

Practice Improvement and Crisis Response Team

OCTOBER 2022 - GPNI

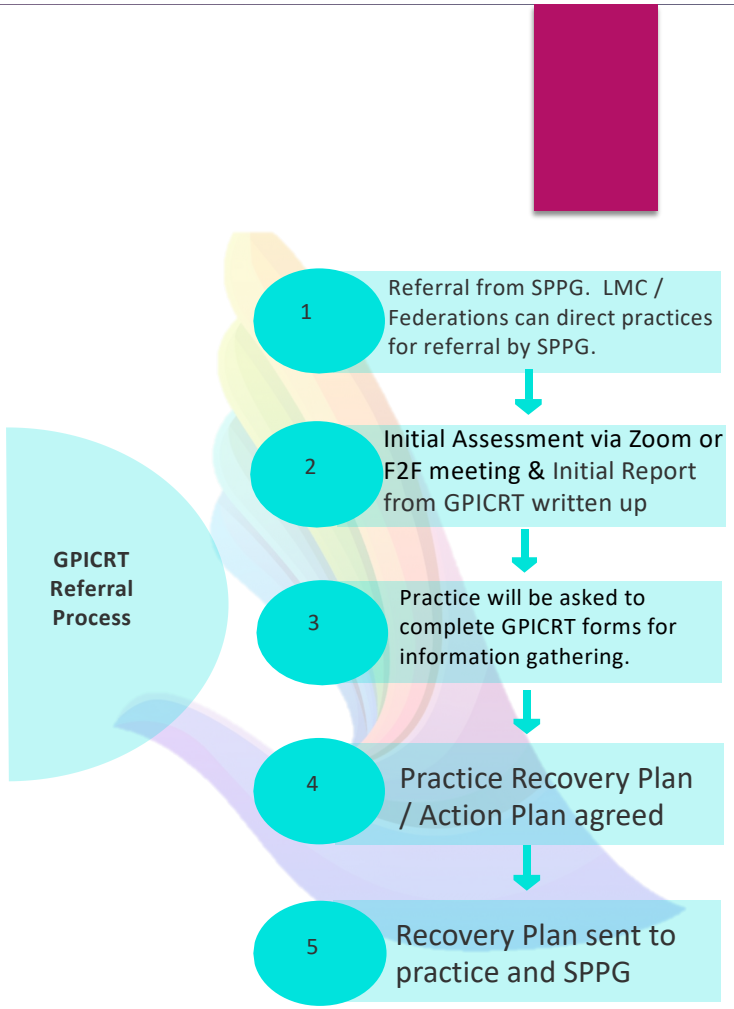
Why have PICRT ?

- Federation-led
- Aim of supporting GP practices in Northern Ireland
- Practice recovery plan
- Practical help



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 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.



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 we now estimate we would require at least 15 wte to meet demand in meaningful way
- Current workforce 5.3 WTE
- Just received funding for additional 5.5 WTE temp initial end of March 23
- 350 locums in NI – 10.8 wte 3% of locum pool
- WE SKEW RESOURCE TO PRACTICES MOST 'AT RISK'



Number of practices GPICRT have been involved with 2018-2022

- Number of action plans agreed - 79 (7 re-referrals)
- 27 referrals since Jan 22
- CURRENT ACTIVE PRACTICES - 22

Number of salaried GP sessions provided to practices at risk-

- 01/04/18-31/03/2019 - 18
- 01/04/19-31/03/2020 - 533
- 01/04/20-31/03/2021 - 996
- 01/04/21-31/03/2022 - 1140 (average 285 per Q)
- 01/04/22-31/08/2022 - 928



EVALUATION OF REFERRALS | APRIL 22

KEY THEMES

Dr Matt Harling | Fellow 21/22

Recruitment

Organisational

Financial Pressures



MAIN THEMES / LEARNING

Clinical staffing issues were the most common reason.

Succession planning.

Contingency planning.

Unplanned absence

Organisational restructure

Partnership issues. No valid Partnership Agreements. "Last man standing" clause.

Lack of reviewing systems and change management.

Examples: Care Navigation / Workload Optimisation

Early identification of issues within practices rather than reaching crisis – Prevention is better than cure.

Communication within practices. Regular meetings, communication with whole practice team. Huddles / regular meetings.



Strategy to Develop PICRT –Wrap around service

- Employ PBP
- Employ PN
- Create a bank of PM
- Create a bank of Care Navigators trained in coding
- Develop PICRT website to be hosted on FSU websites to share learning and create a library of resources practices can be directed to. Encourage best practice.



SUMMARY

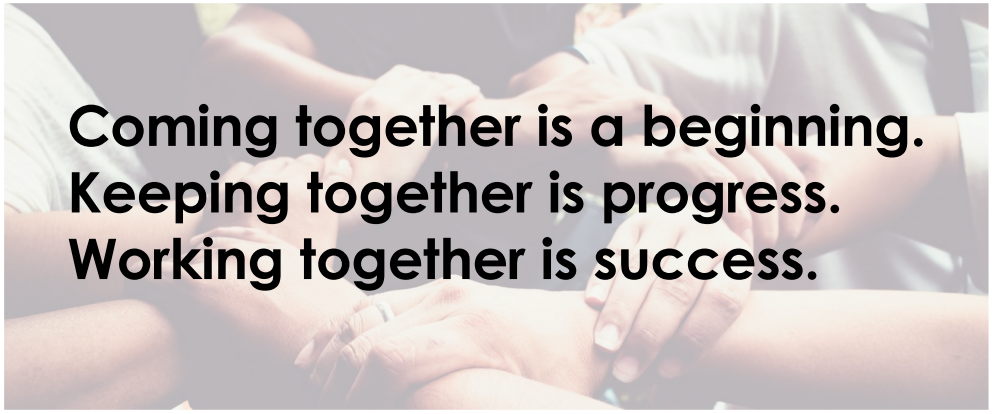
- Intense SUPPORT PRACTICES advice/resource
- Practice Improvement rather than crisis – seek help early through SPPG
- Discreet & Confidential service
- Break down the stigma and remove ‘failing practice’ narrative and encourage practices to ask for help
- Work together to create practice resilience through PRP
- We can bring fresh perspective and provide resource to give practice teams time for strategic development- PRP



SUCCESS

- 79 PRACTICES REFERRED and agreed PRP implemented & stabilised
- Currently working with 21 practices
- We cannot agree PRP if contract handed back.
- Main focus remains Practice Improvement Plans





PICRT

Practice Improvement and Crisis Response Team

Helping Hands