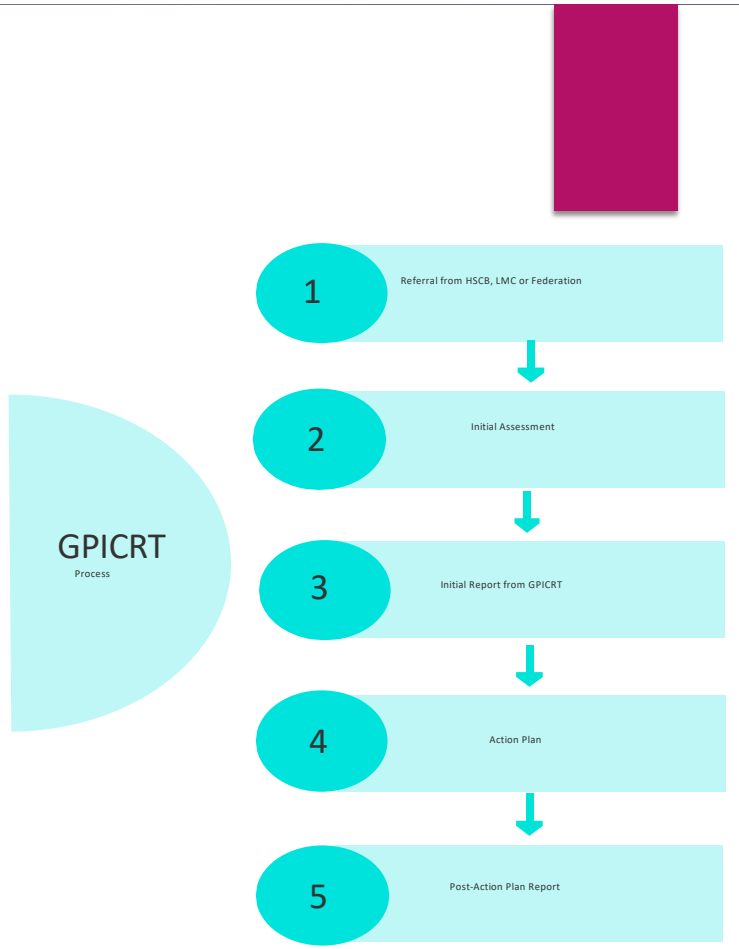


Figure 1. GPICRT Process Map

Organisation

- Clinical Lead GP
- Lead Practice Manager
- Salaried GPs
- "Casual hours" GPs and Practice managers
- FSU- contact

SALARIED GP WORKFORCE GPICRT

- Following the original scoping exercise and development stage of the business plan in 2018 the aim was to employ 12.8 WTE salaried GPs to cover the region. We were slow to recruit initially.
- Current workforce 5.3 WTE

Governance

- Organisational
- Crisis team
- Your personal input
- Confidentiality

Booking system

- Database to record PICR GP allocations
- If not being used for PICR work practices can make requests for locums
- These are not guaranteed
- Best resource for this is Federation locum lists

EVALUATION OF REFERRALS – APRIL 22 KEY THEMES

Dr Matt Harling



Recruitment



Organisational



Financial Pressures

Clinical staffing issues were the most common reason reported by respondents for requiring the GPICRT (60%) followed by partnership issues (20%). Practices reported high satisfa
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MAIN THEMES



Clinical staffing issues were the most common reason



Practice Management Issues



partnership issues (20%).

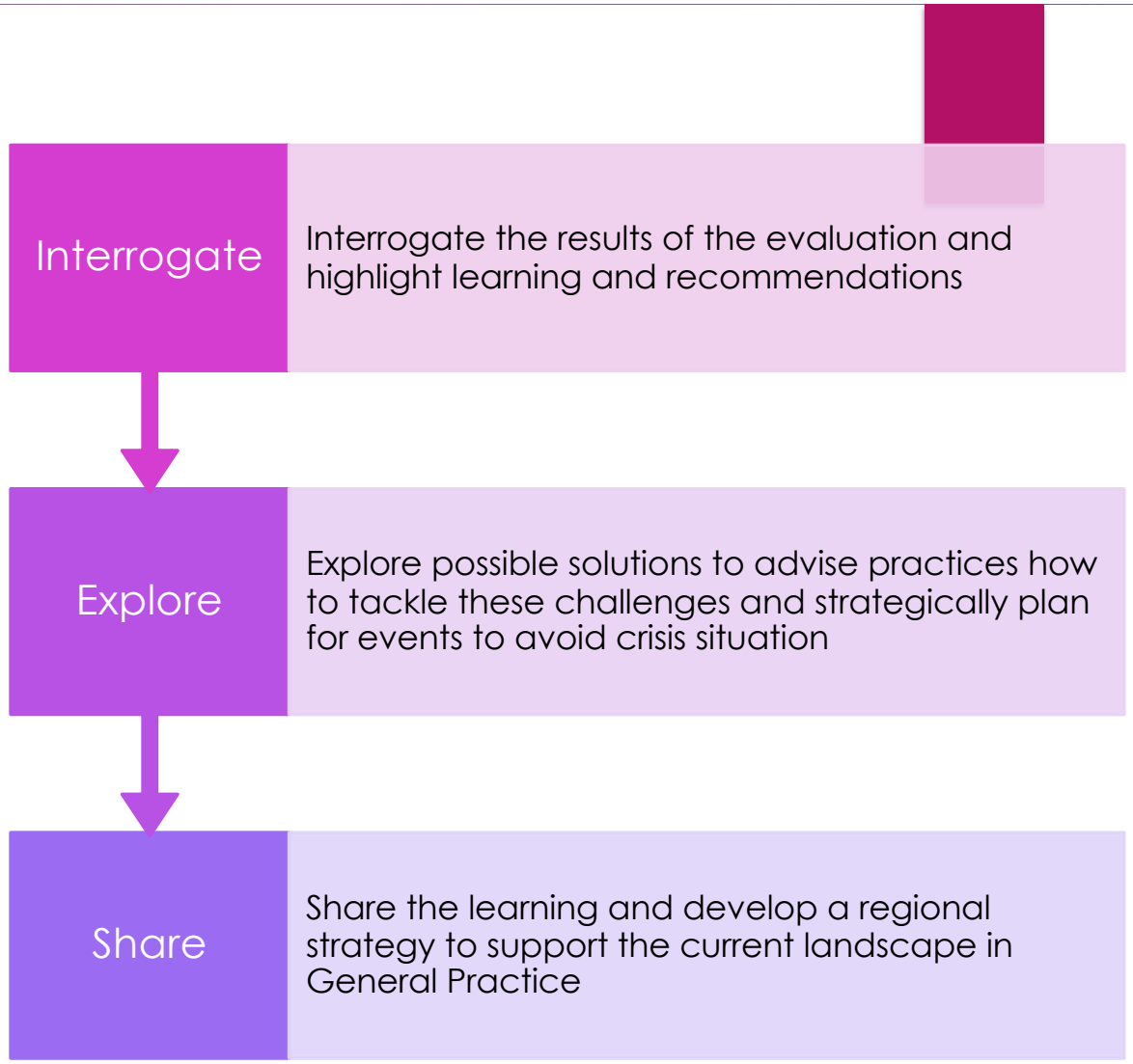


Practices reported high satisfaction with the process and a positive impact on the practice's sustainability and resilience.



Fewer practices agreed that there was a positive impact on either their financial stability or on neighbouring GP practices.

NEXT STEPS


Interrogate
Interrogate the results of the evaluation and highlight learning and recommendations
Explore
Explore possible solutions to advise practices how to tackle these challenges and strategically plan for events to avoid crisis situation
Share
Share the learning and develop a regional strategy to support the current landscape in General Practice

SUMMARY

- Practice Improvement rather than crisis – seek help early through SPPG
- Discreet & Confidential service
- Break down the stigma and remove 'failing practice' narrative and ask for help
- Work together to create practice resilience
- GPICRT can bring fresh perspective and provide resource to give practice teams time for strategic development


That's all Folks!