The Microsystem Festival 2017

Collaborative Practice

A new model of care

Helena Hughes
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About Altogether Better

• NHS national network organisation
• Diverse team of community engagement experts, clinicians, OD & system designers and academics with regional, national & international experience
• Award-winning, evidenced based approach
• Using theoretical models of organisational development and evidenced based practice we have prototyped and scaled a radical system intervention which offers a new model of care
• Working in Primary Care, Acute (A&E), Mental Health settings and system-wide
• Working to develop both vertical (Paediatrics) and horizontal integration (Social Care)
What we did in primary care

Evolving a new model of Collaborative Practice:

• From 3 to 87 GP Practices in 18 CCG areas
• Stumbled across a new model for general practice, ‘Collaborative Practice’, which is designed to meet the challenges we face
• Citizens/patients play a pivotal role in meeting this challenge
• If we want to change the conversation we need to change whose in it - and we need to do it together
• Amazing response from the system nationally
Why change?

• NHS facing **unprecedented** challenge
• NHS **set up to treat infectious disease** – organised around a ‘medical model’ but the **nature of disease has changed**
• **New demands** – supporting people to adapt and cope with long term conditions, loneliness, isolation, anxiety, old age
• Primary care **no longer sustainable** – NHS and social care **under pressure**
• NHS 5YFV asked for a “more engaged relationship with patients, carers and citizens”
• Clinicians driven by desire for the best consultation – but **need to see the right patients**
In a GP’s working week

• 10-15% minor ailments – pill, sore throat, headache, pharmacist, a ‘wise granny’
• 10-15% depressed, anxious, stressed, fatigued. Need a job, some friends, a loving partner, not antidepressants or counselling
• 10% obesity & lifestyle related – type 2 diabetes, hypertension, heart disease
• 5% lonely and we are the only social contact
• 5-10% just getting old! Lots of problems, no cure

“It’s a rotating door - they just come back again, patients need people not pills.

“I estimate that 40-55% of patients I see every week could be better supported by someone else – they don’t need to see someone with 5 degrees”

Dr Niall Macleod
GP, Exeter
Impact

Evaluation from 30 GP practices including over 500 Champions, and 125 practice staff demonstrated:

• **94%** of people reported improved mental health and wellbeing
• **99%** increased involvement in social activities and social groups
• Increased resilience and ability to cope with LTCs
• Patients beginning to use services differently
• a new business model for general practice emerges and a new model of care

“We have increased our patient list by 4500 people but seen no increase in demand for either primary or secondary care consultations because we do things differently”

Mev Forbes, Managing Partner
Robin Lane Medical Centre, Leeds
What happens?

Over 55 champions delivering 15 regular weekly offers/activities
…..63 types of offers

“the great story is that lives are transformed. We reach hundreds and hundreds of people every week. People are no longer isolated; they have made new friendships and use services differently”

Linda Belderson
GP, Robin Lane Medical Centre
216 types of activities and counting...

- Community Choir
- Ukulele group
- A poem & a pint
- Glass painting
- Dancing...belly, ballroom, circle!
- Film matinees
- Improving the consultation
- Painting
- Signposting
- Conversation club
- Increasing screening uptake
- Quilt making & cross stitch
- Singing for the brain for people with dementia
- Flu clinic
- Carers support
- Reception welcomers
- Gardening
- Local history
- Coffee mornings
- Christmas lunch!!

...you name it!
collaborative

“produced by or involving two or more parties working together”

practice

“the customary, habitual, or expected way of doing of something”
Collaborative Practice

• This work is a collaboration – not simply a volunteer project
• Champions are just one part of Collaborative Practice
• Champions are gifting their time to be part of this work
• Just as we welcome friends, we welcome Champions:
  • Warmth and welcome
  • Tea and cake!
• The practice and champions collaborate to make the work a success – find people to come along, share ideas about what could happen
• Make the work visible to everybody – share across the team, find the best ways to keep everybody up to date
• Appreciate and value Champions and what they do
• Be part of solving problems and celebrating successes
Balanced between two world views...

The ‘Life world’

- People with myriad and unique skills, interests, values, beliefs, needs
- Multiple and fluid identities
- Human interaction
- Flexibility, improvisation
- Stories
- Relationships
- Non-monetary, fluid ideas of exchange and reward
- Emergent order

Formal Systems/Institutions

- Roles, qualifications, titles
- Fixed and legitimised identities
- Processes & structured interaction
- Protocols and pathways
- Fixed definitions
- Data
- Hierarchy, authority
- Monetary economy, fixed ideas of currencies and exchange
- Planned order

Collaborative Practice

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When it works the practice evolves

- Stronger link between practice and community
- The practice evolves new ways of doing things
- The recognition of the resource and resourcefulness and generosity of citizens who use their services leads to the possibility of changing the way that they provide services
- Amplifies and connects voluntary and community organisations to practice
- It becomes simply “how we do things around here”

“We’re a community centred practice now”

Practice Nurse
Newcastle
This work is meaningful and fun.....
Any questions?

Chat to us:

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