Engagement Alliance



New Primary Care Roles

Primary Care Working for All: Exploring the understanding from the voluntary sector of the new primary care roles, how the voluntary sector link to these roles and potential barriers to accessing the new primary care roles.

13th November 2018 Michelle Del Rosso Senior Health and Engagement Officer

Introduction

Primary care services are an essential component of the health and wellbeing of Bolton's people, patients, carers and broader communities and neighbourhoods. To ensure that resources are used effectively and efficiently it is crucial that public, private and voluntary services along with Bolton's residents have a good understanding of the role of primary care and how to access it.

As an infrastructure organisation, Bolton CVS is in a prime position to engage with the voluntary, community and social enterprise sector to discuss and explore current issues and developments within health and social care, to share information with community groups and organisations and ensure a collective voice is heard.

As part of the Engagement Alliance, Bolton CVS and Healthwatch conducted engagement work around the new workforce. Bolton CVS engaged with the voluntary sector using both targeted outreach engagement and a focus group meeting to explore the sectors current knowledge and understanding of the new primary care roles, how they feel their organisation links into these roles and discuss and highlight potential challenges and barriers in accessing the new services within primary care.

1. New Primary Care Roles

Demands on primary care are higher than ever before, and primary care services face the challenge of delivering the right care, from the right person at the right time to ensure Bolton's residents can remain healthy and well and avoid hospital admission where possible. The changing needs of Bolton's population and the reduction in resources and funds mean Bolton has to think differently about meeting the needs of Bolton's people.

The implementation of the four new primary care roles and the additional community based workforce provides more specialist care from the right person at the right time, stronger community links and a proactive and holistic approach to health and wellbeing. It also means that patients can be triaged to the appropriate specialist, relieving the pressure on GP surgeries and freeing up GP time.

Our engagement aimed to explore the understanding from the voluntary and community sector of the new workforce, how as an organisation they may link in with these new services and to discuss any potential barriers to accessing the modern workforce. The four new primary care roles include

- Muscular Skeletal Practitioners (MSK)
- Clinical Pharmacist
- Mental Health Practitioners
- Health Improvement Practitioners (HIPs)

The additional community based workforce are the Community Asset Navigators (CANs) which are based in a central location at Bolton Hub and work across the nine neighbourhoods in Bolton.

Primary Care	Strengths	Challenges and Barriers
Role	ottengtils	Unanenges and Damers
Mental Health Practitioners	 Specialised care available in local communities More intensive support Opportunities to build better patient/practitioner relationships Prevent people experiencing acute illness and deterioration of mental health illness People will be able to access appointments sooner 	 Sector were unaware of these new roles, more promotion needed Addressing mental health illness can be both sensitive and complex in nature, will appointments provide sufficient time for patients to discuss their mental health How can these roles be communicated to diverse communities such as visually impaired/deaf or hearing impaired/those whose 1st language is not English? Can home visits be provided for those who are housebound or who cannot access public transport without support
Clinical Pharmacist	 Allow people to book in medication reviews with specialist and free up GP time For people on more than one medication this will provide an opportunity for people to discuss concerns regarding medication combinations/side effects/ dosage changes 	 Ensuring this service is accessible to all, will this service be able to provide translators to ensure people are fully informed and understand issues relating to their medication as misuse of medication could be fatal Are home visits available for those who are housebound or

2. Feedback from the sector

			cannot access public
			transport alone
		\triangleright	Do Pharmacists have
		-	access to patients
			medical records?
Muscular	Specialist care	\succ	Will home visits be
skeletal Practitioners	 Move away from prescribing pain killers to a more physical 		provided for those who
			are housebound?
(MSK)	improvement via recommended	\succ	Will they have capacity
	exercises which is welcomed		to meet the demand? If
	as many people don't like		people have to wait a
	taking pain killers long term		long time for an
	Patients will be empowered to		appointment this may
	take control of their own		be demotivating
	recovery and improve their	\succ	Will follow up
	physical health		appointments be made
			to monitor progress and
			adapt exercises if
			necessary and if so
			how often in between
		~	appointments
			Is there a time limit on
			how long patients can
			be open to the MSK team?
			Will long term support
		-	be offered to those with
			long term conditions
			such as Muscular
			dystrophy
		\succ	Will information be
			provided in a range of
			formats to ensure this
			service is accessible to
			all
Health	Opportunity to support people	\triangleright	People need to be
Improvement	who wish to make positive life		informed of this service
Practitioners	changes		to ensure effective use
(HIPs)	Provide up-to-date information		of this resource
	on managing health conditions	\triangleright	Will the information on
	and how to prevent		a range of health
	deterioration of health		related issues be
	Provide early diagnosis		provided in a range of
	Improve the overall health of Belten's people	~	formats?
	Bolton's people		Will there be
	Free up GP time		consistency for seeing the same HIPs, so
			people can build
			relationships without
			having to repeat their
L	I	L	nating to repout their

		 history to different practitioners Will home visits be provided for patients with chronic health conditions such as COPD,
Community Asset Navigators (CANs)	 Builds stronger links between primary care and community groups Places more emphasis on the importance of feeling connected to your local community Offers a wide range of interventions and support mechanisms socially, physically and emotionally Provides a holistic and person centred approach to health and wellbeing Utilises the services and assets within Bolton 	 How will the community navigators decide which organisations to sign post to? Is there follow ups or support to ensure people are maintaining those connections with community organisations and groups What are the Boroughs borders, what support is available for people just outside of the border? How do community asset navigators communicate with diverse communities? How will you ensure the community information you have is up-to-date? How will you measure the impact of social prescribing?

3. Solutions

Following on from the discussion around the new workforce, we adopted a solutions focused approach to looking at the challenges and barriers that had been identified and worked together to co-design some solutions which included the following suggestions

- Partnership Working and potential co-design opportunities for the voluntary and community sector and primary care to work together to produce accessible resources that represent the diverse communities within Bolton
- Voluntary and community sector to disseminate information using their existing mechanisms to ensure their staff, volunteers and people who access their services are fully informed of the new workforce to support effective use of these resources

- Information/service promotion boards to be displayed in GP surgeries, community venues and health venues across Bolton
- Exploring processes for people who may need further support in accessing these services such as translation or signing support, inform community groups and organisations of the support available so they can disseminate information accordingly
- Gain a better understanding of where these services can be provided, for example do these services provide home visits and if so is there a criteria to accessing home visiting services, voluntary and community groups and organisation can then disseminate information
- The voluntary and community sector to update Bolton CVS with any developments of services or changes to groups to ensure Bolton CVS's community intelligence is up-to-date which will support the Community Asset Navigators to signpost to services in line with client's needs, wishes and preferences
- Bolton CVS to continue to use existing mechanisms to ensure community intelligence is up-to-date
- Bolton CVS to continue to engage with the voluntary and community sector to ensure the sector is fully informed and updated in regards to developments within the umbrella of health and social care by utilising existing mechanisms and community engagement.
- Services to provide case studies that illustrate the impact the services have had on their overall health and wellbeing

4. Summary

Overall the feedback from the focus group highlighted these new roles will be welcomed for providing specialist support in each of the nine neighbourhoods. It will empower Bolton's people to take control of their own health and wellbeing with the primary focus being on prevention and early intervention through a wide range of services that will support people to remain happy and healthy.

Some concerns were raised regarding the accessibility of these new roles, and it is clear from the feedback that more work needs to be done to ensure our information resources are provided in a wide range of formats to represent the diverse communities within Bolton. This does however, provide some exciting opportunities for the voluntary and community sector to work in partnership with primary care to co-design information resources to ensure these services are accessible to all. It is also clear following on from this piece of engagement that the voluntary and community sector is keen to disseminate information to the people who access their services, and now feel better informed to do so. There is still some work needed in reaching out to the rest of the sector to ensure they are informed and educated around the new workforce. Some work clarification on the following also needs addressing to allow community groups and organisations to provide information and support to people they support to access primary care.

How long can patients access a particular service for? Are there cut of points?

- Will patients be able to request seeing the same practitioner for consistency and to promote effective patient/ practitioner relationships?
- > Do the new practitioners have access to patient records?
- Are home visits provided for those who are not able to come into the surgeries?

The voluntary and community sector provided a positive response when asked how they felt their community group or organisation linked to the new workforce. These links included

- We provide services in Bolton that would be beneficial for people accessing the CANs programme
- We support people who access primary care, therefore it is important we are informed of current developments and changes to services to ensure we can navigate people to the right service
- Some of our specialised community groups and networks can support the development of accessible resources using our wide range of knowledge, skills and lived experiences. This provides an exciting opportunity to work in partnership with the public and private sector to ensure a uniformed accessible approach is adopted across Bolton.

Further information and detail:

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