Suffolk GP FEDERATION

NEWSLETTER

www.suffolkfed.org.uk

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Suffolk Podiatry Service update

Suffolk GP Federation took over the management of the Suffolk Podiatry Service in October last year. We are also responsible for diabetes podiatry in North East Essex where we have successfully transformed how it works and significantly improved outcomes.

In conjunction with the Suffolk team we have started a review of the service. Staff are dedicated but have been frustrated that little change has happened over the last two years. Issues identified so far include:

- Lack of clear clinical criteria, including access and discharge. This has led to full clinics and long waiting lists of up to two years. There is no integrated diabetic foot pathway.
- Large caseloads with many low risk patients restricting the ability to quickly see those most in need, such as those with diabetes.
- Lack of admin support, inability to refer directly into secondary care, paper based systems and no access to PACs or pathology – which is a clinical risk.
- Lack of integration, education and development with primary care and community services.

We are implementing some 'quick fixes':

- Ensuring access to ICE for biochemistry results and investigations
- Focusing on outcomes, particularly prioritising patients at high risk
- Developing a service with Age UK for patients at low risk

A wider transformation project is also starting which we have called Focus on Feet. This will ensure the service is fully integrated with general practice, community services and secondary care, delivers first class outcomes, is cost effective and accessible to those most at need. It will meet NICE Foot Care Guidance (2015) and best practice.

Web based self-referral

Despite the constraints facing the team, they have developed an excellent online self-referral service – the first in the UK. This means practices no longer need to make a referral but can direct patients to the website.

Access is via ***www.podiatryreferrals.co.uk***. The online system guides patients through the referral process e.g. ensuring they provide necessary information, including medical history and 'reason for referral'. If patients do not need an appointment they are offered advice electronically.

Practices can reduce their administration load by encouraging patients to self-refer. Practice managers have a detailed briefing on how it all works, so please speak to them for further information.

Update on Suffolk Locum Service

The Suffolk Locum Service has now been up and running for several months and feedback from both practice managers and GPs has been positive.

So far, 50 practices have signed up to the online portal, posting 536 hours of sessions. Some 35 locums have also registered their details.

The service, a joint venture led by Suffolk GP Federation in partnership with Suffolk LMC and the county's two clinical commissioning groups, is completely free of charge. We would now like more locums to sign up to ensure the service meets its full potential.

Locum GP Vishal Nayak, who booked sessions at Long Melford Practice through Suffolk Locum Service, said: "There are plenty of opportunities and the booking system is very easy. A lot of the sessions are advertised at short notice – so it's much easier to book work at the last minute.

"This service is very apt for people like me who are new to the area and who have to depend on agencies to provide work. I will definitely make use of it again."

For more information about Suffolk Locum Service, please email ***locums@suffolkfed.org.uk***. Alternatively, you can visit ***www.suffolkfed.org.uk*** and click on the 'Suffolk Locum Service' link on the homepage.

To read Medical Director Paul Driscoll's latest blog on why Suffolk Locum Service is so important to local workforce development, **click here**.

Future Leaders advanced leadership programme

Feedback from those who attended our most recent Future Leaders course has been overwhelmingly positive.

The three, two-day workshops ran from October – December for GPs in Ipswich and included discussions on the future of general practice and the main financial, regulatory and legal challenges facing primary care.

Attendees also looked at the wider NHS and public-sector system, as well as exploring their own leadership styles, using practical tools and techniques rather than academic models.

There was also a visit to the Bromley-by-Bow Centre in Tower Hamlets, which focusses primarily on the non-medical aspects of well-being.

The Future Leaders programme, facilitated by Judy Oliver, from Oliver & Company, is for experienced GPs who are looking for a more prominent role.

Those who attended said the course has helped to build their confidence and that it has led to a desire to see positive change within their own practice. Others said it has also been beneficial to network and meet GPs in a similar position.

Many said the course exceeded their expectations, with one commenting: "So different to what I expected. Interacting with colleagues I did not know well was an added bonus." Another added: "Overall a great course, very inspirational."

Others said the course would lead to a greater emphasis on personal development, improving the culture of the workplace, a focus on partnership working and exploring the use of social prescribing.

We are planning to run another course later this year and will be taking all feedback into consideration – including areas for improvement such as sessions on public speaking and practical tips on people management and how to draw up a business case.

If you would like more information about this course, or any others that we run, please contact David Pannell (*david.pannell@suffolkfed.org.uk*)

Projects from our Leading the Way programme

The Leading the Way programme is for GPs within a few years of qualification. Each delegate undertakes a project and we have listed the titles below in case they are useful for members. If you would like a copy, please email David Pannell (*david.pannell@suffolkfed.org.uk*).

- Dr Daniel James – Combined hormonal contraception prescribing
- Dr Gemma Atkins – Workflow optimisation
- Dr Helen Martin - Improving delivery of exercise information for patients
- Dr Lena Powell – Locum induction process
- Dr Lolu Ogunniyi - Developing a community referral scheme for Burlington Primary Care
- Dr Sarah Parsons - Opiate reduction clinic

Emergency Care Practitioners (ECP) and practice paramedics network

The inaugural meeting will be on Thursday, February 8th at Trinity Park (IP3 8UH). Its purpose is for ECPs and practice paramedics to network and identify any development or other support needed. The meeting is open to all ECPs and practice paramedics.

We suggest participants attend the End of Life educational event which starts at 2.15pm and the ECP/practice paramedic session will start at 4pm. There will be signs showing you where to go.

Paul Driscoll, Suffolk GP Fed Medical Director, will facilitate the session.

Please inform your ECP or practice paramedic about the session and ask them to email David Pannell (*david.pannell@suffolkfed.org.uk*) if interested.

New offer from GP Health Service (GPH)

Suffolk GP and GPH Clinical Lead, East of England, Dr Lucy Henshall writes:

GP Health Service has now been in place for a full calendar year and has already seen over 1,000 new GP patients across England. Problems range from stress, anxiety and depression, through to more complex addiction issues - but for most patients, there is a strong component of work related difficulty.

As GP workload and stress levels continue to rise, the risk to practitioners' own mental health only increases. Life and work are not separable.

GPH offers free, readily accessible, locally available, and highly confidential 1:1 assessment, usually lasting 90 minutes, and then access to fully funded CBT, or other treatments, through high quality national providers (face to face, by phone or online) as suits the individual.

GPH has multiple assessing clinicians easily accessible across East Anglia.

This six-minute video explains how the service works. Please do watch it: ***http://gphealth.nhs.uk/resources/introvideo/***

In addition to individual care, there is also GPH funding for facilitated Group Peer Support, proactively targeted at currently well GPs - aiming to support and improve mental wellbeing, self-care and resilience and thereby help prevent illness developing. Groups of 8 to 12 GPs can access 900 minutes of fully funded facilitation, usually in 90-minute sessions, but this is flexible. For more details, ***click here***.

Access to GPH as an individual is by self-referral only via ***gp.health@nhs.net*** or 0300 0303 300. It is available 8am – 8pm Monday to Friday and 8am – 2pm Saturday.

Further information is available at ***www.gphealth.nhs.uk***.

Dr Lucy Henshall is also contactable on ***lucy.henshall1@nhs.net*** to discuss collaborative work around clinician wellbeing and to discuss GPH workshops and presentations.

Integrated urgent care tender (111 and Out of Hours)

The CCGs have now re-started the tender process for these services across Suffolk and North East Essex. We are currently in discussion about how the Fed should be involved.

Fed Data Sharing Agreement

The LMC has now completed its legal review of the Fed's Data Sharing Agreement (DSA). There were no issues arising other than making privacy notices available in practices and on websites. Linda West (***linda.west@suffolkfed.org.uk***), Suffolk GP Fed's Practice Services Director, will be in touch to progress this with practices as necessary.

Fed Board elections

In March, elections will be held for the following non-executive posts:

- Ipswich GP
- West Suffolk GP
- East and West Practice Manager

David Pannell (***david.pannell@suffolkfed.org.uk***) has a briefing note if you are interested in standing. Nominations close on Monday, February 12th.

If we have any contested posts, Andy Yacoub, Chief Executive of Healthwatch Suffolk, has agreed to be our Returning Officer.

Suffolk Fed features in podcast

Ockham Health is a specialist primary care consultancy focusing on collaboration and at scale general practice. They publish really interesting podcasts which are well worth subscribing to (*www.ockham.healthcare*).

This month they feature a 20-minute interview with Fed Medical Director Paul Driscoll and Chief Executive David Pannell. Please follow the link below to access it:
https://ockham.healthcare/episode-94-suffolk-gp-federation-sustaining-general-practice-and-improving-patient-care/

Using Facebook to communicate with patients in Haverhill

Traditionally practices communicate with patients via patient participation groups and newsletters.

Haverhill patients are heavy users of Facebook and we have been testing if we can use social media as a more effective way of targeting messages.

Before Christmas we ran some Facebook advertising to promote a practice newsletter. We have been amazed at the response, with 16,858 people seeing the post and 1,029 clicking through to the newsletter. It is very cost effective compared with printing newsletters.

We have also created a video which explains why Christmas Maltings & Clements Practice is under so much pressure. We will be promoting this in February. If you are interested the video is at *http://bit.ly/2ACHIQA* - username is 'video' and password 'candy-crush'.

Facebook encourages lots of comments - not all positive. However, it looks a promising way to get messages out to certain patients.

Update on Fed internal projects

Morepay HR

In March we will be moving to an online HR system (we already use Morepay for our payroll). Staff will be able to book holiday, charge expenses, claim overtime and receive their payslips via the web thus removing all paper.

Datix

This is an online risk management and significant event/complaints reporting system. It will be used by the CCGs, Fed, Suffolk Primary Care and Deben Health Group. It will be piloted next month and gradually rolled-out across the various Fed services.

Mandatory training

This is a project to review what mandatory training is needed, who needs to do what and then how it is best delivered.

E-referral

This is now working for GP+ outward referrals. We want to move ultrasound and our other services to e-referral but need central changes to SystmOne before this can happen.

Synaxiom

This is a replacement for the software which we use to extract diabetes outcome data each month in North East Essex. Once this is running we will use it to run monthly clinical audits in our practices along with outcome data.

Walton Surgery, Felixstowe

We are planning to add clinical rooms and refurbish the building, including adding operating space for our Prescribing Support Team.