

Care Navigation: The West Wakefield way

Improve access to primary care and reduce GP pressures through better signposting

Today's healthcare systems are complex. Patients often present with complex needs that are difficult to address within a short appointment, particularly within primary care. More often than not, we also know that these needs require a number of professionals to work together to deliver the best possible outcomes.

It's easy to see why this can prove challenging for patients to know where best to go for help and advice to meet their health and wellbeing needs.

Care navigation is a tried and tested model of care that improves access to primary care services for patients and reduces GP pressures all in one.

It allows frontline staff to provide patients with more information about local health and wellbeing services, both within and outside of primary care, in a safe, effective way. Care navigation offers the patient 'choice not triage' to access the most appropriate service first which as we know, isn't always the GP.

So for example when a patient presents with symptoms that meet the access criteria for other services such as a physiotherapist, pharmacist, optician or third sector service, the care navigator can confidently offer these choices and enable the patient to go straight to the service which best meets their health and wellbeing needs. This saves GP time & improves patient experience.

The West Wakefield journey

Through our work as a Prime Ministers' Challenge Fund site and subsequently a Multispecialty Community Provider (MCP) vanguard pilot, West Wakefield Health & Wellbeing has successfully developed a safe, sustainable care navigation model that has helped to signpost over 23,647 patients and saved over 2,785 hours in GP time across Wakefield in just one year alone.

We define care navigation as:

"A person-centred approach that uses signposting and information to help primary care patients and their carers move through the health and social care system, as smoothly as possible, to ensure that unmet needs are met."

From the start, the aim of our Care Navigation programme was to test the hypothesis that:

"50% of the work done by GPs could be carried out by a more cost effective resource."

So for example, we identified that pharmacists remain one of the most under-utilised professional resources within the system and that we must bring their considerable skills into play more fully (GP Forward View, 2016).

In Wakefield, patients can now access a pharmacist and other services rather than seeing a GP first. Table 1 (right) shows the number of accepted care navigation signposts by patients during quarter one of the 2016/17 financial year.

Saving GP time

In order to calculate GP time saved, we take a number of variables into account. The variables include:

- The total number of GP hours work in a year
- The number of Whole Time Equivalent (WTE) GPs that work in a practice
- The total number of signposts which avoid a GP appointment
- The total time saved by each service that is signposted to. See Table 2 (right)

In Wakefield, each individual signpost is recorded using a SystmOne template and an EMIS template in each practice.

To calculate the GP time saved from the services we signposted to the most, GPs, care navigators, practice managers and business intelligence reviewed the services together.

Table 1 - Quarter 1 2016/17

NAVIGATION	NUMBER OF ACCEPTED NAVIGATIONS
Pharmacy First service	1
Refer to other health worker	1
Referral for ambulatory blood pressure monitoring	5
Referral for warfarin monitoring	1
Referral to Community Pharmacy	489
Referral to contraception and sexual health service	43
Referral to counselling service	2
Referral to dental service	1
Referral to district nurse	55
Referral to health trainer	1
Referral to midwife	2
Referral to minor ailments clinic	111
Referral to nurse practitioner	1,132
Referral to optician	37
Referral to Physio First	318
Referral to Practice Pharmacist	3,970
Referral to smoking cessation service	5
Referral to social prescribing service	1
Referral to Social Services	1
Referral to voluntary support service for carers	5
Grand	6,181

Table 2 - GP time saved

NAVIGATED TO	TIME SAVED (In minutes)
Pharmacy First service	10
Refer to other health worker	10
Referral for ambulatory blood pressure monitoring	5
Referral to contraception and sexual health service	10
Referral to counselling service	10
Referral to dental service	10
Referral to district nurse	5
Referral to health trainer	10
Referral to midwife	10
Referral to minor ailments clinic	10
Referral to nurse practitioner	5
Referral to optician	10
Referral to pharmacist	7.5
Referral to Community Pharmacy	10
Referral to physiotherapist	10
Referral to smoking cessation service	10
Referral to social prescribing service	10
Referral to Social Services	10
Referral to voluntary support service for carers	10

Pharmacist in GP

- A study by our contracted pharmacy provider study suggested that for every 100 minutes of pharmacist time, 75 minutes of GP time was saved.
- Therefore, for every Pharmacist navigation we have accredited **7.5 minutes of GP time saved.**

Nurse Practitioner (NP)

- The NP can effectively deal with many GP problems with the exception of Fit notes and termination of pregnancy.
- Some patients who are referred to a NP could potentially speak to a GP for 5-10 mins through telephone call.
- Because NPs are funded by practices, we decided to keep it to **5 mins of GP time saved** as we realise that some of the referrals through Care Navigation may have seen a NP already.

Physio First

- Patients would normally be seen by a GP for minor MSK problems.
- Patients are now seen by a physiotherapist in a longer consultation.
- Very few patients are referred back to the GP after using Physio First.
- Therefore, each Physio First navigation is **10 minutes of GP time saved.**

Minor ailments clinic, Community Pharmacy or Pharmacy First

- Patient rings for minor illness and is normally given a face to face assessment by a GP or NP.
- Care Navigation directs them to a more appropriate resource either internally in practice, or externally to the community pharmacy service.
- Therefore, each above navigation is **10 minutes of GP time saved.**

Optician / Primary Eye-Care Acute Referral Service (PEARS) / Minor Eye-Care Service (MECS)

- Patients could potentially have come to see a GP for an eye problem.
- Through Care Navigation, we are diverting patients to a more specialised clinician through the PEARS scheme.
- This means they are seen within 48 hours by their regular optician, who provides acute eye care in the community and this means **10 minutes of GP time saved.**

Dentist

- Patients should not be seen for dental problems in GP practice, but they can present quite frequently.
- If they had not been asked the nature of their problem, these patients could have seen a GP and their time would have been wasted.
- Therefore each dental problem care navigation is **10 minutes of GP time saved.**

Practice worked example

Care Navigation at a practice with a list size of 12,500 patients in 2016/17

- 5,819 signposts per year = 743 GP hours saved (based on 'GP Time Saved' Table).
- A typical GP works at this practice works 8 surgery sessions of 3 hours = 24 GP consultation hours per week.
- 24 x 46 working weeks = 1,104 GP consultation hours per year.
- This practice has 7 x WTE GPs

7 x 1,104 GP hours = total of 7,728 GP consultation hours p/y

743 / 7,728 = 9.61% GP consultation hours saved