

What is the Govan SHIP? (Social & Health Integration Partnership)



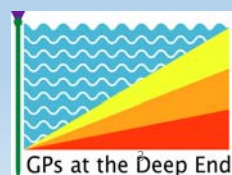
The 'Deep End' - significantly lower healthy life expectancy (HLE) for patients living in the most deprived areas than in the least deprived areas; patients who have more complex and multiple conditions; higher levels of patient demand and unmet need and more vulnerable families with children

The Inverse Care Law - the principle that the availability of good medical or social care tends to vary inversely with the need of the population served

THE AIMS:

- PERSON CENTRED APPROACH – BASED ON ALL HEALTH & SOCIAL CARE NEEDS, NOT CRITERIA
- SHIFT DEMAND IN PRIMARY CARE
- WORK TO THE TOP OF THE LICENCE
- DEVELOP ANTICIPATORY AND PREVENTATIVE APPROACHES
 - REDUCE FREQUENCY OF USE OF UNSCHEDULED CARE, AVOID OR DELAY HOSPITAL ADMISSION
- PROVIDE IMPROVED SUPPORT FOR CHRONIC ILLNESS
- EVALUATION

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GOVAN SHIP Getting Us From H1-H3



HORIZON 1 SINKING IN THE DEEP END

- PRE-ESTABLISHED TEAM WORKING BUT NO STRATEGIC SUPPORT
- COLLECTIVE MEMORY OF WORKING WITH ATTACHED SOCIAL WORKER - A POSITIVE EXPERIENCE. **LOSS OF ORGANISATIONAL MEMORY**
- CLUNKY COMMUNICATION SYSTEMS - AN ONGOING FRUSTRATION
- FRAGMENTED DATA SYSTEMS
- GP CONTRACT - MINIMISES MATERNITY, PAEDIATRIC AND FAMILY HEALTH CARE
- NO SPECIFIC ROLE FOR GPs IN CARE OF VULNERABLE CHILDREN & FAMILIES DESPITE BEING THE 'HUB' AND POINT OF CONTACT FOR OTHER SERVICES / OUTSIDE AGENCIES
- VULNERABLE ADULTS OFTEN DON'T REACH THRESHOLDS OF SERVICE PROVISION. BOUNDARIES TO SERVICE PROVISION ARE BARRIERS TO ACCESS TO SERVICE
- VERY LITTLE RESEARCH TO ARGUE OUR CASE. GPs DON'T WRITE THINGS DOWN, DIFFICULT TO QUANTIFY 'NON EVENTS'
- EXPERIENCE DOESN'T SEEM TO COUNT

HORIZON 3 SAILING ON CALM WATERS

- PROTECTED TIME - **CASE PLANNING**
- PROFESSIONAL RELATIONSHIPS - FACE-TO FACE DISCUSSIONS - BLURRING THE BOUNDARIES – **ALL WORKING AS GENERALISTS,**
- INFRASTRUCTURE- E.G. MDT MEETINGS, JSTs, WHOLE SYSTEMS APPROACH, 1Y & 2Y CARE INTERFACE, STEERING GROUP
- MULTIMORBIDITY DATABASE
- DOCUMENTATION - MINUTED MEETINGS, DIARIES **ADMIN SUPPORT**
- PATIENT ENGAGEMENT
- RESEARCH THAT FITS WORKING PRACTICES (E.G. EVALUATION REPORT)
- BIGGER PICTURE - LINKS WORKERS, MENTAL HEALTH, EDUCATION, 3RS SECTOR MANAGEMENT (UNDERSTANDING BUDGETARY CONSTRAINTS AND PLANNING NETWORKS)
- NORMALISING THE PROJECT WORK THROUGH CONNECTIVITY, EMBEDDED KNOWLEDGE, KNOWLEDGE EXCHANGE – **AN ECOLOGY OF LEARNING**

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Resources To Get Us To Horizon 3

- Locum GPs
- Social Care Workers (funded directly)
- MDT admin (shared resource)
- Framework - processes / documents/ data (GP & project manager)
- Fusion of Academic and frontline perspectives (middle ground research)
- Core data collection essential (can customise the process)
- Professional enthusiasm! (admin, clinician, managerial, academic)
- Scottish Government support



The Scottish Government
Riaghaltas na h-Alba

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Data & Evaluation Processes

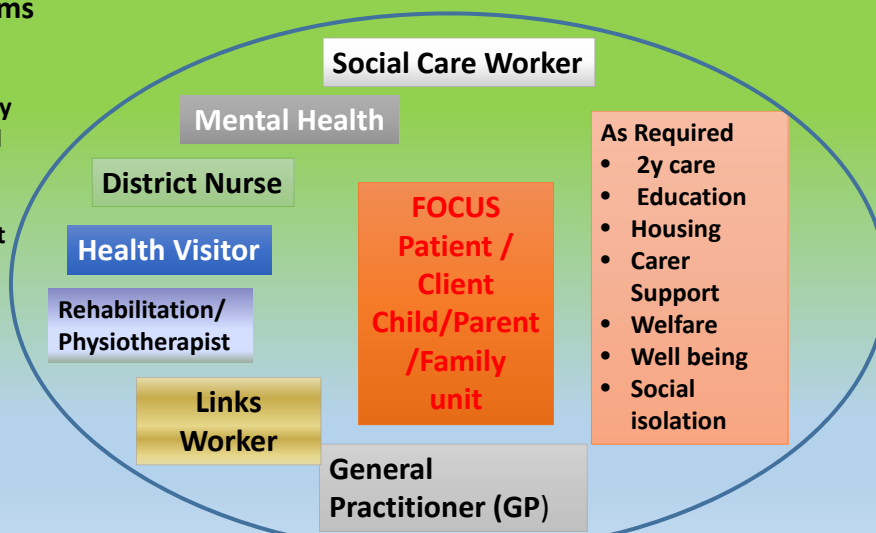
- CUSTOMISED DATA CAPTURE / EXTRACTION / LINKAGE
- PROJECT CHALLENGES
 - CULTURES / THRESHOLDS / CRITERIA
- EVALUATION CHALLENGES
 - INFORMATION SHARING
 - MIXED ANALYSIS
 - EXTERNAL IMPACTS
 - COLLABORATIVE LEARNING
 - LONGEVITY

Name	Population Count	%	Last Run	Search Type
Govan Only Patients	9038	44%	01-Feb-2018	Patients
ADP	298	1%	19-Oct-2017	Patients
ADP Report	298	1%	19-Oct-2017	Patients
New Population DWH	9038	44%	01-Feb-2018	Patients
Interaction Data Between Two Dates	2766	13%	01-Feb-2018	Patients
Blue Interactions Between Two Dates	2766	13%	01-Feb-2018	Patients
Publication Reports	125	0%	01-Feb-2018	Patients
Registered Tuples	3817	18%	01-Feb-2018	Patients
Registered Tuples Report	3817	18%	01-Feb-2018	Patients
Govan Project Participants Register	696	3%	09-Feb-2018	Patients
Blue SHIP Linked Report	696	3%	09-Feb-2018	Patients
ADP Phosphorus Search	0	0%	27-Dec-2017	Patients
ADP Phosphorus Report	0	0%	27-Dec-2017	Patients

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Putting It All Together – SHIP MDT

- Workstreams
- Children & Families
- Frail & Elderly
- Unscheduled Care
- Information Management
- Other



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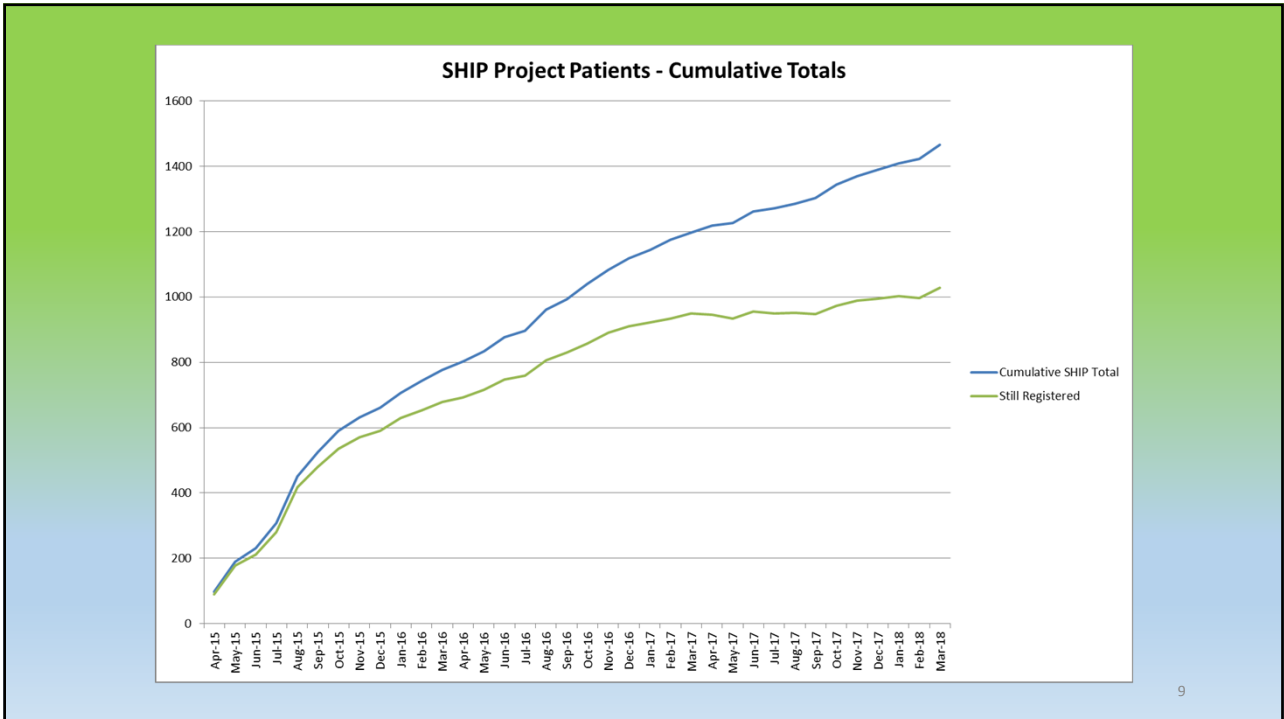
WHO ARE WE LOOKING AT?

- At End December 2016 = 951 currently registered (of 1208 identified) SHIP Patients in practice population of 14,200
- Characteristics, with universal selection, suggests focus is on the 'right' people when comparing to the rest of the practice population:
 - Age - greater numbers in 0-14 and 65+ age groups
 - Gender balance - more females (age 15-64), more males (age 45-75)
 - Deprivation (in SIMD1)
 - SHIP = 83% OTHERS = 73%
 - Multi-morbidity (average number of conditions)
 - SHIP = 2.6 OTHERS = 1.3
 - % with 4+ conditions
 - SHIP = 31.5% OTHERS = 10.1%

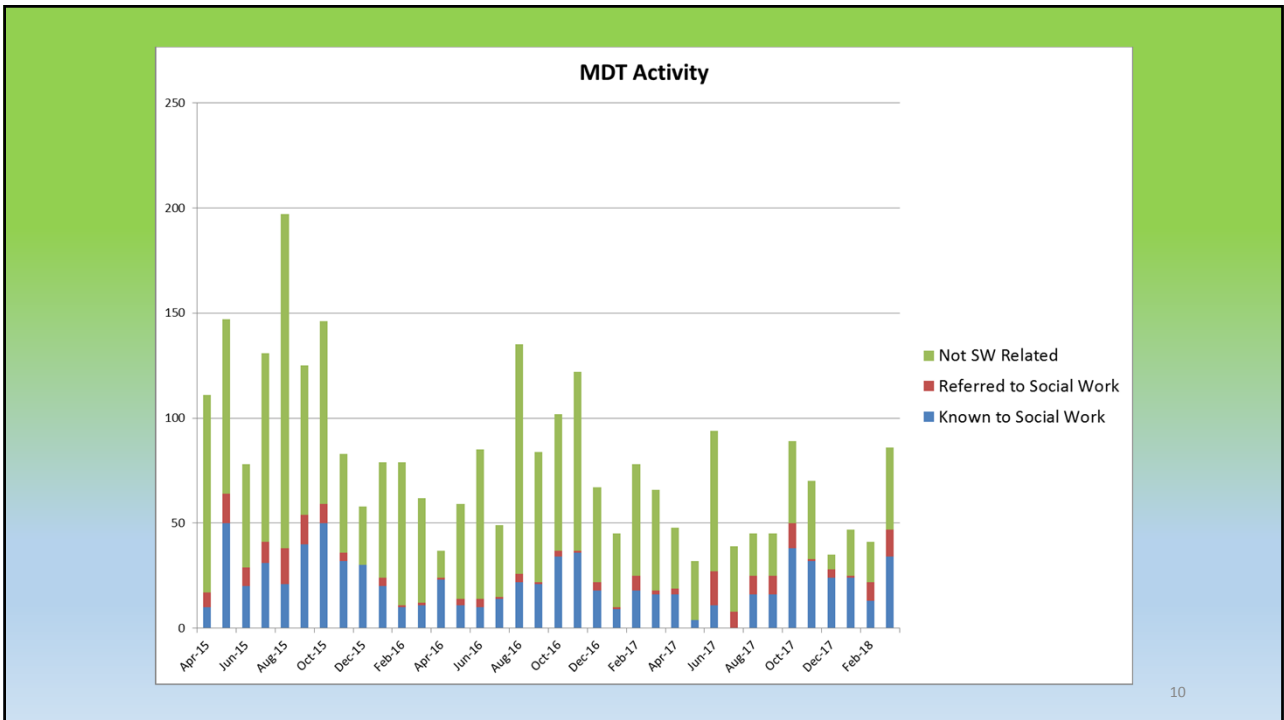


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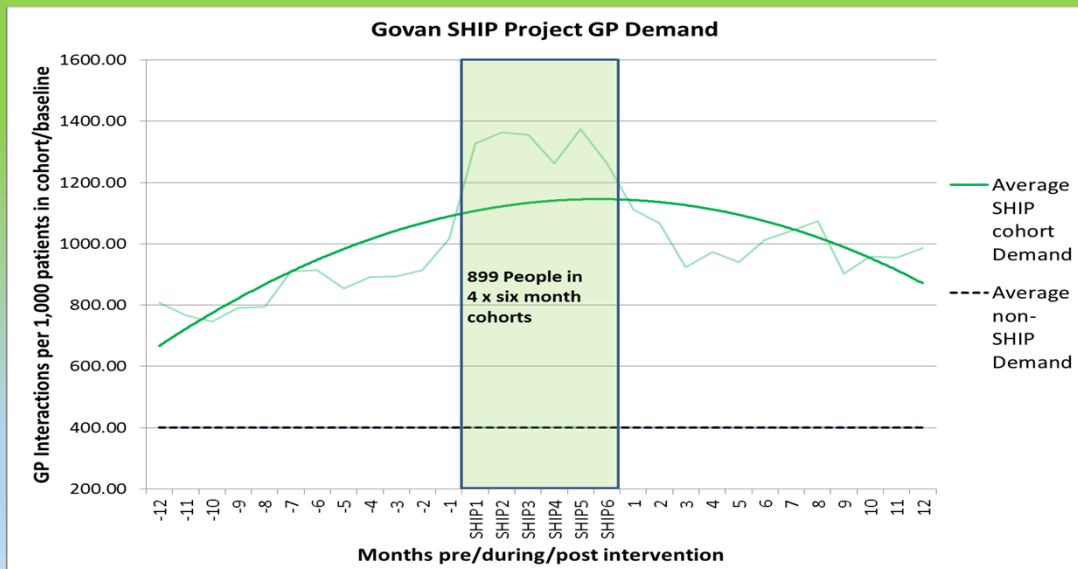


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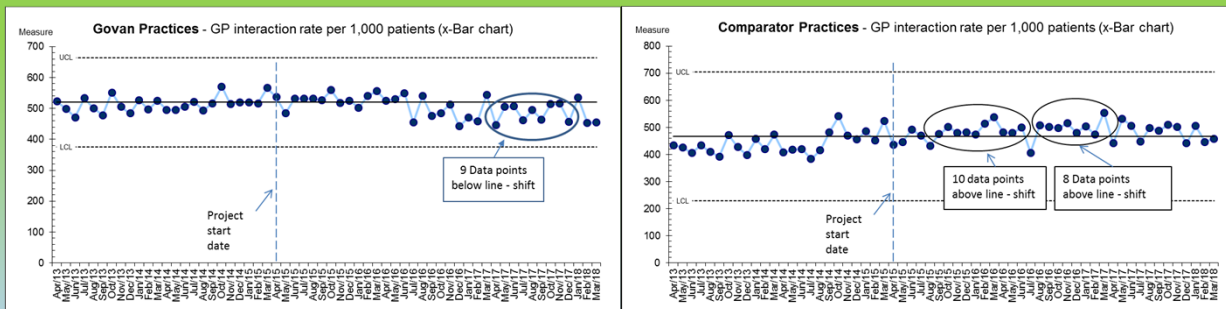
GP Demand – Still Registered – SHIP



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OVERALL PRACTICE DEMAND VS COMPARATOR

GP Interactions per 1000 patients



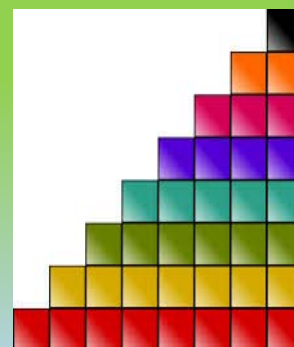
Govan SHIP practices

Comparator practices

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Next Steps

- Continuation
- Short term (to end March 2018)
 - Physiotherapy
 - Pharmacy
- Medium term (April 18 – March 19)
 - Time to prove more
 - Rollout of key principles (cost / no cost)
- Long term (April 2019 and beyond)
 - Wider rollout
 - New GP contract

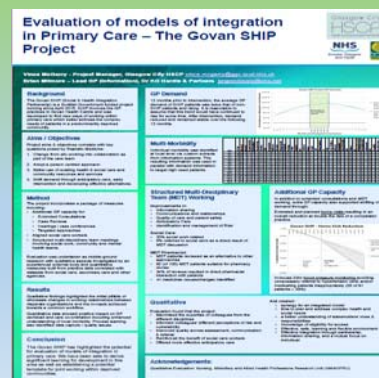


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CONCLUSION

- SHIP DELIVERED
 - Decrease in GP Demand
 - Right people seen at right time by right person (integration)
 - Decreased patient repeat attendance
 - Incorporated new ways of understanding e.g ACEs, trauma informed workforce (shifting the horizon)
 - Improved recruitment and retention (longevity and stability of General Practice)
 - **CREATED EFFECTIVE CAPACITY**
- THROUGH
 - System change/ Behavioural change
 - Extended consultations
 - Pharmacy reviews
 - Multi-Disciplinary Team (MDT) working
 - Recreating connections



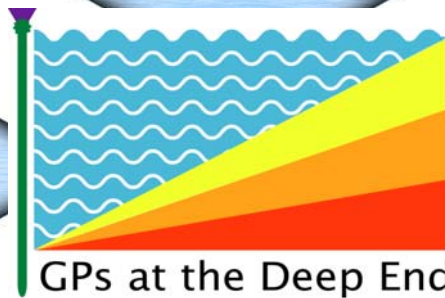
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The Final Destination



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GPs at the Deep End

THANKYOU! ANY QUESTIONS?

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